

JUNGIAN THERAPY

COMPANION WEBSITE MATERIAL

Accompanying

THEORIES AND STRATEGIES IN COUNSELING AND
PSYCHOTHERAPY (FIFTH EDITION)

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Fundamental Tenets

HISTORY

Carl Gustav Jung was born in Kesswil, Switzerland, in 1875, the only child of a Swiss clergyman. Jung's early family life undoubtedly influenced his theory. On one side was his worldly and outgoing mother, on the other a staid and pious father. He also had eight uncles, all of whom were clergymen in the Swiss Reformed church. Certainly, the heavy emphasis placed on religion by his family influenced the spiritual aspects of his theory, although Jung stated that for a great portion of his youth he was bored by it. Jung was taught to read Latin at an early age by his father; this along with his mother's reading to him about exotic religions would seem to account for his early and abiding interest in history and his facility with ancient languages (Smith & Vetter, 1991, p. 96).

As a young man he was intrigued by spirituality and the occult and was struck by the repetitious themes, symbols, anecdotes, and occurrences of spiritualistic phenomena that he found in a variety of writings and reported experiences. These repetitious themes came from all over the world and throughout recorded history. They were so similar that they defied rational explanation. Jung's experiences with the supernatural in his own home caused him to attend seances for more than two years and culminated in the writing of his doctoral dissertation in 1902. His dissertation "On the Psychology and Pathology of So-Called Occult Phenomena" laid the groundwork for a number of major themes in his later work (Campbell, 1971, pp. ix-xiii).

After graduation from medical school he became an assistant at the Burgholzi Mental Hospital and Psychiatric Clinic in Zurich. During this time he worked with Bleuler and Janet, two giants in the early twentieth-century frontiers of mental illness. In 1906 he struck up a correspondence with Freud. It appeared his close working relationship with Freud would make him the heir apparent as the chief theoretician of psychoanalysis. Indeed, he was the first president of the International Psychoanalytic Society. However, like Adler, he became disenchanted with Freudian theory. Basic disagreements over emphasis on sexuality and the importance of psychoses as opposed to neuroses and different views on the structure of personality culminated in 1913 with Jung's breaking away from Freud and starting his own analytic school (Nystul, 1993, p. 137). In 1913 he gave up his instructorship in psychiatry at the University of Zurich to go into private practice. From 1933 to 1942 he was professor of psychology at the Federal Polytechnical College in Zurich.

Like Freud and Adler, Jung was a prolific writer. His collected works comprise twenty volumes (Read, Fordham, & Adler, 1953--1978). His writing covers a wide range of topics and illuminates his most famous contributions of the extrovert and the introvert, the four functions of thinking, feeling, sensation, and intuition, and primordial archetypes (Sahakian, 1969, p. 82). Jung's interests were widely varied, with religion, mythology, literature, philosophy, and archaeology holding important places in his intellectual life. These interests are clearly reflected in his travels, writing, research, and practice (Nystul, 1993, p. 137). Jung continued to write and conduct research until his death in 1961 at the age of eighty-five. Jung was much more than a psychologist or a psychiatrist---he was a classical scholar in the truest sense of the word (Rychlak, 1973, p. 132).

Until the 1960s, Jungian analytical psychology was practically nonexistent in America (Kaufmann, 1989, p. 126). However, two disparate movements have caused it to take root and begin to grow. First was the emergence of the Myers-Briggs Type Indicator (MBTI), which measures personality according to Jungian function (Myers & McCaulley, 1985). Interest in the MBTI has grown to the extent that the Center for Application of Psychological Type in Gainesville, Florida, conducts nationwide conferences on the study and use of the MBTI. True to their calling, in the workshop literature of the Center, teaching staff typically list their MBTI type after their professional degrees! Indeed, it is not uncommon for avid followers of the MBTI to have their typology printed on T-shirts, stationery, and desk plates!

Second, since the "psychedelic" seventies, considerable interest in altered states of consciousness, the metaphysical and spiritual aspects of human growth and development, and transpersonal psychology as a legitimate field has developed. Jungian therapy is the only major contemporary therapy to actively embrace and use theology in its work. Thus, it has special appeal for those who feel that spirituality and the need to achieve a transcendent state are necessary ingredients in the therapeutic process.

Today, Jungian training institutes are found throughout the world and are part of the International Association for Analytical Psychology (IAAP). Because of the interdisciplinary nature of the therapy, Jungians offer training to people from a wide variety of academic backgrounds. Among the more interesting requirements for admission to training is that an individual must have had at least one hundred hours of personal analysis with an IAAP analyst (Training Institute of the Inter-regional Society of Jungian Analysts)!

OVERVIEW OF JUNGIAN ANALYTIC THERAPY

Jungians view humans in a positive sense and believe they are inherently predisposed to make their individual mark in the world. However, this individuation process is not accomplished by merely obtaining fame and glory through material achievement or notoriety (Jung, 1971d, p. 8). Rather, to become truly individualized, human beings must become transcendent and come to grips with the unconscious part of their personalities. Individuals who fail to integrate fully the many oppositional forces of conscious and unconscious components of their personality will never fully develop to optimal capacity or achieve self-realization.

Individuation is the process through which people move toward self-realization and is the penultimate goal of living and of therapy. It is a complex and difficult process that calls for reconciliation and integration of a variety of forces, traits, and attitudes, and it may be beyond the scope of many individuals. Therefore, the process of therapy may be twofold. In a minimal sense, it may be enough for the client to experience affective catharsis of a problem, gain insight into it, and then learn new ways of coping or solving the problem. At a far deeper level, some clients may go beyond the immediate problems of their lives and plunge into a transformation of their psychic processes and their total being. If successful, they may emerge as very different and changed individuals who have achieved a higher consciousness and a clearer picture of their distinctiveness and separateness from the rest of humanity.

To become individuated, clients must come to grips with powerful, unconscious archetypal complexes that are in constant, submerged flux. The complexes of the shadow and the anima/animus are two of the principal oppositional and tumultuous unconscious forces that must be reconciled. The therapeutic modality most commonly used to bring these and other archetypes to conscious awareness is dream work. Thus, analytical psychotherapy attempts to create a communicative

link between the conscious and unconscious and make understandable through debate and interpretation what may appear to the individual as very illogical and completely undecipherable (Kaufmann, 1989, p. 119).

THEORY OF PERSONALITY

Analytic psychology does not have a comprehensive topographic, genetic, economic, dynamic, structural view of personality, as does Freudian psychoanalytic theory (Kaufmann, 1989, p. 127), nor does it view socialization as the critical component of personality development, as does Adlerian psychology. Its personality basis is a very dynamic, fluid, and complex view of the psyche. The psyche is composed of numerous subsystems and functions within those systems that are constantly active and oppositional to one another and at the same time inter- and independent.

Jung believed that the psyche is composed of interdependent systems comprised of the *conscious*, which provides consistency and direction and handles perceptions, memories, thoughts, and feelings; the *personal unconscious*, which contains forgotten or repressed material that has been lost to conscious thought but is still retrievable; and the *collective unconscious*, which is the transpersonal or nonpersonal conscious that is not concerned with any personal experiences (Jung, 1971a). The personality is composed of these parts in an integrative, holistic way (Smith & Vetter, 1991, p. 97).

The Jungian view of the personality may be depicted as an upright, somewhat flexible and fluctuating cylinder (Rychlak, 1973; Smith & Vetter, 1991).

EGO

At the top of the cylinder is the Jungian conscious, with the ego at its center. It rests on the total field of both conscious and unconscious contents of the personality and is the central complex and point of reference in the field of consciousness (Hall, 1989, p. 31; Jung, 1971a, p. 141). The ego consists of thoughts, feelings, evaluations, sensations, perceptions, and active memories. It has both an internal and an external frame of reference, provides the framework for one's self-perception and identity, and is the reality base for interaction with the environment (Smith & Vetter, 1991, p. 98).

PERSONA

The persona is the thick shield that covers the ego. It develops during childhood and is the public image that the individual allows others to see. It is the compromise that one must make between personal desires and those of society (Smith & Vetter, 1991, p. 98). Persona is the conscious everyday component of the self and is reflected in various roles, such as work, family, leisure, and social settings. For Jung, the goal of individuation is inversely related to one's persona. That is, the more one is aware of the social, personal self and operates on it, the less one is able to understand and act on the private, personal self (Nystul, 1993, pp. 139--140).

SELF

Sandwiched in the middle of the cylinder is the personal unconscious. At the center core of this layer is the self, which is the unifying and stabilizing agent of the personality. The self is the regulating center of personality and mediates between the conscious, unconscious, and collective unconscious (Hall, 1989, p. 32). The self cannot emerge until other systems of the personality have fully developed, which seldom occurs before middle age. The self begins to develop when the individual moves from sole reliance on the conscious ego to a

middle ground between the conscious and the unconscious. The emergence of a more spiritual, philosophical self is the result of an optimal blending of conscious and unconscious (Nystul, 1993, p. 140).

Surrounding the self are three highly evolved archetypes: the shadow, anima/animus, and a host of supporting complexes.

SHADOW

The shadow comes from both the personal and the collective unconscious and contains the primitive, uncivilized elements within us that are unacceptable to society and are generally repressed (Smith & Vetter, 1991, p. 103). Generally, the shadow represents traits and attitudes that are the negative or evil side of the personality that people either fail to recognize or deny exists (Hall, 1989, p. 33). It is conjectured that these negative thoughts and actions occur from animal instincts that were inherited through the evolutionary process (Nystul, 1993, p. 139).

The shadow is the antithesis of the persona. It is the reservoir of those characteristics we find most repugnant in ourselves and attempt to disavow. While one's personal shadow is relatively easy to identify and handle, the archetypal shadow is far deeper and wider in its evil nature (Harris, 1996, pp. 43--44). It is Freddy Kruger, the creature from the Black Lagoon, the devil, all of Stephen King's characters, and every nasty alien conjured up by science fiction writers rolled into one Evil. The shadow is manifested by the defense mechanism of projection. That is, another person, who will always be of the same sex, will be projected as causing the client's lousy feelings, crazy thinking, and rotten behavior (Jung, 1971a, p. 146).

Acknowledgment of the shadow as an integral part of the individual's personality development requires considerable moral effort because it challenges the positive image the individual wishes to present to the world. Integration of the shadow marks the first stage in the analytic process (Jung, 1971a, p. 145).

ANIMA AND ANIMUS

These are masculine and feminine archetypes that are present in varying degrees in all individuals and are roughly equivalent to the concept of yin and yang. Anima is the feminine side archetype in men and animus is the masculine side archetype in women (Hall, 1989, p. 32). Each is responsible for certain characteristics stereotypically associated with the opposite sex. That is, the anima may behaviorally manifest itself as tenderness in the man and the animus as aggressive behavior in the woman. These opposite sex characteristics allow each sex to understand and react appropriately to the other (Jung, 1971a, p. 153). Jung believed that these archetypes come from millennia of generations of men and women living together and slowly picking up parts of each other's personalities (Hall & Lindzey, 1978).

