

# *International Institute for Humanistic Studies*

## **Meaning and Transformation: A Journey of Client, Psychotherapist, and Supervisor**

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*"The most beautiful experience we can have is the mysterious." — Albert Einstein*

### **Historical Overview**

This article will address meaning and transformation in existential-humanistic psychotherapy. We present these mysterious processes as they apply to the client, therapist, and supervisor. Our orientation is existential. This means that we ask ourselves and our clients to look at how we are each meeting this basic fact and mystery of our existence. Mystery is infinite, not finite. Mystery is the latent meaning always awaiting our discovery, and it is always more than our knowing in the objective world. Mystery points to the subjective world where implicit meanings are waiting to be transformed into explicit meanings in living experience.

Our value system is humanistic, meaning that we regard all humans as valuable and as having the potential for experiencing greater meaning in their lives. Through the processes of inner searching, we can access the human potential inherent in our being. The open spectrum of possibilities is a powerful encouragement for us — client, therapist, and supervisor — to reconceive the familiar, to attempt the new, and to explore with innocence of perception. Existential-humanistic psychotherapy is a lengthy, in-depth searching process, not a few visits to the doctor's office for a quick answer to a client's objective concerns (Bugental, 1999).

One of the great gifts of being human is the capacity to search and particularly to search for meaning. In *Man's Search for Meaning* (1984), Victor Frankl, an existential pioneer in this topic of meaning and psychotherapy, proposes that answering the question, what is the meaning of life, is essential for each individual in the psychotherapy process. It is not an "out there" search for an objective answer to a problem, a dream, or a symbol, but rather an "in here" search for one's full life potential with all its paradoxes and complexities. This inner search for meaning weaves individual experiences into a tapestry of meaning from inside.

The individual is transformed from inside. Searching is a process of transformation from inside, facilitating transition and psychological shifts inwardly by which the individual moves the process of living from one stage of life to the next, forming patterns of beginnings and endings. These patterns become conscious and choiceful to the individual through the searching process lived in psychotherapy.

In-depth, long-term psychotherapy focuses on the search for meaning and transformation by accessing and using implicit meanings and capabilities. This chapter first establishes the importance of the distinction between subjective versus objective and then defines the core psychotherapeutic work, searching and resistance — i.e. how the searching stops. We explore the vitality of the actual moment in psychotherapy and the components necessary to support searching in existential-humanistic psychotherapy. We elaborate on meaning and transformation through a case, *Inside A Cage of Diagnosis* and end with some concluding thoughts.

### **Objective verses Subjective: Explicit verses Implicit**

In this moment, we the authors are writing. The objective reality of writing involves our fingers touching letters on the keyboard of a computer and in a broader view of the objective reality it is a spring day in California in the year 2002. The subjective realities of the two authors include searching their inner truths about meaning and transformation and then finding words to match these truths. We sit in silence to see if there is a match, feeling and being with our world from inside concerning these subjects. We share this immediate focus with you the reader to bring you into our actual moment as we write. As you read these words, part of your objective reality is that you are holding a book and reading. Part of your subjective reality, is that what you are reading is stirring feelings, impressions, images, and other unknown dimensions of your subjective world.

The inner world of each person is immense, perhaps larger than will ever be consciously known to yourself or to others. This vast unknown territory is the landscape through which we accompany our clients on their psychotherapeutic journeys.

What can be said about a client are always at least in some measure an abstraction, an objectification, and a distortion. To talk about a client is to make that person an object — of observation, of speculation, or of report. Human objects are not to be confused with human subjects. The very fact of human subjectivity is the most distinguishing and salient feature of human life (Bugental, 1999).

We have the paradox of the human as simultaneously being both subject and object. This paradoxical distinction is crucial and is at the root of existential-humanistic psychotherapy. Thus this recognition of limitation — which we are now

writing and you are now reading — applies to what we are saying right now.

Existential-humanistic psychotherapy provides a safe place for clients to face their inner worlds and to take responsibility for their human existences. We are here concerned with the uniqueness and irreducibility of human experience. This puts a strong focus on the psychotherapist and any therapist's supervisor to recognize the uniqueness of each client and to respond to it with a unique and particularized adaptation of the therapist's knowledge, skill, intuitions, and sensitivities. The supervisor shares this focus with the therapist by attending to what is subjectively stirred in the therapist presenting the case.

