

REFLECTIONS ON PRACTICE | PEER REVIEWED

Experiences of Transcendence in Guided Imagery & Music (GIM) – An Intersubjective Perspective

Katarina Mårtensson Blom^{1*}

¹ Swedish private practice, Sweden

*kia.m-blom@telia.com

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Abstract

In this paper, the author describes a perspective on experiences of transcendence in GIM through an integrative description of a clinical case study of GIM transcripts and a PhD study. The article summarizes results from both and develops a reflecting discussion in relation to the author's continued post-doctoral clinical and teaching experiences. The developed perspective focuses on the process in GIM when experiences of transcendence occur and juxtaposes that to the contents of such experiences. This is argued for in terms of an intersubjective, interactive perspective on *how* the process among therapist, music, and client moves and deepens.

Keywords: *intersubjectivity, therapeutic process, therapeutic relationship, music classification, GIM experiences of transcendence, altered states of consciousness*

Introduction

Experiences of transcendence can strike us suddenly or emerge more gently. They can come from outside or from within, or in the point of intersection. Their context varies as well as their dependence on the presence of others. Still, they are often emotional, energizing, integrating, and interactive. The knowledge about experiences of transcendence is part of the vast field of consciousness studies, transpersonal psychology, and psychology of religion, and it would lead far beyond the scope of this article to account for this field of knowledge. One of the first to acknowledge the importance of these experiences within psychology, was William James in his pioneering work, *The Varieties of Religious Experiences* (1902).

Experiences of transcendence, also denoted transpersonal experiences, are transformative and healing, often occur in Guided Imagery and Music (GIM), a receptive music therapy method (Bonny & Summer, 2002), as well as in verbal psychotherapeutic relationships depending on their developed qualities (Assagioli, 1965, 2006). They also occur in daily life (Halling, 2008) and in different musical experiences (Gabrielsson, 2008).

The creator of the GIM method, Helen Bonny, stated that a core function of the GIM method is to be a medium of transpersonal work (Bonny & Summer, 2002) and several practitioners have developed specific music programs to promote a transcending process in GIM (Bonny, 1973, 1978; Kaiser Mardis, 1986; as cited in Bruscia & Grocke, 2002). Since this phenomenon, or phenomenological experience, is given such great importance as healing and transforming, terminology is broad encompassing experiences of transcendence as well as transpersonal experiences. Abrams (2002) states, “The term transpersonal phenomena...encompasses both transpersonal experience and transpersonal aspects of inner development or self-transformation” (p. 340). Abrams contributed to a comprehensive definition of transpersonal GIM phenomena, in his study *Defining Transpersonal Experiences of Guided Imagery and Music* (2001), with a model that combined the participants’ individual definitions of their personal experiences.

In this article, based on intersubjective theory, I use the following definition of transcendence: a subjective, personal experience of an expansion of consciousness and a transcending and/or expanding movement of boundaries that transforms the sense of Self and/or consciousness (Mårtensson Blom & Wrangsjö, 2013).

Professional Background and Context

As clinical psychologist and psychotherapist, my main interest is in the field of new developmental psychology, neurobiology and change factors in psychotherapy. I started as a clinical psychologist and therapist in child and adolescence psychiatry in the Swedish Stockholm area, and for 37 years, have worked in private practice as an individual psychodynamic psychotherapist, couples and family therapist, and supervisor. I worked as a trainer and supervisor in psychotherapy at the University of Ersta Sköndal, Stockholm. The Swedish professional context is based on licensures for psychotherapists and supervisors and they are developed professions on top of basic professions like psychologists, medical doctors, social workers, psychiatric nurses, physiotherapists, and music therapists. I started the GIM training in 1997 with Frances Smith Goldberg as an experienced, licensed psychotherapist, with a personally rooted relationship with music as a layperson. As private practitioner, I combined integrative psychotherapeutic work with adult clients using verbal psychotherapy, arts-oriented methods, and GIM. I also worked as GIM trainer in collaboration with Margareta Wårja (PhD, licensed psychotherapist, Music and Expressive Arts Therapist, Fellow of the Association for Music and Imagery, Primary Trainer) at The Expressive Arts institute in Stockholm.

Epistemological Preunderstanding

Before the clinical case study and PhD study, I published six articles and book chapters focusing on different process-issues in psychotherapy and supervision (Mårtensson Blom, 2002, 2003-2004, 2004a, 2004b, 2006, 2010). The first focused on how musical elements and ingredients in human interaction in a therapeutic context may resemble and inspire each other (2002). The second was about using GIM music in supervision (2003-2004). The third and fourth were two book chapters about different implicit relational and gender perspectives on the supervisory relationship (2004a, 2004b). The fifth reported a clinical research project on collaborative interviews with families and their children in a child guidance clinic (2006). The sixth article concerns the clinical case study (2010). All were included in the PhD thesis, and contributed to the development of my intersubjective and collaborative perspective on the transforming power of GIM. The intersubjective perspective is also connected to knowledge from research on change factors in psychotherapy indicating that relational ingredients provide for most of the change in psychotherapy (Huber et al, 2021; Wampold, 2010; Wampold & Imel, 2015). In sum, my theoretical preunderstanding is deeply rooted in the intersubjective perspective, as well as new developmental psychology. This field of knowledge is based on infant research, illuminating how the human sense of self emerges through

interaction with crucial relational qualities (Stern, 1985, 2004). This is also similarly important in adult treatment (BCPSG, 2010; Beebe & Lachmann, 2005, 2013).

During the years of my GIM training (1997-2001) and the years of clinical practice that followed, I was personally and professionally inspired by relational psychoanalysts such as the work of Jessica Benjamin, relational psychoanalyst and feminist writer (1995, 2005); Emmanuel Ghent, psychoanalyst and music composer (1990/2003); and from the Swedish spiritual tradition, Wilfrid Stinissen, writer and Swedish/Dutch member of the Carmelite Order (2004). In my personal spiritual work, ways to understand, accept and practice ways of surrender, as well as experiences of transcendence, was at stake. This work fruitfully interacted with the work I did as a psychotherapist. I wanted to contribute and develop the possibility to assist clients in their processing of strong transcending experiences with music in GIM. A credo of mine is that people engage in psychotherapy because they 1) hope for a new relational experience of recognition different from previous negative and hurtful ones, and 2) sense a deep longing for (re-)connecting with the “true self” as well as the existential and spiritual dimension in life.

Background for the Clinical Case Study

In practicing GIM, I felt a growing need to develop new ways to assist processing clients’ experiences of transcendence through a relational, intersubjective perspective. Clients needed help to integrate how these experiences could be supportive in daily life as well as emotionally and relationally healing.

In the GIM work with a woman in her 30s with depressive and anxiety-related problems, I found interesting patterns in her interaction with me and the music. In the course of music experiences, the client moved through deeper and more adequately regulated experiential qualities. The sharing with me and herself, verbally and non-verbally, facilitated both interactive regulation and self-regulation of emotions and bodily responses. First and foremost, through sharing and regulating experiences of recognition, positive senses of being known, and then also in sharing and regulating experiences of challenge, distress, discomfort, and non-recognition. The process often moved back and forth in spirals, leading into a state, or moment when she surrendered. Seemingly to receive it but also being pushed or carried, and indeed deliberately opening to, a surrender. This sometimes moved the client into an experience of transcendence and/or an experience with a spiritual quality.

The following example is from one first ad-hoc clinical analysis of one session (nr 12, second semester) in one music experience, Liadov’s (1909) *The Enchanted Lake*. The client has given her consent to share the session material.

