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Ecotherapy: Theoretical Foundations Leading to Clinical Work With Images and Dreams for Individual, Community, and Planetary Transformation

Paper based on a program presented at the 2009 American Counseling Association Annual Conference and Exposition, March 19-23, Charlotte, North Carolina

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In a lecture delivered to a group of Ecotherapy students at Regis University, Dr. Jeffrey Kiehl, a 30-year veteran research scientist of the National Center for Atmospheric Research (NCAR) in Boulder, Colorado, confirmed the findings of over 3000 scientists throughout the world. Kiehl stated that there is no question that human intervention in the natural cycles of nature is negatively impacting all living systems on Earth, including humans (J. Kiehl, personal communication, June 21, 2008). Yet scientific information has not significantly motivated humans to embrace sustainable living practices and environmental action. After years of dedication to science, Kiehl has turned to the world of mental health in search of what personally motivates people to be concerned about the environment and to understand how the environment impacts mental health. Counselors and counselor educators ought to do so as well.

Counselors and counselor educators have the training necessary to examine the ecological issues impacting mental health today. Ecological distress is, in fact, brought into the counseling room each day through the problems clients present. However, the integral connection between ecological issues and mental health has yet to be made. Why is this so?

Cultural historian, Thomas Berry described Euro-western cultures as being in the grip of a cultural pathology whose outstanding feature is a kind of autism towards the earth and its travail. “This pathology is manifest in the arrogance with which we reject our role as an integral member of the earth community in favor of a radical anthropocentric life attitude” (Berry, 1988, p. 208).

Depth psychologist Carl Jung (1976) attributed this autism to the Western world’s devotion to rational thinking and reductionist science, which he perceived as stripping life of its mystery and its potency to heal people emotionally and psychologically:

Through scientific understanding, our world has become dehumanized. Man feels himself isolated in the cosmos. He is no longer involved in
nature and has lost his emotional participation in natural events, which hitherto had a symbolic meaning for him. Thunder is no longer the voice of a god, nor is lightning his avenging missile. No river contains a spirit, no tree means a man’s life, no snake is the embodiment of wisdom, and no mountain still harbours [sic] a great demon. Neither do things speak to him nor can he speak to things, like stones, springs, plants, and animals. He no longer has a bush-soul identifying him with a wild animal. His immediate communication with nature is gone forever, and the emotional energy it generated has sunk into the unconscious. (p. 255)

Within the counseling profession, this type of autism or reductionism may take the form of hearing mental health issues as oriented only to the individual. Diagnostic manuals, for example, which drive both treatment planning and the economy of community mental health, give nearly exclusive priority to individual problems. Counselors more recently have acknowledged that individuals are powerfully impacted by their family systems. Consequently, there are many family counseling theories as well as family counselors who have been trained to “hear” and address issues from systems perspectives.

Both mainstream and mental health professionals are beginning to better identify problems related to dysfunctions in the environment. “Affluenza” (De Graf, Wann, & Naylor, 2002) is “a powerful virus which has infected American society, threatening our wallets, our friendships, our families, our communities, and our environment” (p. 2). “Materialistic disorder” describes the addictive consumption which ensues when one is separated from one’s roots in nature. (Conn, 1995, p. 162). “Nature deficit disorder” (Louv, 2005) is a common malady of children today. Seasonal affective disorder (SAD), otherwise known as “winter depression,” is another example (e.g., Mayo Clinic, n.d.) as is psychic numbing (Lifton, 1967), a term which describes reduced emotional responsiveness associated with exposure to traumatic events or massive amounts of negative external stressors. Gulf War Syndrome (McKenzie, 2003) has both biological and psychological symptoms. Other emerging phenomena such as road rage, autoimmune diseases, silence phobias, designer addictions, cubicle stress, chronic multitasking, and other psychobiological responses to living in today’s world are yet to be seen and heard as ecologically-related dysfunctions.