### **The Core Work — Searching and Resistance**

What we are here calling "searching" is simply one way of tapping into our native endowment — our inner world. Freud's "basic rule" of free association is another (Freud, 1997), as are Martin Buber's (Buber, 1978) and John Welwood's "unfolding" (Welwood, 1983) and Gendlin's "focusing" (Gendlin, 1996). Our instinctive searching powers are called into play whenever we need something (e.g., food, companionship, intellectual stimulation, physical activity, and rest). The same is true when we search for meaning. The inner search for meaning is usually activated by difficult or challenging life experiences such as loss of a job, an unhappy relationship, or difficulty with children. These are all concerns boldly or hesitantly brought into the psychotherapy room. These external concerns often bring the individual into searching for meaning not only for this external concern, but for the intention of their living, the driving force behind being here with purpose plus awareness of our limited time here. "It is this changing or moving the concern which points to the fullness of the client's capacity for living" (Heery & Bugental, date? 1999 p.25). The question of meaning moves into involvement of living with choices and responsibilities for one's life.

In spite of the therapist's good intentions and the client's good intentions, this search encounters many resistances. When we become fully engaged in searching in psychotherapy, we discover difficulties in letting our thoughts and feelings range widely and meaningfully. These are the resistances and in a very real way, they are necessary and sometimes predictable.

The resistances, which we encounter while searching, have three profound implications. First, we experience them as interfering with our capacity to search. It is like paddling a canoe down a river and at times we slow down or even stop because of an object that temporarily blocks our movement. The slowing of our movement in the canoe and in searching is a very natural part of our lives. Resistances give form and range to our thinking. They are essential to rational thought and meaningful discourses.

Second, resistances are integral to how we organize our world; they are central to

the ways we define who and what we are and what is possible in our reality. Resistances are at the core of our construct of self-and-world; the ways we implicitly define ourselves and our conception of the nature of the world within which we live. They are knit into our ways of being in our world. Resistances are the patterns of thoughts or behavior, which each person develops to protect his or her conception of nature of the world and reality and to guard the person's speech and behavior in the world.

Finally, depth psychotherapy raises the question of how the resistance is serving or not serving the individual. Resistances are not to be thrown away for they are essential for human life. Just as our skin holds our physical body together resistance is necessary to hold our subjective world together. The question is whether the resistance is truly serving the individual. The answer to this question is likely to be disclosed through the inner searching of the client rather than the opinion of the psychotherapist or the supervisor of the psychotherapist.

Transformation and meaning in a client's life involves experiencing resistance in the here and now, not there and then. It is not in talking about meaning or transformation but in actually experiencing what is stopping the individual in the moment in psychotherapy.

### **The Actual in Psychotherapy**

The client, therapist, and supervisor are never static. The therapist's impression of a client in the first ten minutes of a session may differ from the last ten minutes. This constant change points to the fluidity of living. "Life is incessant movement, always going forward into the next moment. Bodies change, thoughts change, emotions flow--there is no final form of any aspect of life. Without flow, an organism is dead. Psychological reality is always the present, the ever-moving, never-repeatable present" (Heery & Bugental, 1999 p.25). Change, constant change, movement, growth, decline, expansion, contraction, such is the nature of life.

Clients tell stories and the therapist listens. Therapists tell stories to supervisors and the supervisor listens. What does the therapist and supervisor listen for? Our work does not focus on content of the story but rather how the story is told, whether by client or supervise. The how can include pauses between the words or makes a repeated physical gesture or varies information, emphasis, gestures, and focuses. The following demonstrates focusing the how of a client's story. The therapist seeks to take it all, to assess it, and to recognize if his or her input will be effective.

CI: "Well, Mom is about the same this week. She does not seem to be getting better or worse, same old, same old response to her chemotherapy treatments" (said with a big grin).

1. Th: "John, tell me more about the chemotherapy treatments?"

2. Th: "John, are you aware you smile when you speak about your mother's chemotherapy?"

Cl: "Gee, I didn't know I was smiling. I am sorry. I will try not to do that."

Th: "John, I'm not passing a judgment on your smile, and I'm not asking you to stop smiling, I am noticing your smile when you talk about your mother's chemotherapy and I want to bring it to your awareness."