The client found herself by the sea, standing at a sandy shoreline watching the big waves. Her immediate feeling was fear of drowning. But in the presence of the music and the guiding, she stayed there. Eventually, the sand softened and she felt her body slowly move and sink, the sand being more and more wet and muddy, and the water coming closer. Feelings of surprise and ease mixed with her fear, and she gave in to the movements, slowly sliding into the sea. A sense of becoming one with the sea took over the experience giving her deep emotions of gratitude and peace. In the processing, she herself stated, “I gave myself to the sea”. The session brought her into a new state of relief, where she could experience less fear of losing control also in daily life, for example in her love relationship. The experience of a mode of surrender worked on a bodily level and expanded her “window of tolerance” (Siegel, 1999.)

I found a way to understand her process through really listening (and afterwards reading her transcripts) to *how* she described her *ways* of interacting with music and imagery, and me. Very obviously, apart from *what* she was occupied with – the content of her experiences – she also interacted, regulated, shared, and collaborated. She was in relation to her inner world, herself, the music, and me. When I listened carefully, I “heard” how she developed her ways of being in relation, her capacity to regulate inner states, of being and acting in the intersubjective field.

After this ad-hoc analysis, I started to formulate definitions of categories of analysis, to analyze GIM transcripts more systematically.

Clinical Case Study Description and Outcome

With the intention to deepen understanding of experiences of transcendence through a relational perspective, I embarked on the analysis of two GIM transcripts from the course of therapy with the same client described above. The transcripts contained descriptions of experiences of transcendence. A complete report of the study was presented in *Nordic Journal of Music Therapy* (Mårtensson Blom, 2010), but I provide a summary here as a basis for subsequent reflection.

The following questions were formulated and addressed:

- How are the relational modes that constitute shared lived experience (Stern, 1985) shown in the GIM session transcript?
- How is the emergence of a process of surrender shown in the GIM session transcript?

The definitions of the categories of analysis were based on intersubjective theory. Three categories were defined and used to identify descriptions of ways of being in relation, relational modes, in the transcripts:

- focus of attention – sharing attention;
- movement and direction – sharing intention; and
- affectivity – shared and conveyed in words and expression – attunement.

The first category captured descriptions of where in the field of experience was the focus of the client, establishing a starting point for movement and direction. The second category captured the described intention and movement, which can be experienced as more or less deliberate. The third category captured descriptions and expressions of the affective qualities or the relational sequences, like dynamics in energy, values like positive or negative, intensity and duration, as well as categorial affects and emotions, like sorrow, joy, anger, fear, etc. These three categories put together would capture descriptions of the client being in relation to herself, the music, therapist and the inner world, and considered building blocks in developing the intersubjective field.

After the first analysis, the possibility to develop three more categories was considered, based on the second question in mind, *How is the emergence of a process of surrender shown in the written GIM transcript?*, with focus on descriptions of transpersonal and/or spiritual experiences. A developed third question was formulated: *Is there a connection between a shown/described process of surrender and described transpersonal – spiritual experiences?* The question could be answered positively, when, during the second analysis of the same transcripts, examples that illustrated categories 1-3, seemed to form “clusters” and lead into more complex ways of relating, and eventually into descriptions of transpersonal experiences. Together with theoretical preunderstanding and knowledge from the field of intersubjectivity and psychology of religion, three new categories of analysis were defined, that would capture a development, an elaborated and deepened capacity to share lived experience:

- Share and regulate coherence/correspondence in attention, intention and/or affectivity, giving an experience of recognition.
- Share and regulate difference/non-confirmation in attention, intention and/or affectivity, giving an experience of non-recognition.
- Surrender in relation to something greater and/or beyond the interacting movements between recognition and non-recognition.

The same transcripts were analysed once more with the purpose to find examples that illustrated the three new categories.

The study confirmed the utility of the defined categories of analysis (Table 1) and provided a tool for deeper analysis of other GIM transcripts. The most important out-

Table 1
Definitions and Examples of Categories of Analysis

	Category of analysis	Definition	Example
1.	Focus of attention – sharing attention	Descriptions and expressions of where in the experiential field is the attentional focus of the traveler, establishing a starting point for movement and direction.	<i>I see myself, I can sense water.</i>
2.	Movement and direction – sharing intention	Descriptions and expressions of intention, directions, movements, experienced as more or less deliberate.	<i>Warm air is coming towards me. Perhaps I might fall.</i>
3.	Affectivity – shared and conveyed in words and expression – attunement	Descriptions and expressions of the affective qualities surrounding and coloring the relational sequence, (vitality affects and/or categorial affects).	<i>Sad and melancholic. Pleasant and powerful.</i>
4.	Share and regulate coherence/correspondence in attention, intention and/or affectivity.	Expressions of experiencing qualities of recognition and/or confirmation and belonging. Often strong evocative affects.	<i>The air is balancing my body, me. I can feel the mountain under my feet.</i>
5.	Share and regulate difference/non-confirmation in attention, intention and/or affectivity.	Expressions of experiencing tensions, differences, ruptures and/or non-confirmation. Often anxiety, shame or other inhibitory affects.	<i>I need to work in order not to fall. Feel fear, and dizziness.</i>
6.	Surrender in relation to something “third”, something “greater” and /or “beyond”.	Expressions that contain or encompass fields of tensions, letting go and transcend.	<i>I am connected to, one with Nature. I am light, it is inside and around me.</i>

Note: From Mårtensson Blom, (2014, p. 109), based on Mårtensson Blom (2010, pp. 32-35).

come was a developed relational perspective on experiences of transcendence in GIM, through the concept “Relational Mode of Surrender.” The GIM client could, with a deepened capacity to share and regulate experiences of recognition and non-recognition when interacting with both music and therapist, be able to find ways to surrender in relation to something greater, something beyond self and/or other. The relational mode of surrender created a process that may generate experiences of transcendence.

When highlighting these experiences with the perspective of intersubjectivity, its connection to the client’s ways of relating became clear: connections to courses of events in the inner world, to music, and to the therapist’s presence. These relational modes could be understood with the intersubjective frame of reference. The *content* of the experiences could be understood as “transpersonal-spiritual.”

The PhD Study

Methodology and Study Design

Findings from the clinical case study (Mårtensson Blom, 2010) entailed the exploration of usefulness of the categories of analysis in a larger study, the PhD study (Mårtensson Blom, 2014), whose study design will be illustrated in three figures. Research question and triangulation of data collection are depicted in Figure 1.

The focus of interest had, through the clinical study, developed into a defined phenomenon - The Process of Surrender. As a first step into the PhD project, I explored other GIM-therapists’ opinions about the clinical usefulness of the research questions.



Figure 1

Study Design: Research Question and Data Collection.

Note: From Mårtenson Blom, Ersta Sköndal University ppt-presentation, 2015.

This was done through two focus group interviews, and the results confirmed and supported the further work (lower left triangle in Figure 1). The interviews explored the usefulness and meaningfulness of the categories of analysis among fellow GIM practitioners. The focus-group responses underlined the importance of developing the understanding of the GIM process through using the categories of analysis, as well as the relevance of the developed concepts, the Process of Surrender and the Relational Mode of Surrender.

The data collected through transcript analysis for the PhD study, was facilitated by collaboration with L.O. Bonde's explorative study (Bonde & Mårtenson Blom, 2016) of non-clinical participants' experiences of selected music programs, constructed with the purpose to support and facilitate experiences of transcendence. Altogether, 38 GIM transcripts were analyzed from sessions conducted by one GIM therapist from that study. The participants ($n = 10$) configured a non-clinical sample, six with former experience of GIM receiving three sessions and four with no former GIM experience receiving five sessions ($n = 38$). The GIM music programs used the most were "Faith", "Gaia" and "Sublime 1 & 2", all developed by Kenneth Bruscia (as cited in Bruscia & Grocke, 2002).

