

Analyzing the Mind-Coping Cognitive Process or Psychosis And the Higher Mind

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James Hillman writes, in his book *The Dream and the Underworld*, that:

"...It is sometimes said that most ideas can be put into a few words..." (Hillman, pg. 1)

This statement is true in my case and my theories. However, for the purposes of this paper, I shall try to elaborate on them.

The first question I ask is, "If psychosis exists, and it does according to psychiatrists, psychologists and mental health professionals etc., what forms may they take?"

The types of hallucinations my theory seems to fit most visual hallucinations.

This is because, I feel, as James Hillman wrote in his book *The Dream and the Underworld*, when a person dreams, they mainly dream visually using visual perception. In other words, it is far rarer to hear, touch and taste in a dream. Rarest of all, he writes "...do we use the sense of smell...", (Hillman, p. 185).

This is why I choose to deal with only visual or auditory hallucinations for now although I will discuss my opinions on tactile and other types of hallucinations (that of smell, for instance) later on in the Discussion chapter.

In the book, "SCHIZOPHRENIA: A very short introduction," written by Christopher Frith and Eve Johnstone, we may read of an account where the Reverend Mr. George Trosse (c. 1690) stated that he heard a voice saying, "Yet more humble! Yet more humble!" (Frith & Johnstone, p. 3).

As a result of this prompting, the book states that "the Man of the Cloth removed his stockings, hose and doublet" (Frith and Johnstone, p. 3).

Frith and Johnstone quote him:

"...I had the strong internal impression that all was well done, and a full compliance

with the design of the voice..." (Frith and Johnstone, p. 3)

Another example of schizophrenia given is an account of a patient in a psychiatric hospital. When the patient complained of a place on his shoulder irritating him, he was given some cream, and he then said that the place was in fact a plaice as one reads below.

The authors quote the patient. "...It's the place on my shoulder...", (Frith & Johnstone, p. 23).

The authors then inform the reader that the patient was: "...given some cream..."

The reader is then informed that the patient then said: "...It's a fish...not P-L-A-C-E but the P-L-A-I-C-E..."

The final example of schizophrenia I will give from this book informs the reader that a female patient saw the face of a rabbit when she looked in the mirror (Frith & Johnstone, page 23).

"...{The patient reported that} her face changed into that of a rabbit with ears and whiskers while she watched in the mirror..." (Frith & Johnstone, p. 23).

The authors then inform the reader that: "...She had hallucinations of being touched in a sexual manner..." (Frith & Johnstone, p. 23).

The above serve strictly as examples of past cases to show the reader of this paper what it is like to have hallucinations.

Unfortunately, the patients are not with me, the writer, at present so their psychosis cannot be analyzed with their verification or presence.

In his book *Freud & Jung: A dual introduction*, Anthony Stevens writes about this scene that happened in the life of Judge Schreber. Schreber felt his mission was to restore the world to its former state of happiness. To paraphrase Storr, Schreiber also believed that he should be turned into a woman and that a new human race would be produced by the healing

impregnating rays of the sun or, rather, as Storr wrote "...divine rays so that a new race of men might be created..." (Stevens, p. 61).

Storr writes that Judge Schreber's father was an eminent man of high standing and a strict teacher otherwise known as a "pedagogue" (Stevens, p. 62).

Storr then goes on to write that Freud did not go any further in attempting to delve into what Judge Schreber's childhood was actually like or what type of person he really was. If Freud had done so, he would have discovered that Dr. Schreber was an "...authoritarian monster..." (Stevens, p. 62).

Storr writes that his eldest son shot himself at thirty-eight whilst "...his younger son, Judge Schreber, became psychotic in the way described above..." (Stevens, p. 62).

This tells me that Freud did not do his job well. He did not deal with his patient deeply enough or, maybe, meaningfully enough. This shows a lack of spiritual awareness to an extent and proves that Freud was more of a real-world psychologist whereas Jung dealt more with the ethereal mind and with spiritual nature in his work.