In this brief vignette we see two different responses from two therapists. The first therapist is following the content of the story and collecting more facts with her response. The second therapist is attending to the actual moment by bringing the client's smile into his awareness. We are not talking about the content of his mother's illness, but actually bringing into awareness aspects of John's resistance; John being the good client, and avoiding deeper feelings of the possible loss of his mother. By pointing to the actual, these resistances become alive in the moment. In listening to clients' concerns, beginning therapists will often slip into the content of the story and miss the actuality. Death and dying concerns are givens of being human which are often not explored in training a psychotherapist (Heidegger, 1962, Jaspers, 1951, Yalom, 1985) Of course, there will be resistances alive in a therapist or supervisor who attends to the content of death and dying and not to the lived moment of the therapy. These resistances need to be monitored by the therapist through consistent supervision and confronted with questions such as, "What is happening in you right now as you talk about John's mother's chemotherapy?"

This question brings into the therapist's awareness how s/he is being emotionally touched or not touched by John's concern, his dying mother. Allowing the client's concern to touch the therapist can become the touchstone of transformation for both the client and the therapist. Certainly, this perspective does not exclude the content of the client's story but it shifts the focus from content to process in the moment inside the client and the therapist. The process of meaning and transformation is happening in the moment. These processes will never be the same with the same client on different occasions or with a different client voicing a similar concern. We are each unique and the meanings we search for regarding our concerns are unique as well.

### **Necessary Components for Therapeutic Support**

The five necessary components of therapeutic support are presence, holding, caring, challenging, and confirming. These components blend into one other, working together to support the vitality of the clients' searching process.

Presence is that aspect of the therapist's subjective being which shows up physically, emotionally, spiritually and engages with the client. It is a full response to the client in the moment. Presence is allowing the client to matter to the therapist (Yalom, 2002). "Presence is accompanied by heightened self-awareness on the part of both therapist and client" (Heery, 2001, p.437).

In holding we are not referring to a physical act but rather a subtle way of being with a client. Holding is how the therapist provides a client with a secure and dependable framework within which to experience and explore a wide range of feelings and impulses. Holding may include accepting socially disapproved feelings and impulses from the client, but it does not imply acting on them.

Caring is the therapist accepting to be engaged with a client's suffering. "Caring is an experience shared between therapist and client; at times it is satisfying to both, and at other times, it is exhausting to both" (Heery, 1999, p. 438). The state of caring allows the experience of empathy: as if you are this person suffering and at the same time separate from this person.

Challenging brings the therapist into authenticity with the client, with a commitment to speak the truth to the client. Challenge supports the client's innate ability to become more than what the client experiences him or herself to be in the therapeutic hour.

Confirmation provides a stable, accepting, and understanding accompaniment to a client's inner search, particularly to a client's struggles and experiences of psychological pain and /or anxiety. Confirmation is not "hand holding," rather, it is a part of the container of the therapeutic alliance, providing support for inner searching.

#### Case Illustration: Inside A Cage of Diagnosis\*

Allen is a tall, thirty-eight year old single man. In his first session, Allen paces the room and announces in a very matter- of- fact tone, "I'm schizophrenic. I've been diagnosed several times over the past twenty years by several reputable psychiatrists and I want you to know that I'm schizophrenic. I take my meds regularly. I live at a meditation center and the directors of the center have told me that I have to get a job. I cannot get a job as I am schizophrenic and no one hires schizophrenics. The directors of the meditation center gave me your name and said you could help me sort out this problem. I don't know how you could do such a thing but maybe you could, I'm not sure. Do you think you can help me?"

I am caught by the fact that Allen has not sat down this whole time; he is still pacing as he waits for my response. I am drawn into his physical presence, which in turn draws me deeper into the inner Allen. With curiosity and careful pacing, I

invite Allen to sit down and he responds.

No thank you, I prefer to stand and walk.

I leave the invitation and his response but hold my invitation and his response as the beginning of our therapeutic alliance. I have accepted him exactly where he is and he not only knows this but also has experienced it. He seems to be in a cage. He can only walk so far and no further. He expresses himself quickly and succinctly, as if he is coming up against the invisible bars of the cage that holds him back. He feels determined, which manifests in his determined walk. Each step seems clearly measured. His determination is a window to his inner world and what it is to live with this diagnosis of schizophrenia. My supervision with Dr. Bugental this week is filled with Allen's presence.

"Let yourself walk his walk, be him as much as you can." Dr. Bugental leans forward in his chair full of the curiosity that I have grown to know so well.