COMPLEXES

More commonly known in Adlerian theory, complexes were originated by Jung and are a major component of the personal unconscious. They are an emotionally charged group of ideas or images. At the center of a complex is an archetype or archetypal image (Hall, 1989, p. 30). As the individual interacts with the environment, repeated exposure to specific objects of importance and key concepts results in a coalescing of these experiences around the object or experience and adhesion to it (Rychlak, 1973, p. 139). A complex has constellating power in that it may increase its potency by attracting other supporting experiences to it. Such power, if left unchecked, may cause a splitting of the complex into a splinter personality, which may cause severe

maladjustment (Smith & Vetter, 1991, pp. 100--101). Whenever there is a strong emotional reaction to a person or a situation, a complex is constellated or activated (Hall, 1989, p. 31). Because complexes reside in the personal unconscious, knowledge or awareness of them is generally unknown to and repressed by the individual (Jung, 1910).

PERSONAL UNCONSCIOUS

Jung believed that the personal unconscious holds those pieces of information that are unacceptable to the ego (Harris, 1996, p. 31). He identified three categories of the personal unconscious: First are those things we forget: "Where in the world are my research notes for this chapter?"; second, thoughts that are repressed and brought back to memory: "I'll be darned---the name of that girl I took to the homecoming dance in 1963 was Karen. Now why did that pop into my head?"; third, elements that have never reached consciousness (the unknown archetypes that nevertheless influence and guide us).

COLLECTIVE UNCONSCIOUS

At times called the objective psyche or transpersonal conscious (Kaufmann, 1989, p. 131), the collective unconscious is both the most intriguing central aspect of Jung's theory and the most controversial. Resting at the bottom of the cylinder and far below conscious awareness, the collective unconscious is composed of a culturally universal unity at its core with an infinite number of culturally universal archetypes surrounding the core (Smith & Vetter, 1991, p. 99). Jung believed that all humans have generic images, myths, and symbols that deal with concepts such as mother and father, earth and heaven, and birth and death. Not only are these images present in the world around us, they are also biologically transmitted by what Jung called *memory traces* in the cortex. They are transmitted down through the generations and are an integral and guiding part of our thinking, feeling, and acting. While the collective unconscious is not directly retrievable to consciousness, it is nevertheless universal and functions as the major undergirding component of the personality (Hall & Lindzey, 1978; Kaufmann, 1989). Its concrete representation in the individual's present reality is in the form of what Jung calls primordial images or archetypes.

ARCHETYPES

Jung named these culturally and generationally transmitted and inherited personality building blocks of the unconscious *archetypes* (Jung, 1971c). Because they emanate from the deepest regions of the collective unconscious and are so ancient, they are also called primordial images. Specific archetypes have evolved so completely that they now stand as separate but interlocking systems in the personality. These are the anima and animus, the shadow, and the self (Hall & Lindzey, 1978). Supporting these major systems are a host of different, commonly held archetypes that are universal patterns or motifs and are the basic content of religions, mythologies, legends, and fairy tales. They emerge in individuals in the form of dreams and visions (Hall, 1989, p. 30).

THE DYNAMIC PERSONALITY

The Jungian personality is restless. It has an instinctual need to seek what Jung has variously called *individuation*, *transcendence*, and *self-realization* (Jung, 1954b, p. 81). Being active and mobile, the cylinder is ever changing. Now lopsided, now depressed on one end or the other, now stretched wasp-waisted, the perfect figure would be close to a cylinder, with equal parts of conscious, unconscious, and collective unconscious. However, this cylinder is not fixed and

immobile, but fluid and dynamic. For Jung, even at the hypothetical endpoint of self-realization, the personality is still energized, still seeking its personal holy grail (Jung, 1954a; 1971e; 1971f).

NATURE OF MALADJUSTMENT

Pathology is not seen in Jungian psychology as a diseased or abnormal state. Rather, symptoms associated with psychopathology could be instructive for both the client and the analyst in providing clues to the function of the personality and also serve as warning signals when something is wrong in the personality system (Nystul, 1993, p. 140). The extent of disturbance we eventually suffer will be a function of the number and one-sidedness of incompatible opposites we generate in living and how soon we attempt to compensate for our lack of balance (Rychlak, 1973, p. 169).

NEUROSIS VERSUS PSYCHOSIS

The fundamental difference between a neurosis and a psychosis, such as schizophrenia, is the split between the ego and some of the complexes. In a neurotic, the split is relative. Even in a multiple personality there is cooperation between the different persons who generally keep to their respective roles and, if possible, do not bother each other. Personality dissociation in schizophrenia is quite different. The personality is almost completely split off in schizophrenia (Hall & Lindzey, 1978; Kaufmann, 1989). Its concrete representation in the individual's present reality is in the form of what Jung calls primordial images or archetypes.

Insanity is thus an invasion from the unconscious of contents that are flatly incompatible with the aspirations and intentions of the ego (Rychlak, 1973, p. 169). For most of his career, Jung (1960a, p. 253) believed that psychoses were so intractable to therapy because they had some sort of metabolic toxin as their cause. Thus, talking could do little to rein in the unbridled complexes that came stampeding into conscious.

Conversely, the full-blown neurotic fights furiously for the maintenance and supremacy of ego-consciousness and relentlessly subjugates the unconscious. By attempting to maintain ever more rigid ego control, the neurotic approaches the morass of psychosis, yet somehow manages to remain on a relatively safe but teetering precipice (Jung, 1960a, pp. 234--238).

However, neuroses also serve a positive purpose. First, they start a holding action against unconscious complexes that would inundate the conscious if allowed to do so. Second, they send a message that has a purpose for our mental health and teach us something if we are willing to experience it. In Jung's words, "We do not cure it, it cures us" (Jung, 1964a, pp. 69--170).

MORALS AND CONSCIENCE

There is a component in maladjustment that has to do with morals and conscience. People develop a neurosis for want of a conscience (Jung, 1960a, pp. 355--356). Continual denial of the collective body of ethical beliefs and moral standards designed to compensate for selfish behavior will invariably result in a neurotic outcome (Jung, 1954b, p. 120). Therefore, when the client's conscience talks, he or she had better listen, or some very negative behavioral outcomes are likely to occur (Jung, 1960a, pp. 355--356).

Thus, denial assumes a prominent role in the analyst's attempt to ferret out the client's evasion of a task. The analytical therapist asks, "What is the task which the client does not want to fulfill at this time? What difficulty is the client trying to avoid now?" (Jung, 1961, p. 182). The client attempts to flee

into the known and idyllic past and remain there, supposedly safely in control in preference to confronting life in the present with all of its unknowns and risks (Jung, 1961, p. 166).

MAJOR CONCEPTS

POWER OF THE UNCONSCIOUS

Humankind's heredity is psychic as well as physical in nature. The unconscious is an intuiting agent that far exceeds the capacity of the conscious mind. Unlimited power resides in its collective aspect, and the archetypes are carriers of this tremendous energy or libido. The libido is fueled by the energizing forces of diametrically opposed force fields of the personality that are constantly under tension and generate tremendous amounts of energy (Harris, 1996, p. 22). It should be clearly understood that Jungian libido is not just Freudian sexual energy, but psychic energy in any manifestation. Release of this energy causes emotional reactions that stimulate feeling toned thoughts, which in turn form clusters of ideas called complexes. Finally, from a positive viewpoint, the unconscious is not merely composed of repressed material but is a fountainhead of creativity, guidance, and meaning.

SYMBOLS

All products of the unconscious that come to awareness do so as symbolic messages. Archetypes are the birthing agents for symbols. The most common symbols occur as dreams. Dreams are the avenue of egress for the unconscious to gain awareness and, as such, are the axis on which therapy revolves.

Jung's symbols are different from Freud's symbols. For Jung, symbols are intuitive ideas that have not yet formed, as opposed to Freud's view that symbols are symptomatic signs released into conscious awareness (Jung, 1966).

ENVIRONMENT AND CONDITIONING

According to Jungian theory, environment and conditioning play a critical part in the personality by interacting with archetypes (Kaufmann, 1989, p. 131). Thus, behavior is both consciously and unconsciously motivated by environmental and psychic stimuli.

MOTIVATION

The individual is both pushed by inherited archetypes and developed complexes from the past and pulled toward the future by the need for self-actualization, individuation, transcendent functioning, and selfhood (Smith & Vetter, 1991, p. 107). Although the past determines a good deal of the present, human movement is focused on the future.

POLARITY AND OPPOSITIONAL BALANCING

There are four functions of consciousness: thinking, feeling, sensing, and intuiting. These functions along with other functions and archetypes are polar opposites to one another. Opposites are the driving principle of all psychic energy and have a counterbalancing relationship. In the mentally healthy individual, conscious and unconscious components of the personality are balanced. The Jungian personality is always in a state of psychic flux through a transfer of psychic energy that invariably oscillates in a bipolar manner.

Any systems, attitudes, or functions may interact with one another in any of three ways: compensation, unification, or opposition. Compensation most often

occurs when parts of the unconscious attempt to countervail parts of the conscious. Thus, the person who is consciously dominated by feeling and thinking may be unconsciously motivated by intuition and sensation. Oppositionally polar tendencies are in constant struggle with one another and are key in energizing one for effective living. Because polarities also have the power to attract, there is also the possibility of unification (Smith & Vetter, 1991, p. 108).

TRANSCENDENCE AND SPIRITUALITY

Technology and scientific knowledge are but one way to solve psychological problems. Transcendence and spirituality are another. Conscious rationality forms but one small aspect of the human experience. Unconscious archetypes form an even larger realm. As a result, self-realization can come only through transcendence and individuation, which is as instinctual as the drives of sex, hunger, aggression, and thirst (Kaufmann, 1989, p. 120).

No other theory begins to approach the breadth and scope of Jung's when it comes to views of the spirit, spirituality, and whatever passes for each person's immortal deity. Jung ranged across such arcane religions as Mithraism and Gnosticism to Christianity, Buddhism, and Judaism to the Great Spirit of the American Indian and tarot cards (Harris, 1996, pp. 172--178). In the Jungian quest to reach out and touch the transcendental nature of humankind, there is probably no known religion that is not of interest--particularly if it includes a heavy dose of mysticism.

INDIVIDUATION

Individuation is the attempt at realization of the self (Kaufmann, 1989, p.130). It is the hypothetically attainable endpoint of our existence and also the hypothetical culmination of the transformation stage in therapy. It is an instinctual force that continuously pushes us toward wholeness and realization of our own particular meaning in life (Kaufmann, 1989, p. 120). The important factor in individuation is not the amount of achievement one attains, but whether the personality is being truer to its own deeper potentialities rather than identifying in egocentric or narcissistic ways with cultural roles. The process, both in theory and as applied in therapy, involves a continuing dialogue between the ego and the self. Thus, successful movement toward individuation is both intimate and transpersonal, because both conscious and unconscious must be called into play and melded together for the possibility of individuation to occur (Hall, 1989, p. 4; Jung, 1971e, p. 279).