Effective use and analysis of dreams are an integral part of Jungian analysis. Freud's method of analyzing dreams profoundly influenced Carl Jung: first as a model for practical therapy, and later as a model to react against, to modify, and to extend. Freud's view of dreams is therefore an essential starting-point. Freud thought that dreams were one's forbidden wishes that were inhibited during the daytime. At night, he believed that the forbidden wishes would try to gain access to the dreamer in a more palatable form. However, the 'forbidden' nature of these dreams could potentially disturb the dreamer and wake them up. Freud viewed the purpose of dreams as the mind's way of adjusting or altering these forbidden wishes into a format that would not wake the sleeper and would be more acceptable to the sleeper's mind during sleep and upon waking up: thus, the ego would be relieved of pain or burden psychologically (Storr, p. 81).

The quotation below is, I feel, most integral to this essay paper. Therefore, I shall quote it in full terms and simplify the quote to make its meaning clear and understandable to all who read this paper.

To quote Stevens, and not paraphrase him as above:

"...The mental institution that is responsible for performing this protective function is the 'censor' or super-ego, which causes the forbidden wish (the latent content of the dream as Freud called it) to be disguised and appear in a form which will neither disturb nor wake the dreamer. In order to disguise the latent content, the censor makes use of a number of techniques such as displacement, condensation, symbolization and pictorialization..." (Storr, p. 81)

In other words, Freud believed that the censor could move the subject matter of the dream from its original location to another in the sleeper's mind, that it could condense the image or subject into a compact more condensed form, use different symbols and finally pictures to make the dream easier for the dreamer to cope with (Stevens, p. 81).

In other words, the censor or super ego makes a dreamer's dream easier to take, as it contained forbidden wishes etcetera, and can do so in such a manner so as not to wake or disturb them or their sleep, according to Freud's beliefs (Stevens, p. 81).

To continue, the book then goes on to read:

"...(This would explain)...the often bizarre and irrational nature of the manifest dream..." (Stevens, p. 81)

Furthermore, Stevens writes:

"...The goal of Freudian dream interpretation is to undo the work of the censor. This is achieved by the technique of free association, whereby one starts with a dream image and

allows one's thoughts to associate to it in complete freedom..." (Stevens, p. 84).

To paraphrase what Jung was trying to say, Freud's techniques were a good place to start, however, when working in a Jungian style of therapeutic environment the dreamer is taken on a journey where they relate to the dream in a personal and intuitive way where they are in charge of the whole experience from the subjective intuitive actor in the scene to the objective critic. Only then can the dream be fully investigated: it is interesting to note that in both methods use of the subconscious and conscious mind are made as well as the collective unconscious in Freud's method and Jung's method as the technique of free association taps into the collective unconscious eventually through the subconscious wall of the mind. Jung's approach takes a more all rounded viewpoint and directs the reader thoroughly in the guiding process of the dreamer knowing his or her dream in full and its own interpretation as far as they can go themselves or as far as they can reach. Then, I feel intuitively, they would have flashes of self-insight from their Higher Mind which would help the dreamer analyze the dream in a far more complete metaphysically interpreted manner and form of analyzing (Stevens, p. 84).

Stevens writes that Jung points out of dreams that:

1. Dreams, natural, spontaneous events, proceed independently of conscious will or intention;
2. Dreams both have purpose and are compensatory, in that they serve to promote the "balance and individuation of the personality" (Storr, p. 83).

Furthermore, Jung thought that:

"...3. The symbols of dreams are true symbols, not signs and they possess a transcendent function;

4. The therapeutic power of dreams is better served by the techniques of amplification and active imagination than by interpretation based on 'free association'.." (Storr, p. 83)

Freud was very passionate and sure of his theory of dreams and dream work or analysis. In his book, *Dream Psychology*, he wrote that the dream is perceived by most educated people as an act of the mind. "...But since the downfall of the mythological hypothesis an interpretation of the dream has been wanting..." (Freud, p. 11)

Furthermore, Freud writes:

"...Under certain conditions, one of which is the sleeping state, the balance...[of the working processes of the subconscious mind and conscious mind]...[the subconscious having been]...repressed will now succeed in finding its way to consciousness. But as the censorship is never absent, but merely off guard, certain alterations must be considered so as to placate it..." (Freud, p. 44)

The reason why the quote above has not been paraphrased is that it is an important part of this paper. The reason is it is my belief that the censor has weakened considerably due to situations such as stressful situations such as redundancy or a stressful personal relationship. In the case of a psychosis it is my belief it weakens during waking hours and thus may cause significantly more stress or distress and trauma to the patient concerned. Another cause of stress might be sleep deprivation which might affect dreams as well as waking nightmares for the patient. (In other words; psychosis or psychotic episodes.)