By walking in Allen's shoes, allowing myself to be this client as much as possible, I begin the real work. This role-play is what I refer to as a sacred entrance into the client's world. Yes, I walk Allen's walk over and over, many sessions, many times. I begin the journey of a man diagnosed as schizophrenic. He is a brilliant man who has never worked in the world. He has been supported financially by his father and lived a sheltered life at a meditation center. Now he is being asked to get a job in a world, which he does not know. It is a world that does not know him or want to hire him. He has been labeled and he bears all the consequences of this label. Employment is the external challenge for Allen, but our work is cut out for us from the inside.

### **Knowing, Not-Knowing**

What does it mean to be schizophrenic? What is the meaning of this man's life from inside? How can I really walk in his shoes? How can my supervisor help me to help him? This is a journey of existential-humanistic psychotherapy taken by three people: the client (Allen), the therapist (Dr. Heery), and the supervisor (Dr. Bugental, referred to as Jim hereafter). This is a journey of meaning and transformation for the three of us out of a cage of diagnosis into unknown possibilities. The vehicle is our common humanity. Several psychiatrists had given Allen a diagnosis but the real Allen is unknown to Jim and me. The analysts knew Allen was schizophrenic and now Allen knows himself as schizophrenic.

As I imagined being in Allen's shoes, I knew I did not know what it is to be labeled schizophrenic. My experience opened me to the not-knowing. Beginning to look at Allen's inner world from not-knowing awakened a persistent sense of curiosity and awe in me — behind this objective diagnosis lives a person who has yet to be seen by himself, Jim or me.

## **Diagnosed and Searching for Meaning**

My sense of curiosity and awe brought up many questions for me and Jim. How does this diagnosis of schizophrenia impact Allen's inherent capacity to search? Is he searching for more than a job and if so, for what? Allen is still pacing during his sessions as he answers these questions.

"I'm not here to look for a job; that is my father's concern, not mine. My concern is enlightenment. If getting a job can help me reach my goal, so be it."

Allen is searching. He is searching for enlightenment, even if the route to it lies "out there" in a job. Allen has been living at a meditation center for fifteen years in search of enlightenment, accompanied by his diagnosis of schizophrenia. Soon after his diagnosis, he entered this meditation center to find meaning in what he described as a "meaningless life." He is well read in the literature in every Eastern and Western spiritual tradition available to him.

Part of Allen's diagnosis includes hearing voices, yet these voices are not harmful to him or others; he describes them as helping him to reach God. His experience confirms my research that hearing voices can be helpful as long as they are not instructing harm to self or others (Heery, 1989). Allen is determined to reach enlightenment as he continues to pace the floor of my office. But he has not reached his goal and here he is in my office, pacing. He comes two, sometimes three times a week.

My weekly supervision continues. We individually and collectively begin to experience Allen from inside. I actually pace during some of my supervision session. In pacing, I experience determination accompanied by hesitation, as if I was a caged bird, able to fly but stopped by invisible bars of the invisible cage formed by a diagnosis. Because this work involves fluctuating states of curiosity and awe extending beyond the individual, there is blurring of the identities of the client, therapist, and supervisor. Perhaps, this blurring can be defined as loss of boundaries. We are not referring to physical boundaries in this blurring process but rather inner experiences lived by the client, therapist, and supervisor. It is an experience of being apart of and at the same time apart from. By walking Allen's walk I can feel into his state, as if I am Allen, yet separate from Allen. Of course, I hesitate.

"Jim, his continued pacing is concerning me."

"What is happening inside you right now?" Jim asks me.

"I feel impatient. He knows he can sit down. I am moving away from the present moment and into the future with fear. What if he never sits down?"

"So."

"I feel so deeply moved by him (tears come). I feel so alone when I feel into his inner world. I need to stay where he actually is in the moment. I need to slow down."

"Yes, continue your pacing."

I move slower and experience a felt sense of Allen's inner world. I call Allen's pace the sacred pace, as it allows me to enter Allen's inner world without judgment of good or bad, right or wrong, But rather with deep awareness of what is. I continue to pace during some of my supervision hours and Allen continues pacing for roughly a month during his therapy hours. Accepting his pace is sacred to him, to me, and to Jim. Sacred in the sense of embodying Allen's world as it actually is in the moment.

"I'm going to sit down today. I can see you and the tree outside much better that way." Allen makes this announcement in a very matter- of- fact manner accompanied by clear determination as he sits in the chair, looks at me clearly and then at the tree outside the window.