The Counseling Process

To allow an integration of the conscious and unconscious selves and the emergence of the true self, much of therapy involves the slow, methodical detective work of exploring the symbolic, often obtuse, and at times seemingly incomprehensible components of the unconscious. Currently, there are three major schools of thought on how this might be achieved. The classical school focuses on integration of self. The developmental or genetic school focuses on transference phenomena and dynamic interpretation of childhood experiences. The archetypal school focuses on the primordial images derived from the collective unconscious (Dehing, 1992; Samuels, 1985; 1989; Spiegelman, 1989; Walker, 1992).

Unlike the cause-and-effect systems of Freud or the behaviorists, Jungian psychology is symbolic and multidimensional in its interpretations. Probably the only law in Jungian psychology is that there is no law. Jungian psychology is paradoxical in that there are no simple yes and no answers. Therapy, like life, depends on the situation. Any action or trait taken to an extreme will become a counteracting force, and it is this force that is the essence of both therapy and living fruitfully. Jung had little use for a theory of personality that

defined itself by a law of averages and measures of central tendency. He saw a workable theory of personality as primarily *paradoxical* and characterized by its *irregularity* (Jung 1964a). The Jungian personality is made up of many subpersonalities, which constantly replace one another in taking the driver's seat down life's rocky road while the others sit in the back of the bus---some patiently waiting and others noisily demanding to drive. In full bloom, analytic therapy is concerned with all of these passengers and their ancestral ghosts!

Analytical therapy typically involves four stages of treatment: confession and catharsis, elucidation, education, and transformation. While each stage seems final and may be sufficient for a return to mental health, none is complete in itself. Even transformation is not an endpoint (Jung, 1966, pp. 68--75).

CONFESSION AND CATHARSIS

Confession is the emotional side of mental distress and affirms that intellectual insights alone are rarely sufficient to effect change. By beginning to own feelings, the client establishes contact with the feeling tone of the unconscious complexes that cause maladjustment. This form of catharsis functions in much the same manner as the religious confessional (Rychlak, 1973, p. 176).

ELUCIDATION

Rarely is confession and its subsequent catharsis sufficient. Elucidation is the dynamic interpretation by the therapist of the client's past and also the projection or transfer of important complexes to the therapist (Jung, 1954b, pp. 61--62). Therefore, for elucidation to be effective, the therapeutic dynamics of transference and countertransference need to occur and be dealt with by client and therapist.

TRANSFERENCE AND COUNTERTRANSFERENCE

Transference/countertransference is one of the keystones around which analytic therapy is built, and may be both personal and archetypal. It can be positive or negative and invariably has the oppositional forces of attraction and repulsion at work (Harris, 1996, pp. 116--119). Transference is a special instance of the more general phenomenon of projection and needs to be analyzed. For Jung, the therapist is not just a sexual transference object, but rather a symbol of the social bond that holds society together (Jung, 1961, p. 199).

However, in attempting to establish this bond, the client becomes dependent and regressive, with an outpouring of feeling toned projections, typically concretized by acting out behaviors. Once the client realizes he or she has been projecting on the therapist, the transference is resolved (Rychlak, 1973, p. 177). Before this can happen, any countertransferences that may exist must also be resolved and recognized as such by the therapist.

Countertransference is the analyst's projection onto the client and is a necessary happening that may be used by the therapist as a guide during the course of therapy. It is inevitable that countertransference will arise in the relationship because all projections provoke counterprojections (Jung, 1960b, p. 237).

Thus, both transference and countertransference may be expected and even invited. From that standpoint, the therapist is as much in analysis as the client, and if the therapist believes the client must work through a narcissistic personality, then the therapist should look to his or her own narcissism.

EDUCATION

The therapist must now help clients to educate themselves in all aspects of life that have been found lacking. Jung proposes no particular way of doing this, except to say that whatever needs doing will be made plain by this stage of therapy, and the therapist will need to act as would any friend, by lending moral support and encouragement to the client's efforts (Rychlak, 1973, pp. 177-178).

For many clients, the first three stages will be enough, and therapy will be terminated by clients who are armed with the necessary knowledge and insight to attain some semblance of balance to their lives (Rychlak, 1973, p. 178). Yet some individuals have potential beyond the average; for these people, to educate them to normality would be their worst nightmare because their deepest need is to march to the tune of a different drummer (Jung, 1954b, p. 70). Understanding their "abnormal" lives calls for therapists and clients to plunge into the fourth and most complex stage of therapy.

TRANSFORMATION

The final stage of transformation is unlike any other in psychotherapy and is necessary for self-realization or individuation. It is the shadow complex, which triggers the individuation process. Clients do not relish this stage because of their fears that it may overwhelm them (Jung, 1967, pp.197--198). The shadow provides a fearsome but necessary contrast to the conscious realm of personality. It is necessary to the extent that it allows for the tension of opposites from which psychic energy is generated (Jung, 1963b, p.497). Character is actually enriched through this constant interplay between the shadow's intrusion and the compensating measures we take to control it. Thus clients must see it, confront it, and learn to live with it.

However, it is not the shadow that is directly confronted, but rather the anima or animus that directs the shadow's actions in the unconscious and serves as a bridge to the conscious world (Jung, 1967, p. 42). Once out in open conscious, the anima/animus is quite likely to have very decided opinions about a number of things, and very lively internal dialogues are likely to ensue between the personified anima/animus and the client. Thus is the coming-out party of the polar opposite of the client's conscious ego. Yet victory of the ego over the anima/animus or vice versa is not the goal of therapy, for in the former case that would be a return to a complete state of consciousness with no self-realization and in the latter case to a complete state of unconsciousness, again with no self-realization (Rychlak, 1973, pp. 179--180).

What is needed is a balancing act between the two. This process is not easily done and requires a great deal of time and concentrated effort from both client and therapist in the quest for the emergence of the self.

Finally, the emergence of the self has some far-reaching consequences for the ego, which is usurped by the arrival of a new focal point of the personality (Jung, 1967, p. 45). This is all very upsetting to the ego, which does not always give up its position without a fight (Rychlak, 1973, p.182). The ego is a very shortsighted, biased psychic complex that lives on extrinsic concrete reinforcement, while the self has a much larger catholic character that thrives on intrinsic, abstract reinforcers. Balancing the two forces balances the transformation equation.

STRATEGIES FOR HELPING CLIENTS

COUNSELING GOALS

The aim of therapy is to help the client move toward greater self-realization. For this to occur, the client needs to develop other major systems that may be arrested or achieve a better balance between subsystems of the personality (Nystul, 1993, p. 140). Most people who come for therapy have lost touch with their inner world and are barely aware of its existence. One of the major goals of therapy is rebridging the gap between these inner and outer worlds. Some clients must be reminded again and again to pay attention to their inner world. Others are flooded by their inner world and pay too much attention to it. There is no bridge because the two worlds are commingled. The therapist's job, then, is to separate these two worlds and build a bridge between the two (Kaufmann, 1989).

THE COUNSELING RELATIONSHIP

Jungians do not perceive therapy as a typical client-therapist relationship wherein the client is *treated*. Acceptance is the *sine qua non* of analytic therapy (Kaufmann, 1989, p. 139). Jungians see themselves more as guides to help another person delve into the unconscious. They can function as expert guides because they have traveled the territory and know it from their own analysis (Nystul, 1993). Depending on the client's development, the therapist may exchange feelings, experiences, and even dreams. The analyst may teach, cajole, give advice, reflect feelings, or give support. Much like Gestalt therapy, major emphasis is placed on conscious assimilation of immediate experience (Kaufmann, 1989, p. 135).

Jungian therapy hinges on an equitable relationship between client and therapist. To instigate such a relationship, the therapist must give up all pretenses to superior knowledge and all authority and desire to influence the therapeutic process. The therapist must give the client the opportunity to be free to say, feel, and think what he or she wishes. In that regard, the therapist's reaction is the only thing with which he or she can legitimately confront the client (Jung, 1966, pp. 5--10). Thus, a major axiom for analytic therapy is that the therapist follows religiously the direction of the unconscious and abandons all fixed notions and preconceptions about the client (Kaufmann, 1989, p. 134).

COUNSELING TECHNIQUES

Jung was skeptical of mandating techniques because he felt they could be restrictive to the individuation process (Nystul, 1993, p. 141). Jung as a therapist was unorthodox and pragmatic in his approach and would use whatever worked (Kaufmann, 1989, p. 132). However, knowing the client's background and how it is linked to present functioning is mandatory, not only for the insight it provides into conscious dynamics but also as the opening move in discovering the complexes that contribute to maladjustment.

ASSESSMENT

Two forms of assessment are closely allied with Jungian therapy. First and foremost are personality types. Within the Jungian personality schema there are two major types of attitudes---the outgoing, gregarious, or extroverted personality and the introspective, shy, or introverted personality. Each individual has some combination of the foregoing with the dominant attitude represented in the conscious and the nondominant in the unconscious. Complimentary to extroversion and introversion are four functions that allow for further differentiation of personality type: thinking, feeling, sensation, and intuition (Jung, 1971b).

These are divided into two pairs: sensation is paired and contrasted with intuition and thinking is paired and contrasted with feeling (Jung, 1971b). Sensation is the perceptual function that allows the individual contact with the real world through the five physical senses. Intuition perceives the world via the unconscious. While it has no basis in rational thought, it provides flashes of insight and impressions that do have some basis in reality (Hall, 1989, p. 31). Thinking and feeling classify the functions of sensation and intuition. Thinking classifies data into logical and discrete categories while feeling classifies input into pleasant or unpleasant categories and arranges it into a value structure. Thus, the two counterbalance each other: feeling gives full play to emotions, and thinking attempts to suppress emotion by reliance on factual data. Gradually, one function will assume a superior role and the other assumes an inferior role in the personality (Smith & Vetter, 1991, pp. 104--105). It is from these attitudes and functions that the MBTI was developed (Nystul, 1993, p. 140).

The other major component of Jungian assessment is the word association method that Jung modified and adapted to determine types of complexes. The client is asked to respond as quickly as possible to one hundred stimulus words that, as Jung stated, "are chosen in such a manner as to strike easily all complexes which occur in practice." Hesitation, stumbling responses, lengthy response times, repetition of the stimulus words, and repetition of inappropriate responses to a variety of stimulus words are indications of constellating complexes (Jung, 1910). Jung measured these responses with various biofeedback devices and found distinct physiological differences in words that were troublesome to respond to and those that were not. Once these complexes were uncovered, they could then be brought to the attention of the client and thus bring unconscious material into awareness (Smith & Vetter, 1991).

EXPLORATION

The process of therapy starts with a thorough investigation of the client's current functioning in the environment. Particularly since the unconscious is compensatory to the conscious, the only way to get at it is to know the client's present reality. The investigation includes the past history of the client, various important influences in the client's life, attitudes, values, and ideas. The analyst is then able to point out inconsistencies and contradictions, peculiar reactions and odd behavior patterns. Many of the client's tacit assumptions are challenged and questioned (Kaufmann, 1989, p. 133).

There are three schools of thought in how therapy occurs. The classicists emphasize the journey into the self. The archetypals emphasize archetypal imagery exploration. The developmental Jungians journey across the life span. Dream interpretation, regression to childhood, relational emphasis between therapist and client, sand play, art, dance, and body sensation (as in a sweatlodge experience) may be primary operating procedures for Jungians (Harris, 1996, pp. 129--130).