The above shows the dedication he had towards the field of study in question: in other words, psychoanalyzing the dream state or dream work in a psychoanalytical manner. It also shows the differences between Freudian and Jungian thoughts on dream analysis and psychoanalysis of the dreamer and dream itself.

Jung acknowledged the existence of the soul and Higher Consciousness or Higher Mind within and around us as can be seen by the forthcoming paragraphs in this Review of Literature below further on in this essay paper.

From a metaphysical viewpoint the emphasis is more on Jungian psychology being more correct in this field of study. The transcendent quality of dreams comes from the Higher Mind as is known by the metaphysician. Freud did dismiss transcendence in dreams in a sense as a "mythological hypothesis" that has been dismissed; the need for dream analysis being needed to be studied at greater depth.

Free association was a technique used by Freud and it makes perfect sense that if one were to use this technique one would then work towards decoding to work of the censor.

Jung's views on dream analysis were spiritual compared to Freud's and different methods applied to working with them in a therapeutic capacity which differed from free association.

My methods as discussed later of analyzing psychosis in the same way one would analyze a dream using both Freudian and Jungian concepts.

The methods I initiate in this paper use the Freudian concept of free association and the Jungian concept of archetypes. It also bears in mind the metaphysics of the Higher Mind which should be contacted and allowed to bring peace to the sufferer/patient through the aid of a metaphysical or transpersonal counselor. I also mention other methods of sterling treatment further on in this essay paper further on.

The mythical aspect which Freud referred to was the thought that dreams came from outside sources such as the Divine or gods and goddesses. This is clear if one reads the above text. The thought of a Divine Source of dreams shall be analyzed in the discussion chapter.

He also writes in *Dream Psychology: Psychoanalysis for Beginners*:

"...That the dream actually has a secret meaning, which turns out to be the fulfilment of a wish, must be proved afresh for every case by means of an analysis..." (Freud, p. 51). The process of psychoanalysis involves free association in Freud's methodology as discussed above.

As one can tell, Jung's theory summed up previously is a lot more well-rounded and even encompasses the spiritual and uses different therapeutic techniques to Freud's method of free association.

A therapist, therefore, could argue that one was more capable of analyzing the dream if one were more open minded to the more rounded spiritual aspects of the personality, and did not place such a large emphasis on the base nature of the mind as having "forbidden wishes", and the mind's censor giving the dreamer a coded message of a base desire in a more palatable way.

I would personally not, or rather never dismiss the transcendent nature or qualities of the dreams if treating a patient, myself, encouraging the patient to go deep within through mystical meditative techniques and contacting their Higher Mind once the patient feels ready to begin the process after possible psychiatric drug therapy and treatment of their psychosis by analyzing it in the my ways and methods explained in the Methods Chapter. Upon reflection, I feel that after the psychiatric drugs have taken effect, free association should take place to strip back the psychosis to its bare roots. Then, the method in the Methods Chapter should be applied. After this, contact with the Higher Self or Mind should always be encouraged to round things off to a satisfactory conclusion. As stated precisely Jung acknowledged the existence of the soul and Higher Consciousness or Higher Mind within and around us as stated before and the methods above also acknowledge and make use of Jung's

acknowledgements and other methods and concepts and some of Freud's as well too.

Stevens goes on to make a very final sounding point. It is in his book *Freud & Jung* and it is this:

"...To view that dreams are merely the imaginary fulfilments of repressed wishes is hopelessly out of date. There are, it is true, dreams which manifestly represent wishes or fears, but what about all the other things? Dreams may contain ineluctable truths, philosophical pronouncements, illusions, wild fantasies, memories, plans, anticipations, irrational experiences, even telepathic visions and heaven knows what besides..." (Stevens, p. 84).

In his book, "JUNG A Very Short Introduction" Anthony Stevens writes that Jung wrote:

"...dreams add something important to our conscious knowledge..." and "...a dream which fails to do so has not been properly interpreted..." (Stevens, p. 106).