In trusting this sacred pace, we have all entered a sacred relationship. I never verbally tell Allen that I had walked his pace but he knows that I have entered into his inner world. Client, therapist, and supervisor share this unspoken knowing. Allen trusts me now. He acknowledges his changed relationship with me and also his relationship to the world by wanting to see me and the tree clearer. We are now in the beginning stages of a new relationship, which points to the very intricate and delicate work of weaving meaning into Allen's world.

There are many aspects of Allen's work we could share over the next four years of twice, sometimes three times a week therapy yet time and space does not permit such an in-depth discussion. In accepting these present limitations, we are reminded of Allen's acceptance of his limitations.

In a very real sense, Allen's search for meaning came through the acceptance of his actual life. Transformations are processes of embracing the actual. Allen could lower his dosage of medication but could not function without his medication. With the assistance of a psychiatrist, he tried briefly to stop his medication but experienced his self-demeaning voices as unbearable. The medication helped control the volume of the voices. There was never any full meaning to the causes of his various voices. Searching for causes was not the focus of our work, rather accessing Allen's potential. His passion for enlightenment was channeled into his love for spiritual literature and sharing that love with others.

After many failed attempts at employment, Allen volunteered at a bookstore to organize their spiritual books. After a few months, he became like a mentor to seekers frequenting the bookstore. In time, he became an employee at the bookstore with a limited income but an income. These outer changes matched his inner departure from the caged diagnosis. Our mysterious and awesome journey together was coming to a close with some meanings and no meanings, a paradox of being human.

One significant meaning for Allen is he found his voice of spirituality could be heard and accepted by significant other, his therapist. This therapeutic acceptance was critical to his self-acceptance and his ability to function in the world simultaneously hearing voices. It was through this fundamental therapeutic relationship that Allen could move into the larger world with a sense of worth. His work at the bookstore mirrored the positive aspects of his inner world. Certainly, at times his mysterious voices of the mystical realm of life made no sense to him, yet he found other kindred souls to discuss these paradoxes of walking the earth with mystical feet.

Allen went through a process of transformation and woke up to what was actual in the moment. Enlightenment moved from a wished for mystical state of being in the future to an embodiment of the here and now within himself, between us and in his relationships to others in the world. This change from the imagined future to the actual present moment certainly did not stop his dreams of the future but placed more focus on how his future was forming now. In the later phase of his therapy a pivotal experience occurred with his estranged father who had played the role of an emotionally absent father most of Allen's life. According to Allen, his father was a very successful man professionally and Allen's unusual experiences such as hearing voices and his diagnosis of schizophrenia had been shameful to his father's self and world image. They had spoken very little over the years with his father's main contact being a check once a month for Allen's living expenses. During the four years of therapy Allen began to correspond with his father who lived on the opposite side of the country. Their physical distance mirrored their emotional distance. Slowly their relationship began to open with their correspondence.

"I got a letter from Dad today and he wants to come here and attend one of my therapy sessions.

"Is that something you want Allen?"

"Well, it seems ok with me, I do not know what would happen but I do know what has happened in the past."

"And in this moment, what is your wanting?"

"It is all mixed up. I am scared and hopeful at the same time."

"I am too."

The authenticity between Allen and myself is palpable. During Allen's searching, he explores our relationship and how his father's physical presence could change our relationship. He decides to say yes to his father attending a session, feeling the positive far outweighed the negative. I join his decision and know I will review this decision with Jim in supervision.

"Allen's father is coming to Allen's session in about a week. I feel scared."

"So?"

"It is as if I am going to be observed and reviewed by a parent. Am I doing a good enough job with Allen and if not, what? And what if I am doing a good job? I do not like the judgment."

"Who is judging right now?"

"I am."

"So?"

"I am so harsh on myself. My ever-faithful critic is raising her head up and attempting to destroy what we have done and what could be done. Allen also shared a similar concern. Ah, it is good to feel my critic's power and take her power into the session, not the judgment."

In my office a week later a tall-distinguished man accompanies Allen into my office. A gentle smile immediately widens his mouth as he shakes my hand and says.

"Thank you. I wanted to personally come here to thank you for accepting Allen. Something which I have had a great deal of difficulty in doing myself."

Humility fills me. As Benoit so beautifully said regarding transformation, "The only task, incumbent upon us is to understand reality and to let ourselves be transformed by it." (Benoit, p. 242).