Historically, the field of counseling has been responsive to the cultural needs of the times. The inclusion of family systems approaches was a major and timely addition to the counseling field. More recently, counselor education programs and counselors have expanded their curriculums and clinical practices to embrace multi-cultural and feminist perspectives. In subtle ways, nature has already begun to emerge as a relevant influence in counseling practice as well. Nature is often valued by counselor and client alike as a place of comfort and healing. Wilderness experiences are viewed as highly effective for adolescents and for adults in the work place. A few schools in the U.S. are now offering courses and degrees which frame therapeutic work in an ecological context.

In the 1980s, mental health professionals began writing about environmental issues in various ways. Macy (1983), in responding to the Chernobyl nuclear disaster,
designed communal rituals to help people deal with environmental despair by experiencing a re-connection with nature. Roszak, Gomes, and Kanner (1995) made an enormous contribution to the field by compiling the essays of 25 professionals who had made the shift to an ecological way of hearing and working with others. A new model for human development and healing (Clinebell, 1996) placed eco-bonding and eco-alientation as central therapeutic concerns, posited new theoretical considerations, and presented ideas for clinical practice. Naturalistic psychology that would “hold out the human-nature relationship as an ultimate concern” (Fisher, 2002, p. xviii) came into being. Mental health professionals demonstrated that “direct contact with nature led to increased mental health and psychological development” (Davis, n.d., p. 1). Sensory perception was re-defined to include 53 natural sensitivities which help restore one’s sense of connection with the world (Cohen, 2007, pp. 49-51).

Sensory perception was key in that it located humans as part of a global, interpenetrating web of perceptions and sensations borne by other bodies and supported by all the other living beings on the planet (Abram, 1996, p. 65). Accordingly, the goal of eco-counseling is “to participate in and contribute to the healing of the planet by finding one’s niche in the Earth’s living system and occupying it actively” (Conn, 1995, p. 171).

Ecotherapy literature points to direct experiences of nature as the locus of eco-bonding and naturalistic healing. However, community mental health most often takes place within the limits of a professionally contained office or building. Fortunately, there is a methodology which can be used to access clients’ experiences of nature within a conventional counseling setting. In using this method, the counselor attunes to the nature images which clients themselves bring to the counseling session.

This imaginal approach (Aizenstat, n.d.; Berry, 1982; Hillman, 2004; Watkins, 1977, 1986) relies on the power of the image and on the power of human imagination to help clients reclaim their connection with the life of the world. Imaginal work requires a return to a cosmology or worldview in which all things are perceived as having value. The “anima mundi” is “that particular soul spark, that seminal image, which offers itself through each thing in its visible form” (Hillman, 2004, p. 101).

“Anima mundi” is the animation or the aliveness which the world inherently possesses. This “anima mundi” is activated by attending to any particular image. Furthermore, global transformation is dependent upon the dreams and visions, (i.e., the images) of humans (Berry, 1988, p. 201).

Any image can be the subject of imaginal work. In clinical practice, the image may take the shape of a person, a thing, a happening, a feeling, a recurring idea, or even a color. The source of an image may be a television program, a conversation, a recurring picture, a conversation, or a dream. The image may come when one is awake or when one is sleeping and dreaming.

The counselor may invite an image, but the particular image itself should come from the client. Inviting questions could include the following: What is your favorite animal (tree, flower, vegetable, or outdoor activity)? What real or fictional character would best help you survive in the world? Can you describe a place in nature where you feel very nurtured (or safe, or creative)? What is your favorite kind of weather (or climate)?
That being said, often the image simply enters the counseling room through the client’s own mouth. For example, a client may enter the counseling room saying, “It’s such a gorgeous day, can’t we meet outside?” Another may say with a sigh, “Oh, how I hate winter.” Still another may begin to talk about a dream she had that morning: “I went to the supermarket to buy a few groceries. As I walked by the fresh cut flower section, a little red geranium caught my eye. I tried to ignore it and returned to shopping, but I found myself circling the geranium again and again, until I finally picked it up, bought it, and brought it home.”