Four collaborative interviews were also conducted (lower right triangle in Figure 1) with the therapist and four of the participants and facilitated a vertical analysis and a check in on what had been documented in the transcripts by the therapist as subjective experiences during the music. The interviews facilitated exploring the qualities of the collaboration between therapist and participant, and its importance to experiences of surrender and transcendence in the GIM setting. In this article the results from the collaborative interviews will not be presented, nor will the findings from the validating transcript analysis, but are available in the thesis (Mårtenson Blom, 2014).

The PhD study was in this way flexibly designed with a triangulation of data collection (Figure 1 & 2) and thematic analysis as main procedure.

Data from all three sources, focus group interviews, transcript analysis, and collaborative interviews, were analysed thematically. The GIM music used in the sessions was analysed through music classification categories (Bonde & Nygaard Pedersen, 2014; Wärja, 2010), and the interaction between experiential categories (EC) and music classification categories (MCC) was explored.

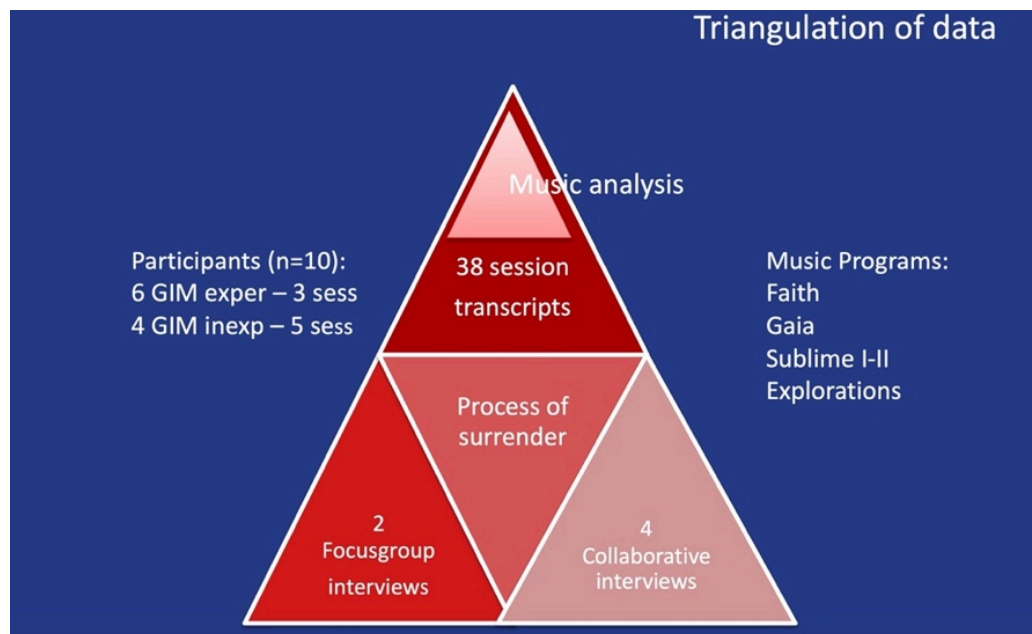


Figure 2
Triangulation of Data.

Note: From Mårtenson Blom (2014, p. 107).

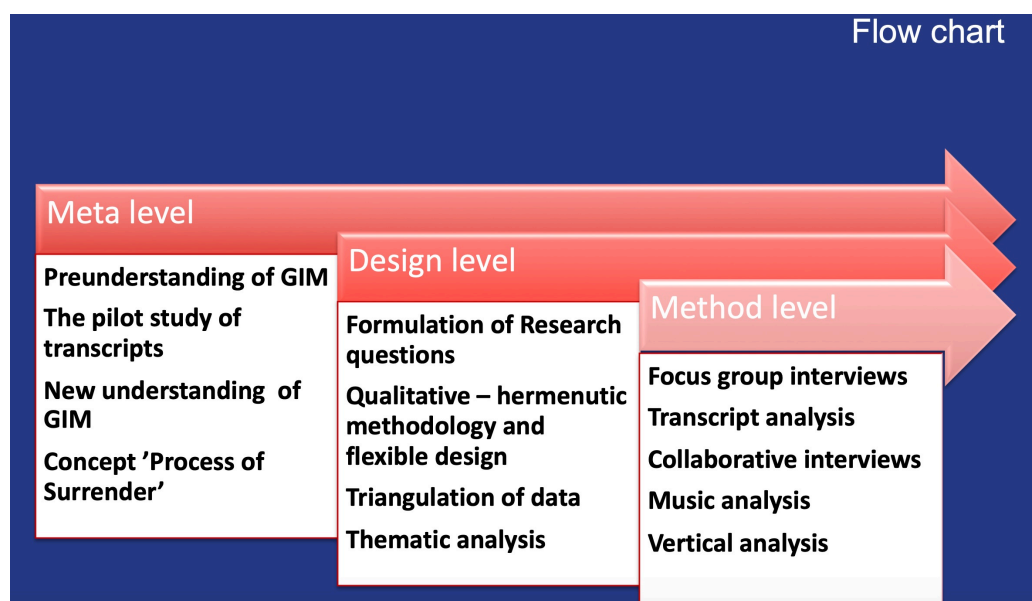


Figure 3
Summary of Developed Study Design.

Note: From Mårtenson Blom, Ersta Sköndal University ppt-presentation, 2015.

Figure 3 illustrates an overview of the PhD study design with its meta-level, design level, and level of methodology.

Results

The focus group discussions put focus on the Process of Surrender as captured by experiential categories 4, 5, and 6. This influenced the further analysis of transcripts done as a second step in the data collection procedure.

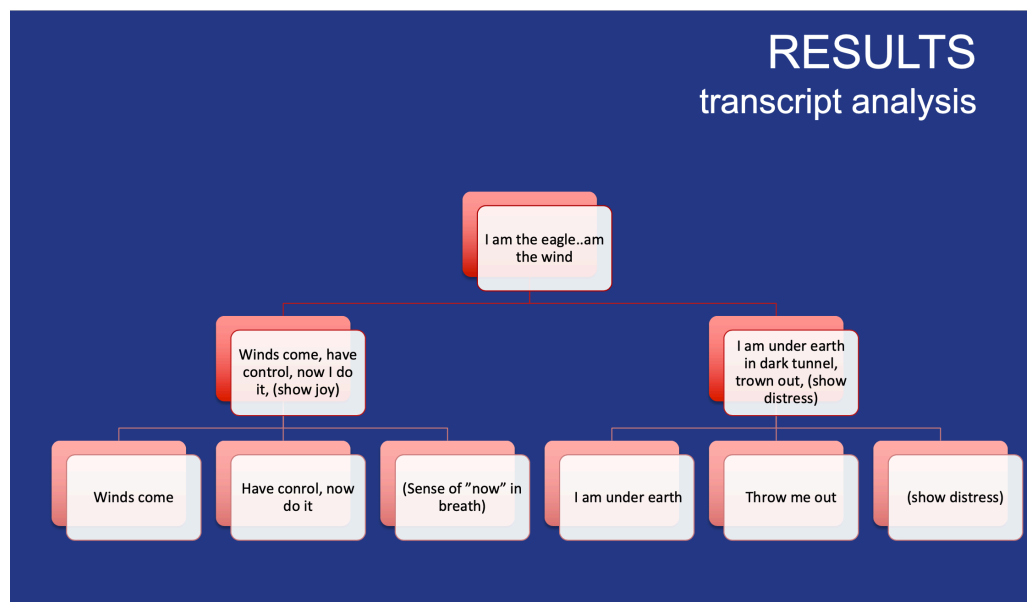


Figure 4
Emerging Patterns in Experiential Categories, Excerpt Examples.