Dream Interpretation

Dreams, the purest form from which to draw on the vast storehouse of the unconscious, often emerge as the most fruitful source of therapeutic material; therefore, dream work is a fundamental core of therapy (Jung, 1933; 1963a). Jungian therapy treats essentially all unconscious sources---dreams, fantasies, paintings, daydreams---in the same manner. For illustrative purposes, we use dream interpretation as the foundation of our exploration of Jungian therapy.

Jungian dream interpretation differs from Freudian dream analysis. Freudian dream analysis is based on repression; that is, dreams are viewed as the emergence of repressed material from the unconscious. Jungians take the phenomenological view that the drama of the dream represents the unconscious message to the dreamer expressed in symbolic terms (Jung, 1964b). The dream message is not necessarily hidden; it may appear to be trying to reveal itself to the dreamer. The dreamer may have preconceptions that either make the dream message seem illusive or impel the dreamer to resist following the wisdom of the unconscious. The dream force may appear to provide a simple solution to a complicated problem or point to a complication of a situation that the dreamer had assumed to be simple. The ego may have real difficulty associating to the dream because the dreamer is not yet ready to accept an obvious solution that appears self-evident to the strong (unconscious) dream force or the dream message presents an understanding of the situation that is too threatening or scary for the dreamer to face readily (Kaufmann, 1989, pp. 133--136).

Just as one does not automatically speak a foreign language, one cannot see the meaning in the dream automatically. This does not mean there is no meaning, but that one does not currently understand the significance of the dream. Dreams are often looked at long and hard with no meaning apparently gleaned from them, and sometimes the meaning is realized months or even years after the fact (Gilliland & High, 1985; Kaufmann, 1989).

ASSUMPTIONS IN DREAM INTERPRETATION

PRIMACY OF THE UNCONSCIOUS

A fundamental assumption in dream interpretation is the existence of the unconscious. Making sense of dream material stands or falls with the hypothesis of the unconscious. If one does not accept the hypothesis, he or she will simply say the dream is a negligible byproduct of the psyche. Obviously dreams would then hold no value in therapy. However, if dreams are from the unconscious, then interpretation is an attempt to get at the meaning of the dream in such a way as to improve the dilemmas of the client and reduce projections from the unconscious (Jung, 1933).

DREAMS BEAR MESSAGES

Another primary assumption in dream interpretation is that there is *meaning* in the dreams. Neither the client nor the therapist may necessarily know the meaning of the client's dreams. They may discover the meaning by working together in a collaborative manner. That calls for a relationship of mutual respect and trust and a commitment to working on the common objective of bringing the client's unconscious attitudes, motives, and choices to conscious awareness (Jung, 1933; 1963a).

ARCHETYPAL IMAGES

A third basic assumption in dream interpretation is that dream contents contain personal and/or archetypal images (Hall, 1977). The personal images that are remnants of one's own history are best interpreted by the client making associations to those images because, in the final analysis, the client is the expert judge of the authenticity of the images. Archetypal images not recognized by the dreamer as a part of the personal past are usually interpreted with the therapist assisting the client in acquiring a collective view of such images.

Dreams reflect the tendency of the psyche to heal itself, perform a compensatory function by indicating discrepancies between our conscious and unconscious, and provide clues for goals for future development (Harris, 1996, p. 154). Just as the inner workings of the body are always seeking balance, so also the dream

seeks to balance the contents of the psyche. This can be seen most clearly in a person holding a one-sided conscious view. The psyche produces a dream that will show the other side of whatever attitude the person has (Hall, 1977).

A final assumption is that dreams are symbolic. To interpret dreams literally is a mistake. The interpretation is only a hypothesis, not a statement of "truth" (Harris, 1996, p. 159).

PROCESS OF DREAM INTERPRETATION

HOMEWORK

Often the dream analysis process entails the therapist and the client designing appropriate homework. Even clients who rarely remember dream content can quickly and effectively begin to remember and record their dreams. Therefore, a typical homework assignment might be writing detailed, chronological, and specific descriptions of their dreams, together with pertinent associations that are directly connected with particular images in the dreams. By consistently writing thorough dream descriptions, clients soon learn to record and recognize sequences of dreams or recurrent dreams and to judge the power or valence of their dreams. Structured homework and instruction by the therapist can teach clients to recall, recognize, and record dream maxims, thus enhancing clients' amplifications as well as the quality of their dream interpretations (Hall, 1977).

DREAM MAXIMS

A *dream maxim* is an expression of a general truth, principle, concept, or rule that helps to describe or explain dream phenomena. Hall (1977, pp. 276--278) has identified eleven dream maxims that provide therapists and clients with vital information to assist in analyzing, interpreting, discovering, and unlocking the mysteries dreams seem to hold. These maxims can readily be given to clients as written guidelines pertaining to their homework.

1. *What is something unique about the dream?* Assume that the dream can reveal something unique---some new understanding that contributes to the dreamer's wholeness.

2. *What are the form and structure of the dream?* What is the visual dramatic form that moves from problem to development, to climax, to outcome in the dream?

3. *Where is the dream ego in the dream?* Is the dreamer a spectator, a bystander, or an active participant? Is the dreamer passive, proactive, assertive, or aggressive? Sometimes the dream ego shifts in the dream.

4. *Is each motif in the dream described as carefully as the dreamer's memory permits?* Take special care to push to the limit details of each motif. If a "woman" is described by the dreamer, specify whether she is young or old, attractive or unattractive, positive or negative, active or passive. No question is too absurd to ask about a dream's motif.

5. *What feelings does the dream ego experience?* Does the dream ego feeling correspond to what it should in everyday life? Is there an absence of feeling? Is the feeling exaggerated?

6. *Are the motifs of the dream, particularly persons in the dream who are known to the dreamer in waking life, better taken as objective or subjective figures?* Because dreamers sometimes project unconscious complexes onto persons known to them, it is important to help the dreamer distinguish between dream images that are taken subjectively and those taken objectively.

7. *Where does the dream fit in the ongoing series of dreams from the dreamer?* Does the dream represent a recurring dream or dream theme? Is it exact? Is there a new or a different theme?

8. *Is it a "big" dream or a "little" dream?* Some dreams are "fine-tuning" of previous dreams; some dreams represent themes that indicate a new direction. The latter are "big" dreams.

9. *Don't treat the dream concretely or as direct advice.* To ask the dream what to do in an objective situation ignores the responsibility of the waking ego. To take the dream as direct advice does not take into account the compensatory nature of dreams.

10. *Don't reduce the dream to interpersonal terms alone.* To deal with the dream as elements of interpersonal relationships exclusively does not adequately communicate the intrapsychic quality or power of the dream.

11. *Does the dreamer have any private unspoken interpretations that he or she has not subjected to the analytic process?* It is necessary to inquire into the dreamer's feelings as to the thoughts, ideas, or interpretations that have not been spoken to, so as to allow interpretations from both the therapist and client viewpoints.

It is important that clients bring to the dream interpretation session written responses to as many of the maxims as possible. However, these maxims should be used as guidelines, because we cannot expect to be able to apply every maxim to every dream.

DREAMWORK

A very important aspect of the association and amplification processes is to make clients aware of "obvious" symbolic dream images. An *association* is a mental connection between a concrete dream image and its symbolic meaning, not necessarily causal, by virtue of contiguity. For example, a client might vividly dream about a flower. The association could be the sequence of events in the client's life leading up to his or her wedding. An *amplification* is what a dream object or image really *is*. For example, a client may associate a friend to a lamp appearing in his or her dream, but basically the lamp is something that provides light in the darkness (Kaufmann, 1989, p. 136). Many clients have to be taught to recognize these images because they have no "conscious" awareness of the "obviously" big picture.

Dream interpretation is not easy or simple. Every dream is different. There are many leads, diversions, ambiguities, possibilities, and contradictions. Solving the mystery of a dream can often be equated to solving a mathematical equation. A series of dreams presents multiple unknowns and interpretations and must sometimes be approached on a trial-and-error basis. Often the dream may be interpreted in different, even contradictory contexts. A dream may be interpreted on either the objective or the subjective level. The *objective level* pertains to people or events outside the dreamer. For example, if one dreams about his or her mother, the dream may be interpreted as expressing something about the reality of the actual relationship between the person and the mother. The *subjective level* refers to people or events pertaining to the dreamer's "inner" psyche, such as one's inner parent, spouse, dilemma, supervisor, and so on. An example of a subjective level interpretation might be a young woman engaged to be married even though she is ambivalent about her commitment to her fiancé'. She dreams he is about to take her out dancing when the guys from his workplace suddenly appear with their hunting gear, and her fiancé' departs with

them to go hunting, leaving her feeling betrayed and hurt. On the objective level, this dream may mean that the stability of the young woman's relationship with her future husband may be questionable. On the subjective level, the dream may be saying to her that her inner (animus) side is not up to the stresses of the masculine competition that she intuitively knows would be required to make such a marriage work (Kaufmann, 1989, p.137).

MAJOR STEPS IN DREAM INTERPRETATION

STEP ONE

The dreamer writes the details of the dream(s) as quickly as possible after awakening (Jung, 1933, p. 12). This provides a clear understanding of the exact details of the dream before the memory of the specifics becomes convoluted, commingled, or distorted.

In writing the dream content in specific detail the client attempts to describe and clarify the context of the dreams. Context specification is important because it keeps the therapist from injecting premature associations and attempting to interpret the dreams too early. In step one the therapist questions the client incisively to make sure that both client and therapist understand the exact content; sequence of dream events; dreamer feelings about dream images; whether the dream is a repetition of a previous dream or is one in a series of dreams; and the power, strength, or valence of the dream. A series of dreams gives more confidence in interpretations than does one isolated dream. Also, a series of dreams provides a clearer perspective of basic or developing themes (Jung, 1933, p. 14). The more powerful the dream, the more important the message the dream is attempting to reveal to the dreamer's conscious ego and psychic system.

STEP TWO

The dream is reassembled with amplifications in mind. The gathering of associations and amplifications in progressive order on one or more of three levels---personal, cultural, and archetypal---helps to identify the core maxims of the dream images (Hall, 1977).

Amplification of a dream is analogous to "peeling" the three layers of a complex: (1) personal associations; (2) images of a more cultural or transpersonal nature; (3) the archetypal level of amplification---that is, in the context of snakes, houses, automobiles, incest, mourning, alcohol and drugs, death, and so on (Hall, 1989). In many dreams the order of events holds much of the secret of the dream. Questions are open-ended and not focused on specific questions found in step one. Instead, amplifying questions help the client to discover the larger picture and set the stage for expanded understanding of the dream. Therapist questions during the reassembly/amplification step could be: "What do you think the dream wants to tell you?" "How do you see the dream now?" "How do you feel about the dream?" To further amplify the dream, the therapist may use a fairy tale or anecdote that parallels or explains something related to it. Amplification does not involve interpretation, but rather adds information to the client's story or reframes it. The purpose is to help the client recognize similarities between his or her personal experience and its archetypal configuration (Harris, 1996, pp. 149--150).