This brave father continues and apologizes to Allen. They speak openly for an hour. There are bumps in their communication as there are in all human communications and at the same time their hearts remain open to each other. Simultaneously, in a very precious, unique way, my heart is also opened to myself as a therapist.

## **Concluding Thoughts**

We have not seen nor heard from Allen in over twenty years but we visited him through watching a movie this year, 2002. Jim and I along with our spouses saw *A Beautiful Mind*, a story of a brilliant schizophrenic's healing process. I found myself riveted to my chair at the end, weeping as the memory of Allen and our work together once again moved me. Will the memory of Allen ever not move me? I looked over to find Jim and our spouses also weeping. Each moved in their unique way. My journey with Allen transformed me into a therapist who deeply trusts the client to do his or her work and to trust myself in accompanying their work in the moment. For Jim, he had the great delight in being a part of my transformation, experiencing the work from inside myself. When we slow down, we have the opportunity to become aware of the actual moment, should we turn our attention to it — whether as client, therapist, or supervisor. Meanings and transformations are found in the actual moment. When we allow ourselves to experience the moment, we open to the gifts and challenges inherent in searching for meaning and transformation. The job of being and becoming fully human is awesome and mysterious and to accompany an individual on this journey is a great honor.

## **Critical Considerations**

It is a new century accompanied by many new beginnings for individuals and the world we live in. The historic destruction of the World Trade buildings in New York by terrorists is imprinted on everyone's consciousness. As psychotherapists we bring this present world reality into our sessions and are continually challenged with helping our clients search for meaning in their individual lives within the context of an increasingly unpredictable world. This unpredictable quality of living is an old backdrop to the stage of living as we as psychotherapists and supervisors well know.

Perhaps it is at this juncture that our profession needs to look back to critical incidents in history and reexamine the lessons learned. Victor Frankl, a pioneer existentialist in meaning and transformation in psychotherapy (1985), continued to hope for a truly humanistic psychology within a fascist state that was mobilizing in Germany. Perhaps the truth he saw and experienced in humans in concentration camps was akin to the truth seen in the couple holding hands as they jumped from the World Trade building on 9/11.

We each project a different meaning onto this couple dying together and this critical incident speaks to each of us. What do we hold when our lives are threatened? What is the meaning of living? What do we hold to be true as we pass through great hardships? These questions and more are critical to psychotherapy today in these heightened unpredictable moments.

## Further Research

Meaning and the future are intricately woven together, In this chapter we have focused on the present that implicates the future as has been illustrated with Allen's psychotherapy process. There are two areas of further research that our work proposes.

1. Does the belief in the future (Frankl, 1985) establish a sense of meaning for living in the present? The relationship between the present unpredictable world situation and the uncertainty of the individual survival needs to be researched to include more recent world tragedies and how people are forming or not forming meaning in their lives. This research needs to focus on the Individual 's inner experience in relation to the world in which they live.
2. Research in the field of psychospirituality and meaning (Sulmeyer, 2001) has opened the area of "false" meaning or "meaning substitutes" for "true" meaning in a person's life. Certainly, in the case of Allen we saw hints of "meaning substitutes", using spirituality as an escape from being in the world. This area of research is young and needs much exploration and will hopefully address the concerns of evil and ego-inflation through "meaning substitutes".

## Further Reading

Searching for meaning includes many inner and outer dimensions. It is our responsibility as clinicians to further our understanding of these different dimensions by following the writings of our colleagues For instance, over two decades, Irvin Yalom, M.D. has contributed vast knowledge and experience to meaning in psychotherapy. In 1980, *Existential Psychotherapy*, Yalom proposed two different aspects of meaning; "cosmic meaning" as to "what is the meaning of life" and "terrestrial meaning" as to what is the meaning of my life? (Isaksen, 2000, p.88). In 2002, *The Gift of Therapy*, Yalom continues with these questions and incorporates the listening to and actualizing of dreams in individual psychotherapy for possible answers to these questions.

Of course, there are many fine writers on the topic of meaning and transformation. We certainly do not mean to exclude but to point to what we feel at this point in time is of great importance to read. We would also point our readers to the co-author, Jim Bugental, Ph.D., latest book, *Psychotherapy Isn't What You Think*, for further elaboration of theory and clinical examples of meaning and transformation.

**\*Note:** For confidentiality the name and identity of the client have been disguised.

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Soon to be published in *Existential Perspectives on Human Issues: A Handbook for Therapeutic Practice*, chapter 6, *Transformation and Meaning*

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