Note: From Mårtenson Blom, Ersta Sköndal University ppt-presentation, 2015.

Relational patterns in the interactional field of participant, therapist, and music could actually be identified through the transcript analysis. When interacting with the music or each other, the building blocks of shared lived experience developed very fast, in the here and now, and almost immediately connected and enhanced the complexity and quality of the interactional field. This is how the field of intersubjectivity deepens, and the quality can be noted in the present moment, the quality of presence in how we meet and move each other. In the PhD study, it was assumed that the degree of complexity in the interaction, and through that a developed quality of presence, depended on how relational modes in patterns as well as levels of complexity developed. The therapist and the music were assumed to contribute simultaneously, shifting in being in the foreground of the participants focus of attention.

To illustrate this consideration, three images will be presented. The Figures 4 and 5 depict the emergence of patterns.

Figure 6 illustrates the emotional quality of each experiential category through a symbolic imagery. The three images at the bottom level show focus of attention, sense of movement, and intention and affectivity. Category 4, a sense of recognition, is illustrated by the image of clear and holding water over a soft sandy bottom, at second level. Category 5, a sense of non-recognition or challenge of safety, is illustrated by the image of deep sea with a vulnerable, lonely fisherman, also at second level. Category 6, transcendence, is illustrated by the image of a glorious sunrise on the third level.

The process appeared to move in stages with an emerging complexity. Figure 7 depicts how interactive units connect into longer or larger sequences. The next image, Figure 8, illustrates how the most elaborated relational mode, with mature and flexible affect-regulation (adaptive defense-mechanisms), might open the experiential field for transcendence and even spiritual qualities.

The following summarizes results from the transcript analysis, horizontal analysis (collaborative interviews and transcript analysis) and analysing process:

- Relational patterns in the interactional field of participant - music – therapist (P-M-T) were identified.

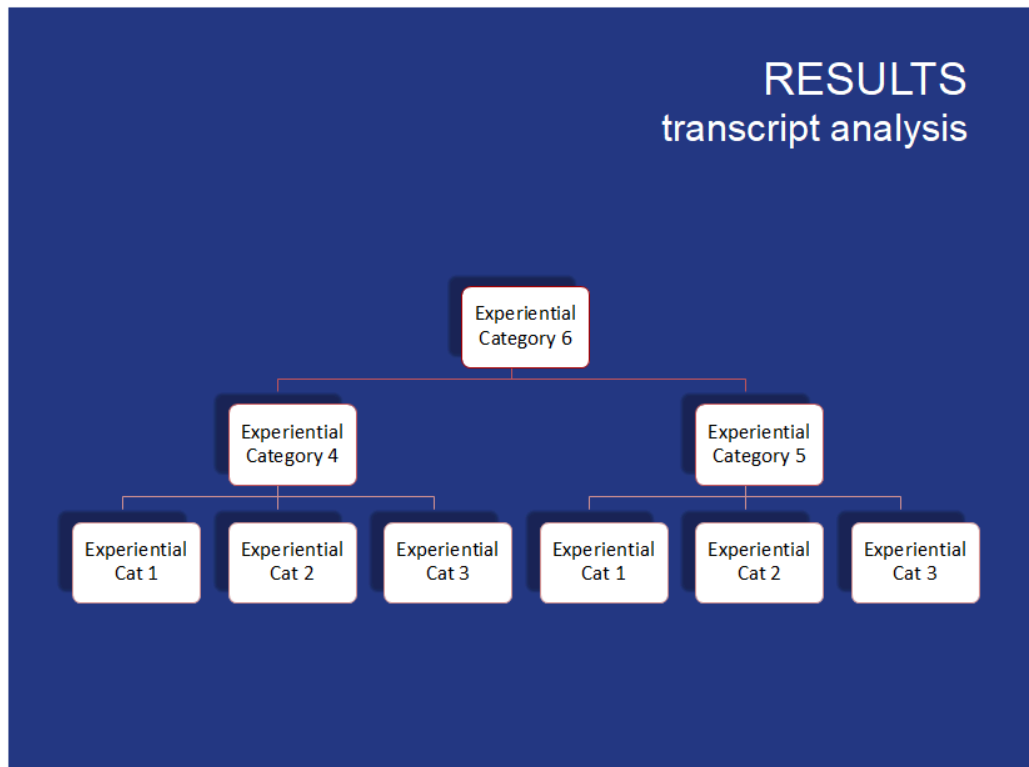


Figure 5
Emerging Patterns in Experiential Categories, Categories.

Note: From Mårtenson Blom, Ersta Sköndal University ppt-presentation, 2015.

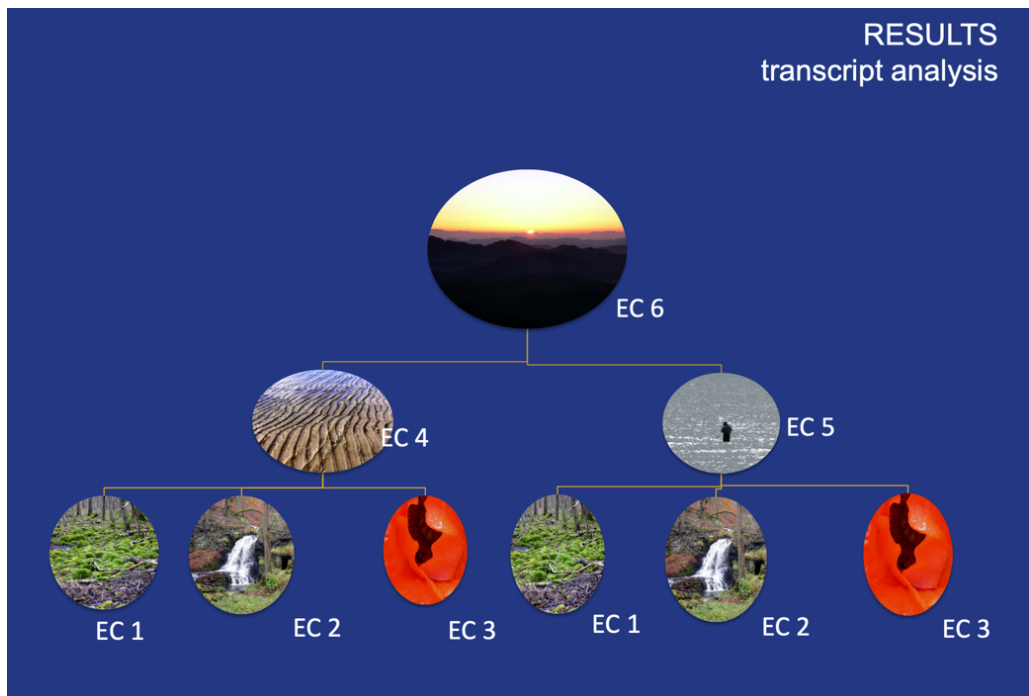


Figure 6
The Quality of Experiential Categories Illustrated in Images.

Note: From Mårtenson Blom, Ersta Sköndal University ppt-presentation, 2015.