STEP THREE

In essence, the assimilation step is where the therapist and the client make conscious sense of the dream. An important aspect of step three is for the client to come to the point where he or she can answer the therapist's question:

"What *conscious* attitude does the dream compensate?" "What *symbolic attitude* in the client's *unconscious* does the dream compensate?" (Jung, 1933, p. 17).

Sample Case

Theo, a forty-four-year-old man, has a master's degree and is a guidance counselor in a public middle school in a large city. He has been divorced four years. His ex-wife works as a secretary for the city's utility company. Theo's three children, ages seven, ten, and twelve, live with their mother. At the time of the divorce it was decided that his ex-wife would keep the house because of its location in a stable neighborhood and desirable school district for the children. Theo lives in an apartment across town from his ex-wife and children. The expenses of keeping up the family, paying child support, and maintaining two places has been a heavy burden and strain on Theo's resources. He is not displeased with his teaching job, but neither is he very happy. He has thought about resigning and going to California or Hawaii. But he cannot bring himself to abandon his responsibilities to his children, and he knows that if he quit his job they would surely suffer.

Theo has been going to the same Jungian analyst for almost four years, having started analysis shortly after the divorce. His analysis was difficult for about a year. Finally, he and the analyst worked through the transference and countertransference issues and now the therapeutic relationship is stable. Theo does not think about quitting analysis or changing analysts the way he did previously. On a Friday in early December of the school year, Theo was offered a job as principal of a different middle school, starting the first of January, in the middle of the academic term. The superintendent's office wanted an answer from Theo by the following Wednesday. That night, Friday, Theo had one of the most vivid and clear dreams he had had since he began Jungian analysis.

STEP ONE: WRITTEN DETAILS

Theo's dream, verbatim, as written and delivered to the analyst, follows.

Friday night I had a most unusual dream. It was really a sequence of three dreams in a row, three scenarios, or three acts, as if in a play.

SCENE ONE

Driving with someone on a curvy two-lane highway in the high hills of California. Some mountainous scenery; some desertlike slopes. I was noticing the floral life. One place we stopped. Got out of the car. Saw lots of purple violets growing everywhere---blooming profusely. Lots of wiry grasses and arid desert plants everywhere. It was obvious to me that there was a scarcity of moisture here. Some small evergreen trees were noticed. Lots of rocks everywhere, scattered all over the slopes. At that time I suddenly noticed that the person I was with was one of my students at the Sunday school where I teach. We began planting pine seedlings all over the open landscape. I took great pains to instruct the student where to plant the evergreen seedlings. I pointed out that, since rainfall is scarce here, the best place for the roots of the seedlings to be placed to survive is near the base or watershed of sloping flat-sided rocks. We then set about planting seedlings as fast as we could, looking for good, loose soil, near watershed slopes of as many flat rocks as possible. We were working very fast. I was feeling a sense of urgency to get as many seedlings planted as we could. I wanted to get this barren land covered with young trees, and I was afraid that we would not get it covered. (That scene trailed off and ended there.)

SCENE TWO

The same California mountains, except at a higher elevation---among densely wooded alpine forests and exceedingly steep terrain. Corlew, my brother just younger than myself, was with me and my youngest daughter, Rethia, was there. In the dream Rethia was only three years old. She was quite small. We got out of the car and were walking through the dense forest. I was carrying Rethia. Corlew and I were walking some distance apart and I lost sight of him, but I could still hear him.

I came upon a very steep slope, still carrying Rethia. I couldn't turn back, and the slope got so steep I was beginning to lose footing. I was trying to hold on to bushes and to Rethia and to keep from sliding down the precipice. My boots were digging into the soft earth as I tried to maintain my footing. I could see that I could not manage much longer. I was telling Rethia to hang on to me, in case I slipped and started plunging down the ever steeper precipice---almost vertical by now. I was fearful of losing my grip on Rethia in case we fell. I was most concerned about both of us getting seriously injured in the dense woods and steep mountains with nobody knowing where we were and rescue virtually impossible. (That segment [scene] faded out just about the time our plunge down the steep mountainous slope seemed imminent.)

SCENE THREE

Rethia and I were injured in the fall (even though I do not recall the actual fall, itself), I more seriously than she. We were coming from the dense forest on the opposite side of the escarpment from which we had apparently fallen. We came upon a barbed wire fence and a paved road was on the other side of the fence. I was crawling; Rethia was walking. Rethia was saying, to a man in the road, that I was hurt and couldn't walk, and she was asking him to help us. Rethia and the man held up the lower strand of the barbed wire while I crawled under it into the road. The man said he was a physician and would attend to us--for us to come on to his house.

I could not see any houses anywhere---only woods and the road and fence. He said, "Come on." He and Rethia started walking out to the road, supposedly toward a house. I told them I would come on in a moment; that I wanted to contact Corlew, because I feared he was lost in the forest. I struggled to get up on my feet, and finally did with some difficulty. I yelled, as loudly as I could, Corlew's name, cupping my hands to my mouth toward the direction I thought Corlew might be. I yelled some more and thought I heard him faintly reply, but the breeze in the tree branches and the noises of the forest and the echo of my voice muffled the sound, and I couldn't make voice contact with Corlew. I was quite worried about him, and became very frustrated and frightened for him. I went on out the road and spotted two houses, fine-looking mansions, way off the road, among many, many trees.

I didn't get to the houses. The physician, Rethia, and now the Sunday school student met me. The doctor said he examined Rethia and that she was OK. He said I was OK too---apparently. I assumed that he gave me a clean bill of health without even examining me other than observing me as I had crawled under the barbed wire fence. I accepted his diagnosis. He said, "Here's your clothes." At that moment, I realized I had on only my shorts. I took my clothes and was looking for a place to put them on when the dream began to fade away. The physician, Rethia, and the student seemed to fade out of the picture. I was urgently trying to find a place to put my clothes on and go looking for Corlew. I just could not find a place to get dressed and was frustrated over that when the dream completely trailed off, finally into oblivion---but not from my memory. (This was the most powerful dream I have had in several years!)

STEP TWO: REASSEMBLY WITH AMPLIFICATIONS

TH: Let's first try to identify the emotional tone the dream has for you.

CL: I guess I get nervous, scared, and curious when I think about it.

TH: Let's focus on the sequencing of the dream. In the first scene you were vividly seeing things growing. What specific feelings do you associate with that scene?

CL: Well, two feelings: one was elation at the tranquility and the beauty of the plants in the landscape; the other was frustration over the fact that the one variety of pine was scarce and might have trouble growing in that semi-arid location.

TH: I gather that your frustration got translated into action on your part when you started furiously planting the seedlings like you were racing against time.

CL: That's right. I don't know where that was coming from, but I was feeling a strong sense of urgency to get those young pine plants in the ground and get that barren landscape thriving.

Here the therapist was assisting Theo to get a clear mental picture of the dream contexts: keeping the sequence of dream events intact; clarifying emotional responses to the dream images; and ensuring that Theo did not lose the true dream images by commingling them with waking events that had occurred since the dream. Clarifying dream context is very important prior to proceeding to further amplification (Hall, 1977, pp. 276--277).

A session was devoted to the amplification of the three scenes of Theo's dream. The therapist and Theo carefully, step by step, verbally sorted through and audiotaped the images, order of events, symbols, motifs and Theo's emotional associations with people, activities, and scenes in the dream. Then they used the tape recording of Theo's dream amplification to study, reflect, and collaboratively dissect certain dream components. Theo wrote down as many amplifications as they could identify. A limited sampling of the amplifications for each scene serves to illustrate the product of step two.

SCENE ONE

1. I was not driving the car on the curvy two-lane highway. Someone else was, but it was not clear whether or not it was the Sunday school student. I'm sure the driver was a female. Maybe that represents the anima side of my personality driving me.

2. The environment of the place was starved for moisture. In what way is my present existence starved for nurturance?

3. I was feeling singularly responsible for nurturing the environment to health as well as for instructing the feminine archetype in myself. In what ways am I attempting to assume total responsibility for creating and cultivating my current life and surroundings?

4. At the start of the scene, I was passive (being driven); later in the scene, I was active and emotionally involved, feeling a sense of frustration and even urgency to get a vital task completed. What urgent tasks or events in my everyday living constitute a frantic personal drive to control, influence, or attain?

SCENE TWO

1. Corlew represents the "younger brother" side of my Self that I am in great fear of losing; Rethia may be that feminine (anima) part of my personality that

is young, dependent, precious. In what ways am I attempting to preserve and protect those precious parts of my personality?

2. The steep slope, loss of footing, vulnerable trek through the dangerous and unknown forest, and inability to turn back or protect the tender feminine (anima) side of my personality may represent a pervasive feeling of loss of control in some essential part of my life. In what ways am I losing or fearful of losing some vital part of my existence?

SCENE THREE

1. In the dream I was injured. How, in my current waking life, am I wounded, injured or debilitated?

2. Following my "accident" and pseudo rescue, the Sunday school student reappeared; Rethia never left me. Both anima representations in my personality were vividly present. What conscious attitude(s) regarding my anima does my waking ego wish to keep me from facing?

3. Near the end of the scene. I found myself virtually without clothing. In what ways am I, in my everyday life, feeling naked and vulnerable?

4. Throughout scene two, I was upset because I could not make contact with my younger brother, and at the very last I was in a hurry to put on my clothes and go look for him. How am I losing or in danger of losing contact with the inner "younger brother" of my existence?

5. The whole dream was unusually powerful and memorable. What message does that power and totality of the dream have for my waking conscious? What obvious conscious attitude(s), if any, is my ego resisting?

STEP THREE: ASSIMILATION

Theo's dream amplification provided the springboard for assimilation and a good deal of analysis that was a collaborative enterprise between the therapist and Theo, who, at that stage in his individuation process, was conversant with the process of dream interpretation.

CL: Now that we've been going over the details of the dream, I do see some real relevancy to my present life.

TH: What seems to be the strongest symbolic and emotional message the dream is trying to convey?

CL: Well, that some aspects of my life have been unraveling lately, and that's scary. I need to get hold of them before they get hold of me. I mean, at first I had no notion that the urgent hurrying depicted in the dream images might be a conscious compensation. Sure, I have been under stress lately. The regional ten-year accreditation visiting team is coming in next week. Would you believe the evaluation was scheduled for December 9 through 12? I'm the coordinator of that! Semester exams begin the day they leave. The Christmas holiday crunch is upon us. I don't have the money I need for all my obligations and my kids' Christmas. No wonder I hadn't thought about all that, much less face it!

TH: So, Theo, now that you connect all the pieces, some of the dream components make pretty good sense.

CL: I can think of some other implications too. Like, what is the barren landscape of my present life that may cause me to have an urgent need to get it started growing? It's not yet clear to me what the urgency of the dream image of planting those trees symbolizes or compensates.

TH: For right now, what does the magnitude of the dream series have to tell you? This was a BIG dream. [The therapist was referring to the fact that Jungians and their clients commonly agree that a "big" dream symbolizes or compensates in the "big picture" in one's life.] What does that mean for your overall life? Also, what did you learn about yourself? And what more do you feel the need to learn about yourself? And what do you want to do about this dream?