Any one of the images in the examples listed above could serve as a little window to help the client connect to the living world. But once the image has been chosen, it is essential for the counselor to know how to invite the client into a dialog of “active imagination” with the image itself. Jung’s (1973) own description of how to do active imagination is one that continues to serve well today.

The point is that you start with any image . . . Contemplate it and carefully observe how the picture begins to unfold or to change. Don’t try to make it into something, just do nothing but observe what its spontaneous changes are. Hold fast to the one image you have chosen and wait until it changes by itself. Note all these changes and eventually step into the picture yourself, and if it is a speaking figure at all then say what you have to say to that figure and listen to what he or she has to say. (p. 459-60)

Using Jung’s directions as applied to the depressed woman’s dream above, the counselor should initially have a conversation with the client about whether or not she wishes to focus on the dream at all. The counselor could certainly voice his or her own curiosity about the little red geranium, or about any other image in the dream that appears to have therapeutic value. However, clinically, it is always informative to ask where the client’s attention falls first. One can always come back and visit other images which may not at first glance seem pertinent to the client.

If the little red geranium plant is the image the client chooses, the counselor then facilitates a kind of dialog (Watkins, 1986) between the client and the image with guiding remarks such as the following:

“Imagine yourself back in the store and seeing the geranium for the first time. Just be with it, and let it be present to you. (pause) As you do so, what are you aware of? Imagine that it can speak to you. Listen for what it has to say to you. (pause) What is it saying? Imagine that this little geranium has a kind of knowing and can respond to your most important question. Imagine asking it your most important question? Try to get in touch with why you feel compelled to bring the little geranium plant home with you. What are you aware of? (pause) What are you feeling or experiencing right now?”
As is true of any conversation, one thing leads to another, and the counselor facilitates the conversation best by noticing the essence of each interchange and guiding the client accordingly. The counselor can determine whether or not the client is able to connect with the image and responds as needed. In the event that the client begins to feel silly or uncomfortable dialoging with an image, as in Gestalt work, the counselor may help the client to shift toward speaking about the image rather than directly to it, or may simply inquire about the discomfort and determine how best to proceed.

Imaginal work takes on an additional potency when shared in a small group. Dreamtending with an ecological focus fosters experiences of community and a sense of participation and belonging in the life of the world (Aizenstat, 2008; Sablatura, 2000). In a group of eight to twelve participants, participants sit in a circle, and someone is invited to share a dream. The volunteer sits near the counselor/facilitator. The other participants are coached to “listen in” as the dream is told by the dreamer in the first person tense. Participants are instructed to pay attention to their own experiences, feelings, and any images that may spontaneously appear. Interpretation is to be avoided.

The counselor facilitates the unfolding of the dream, dwelling on one or several images in detail. Periodically, with the dreamer’s permission, the facilitator invites participants to share what is happening for them. The dreamer takes a listening position, while the others share their experiences. The counselor both facilitates the process and protects the dreamer from serial questioning and interpretation by others. As in the individual imaginal work described above, the dreamer is drawn into an intimate dialog with nature or a nature being. Participants are drawn into a communal experience of that intimacy, which touches their personal lives as well. It is not uncommon for the entire group to experience a sense of awe in response to nature’s beauty or to be moved to compassion by the earth’s distress.

Imaginal work lends itself to the use of expressive arts. Expressive arts may include various forms of drawing, painting, or sculpture; writing poetry, music, or journaling; singing, mantra, or chant; movement or dance; mime; or sitting or walking meditation. Each is a form of active imagination in which one can stick with the original image or imagine the image forward.

In summary, imaginal work can be done individually or in groups. In either case, imaginal work has been shown to effectively help clients address personal suffering, create community, and connect with the living world. Given an understanding of the foundations of ecotherapy and ways to work imaginally, counselors can develop ears to listen for the images and dreams which clients present within the traditional counseling setting. Each image serves as one more spark that is needed for personal, community, and global transformation.
References