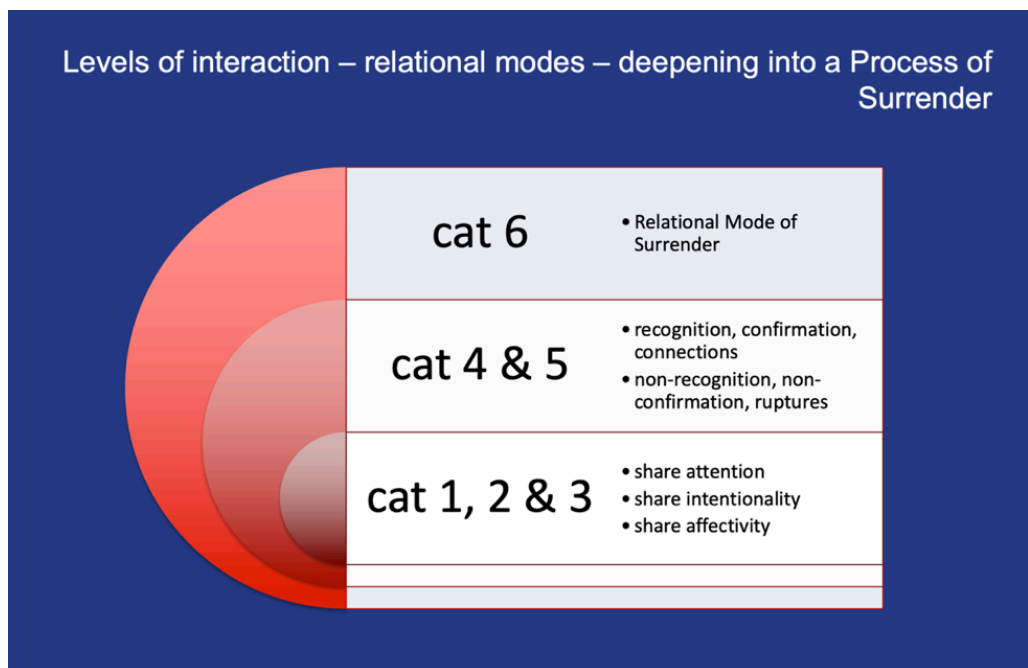


Figure 7
Levels of Interaction Deepening into a Process of Surrender.

Note: From Mårtenson Blom (2014, p. 146).

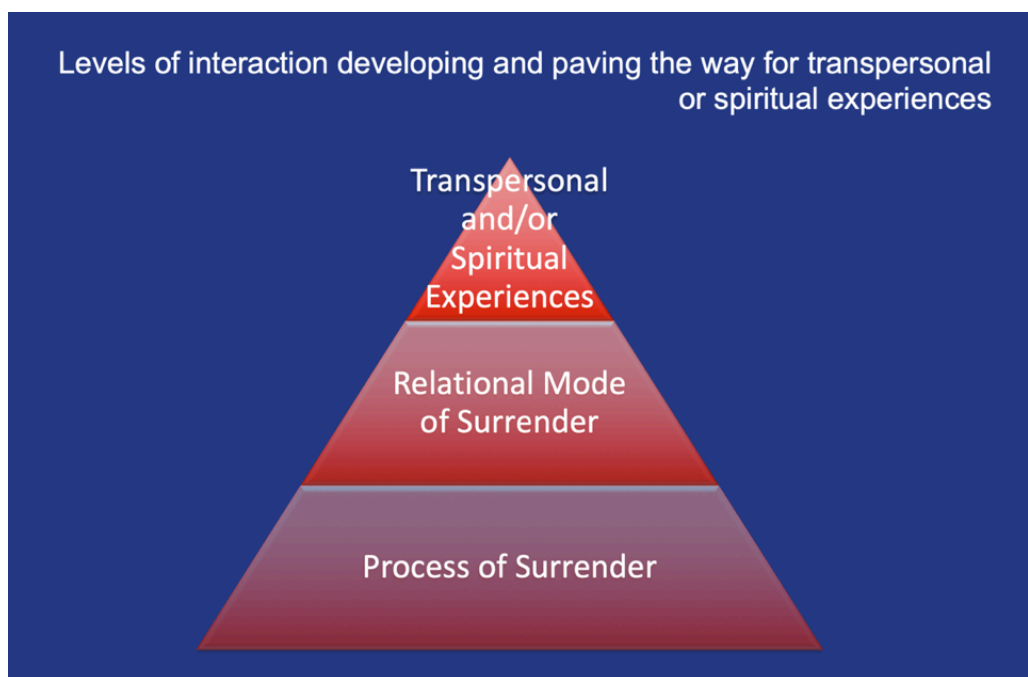


Figure 8
Levels of Interaction Preparing for Experiences with Transpersonal or Spiritual Character.

Note: From Mårtenson Blom (2014, p. 146).

- Levels of complexity in the interactional field of P-M-T were identified, and I could assume a development of implicit relational knowing and deepening levels of consciousness.

- Relational modes (in patterns and levels of interaction) were developed in the relational field, simultaneously in relation to music, ‘imagery’ (or the participants inner world) and therapist. The therapist and the music were assumed to contribute simultaneously, shifting in being in the foreground of the participant’s focus of attention.
- The relational modes were assumed to describe both interaction with music, therapist and imagery.
- It was assumed that levels of interaction influenced/were influenced by levels of consciousness, and through that paved the way for transcendence, transpersonal and spiritual experiences.

In the findings, and in the occurrence of a Relational Mode of Surrender, a difference, 61% compared to 40%, between GIM experienced and inexperienced participants was found. This argued for understanding this kind of experience as something dependent on habituation or training. This was also supported through the fact that 80% of the experiences (Relational Mode of Surrender) occurred in final sessions, compared to 30% occurring in a first session. The conclusion was that these experiences, in a therapeutic setting, do not occur completely by chance. From the point of view of the therapeutic process it was possible for the therapist to assist, when in collaboration with the client. The task seemed to be to stay as close as possible in tracking the client’s attention, intentionality, and affectivity. Alongside this, to follow the elements and developments in the music that captures attention, intention or movement, and affectivity, primarily in terms of intensity, and shifts in all three.

The findings supported the assumption that the strong transforming power of experiences of transcendence can be explained through their relational ingredients including their core affective qualities.

Further Findings from the PhD Study - Analysis of Music During Occurrence of Process of Surrender

The intersubjective field in GIM is very complex and includes both human interactive energies and musical-human interactive energies. In all parts and during the whole session, the process of a developed relational knowing is present. In the PhD study, it was important to map the role of the music in this interactive field, so the transcript analysis was followed by a music analysis.

Before moving into the results, my preunderstanding of the ontology of GIM music, will be accounted for.

- Physiologically, the GIM music interacts with body processes, both autonomous, procedural, and pre-symbolic.
- Structurally, the GIM music interacts with the fundamental building-blocks in “lived experience,” or put differently, the music can ontologically represent building-blocks of intersubjectivity. For example, the shared attention is found in how music catches and meets attention, and the shared intentionality is found in how music invites to follow and be followed. The shared affectivity – perhaps more a foundation than a building-block – is found in how the music evokes, attunes, and regulates emotions. The music also communicates energy, dynamic, and intensity, and interacts with the system of vitality-affects. In terms of attachment, the GIM music can function as safe base and a secure haven.
- Semantically, the GIM music interacts with both pre-symbolic and symbolic memory, and episodic and narratively stored experiences.
- Practically, and very relevant to the relational perspective, GIM music together with the therapist conveys a context of communing.