Here the therapist is working with Theo on the process of assimilation, defined by Jung (1933, p. 16) as "a mutual interpretation of conscious and unconscious contents, and not---as is too commonly thought---a one-sided valuation, interpretation and deformation of unconscious contents by the conscious mind." The focus of assimilation of Theo's dreams is to decipher the message contained therein so that he can both understand and act on those messages.

The application of dream analysis learnings can now begin in the client's life. The therapist will be right there to guide and assist him. Jungian therapy is about the big pictures in life, about the total human existence and enterprise. As Kaufmann (1989, p. 135) has indicated, the most profitable way to use a dream is to view it as a metaphorical drama unfolding before our eyes. That is what the therapist was attempting to facilitate with Theo.

In the brief encounter with Theo we did not get into the intricate workings of the *subjective* level versus the *objective* level interpretations. Nor did we deal with the many complex ramifications of the emergence of Theo's shadow (Sanford, 1984) in the dream. These dimensions are always present in dream material and are a rich source of information for the therapist and the client who have the will and the stamina to stick with it.

Because much of Jungian theory rests on paradox, it should come as no surprise that not only do Jungians take their religions seriously, they also take science (nonlinear quantum mechanics theory in particular) quite seriously and fractals, strange attractors, and chaos and complexity theory extremely seriously. The parallel between analytic theory and these exotic fields in physics and mathematics is that in what looks like absolute disorder there may be, in fact, an evolving order that is quite elegant in both nature and the self (Butz, 1992). For analytic therapists, such fields offer support for the slow, methodical waiting of analytic psychology's nonlinear therapy to unfold (Harris, 1996, pp. 179--188). From that standpoint, we now offer a brief introduction to the cutting edge and controversial field of chaos and complexity theory.

Chaos and Complexity Theory

BACKGROUND

Modern-day Jungian theorists and therapists were among the first and foremost behavioral science practitioners to embrace chaos theory--a theory that hitherto was deemed an exclusive domain of the physical sciences. Chaos and complexity theory, popularized by such theorists as Prigogine (1984) and Gleick (1987) in the 1980s, has recently received a great deal of attention in the larger scientific community (Briggs, 1992; Briggs & Peat, 1989; DeAngelis, 1993; Eiser, 1994; Hall, 1991; Schroeder, 1991). Initially, chaos theory was principally examined by and applied to the so-called "hard sciences" such as physics. More recently, a body of literature has begun to emerge regarding chaos theory's relevancy to behavioral science disciplines. It is now widely accepted that certain elements of chaos theory contain important implications for counseling and psychotherapy (Barton, 1994; Brack, 1993; Brack, Brack, & Zucker, 1995; Brennan, 1995; Butz, 1993, 1995; Chamberlain, 1993; 1994; 1995; Gleatt, 1995; McCown & Johnson, 1993; Peca, 1992; Wilbur, Kulikowich, Roberts-Wilbur, & Torres-Rivera, 1995).

OVERVIEW OF CHAOS THEORY

Chaos and complexity theory is not a substitute or a replacement for other systems of counseling. To the contrary, it serves as a viable adjunctive and alternative paradigm that enriches other therapeutic perspectives. The essence of chaos theory, according to Gleick (1987), is that there is an underlying order in all systems, but that systems are so complex that long-term predictability is not feasible. Waldrop (1992) noted that complexity theory deals with the self-organization that emerges from the unpredictable. Thus, "chaos and complexity theory challenge our presuppositions that reality is always linear, predictable, and controllable" (Brack, Brack, & Zucker, 1995, p. 200).

Ford (1994) speaks of "complexity" in terms of "organized Complexity" and the concept of "system." There is organization in all living systems, but it is the pattern of complexity of relatedness of the parts that defines a specific organization. "If parts are related in such a way that together they produce a property that none may manifest by itself, then organization exists" (p. 36). What we may view as chaos in a person, a system, or an organization may then be what Ford calls "organized complexity," even though we might not recognize it as such viewed through a traditional concept of linearity or cause-and-effect thinking.

Applied to counseling practice, a linear view of a case study may indicate that a person's life might appear to be in total disarray and dysfunction and that the person's behavior and thinking are unpredictable, dangerous, chaotic, and without order. But what may seem at one level to be erratic and unpredictable, when viewed from a more global and holistic vantage point may actually turn out to be ordered.

CHAOS THEORY, COUNSELING, AND PSYCHOTHERAPY

NATURE OF CHAOS

An oversimplified version of chaos theory in regard to counseling and psychotherapy is that (1) the universe, the world, and nature are inherently chaotic or in a continual state of random disequilibrium, but there appear to emerge random and cyclical periods of nonchaos, equilibrium, or order in human functioning just as there are in nature; (2) the chaos or disequilibrium that occurs in the lives of human beings appears to emerge randomly, but there are periods of cyclical and systematic order and homeostasis; (3) in the lives of clients, the periods of disequilibrium are equated with chaos, whereas the periods of equilibrium are equated with nonchaos or order; (4) infrequently, but importantly, a seemingly insignificant and perhaps unexplainable event occurs during a stressful situation that appears to exert a dramatic and positive effect on the client's ability to attain equilibrium and clarity amid the perceived chaos; (5) isolated events in human life, like isolated events in nature, cannot be studied and defined as well as they can be studied and defined in a global or holistic frame of reference; and (6) in any given dilemma or chaotic system there is an underlying order in that system; even when it may appear to be totally disordered to the client or a casual observer (Butz, 1993; 1995; Chamberlain, 1993; 1994).

UNIQUE LIFE EXAMPLE OF CHAOS

Chamberlain (1995, pp. 118--120) provided a case example of chaos and complexity that applies the theory to therapeutic intervention in a family dealing with suicidal ideation and threat. Amid family turmoil, dysfunction, and long-term family therapy, the father found the daughter making plans to kill herself, having already made several attempts. The father, wanting to spontaneously create a reframe of the situation from "I must keep her from committing suicide," to "I want to make her want to live," began choking the daughter. By exerting great effort, the daughter broke the father's grip. Although the choking event did not even begin to resolve all the family's serious systemic problems, it did stop the suicide attempts. During a six-year follow-up period, the daughter was never known to express suicidal ideation or attempt suicide again. This example illustrates how a one-time brief event, done out of frustration and desperation, may change the course of a suicidal person's life where years of professional time, medication, and money have failed.

A CHAOTIC CASE: LARRY

One such example can be found in the case of "Larry" (Harding, 1992), a man in his fifties who once lived what people considered to be the American dream. He had a well-paying civil service job, a comfortable suburban home, a caring wife, and three bright children. But it all went sour for Larry when he fell victim to bipolar disorder, or manic depression. A conventional linear view of Larry's chaos could render it unexplainable. All manner of conventional linear thinking, assessment, medication, and psychotherapy went for naught. But a broader, global view of his situation may make more sense when considering the many dynamic pressures, demands, expectations, seemingly random dilemmas, and complex interactions that his whole family encountered over an extended period of many years.

For instance, Larry attributed his bipolar disorder to recent job stress and family pressures. Chaos and complexity theory, however, would likely examine concomitantly, from Larry's internal perspective as well as from a global external assessment, his current and total past internal and environmental physical, social, familial, vocational, economic, spiritual, and educational lives. Whereas Larry, his family, physicians, therapists, employer, and coworkers might view his apparently chaotic dilemma condition as having come about as a result of recent and specific work, family, or social events, chaos theory would likely hold that his condition is not necessarily chaotic. Rather, chaos theory would characterize Larry's total life history as a system with an underlying order---as any other system in nature has an underlying quality of order.

As counselors we cannot control the ebb and flow of the chaotic external or internal environments of our clients. We can study the patterns of chaotic development in the lives of our clients and perhaps learn to intervene at opportune times and in appropriate ways that will take advantage of the twists and turns in the cycles of chaos that continually assail our clients. We cannot create homeostasis or equilibrium in our clients, but we may be able to recognize the cyclical changes that emerge and we may even be able, on occasion, to generate interventions that turn the tide of chaos.

If counselors can recognize and act on those occasional insignificant and unexplainable events that occur during a crisis situation (and that appear to exert a dramatic and positive effect on the client's ability to attain equilibrium and clarity amid the chaos), then we may find that chaos theory offers a new and helpful perspective on our work. In Larry's case, the so-called chaotic situation has two opposing and ambivalent qualities: on the one hand, at any given moment his behavior and thinking make perfect sense when viewed exclusively from Larry's internal perspective. On the other hand, when Larry externalizes his situation as helpless, and perhaps even hopeless, his dilemma becomes one of both danger and opportunity. That is the point at which the

counselor might be of the greatest help to Larry. It may be the only point at which Larry himself may have an opportunity to understand the underlying systemic order that drives his "chaos" and a chance to grasp the opportunity to shift from a state of disequilibrium to one of equilibrium or homeostasis.

CHAOS AS A SELF-ORGANIZING ENTITY

Chaos theory has been likened to a random or evolutionary event in nature as well as in human existence. "It is evolutionary in that it is essentially an open-ended, ever-changing, 'self-organizing' system whereby a new system may emerge" out of the seemingly disorganized situation (James & Gilliland, 2001, p. 12). Chaotic situations or events—which Postrel (1998, p. xv) refers to as "emergent complex messiness"—evolves into a self-organizing format whenever a critical mass of people come to perceive that there are no known ways to identify patterns or to preplan options to cope with the chaos. Because the chaotic situation falls outside of known alternative solutions, counselors may necessarily resort to spontaneous, trial-and-error experimentation to try to deal with the dilemma. The "messiness" of the dilemma lies not in disorder but in an order that is incomprehensible, unpredictable, and spontaneous—an ever-shifting pattern driven by millions of uncoordinated, independent factors that necessitate experimentation yet may eventually result in a global clarification of the situation. Such experimentation may lead to false starts, dead ends, spontaneous innovation, brainstorming, trial and error action, cooperative enterprise, and other types of evolutionary activities in quest of making sense of and coping with the dilemma (James & Gilliland, 2001, pp. 11-13).

EXPERIMENTATION AND DISCOVERY

A REAL--LIFE EPISODE DEPICTING CHAOS AND REVELATION

Experimentation by a critical mass of people (or even by a single individual) can provide the impetus to reframe and redefine a dilemma in terms of new and divergent ways of viewing the chaotic impasse and generation of new and different alternatives for viewing or coping with it. An example of an experimental activity that bore positive fruit occurred while Francine Shapiro was struggling with a difficult problem. While she was at lunch one day, she sat on a park bench and looked up into the sky. She became aware that, as her eyes moved back and forth watching the birds, suddenly she became unusually relaxed and the problem seemed to have diminished. She pondered that change, and decided that her eye movement back and forth watching the birds might have had something to do with it. It was in that context that Shapiro practically stumbled onto the fact that her eye movement had something to do with her transformation, and her further examination of the event led to the discovery of the essential principles of Eye Movement Desensitization/reprocessing, later called EDMR for short. Later, she was able to apply EDMR techniques to many of the difficult cases of PTSD (posttraumatic stress disorder) that had been confronting her in her professional responsibilities. Dr. Shapiro's real-life experience illustrates the sudden, nonlinear, spontaneous, random, unfolding, non-cause-and-effect quality that appears to explain the nature of chaos theory. Out of what was a seemingly chaotic situation, Shapiro apparently stumbled onto a new "organizing" theme. But it was not really a "stumble" because she possessed the "self-organizing" background to "reorganize" the chaos through her "ah ha!" experience and, in essence, to transform or reframe her disequilibrium (disorganization) into equilibrium or homeostasis (acquiring a new understanding or different thought pattern regarding a previously confusing set of phenomena) (James & Gilliland, 2001, p. 12).