In the music analysis, the music taxonomy developed by Bonde and Nygaard Pedersen (2014) and Wårja (2010) was used. However, the development of that taxonomy was in progress simultaneously in time with the PhD study, so four music classification

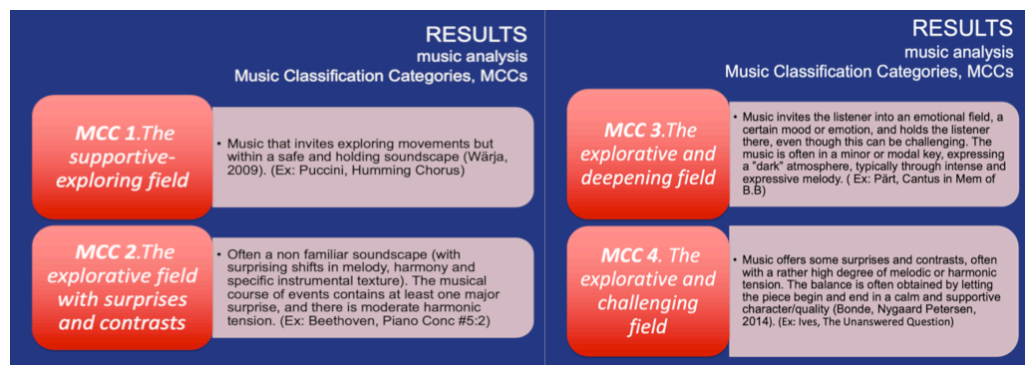


Figure 9
Music Classification Categories.

Note: From Bonde and Nygaard Pedersen (2014) and Wärja (2010)

categories were used (Figure. 9), not six as in the final version of the taxonomy (Wärja & Bonde, 2014).

The music used in the analyzed sessions was pre-selected for the study by Bonde (Bonde & Mårtensson Blom, 2016), for non-clinical GIM sessions with ten research participants. Altogether five GIM programs were used, comprising pieces of music categorized into four classification categories from the taxonomy.

For a complete classification of all pieces used in the study, I refer to Mårtensson Blom (2014).

Through the music analysis, each participant’s experiential qualities could be connected to qualities in the music that was used. The interaction between experience and music could be understood in terms of relational modes.

The interaction between music classification categories (MCCs) and a Process of Surrender in terms of experiential categories (ECs) was analysed and interpretations were formulated. The connections between relational qualities in the different pieces of music were emphasized and compared to the relational modes assumed to be at hand in the experiential qualities. These assumptions relied on the written transcripts. The interpretation of data and results, encompassing and balancing the inherent gap between the implicit and explicit domains of representations, was done through connecting to the knowledge from the field of intersubjectivity and infant research presented in the theoretical background.

As a point of departure for the discussion a summarizing table is presented (Table 2).

Table 2 depicts the interaction between music classification categories (MCCs) and experiential categories (ECs). Horizontal row shows how often experiential categories 4, 5, and 6 respectively, occurred compared to total occurrence of all three (100%). Vertical column shows how often music classification categories 1, 2, 3, and 4 respectively, were used compared to total number of music pieces used (100%).

Experiential category 4 is the dominant quality of the three (4, 5, & 6), 53%, showing how the experienced emotional and relational quality of recognition in these GIM sessions is in a majority. It is also clear that the experience of a complete surrender and transcendence is the least frequent.

Based on the table, assumptions about interactive forces between analyzed experiences and musical qualities could be made. One single piece of music classified as explorative and deepening (MCC 3) and shared experiences categorized as recognizing and affirming (EC 4) or even experiences of surrender into transcendence (EC 6), had strong connections: 50% of EC 4 and 55% of EC 6 occurred/appeared during music classified as MCC 3.

Music programs (music pieces put together) with music pieces categorized as explorative and deepening (MCC 3) in a majority or embedded with at least one piece

Table 2
Interaction between MCC and Process of Surrender in Terms of ECs 4, 5, and 6

Experiential category	EC 4 (53%) % of total appearance	EC 5 (31%) % of total appearance	EC 6 (16%) % of total appearance
Music Classification Category (% of total repertoire)			
MCC 1 20%	19%	10%	19%
MCC 2 26%	17%	32%	10%
MCC 3 40%	50%	38%	55%
MCC 4 14%	15%	20%	16%

Note: From Mårtenson Blom (2014, p. 152).

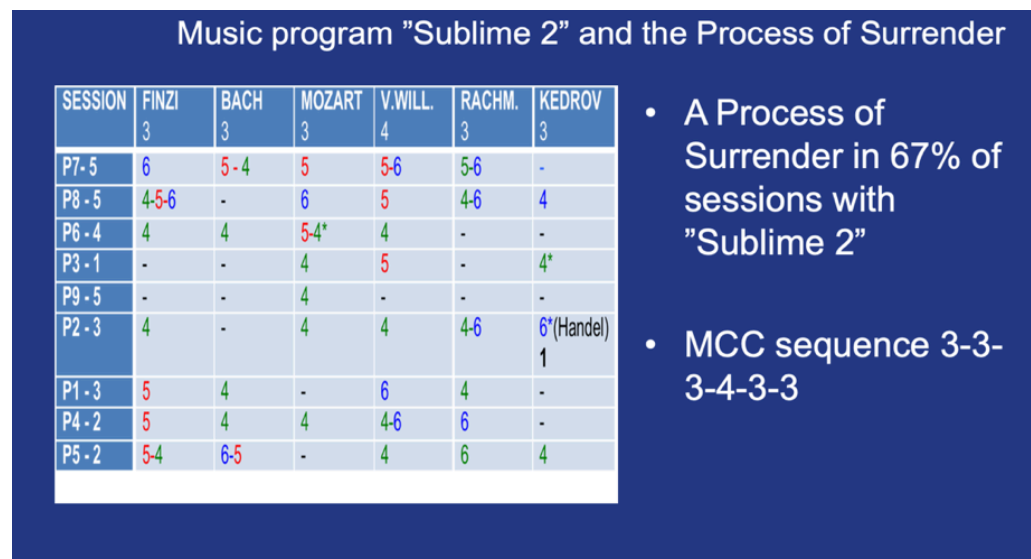


Figure 10
Music Program "Sublime 2" and the Process of Surrender.

Note: From Mårtenson Blom, Ersta Sköndal University ppt-presentation, 2015.

of music classified as explorative and challenging (MCC 4), provided for a majority of experiences defined as a process of surrender. For example, the program Sublime 2 (Bruscia, 1997 as cited in Bruscia & Grocke, 2002) elicited 67% of all noted 4-5-6 ECs (interpreted as a Process of Surrender) during a session that occurred (100%), as illustrated in Figure 10.

Through connecting ECs to MCCs I argued that it was possible to confirm the existence of a bridge, since the joint analysis showed reasonable and comprehensible interactions between music and analysed experiences. The complexity of the GIM music experiential process was illuminated and underlined. The connections between the different MCCs and qualities in the experiences confirm much of what is already known about the GIM process. However, I argued that the findings in the study developed knowledge towards a clearer understanding of how relational modes, building-blocks of implicit relational knowing, develop through interaction with music, therapist, and

inner experiencing, and that shifts and transformations in altered states of consciousness can be assumed to establish connections to movements and shifts in inner representations of ways “to share, regulate, be, act, sense, feel” (Mårtensson Blom, 2010). The contents of imagery are also informing, but more as “signs” of an important transformation going on.

The relational complexity in the field of P-M-T was evidently needed for transformation to take place. The combination of all three parts, through their common and dialogically shared relational modes, triggers the change, and transcendence into the “third,” or the intersubjective field “in between.”