INHERENT REFRAMING/SELF-ORGANIZING QUALITY IN CHAOS THEORY

In chaos theory terms, "self-organizing" means that people may come to perceive the situation or dilemma as global and they thereby pragmatically discover an underlying order within what previously was viewed as fundamentally chaotic disorder. Postrel (1998, pp. xiv-xviii, 39-40) characterizes chaos theory as appearing to seek order randomly, without design, direction, or control. Thus, "chaos" may symbolize systems that are self-organizing, but such systems do not simply "self-organize" around nothing. They evolve toward the most fundamental principles and continuously self-organize around those principles. Even though a chaotic situation or dilemma may appear to be at an insoluble impasse, careful examination may reveal that an important, profound, and hitherto unnoticed global message is discernible. The recognition of such a global message can provide both the impetus and the motivation required to initiate positive, intentional action toward alleviating the problem or dilemma (James & Gilliland, 2001, pp. 12-13; Postrel, 1998, pp. 39-40).

Contributions of the Jungian System

Hall and Lindzey (1978, p. 149) contend that second only to Freud, Jung's formulations opened more conceptual windows into the "soul of Man" than any other person. Sahakian (1969, p. 83) observed that Jung integrated the vital function of religion into the individuation process and, thus, into the world of psychology and therapy.

Jung's (1958) psychological formulations had a major impact on modern religious thought. He also made formidable contributions toward bridging the gaps between Eastern and Western therapies by the infusion of new meaning to such concepts as self-transcendence, altered states of consciousness, meditation, and mysticism (Nystul, 1993, p. 142). Clearly, Jungian theory is a therapy of the "soul." It provides something that much of humankind quests for---something transcendent and larger than the self that takes care of the "soul" and nurtures the person (Jung, 1971f).

Jungian theory is not reductionistic (that is, it does not seek to define therapeutic success structurally). Therapists and clients are therefore not bound by strict rules and mechanistic formulations. In Jungian terms, the transcendent influence, not the environment, drives and gives human intuition legitimacy, thus keeping mechanism/reductionism at bay. The approach has also been the proving ground for developing and using the MBTI as an understandable and positive way of viewing and examining the personality.

While many critics debunk Jungian psychology and therapy as a lot of "hocus-pocus" and "mumbo-jumbo," no other therapeutic modality's adherents are as willing to explore the outer limits of theory. Their romance with exotic physics and mathematics is the very way that new theory is built and turned into practice. Modern Jungians' study and interest in chaos theory is only one example of their openness to new and innovative ways of viewing the human condition. In short, if psychotherapy is to progress, we need dreamers like the Jungians.

Shortcomings of the Jungian System

Probably the most notable shortcoming in the Jungian system of therapy lies in the difficulty of validating the concept of the collective unconscious. It is very difficult, if possible at all, to prove the existence and workings of the archetypes. Nystul (1993, p. 142) summarized several criticisms, noting that the metaphysical components of Jungian theory are incapable of proof and that the theory lacks the developmental concepts necessary to explain the growth of the mind.

In addition to the therapy being difficult for therapists to learn, another criticism pertains to the issue of efficiency. The therapy may be prohibitive for some clients who simply cannot afford the time and money required for attainment of therapeutic outcomes. Even the Freudians have developed brief or time-limited therapies. Also, some Jungians appear to cater to clients who have the intellect and talent to deal in symbolisms and are prone to ignore or not accept clients who are of lesser intellect or who simply need to make situational changes or behavioral adjustments. At least among some non-Jungians there are those who perceive that Jungian therapists revel in unraveling the symbols and unconscious mechanisms as an end in itself.

A major shortcoming of Jungian theory lies in the tendency of therapists to stay locked into the "big picture" with the client. They are not so much concerned with the pressing problems of the day. That is, they are not *product-oriented* but rather so *process-oriented* that everyday problems and "product" may get short shrift.

Jung got in political hot water for his alleged sympathies with National Socialism (the Nazis) and anti-Semitism in pre-World War II Europe. Although he later vilified Hitler, Jung's reluctance to speak out against the Nazis has caused much dialogue over the years---not much of it supportive of his stance (Neuman, 1991).

Jung also gets in contemporary hot-water with feminists for his rather demeaning view of women. As a result, contemporary Jungians have been kept busy doing a lot of repair work on gender differences (Hooke & Hooke, 1994).

Because of the sacrosanct nature of therapy in analytic psychology, Jungians are reluctant to give details or diagnoses to third-party insurers (Harris, 1996, p. 109). Beyond indicating the severity of the client's symptoms, the use of diagnosis is not a key component of analytic therapy (Harris, 1996, p. 137). In the current managed care climate, analytic therapy runs the risk of becoming marginalized because of its refusal to adhere to third-party insurer guidelines (Frey-Wherlin, 1993).

Jungian Therapy with Diverse Populations

The transcendent qualities engendered by the Jungian approach appeal to a wide range of clients from different cultural and ethnic backgrounds because a common thread throughout most of humanity is a need for identification with a power greater than themselves. The theory does not view psychopathology as a disease or as being deviant from some culturally derived "norm." Rather, symptoms are considered messages from the person's unconscious that something is awry and that something different is needed to bring fulfillment to the individual (Kaufmann, 1989, p. 132). According to Walker (1992) the Jungian analyst is fully aware of the changing nature of society and culture and, perhaps more than any other professional working in the realm of the human dilemma, is able to understand the unique psychic feelings, pressures, and needs of clients, regardless of their cultural or ethnic origins. Estes (1992) has formulated unique ways of describing the female psyche in Jungian terms. She uses multicultural myths, fairy tales, and stories in creative ways to help women and minorities reconnect with lost or unfulfilled instinctual and visionary attributes.

Jung in the original can certainly be considered sexist, but it must be remembered that what he said and felt, and how he acted toward women certainly echoed contemporary thought during the early twentieth century. Where Jung was ahead of his time is in the androgynous view he takes of the anima/animus---the male and female parts that exist within each of us.

Although Jung had little to say in regard to homosexual relationships, contemporary Jungians believe that since both sexes contain aspects of one another (anima/animus), to stereotype by gender or condemn such relationships is spurious (Schwartz-Salant & Stein, 1992).

Jungian therapy represents a kind of "tie that binds" for people who cannot conceptualize any kind of counseling devoid of a religious bent---those who need a rock of spirituality for a firm foundation; people whose religious beliefs are preeminent in their lives (Jung, 1958). Also, the system should have a great appeal for people who have an Eastern philosophical outlook---a need for a "yin/yang" harmony of opposing forces. Another diverse group for whom Jungian therapy should have a special appeal are those who profoundly believe in the transmission of cultural influences of ancestors. For people whose living mythology constitutes a vital and functional part of their society, Jungian analysis rings true--- unlike other therapies that would dismiss mythology as "shamanism." Jungians may welcome and validate shamanism as an important component of therapy for people whose belief systems include diverse religions or mythological values (Walker, 1992).

Jungians look beyond achievement on a worldly basis and are more interested in the person's spiritual assets. In that regard, Jungians see spiritual equality in all people---due to the commonalities of their symbols and ways of approaching solutions to problems (Jung, 1971f).

Jungian therapy is not the therapy of choice for most people from lower socioeconomic groups, especially those who have immediate, pressing, concrete, physical concerns. It is also not a preferred therapy among those who require solid, concrete symbols for their thinking and feeling or those whose total identification is based on defining themselves in terms of external events and environmental reinforcement.

Summary

Jungian therapy, usually called analytical psychotherapy, emerged as a response and alternative to Freudian psychoanalytic psychology. Because of Jung's disenchantment with Freud's theories, Jung developed an approach that creates, by means of a symbolic approach, a dialectical relationship between consciousness and the unconscious. A prolific writer, Jung conceptualized unique formulations and workings of the conscious, personal unconscious, collective unconscious, ego, persona, self, shadow, anima/animus, complexes, and archetypes (Hall, 1977; 1989; Jung, 1954a; 1963a). The major goal of therapy is for the client to attain individuation, which is the ultimate state of reaching self-realization or personal potential. The importance of transcendence and spirituality is recognized as a part of the individuation process.

Counseling and psychotherapy is a methodical and complex process that focuses on integration of the conscious and unconscious through therapist-client collaborative exploration of the symbolic messages the unconscious may reveal to the conscious. Dream work, the core of therapy, is among the most powerful and often-used strategies for making the unconscious known to the conscious (Jung, 1963a). An important aspect of therapist-client work entails working through transference and countertransference relationships that invariably arise during the course of therapy or, as Jungians prefer to call it, "analysis."

By helping the waking (conscious) ego to integrate the total personality (unconscious + conscious), the individual can be empowered to move toward personal fulfillment. In the absence of such integration, the process of individuation is severely inhibited. Given successful analysis and integration,

the person's prospects for individuation and even personal transcendence are greatly enhanced.

The inquisitive spirit of the Jungians has resulted in a somewhat unlikely marriage between analytic psychology's transcendental bent and the chaos theory of mathematics. More recently, modern Jungians' study, interest, and application of chaos theory to the field of psychology is only one example of their openness to new and innovative ways of viewing the human condition. Indeed, Jungians have usually been in the forefront of embracing innovative changes and experiments in psychotherapy such as the emergent formulations contained in both Chaos Theory and Eye Movement Desensitization/reprocessing (EDMR).

Suggestions for Further Reading

Campbell, J. (Ed.). (1971). *The portable Jung* (R. F. C. Hull, Trans.). New York: Penguin Books.

Harris, A. S. (1996). *Living with paradox: An introduction to Jungian psychology*. Pacific Grove, CA: Brooks-Cole.

Jung, C. G. (1933). *Modern man in search of a soul*. New York: Harcourt, Brace & World.

Jung, C. G. (1964). *Man and his symbols*. New York: Doubleday.

References

Barton, S. (1994). Chaos, self-organization, and psychology. *American Psychologist*, 49, 5--14.

Brack, C. J., Brack, G., & Zucker, A. (1995). How chaos and complexity theory can help counselors to be more effective. *Counseling and Values*, 39, 200--208.

Brack, G. (1993, August). *Chaos theory: A critical new dimension in consultation*. Paper presented at the Annual Convention of the American Psychological Association, Toronto, Canada.

Brennan, C. (1995). Beyond theory and practice: A postmodern perspective. *Counseling and Values*, 39, 99--107.

Briggs, J. (1992). *Fractals: The patterns of chaos*. New York: Simon & Schuster.

Briggs, J., & Peat, F. D. (1989). *Turbulent mirror: An illustrated guide to chaos theory and the science of wholeness*. New York: Harper & Row.