Reflecting Discussion

I will focus on some of the PhD results in retrospect. Further conversations with colleagues, in clinical and training contexts following the years after 2014, clarified how the findings supported the assumption that the strong transforming power of experiences of transcendence in terms of a Process of Surrender could be explained through their relational ingredients including core affective qualities. The results contributed with possible ways to develop both GIM therapeutic practice and the theoretical understanding of how change and transformation happens in GIM. In the following, this will be highlighted in three parts: clinical implications, towards a developed music taxonomy of GIM music, and applications in a GIM training context.

Clinical Implications - An Interactive Process-View on Experiences of Transcendence in GIM

The PhD study results put focus on the *how* in the GIM process more than on the *what*. As Daniel Stern described, therapeutic change happens in small as well as in highly emotionally charged “now-moments” and “moments-of-meeting” (Stern, 2004; Stern et al., 1998). In the here and now and in the relational meetings (with music and therapist), the study identified three central experiential qualities, or relational modes. Experiential Category 4 (EC 4) captures a recognition process - the sense of deeply being known (Sander, 2002). EC 5 captures a process of non-recognition and possible, or even threatening, ruptures in the relationship. EC 6 captures a shift or second-order change both in relational mode and in level of consciousness as a dissolving of a state of tension in mind and body.

For example, this happens in GIM, when the client is experiencing even deeper emotional qualities in feeling contained by music as well as therapist and manages to stay with both strong positive/recognizing and negative/non-recognizing emotions in a kind of turn-taking circular movement. Eventually, these relational experiences lead into the possibility to let go, to surrender, when the relational trust feels good enough established between client, the music, and the therapist. The process of surrender prepares for experiences of vulnerability, lack of control, state of uncertainty, when the relational mode of surrender remains the only, but also most adequate alternative way of being in relation. Here-and-now experiences in the GIM setting of a mature and useful attitude towards different challenges develops the capacity in real life to feel more relaxed for example in situations that previously evoked fear of being stuck and a sense of not being able to choose between different options. The deepening of relational modes develops implicit relational knowing (Lyons-Ruth, 1998) and the repertoire of emotional qualities in relationships. This provides for a deepening of consciousness with a developed capacity to be present.

This phenomenon does not exclusively appear in GIM therapy and music listening but also in good “verbal” psychotherapy, and of course in daily life’s emotionally moving meetings. The basic requirements can be found in our common and shared sense of presence, in the quality of our presence, which is connected to the consciousness and its different levels. The quality of our presence is also connected to the possibility to transcend or cross borders between different mental spaces within and between us.

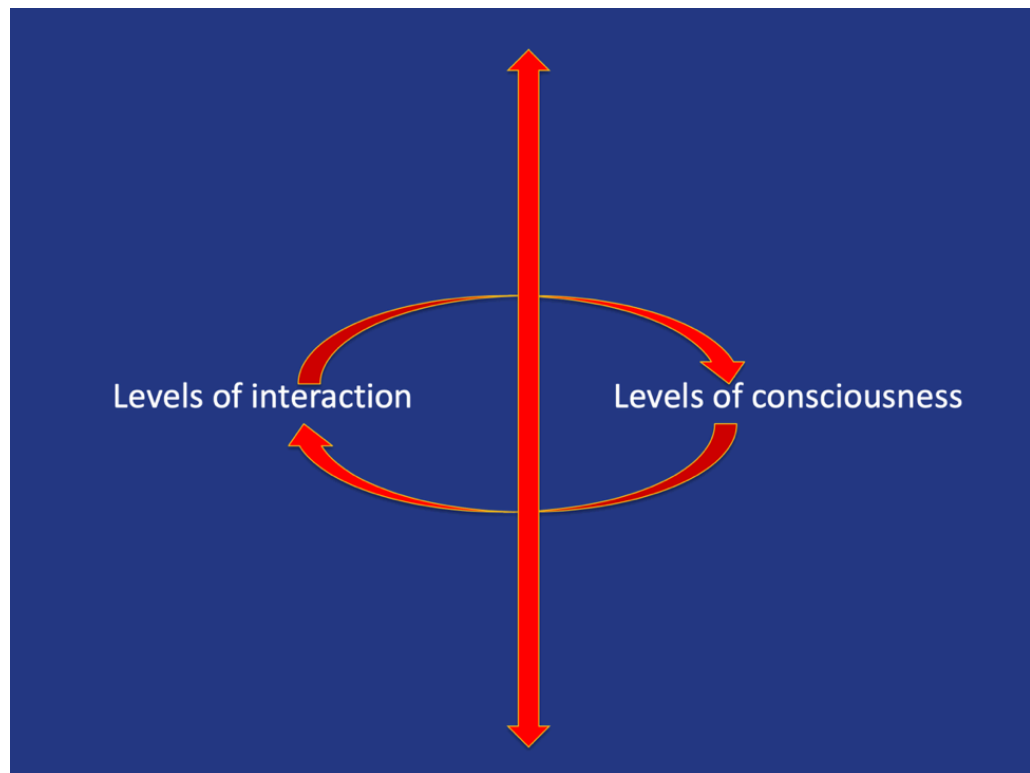


Figure 11
Levels of Interaction and Levels of Consciousness.

Note: From Mårtenson Blom, Ersta Sköndal University ppt-presentation, 2015.

This may entail an experience of transcendence and a possible transpersonal spiritual experience. Figure 11 depicts how deepening levels of interaction in terms of emotional capacity, interacts with and deepens the level of consciousness. The image of a cross depicts the horizontal axis as level of interaction and the vertical axis as level of consciousness (Figure 11).

In GIM, the dyadic regulation in music and dialoguing (guiding) creates a “here-and-now” change in the implicit relational knowing, through shifts between mutual recognition and non-recognition, possible to identify through transcript analysis as EC 4 and EC 5. The three relational modes, defined as a Process of Surrender (Mårtenson Blom, 2010), represents a leap, a qualitative change, into deeper levels of consciousness and possible experiences of transcendence. According to the Boston Change Process Study Group (BCPSG, 2010), this generates in the client feelings of getting better, being cured. For the therapist it is both helpful in the processing and theoretically clarifying, to understand the experience of a Process of Surrender as mirroring three important phenomena:

- the depth of the altered state of consciousness;
- the transforming power of the experience in terms of affectivity and expanded awareness; and
- the quality of the collaborative alliance between client and therapist, and accordingly an appropriate music selection.

The PhD study provided support for the application of theories of intersubjectivity when a process perspective on GIM is needed. The perspective serves as a link between phenomenology and psychology. The vertical analysis in the study illuminated the phenomenological perspective and the horizontal transcript analysis illuminated the psychological perspective. The concepts Process of Surrender and Relational Mode of Surrender served as points of intersection in linking these perspectives. The GIM music

as active force and relational agent, must simultaneously be understood both phenomenologically and psychologically.

In comparison to previous research, the findings were found to contribute with knowledge that brings the GIM process instead of its contents into focus of attention. This brought forth suggestions to apply concepts capturing the field “between” phenomena, like interaction, dialogue, collaboration between client and music, client and therapist, and music and therapist. In the thesis, the findings were also compared and discussed in relation to the knowledge developed by researchers like Denise Grocke (1999), Brian Abrams (2001), and Lisa Summer (2009).

Further Clinical Implications

The clinical usefulness of the experiential categories of analysis can be found both initially, as part of an assessment phase, and continually, in the processing together with the client. As an assessment tool, they may inform about the client’s readiness to go deeper and the capacity to regulate affective defenses. They may give the therapist indications of their own quality of presence and fit with the needs and capacity of the client. They also show potentials for which pieces of music are appropriate as well as the client’s optimal range of tolerable experiences, in their window of tolerance (Siegel, 1999), indicating risk for dissociative defenses to be evoked.

For example, in the assessment phase, the therapeutic relationship starts to build safety and the tolerance for music chosen by the therapist is often enhanced through the client’s preferred music or even chosen pieces by the client. The presence and level of consciousness in how the client travels can be noted through analysis of experiential qualities categorized as 1-2-3 with movement into 4. If the experiences stay in 1-2, with no connection to any emotionality and with a dominating cognitive attention, the client needs more of stabilization both in relation to therapist and music.

Towards a Developed Music Taxonomy of GIM Music

The music analysis discussed in the thesis focused among other things on the need for differentiation of more music classification categories for future research using the combination of Music Classification Categories (MCCs) and Experiential Categories (ECs). The analysis of the interaction between MCCs and ECs generated interesting knowledge about the GIM process. As previously described in this article, the strong connection between MCC 3 and EC 4, mirrors how certain emotional qualities in the experiences are crucial. The music categorized as MCC3, evoke strong affective movement crucial to change, on condition that it can be tolerated by the client, meaning that music must fit with the client’s window of tolerance (Siegel, 1999) and be offered within a good-enough safe and stable therapeutic relationship. Interaction and collaboration in the relational field was illuminated in the vertical analysis and identified as crucial in providing for a Process of Surrender. In the vertical analysis it was clarified how transcript analysis could be used clinically, in combination with an evaluating collaborative interview with a client, illuminating the level of quality of the therapeutic process.

A further developed music taxonomy (Wärja & Bonde, 2014) focused on interactive ingredients or qualities in pieces of music, more than on complete music pieces. This provided a better fitness with a process-oriented understanding of GIM music, and a relational perspective on GIM therapeutic process. The perspective also provided the therapist with a better understanding of how GIM music interacts with affect regulation and the autonomous nervous system including the vagus nerve (Porges, 2001). For example, through combining analysis of experiential qualities in terms of interaction, with a music classification sensitive to the client’s window of tolerance, the therapeutic process will better serve the needs of the client.

Applications in a GIM Training Context

From October 2017 to September 2019, the Scandinavian GIM training, level III was conducted, with twelve participants and six teachers and supervisors (Margareta Wärja, Katarina Mårtenson Blom, Lars Ole Bonde, Ellen Thomasen, Bolette Daniels Beck, and Svein Fuglestad) from Sweden, Denmark, and Norway. The education will be presented and described later in another article. Here, I will summarize some reflections on the implementation of the intersubjective perspective through using the experiential categories (Mårtenson Blom, 2014) and music classification categories (Wärja & Bonde, 2014) as tools in the training process. Based on the theoretical foundation of intersubjectivity and neuropsychology, participants were trained in the analysis of transcripts with experiential categories connected to music analysis with music classification categories, which helped tracking how the travels deepen in terms of level of consciousness and complexity of interaction. The perspective also contributed to development of therapeutic presence on behalf of the therapist, through sharing and regulating attention, intentionality, and affectivity with clients, in the guiding as well as during meeting and dialoguing. The education included an integrative perspective on GIM process, how and what happens in GIM, with the established traditional ways of understanding and using imagery and other contents.

Closing Remarks

Further post-doc reflections include considerations of the health potential in experiencing the Process of Surrender. The study results brought forth a way to understand more deeply the connection between human interdependence and experiences of the ineffable. Qualities in small interactive “gestures,” in implicit relational knowing, deepen the capacity for presence and awareness. Our capacity to meet and be present becomes a condition for an experience of transcendence. The results also illuminated ways to understand this as a foundation for development of mental and spiritual health. There is a kind of paradox in how the human mind and soul is both inescapably involved in and dependent upon other human minds and souls, as well as it is existentially alone and longing for connection with what is greater and beyond. In the GIM therapeutic setting, work is done with both and with how the gap is causing both suffering and healing. As psychotherapist, my task is to assist in the processing of experiential work connected to this, to bridge between inner and outer world. As GIM therapists we often focus on contents of experiences (contents of imagery), especially when it comes to experiences of transcendence. As a relational psychotherapist, the quality of the presence between me and the client is my focus of attention, for example through continuous evaluation of the affective climate. More recent research on outcomes of psychotherapy points towards the relationship as the main factor contributing to change and transformation.

Based on experiences from clinical practice, several clients when processing experiences of transcendence, have expressed, both “getting better” as BCPSG suggested, but also a sense of relief and expanded inner freedom in relation to control, decision-making, problem-solving in important relationships and everyday life situations. This in turn can enhance self-compassion and reduce feelings of anxiety, shame or guilt. It may also entail a spiritual development. The American psychoanalyst, Emmanuel Ghent (1990/2003), wrote:

To experience surrender is to experience being in the moment, totally in the present, where past and future have receded from consciousness. Its ultimate direction is the discovery of one’s identity, one’s sense of self, one’s sense of wholeness, even one’s sense of unity with other living beings. This is quite unlike submission. (p. 216)

Edmund Husserl developed the phenomenological theory of intersubjectivity and stated:

Transcending one's subjectivity means to encompass the quality of "otherness" in the other subject, and at the same time be able to reach out and transcend one's own subjective boundary, to comprise the subjectivity of the other. Now we might simultaneously experience both an expansion and a merging, as if the concepts "inside" and "outside" are no longer meaningful. (Husserl, as cited in Welton, 1999, p. 196)

Applied to the process in GIM, this guides towards a bridge that connects inner and outer experiences and helps integrating GIM experiences of transcendence with everyday life and small daily doings.

The daily struggling, with preserving and developing intimacy in relationships, with enjoying interdependence and reconciliation with similarities and differences, becomes less hard when we deliberately let go and surrender. Emmanuel Ghent, once again, inspired me to formulate,

I notice your attacks, try to stay
 Ask you to do the same
 To leave the land of submission
 And enter the land of surrender
 Give in, not to me, but with me

The health potential in experiencing a process of surrender and eventually transcendence, is enhanced when the client can be assisted in integrating this field of consciousness with ordinary daily life. An experience of transcendence may otherwise solely be experienced as something extraordinary or even strange or frightening. To find ways to understand and emotionally relate to the mystical as part of life, or even begin to see Life and Creation with awe, is truly health promoting. It also points towards a general connection between mental suffering and existential suffering, meaning that we as human beings need to be open to the spiritual dimension of life to live a healthy and meaningful life. Helen Bonny (2002), the founder of GIM, wrote, "Spiritual growth demands a subjective stance, an allowing of immediacy, a melding with the music...a loss of control, or an imagined loss of control. The letting go process is an important part of spirituality" (p. 183).

The study focused on the clinical GIM process between client, therapist and music, amplifying the interactive ingredients in that process. This clarified important connections:

- We need to surrender to transcend.
- We sometimes must transcend to surrender.
- Both surrender and transcendence depend on a deeper intentionality beyond personal control but also on personal willingness.
- Both surrender and transcendence are amplified and supported by the GIM music.

The possibility in GIM therapy, to experience transcendence and learn to surrender takes us to the existential and spiritual center within and between us. Interaction between GIM music and human minds opens and re-connects us with our deep belonging, where love resides.

About the Author

Katarina Mårtenson Blom, PhD, lic. psychologist, lic. psychotherapist, trainer and supervisor in psychotherapy and Guided Imagery & Music (GIM). Psychotherapist, trainer and supervisor in private practice in Stockholm and Simrishamn, Sweden.

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