Butz, M. R. (1992). The fractal nature of the development of the self. *Psychological Reports*, 3, (2), 1043--1063.

Butz, M. R. (1993, August). *Chaos theory and familial dynamics: What does it look like?* Paper presented at the Annual Convention of the American Psychological Association, Toronto, Canada.

Butz, M. R. (1995). Chaos theory, philosophically old, scientifically new. *Counseling and Values*, 39, 84--98.

Campbell, J. (Ed.). (1971). *The portable Jung* (R. F. C. Hull, Trans.). New York: Penguin Books.

Chamberlain, L. (1993, August). *Strange attractors in patterns of family interactions*. Paper presented at the Annual Convention of the American Psychological Association, Toronto, Canada.

Chamberlain, L. (1994, August). *Is there a chaotician in the house? Chaos and family therapy*. Paper presented at the Annual Convention of the American Psychological Association, Los Angeles, CA.

Chamberlain, L. (1995). Chaos and change in a suicidal family. *Counseling and Values*, 39, 117--128.

DeAngelis, T. (1993). Chaos, chaos everywhere is what the theorists think. *The APA Monitor*, 24(1), 1, 41.

Dehing, J. (1992). The therapist's interventions in Jungian analysis. *Journal of Analytical Psychology*, 37, 29--47.

Eiser, J. R. (1994). *Attitudes, chaos, and the connectionist mind*. Oxford, UK: Blackwell Publishers.

Estes, C. P. (1992). *Women who run with the wolves: Myths and stories of the wild woman archetype*. New York: Ballantine Books.

Ford, D. H. (1994). *Humans as self-constructing living systems: A developmental perspective, behavior, and personality*. (2nd ed.). State College, PA: IDEALS, Inc.

Frey-Wherlin, T. C. (1993). Widerstand und Anpassung: Die Analytische Psychologie und die Institutionen. *Analytische Psychologie*, 24, (4), 288--301.

Gilliland, B. E., & High, H. (1985, February). *Dream analysis via small peer groups*. Paper presented at the Annual Convention of the Tennessee Association for Counseling and Development. Memphis, TN.

Gleick, J. (1987). *Chaos: Making a new science*. New York: Viking Penguin.

Gleatt, H. B. (1995). Chaos and compassion. *Counseling and Values*, 39, 108--116.

Hall, C. S., & Lindzey, G. (1978). *Theories of personality* (3rd ed.). New York: John Wiley & Sons.

Hall, J. A. (1977). *Clinical uses of dreams: Jungian interpretations and enactments*. New York: Grune & Stratton.

Hall, J. A. (1989). *Jung: Interpreting your dreams---A guidebook to Jungian dream philosophy and psychology*. New York: St. Martin's Press (Cassette/booklet accompanying Audio Renaissance Tapes, Inc., Los Angeles, CA, entitled, *Jung: Interpreting your dreams*).

Hall, N. (1991). *Chaos: A guide to the new science of disorder*. New York: W. W. Norton.

Harding, W. (Producer). (1992). *LARRY*. (26-minute videotape documentary of Dr. Larry Gladwin Harding's life of chaos as a bipolar or manic depressive person.) Arvada, CO: Walking Eagle Productions, 670 West 84th Way, No. 17, Arvada, CO 80003.

Harris, A. S. (1996). *Living with paradox: An introduction to Jungian psychology*. Pacific Grove, CA: Brooks-Cole.

Hooke, W. D., & Hooke, S. L. (1994). The orthodox Jungian perspective on gender differences in consciousness: A reexamination: Erratum. *Journal of Analytical Psychology*, 39(1), 3.

James, R. K., & Gilliland, B. E. (2001). *Crisis intervention strategies* (4th ed.). Belmont, CA: Wadsworth/Thompson Learning.

Jung, C. G. (1910). The association method. *American Journal of Psychology*, 21, 219--240.

Jung, C. G. (1933). *Modern man in search of a soul*. New York: Harcourt, Brace & World.

Jung, C. G. (1954a). *The development of personality*. *Collected works* (Vol. 17), *Bollingen Series XX*, G. Adler, M. Fordham, & H. Read (Eds.) (R. F. C. Hull, Trans.). New York: Pantheon Books.

Jung, C. G. (1954b). *The practice of psychotherapy*. *Collected works* (Vol. 16), *Bollingen Series XX*, G. Adler, M. Fordham, & H. Read (Eds.) (R. F. C. Hull, Trans.). New York: Pantheon Books.

Jung, C. G. (1958). *Psychology and religion*. *Collected works* (Vol. 11), *Bollingen Series XX*, G. Adler, M. Fordham, & H. Read (Eds.) (R. F. C. Hull, Trans.). New York: Pantheon Books.

Jung, C. G. (1960a). *The psychogenesis of mental disease*. *Collected works* (Vol. 3), *Bollingen Series XX*, G. Adler, M. Fordham, & H. Read (Eds.) (R. F. C. Hull, Trans.). New York: Pantheon Books.

Jung, C. G. (1960b). *The structure and dynamics of the psyche*. *Collected works* (Vol. 8), *Bollingen Series XX*, G. Adler, M. Fordham, & H. Read (Eds.) (R. F. C. Hull, Trans.). New York: Pantheon Books.

Jung, C. G. (1961). *Freud and psychoanalysis*. *Collected works* (Vol. 4). *Bollingen Series XX*, G. Adler, M. Fordham, & H. Read (Eds.) (R. F. C. Hull, Trans.). New York: Pantheon Books.

Jung, C. G. (1963a). *Memories, dreams, reflections*. Recorded and edited by Aniela Jaffe'. New York: Pantheon Books.

Jung, C. G. (1963b). *Mysterium coniunctionis*. *Collected works* (Vol. 4), *Bollingen Series XX*, G. Adler, M. Fordham, & H. Read (Eds.) (R. F. C. Hull, Trans.). New York: Pantheon Books.

Jung, C. G. (1964a). *Civilization in transition*. *Collected works* (Eds.) (R. F. C. Hull, Trans.). New York: Pantheon Books.

Jung, C. G. (1964b). *Man and his symbols*. New York: Doubleday.

Jung, C. G. (1966). *The spirit in man, art, and literature*. *Collected works* (Vol. 15), *Bollingen Series XX*, G. Adler, M. Fordham, & H. Read (Eds.) (R. F. C. Hull, Trans.). New York: Pantheon Books.

Jung, C. G. (1967). *Alchemical studies*. *Collected works* (Vol. 13). *Bollingen Series XX*, G. Adler, M. Fordham, & H. Read (Eds.) (R. F. C. Hull, Trans.). New York: Pantheon Books.

- Jung, C. G. (1971a). Aion. In J. Campbell (Ed.), *The portable Jung* (R. F. C. Hull, Trans.) (pp. 139--162). New York: Penguin Books.
- Jung, C. G. (1971b). Personality types. In J. Campbell (Ed.), *The portable Jung* (R. F. C. Hull, Trans.) (pp. 178--272). New York: Penguin Books.
- Jung, C. G. (1971c). *Psychological types*. Princeton, NJ: Princeton University Press.
- Jung, C. G. (1971d). The stages in life. In J. Campbell (Ed.), *The portable Jung* (R. F. C. Hull, Trans.) (pp. 3--22). New York: Penguin Books.
- Jung, C. G. (1971e). The structure of the psyche. In J. Campbell (Ed.), *The portable Jung* (R. F. C. Hull, Trans.) (pp. 23--46). New York: Penguin Books.
- Jung, C. G. (1971f). The transcendent function. In J. Campbell (Ed.), *The portable Jung* (R. F. C. Hull, Trans.) (pp. 273--300). New York: Penguin Books.
- Kaufmann, Y. (1989). Analytical psychotherapy. In R. J. Corsini & D. Wedding (Eds.), *Current psychotherapies* (4th ed.; pp. 118--125). Itasca, IL: F. E. Peacock.
- McCown, W., & Johnson, J. (1993, August). *Chaos in response to changes in family systems: Empirical findings*. Paper presented at the Annual Convention of the American Psychological Association, Toronto, Canada.
- Myers, I. B., & McCaulley, M. H. (1985). *Manual: A guide to the development and use of the Myers-Briggs Type Indicator*. Palo Alto, CA: Consulting Psychologists Press.
- Neuman, M. (1991). Was Jung anti-semitic? *Israel Journal of Psychotherapy*, 5, 201--208.
- Nystul, M. S. (1993). *The art and science of counseling and psychotherapy*. New York: Macmillan.
- Peca, K. (1992, April). *Chaos theory: A scientific basis for alternative research methods in educational administration*. Paper presented at the Annual Convention of the American Educational Research Association, San Francisco, CA.
- Postrel, V. (1998). *The future and its enemies: The growing conflict over creativity, enterprise, and progress*. New York: Free Press.
- Prigogine, I. (1984). *Order out of chaos: Man's dialogue with nature*. Toronto: Bantam Books.
- Read, H., Fordham, M., & Adler, G. (Eds.). (1953--1978). *Jung's collected works*. Princeton, NJ: Princeton University Press.
- Rychlak, J. F. (1973). *Introduction to personality and psychotherapy: A theory construction approach*. Boston: Houghton Mifflin.
- Sahakian, W. S. (Ed.). (1969). *Psychotherapy and counseling: Studies in technique*. Chicago: Rand McNally.

Samuels, A. (1985). *Jung and the post-Jungians*. London: Routledge & Kegan Paul.

Samuels, A. (1989). Analysis and pluralism: The politics of psyche. *Journal of Analytic Psychology*, 34, 33--51.

Sanford, J. S. (1984). *Evil: The shadow side of reality*. New York: Crossroad.

Schroeder, M. (1991). *Fractals, chaos, and power laws: Minutes from an infinite paradise*. New York: W. H. Freeman.

Schwartz-Salant, N., & Stein, M. (Eds.). (1992). *Chiron: Gender and soul in psychotherapy*. Wilmette, IL: Chiron.

Smith, B. D., & Vetter, H. J. (1991). *Theories of personality* (2nd ed.). Englewood Cliffs, NJ: Prentice-Hall.

Spiegelman, J. M. (1989). The one and the many: Jung and the post-Jungians. *Journal of Analytic Psychology*, 34, 53--71.

Waldrop, M. (1992). *Complexity: The emerging science at the edge of order and chaos*. New York: Simon & Schuster.

Walker, W. (1992, November 16). *Jungian analysis*. (Audio Cassette Recording, 4--92). Memphis, TN: Center for Counseling and Education.

Wilbur, M. P., Kulikowich, J. M., Roberts-Wilbur, J., & Torres-Rivera, E. (1995). Chaos theory and counselor training. *Counseling and Values*, 39, 129--144.

Analytical psychology (sometimes analytic psychology), also called Jungian psychology, is a school of psychotherapy which originated in the ideas of Carl Jung, a Swiss psychiatrist. It emphasizes the importance of the individual psyche and the personal quest for wholeness. Important concepts in Jung's system are individuation, symbols, the personal unconscious, the collective unconscious, archetypes, complexes, the persona, the shadow, the anima and animus, and the self.