Another quote from this book is that Stevens writes that Jung thought that the whole of "... dream-work is entirely subjective..." (Stevens, p. 106). In other words, based on or influenced by personal feelings, opinions etc.

This raises an interesting point.

If this is so, then why are there books that give lists of dream topics and standard interpretations for that topic or theme?

One can only suppose that these themes have been passed down from our ancestors and have been recorded over time, and thus, are archetypal in their nature.

In his book, *JUNG A Very Short Introduction*, Anthony Stevens writes that one day Jung was doing his work when he heard a feminine voice say that what he was doing was "art" and not science. Stevens goes on to write that Jung

was annoyed at this and replied, "No, it is not art! On the contrary, it is nature." Stevens then writes that Jung viewed this voice as the "personification of his soul" (Stevens, p. 32).

Stevens continues in the same book by writing that Henri Ellenberger in his encyclopedic "The Discovery of the Unconscious" (1970) suggested that Jung underwent some form of clinical illness and Stevens further states that "...This illness is prone to strike after a period of intense intellectual activity and resembles a neurosis or, in severe cases, a psychosis...Jung's experience was similar to that undergone by shamans and religious mystics, as well as some artists, writers and philosophers..." (Stevens, p. 35).

If this is true, then it is clear that Jung must have been undergoing severe mental pressure at that time of his work and life. The censor in his mind might have been trying to justify the extreme effort that he was deliberately putting himself through via the above comments Jung heard the voice say.

One aspect of Jung's work I would like to examine that I know already, and knew of before starting the project, is his work on the subconscious and the collective unconscious. I surprisingly found suitable passages in a book entitled *Tarot for Dummies* by Amber Jayanti.

In it she writes that our subconscious minds are always fluid like water or, as she writes "...receptive and suggestible.". She also writes that the collective unconscious or the mass mind have similar traits. She writes that the "...collective unconscious is a collection of memories of all human experiences from the beginning of time..." (Jayanti, p. 12).

I would like to add a further metaphysical point of view about minds in the sense that from a metaphysical perspective the Higher Mind is the tank or container and creator of the collective unconscious as it is within and of the image

of the creations that created the memories in the collective unconscious.

She then goes onto write:

She makes the point that the subconscious is like a "stream" and that the collective unconscious is like a "river" and both flow seamlessly into one another. People can tap into the collective unconscious and both the subconscious and collective unconscious have sway and influence over the conscious mind and one's life (Jayanti, p. 12).

The Higher Mind is the core or center of all of these minds put together. It is my belief that if one can start from the outside symptoms of the psychosis, and then peel back the layers so that the universal archetypes and the personal archetypes are exposed, real metaphysical and transpersonal counselling work can begin by encouraging the patient to make contact with their Higher Mind and, with the help of the metaphysical or transpersonal counsellor and/or anti-psychotic medication, find the root cause of the problem in a calm and tranquil atmosphere and state of mind. This will be explained later on in this dissertation.

Jayanti gives an interesting account of how the collective unconscious does influence people in the modern society of which this paper is written.

She writes of how the collective unconscious affected a friend and college professor she knew when the AIDS virus was first made public by mass press in the media and there was more fear than knowledge being transmitted by the paper's etcetera. She writes that her friend picked up the notion that the virus could be caught by using the same kitchen utensils as a virus sufferer.

"...When an old friend with AIDS came for dinner; I watched as Rick put on a pair of rubber gloves and there the man's eating utensils into the trash..." (Jayanti, p. 12).

She writes of tarot:

"...the tarot is a group of cards bearing pictures that tap into both personal and universal archetypes..." (Jayanti, p. 13).

We deal with the quote directly above later on in this paper.

She also writes:

"...As I see it, there are both personal and impersonal (universal) archetypes or concepts..." (Jayanti, p. 11).

It is my firm belief that as dreams stem from the subconscious mind and are linked back to the collective unconscious through to the Higher Mind, they reflect both personal and universal archetypes, as does psychotic episodes: visual and auditory ones.

To illustrate this point, a person may find monsters fearful. In her book *The Encyclopedia of Dreams*, Elli Goldberg writes in her entry on monsters:

"...Dreams that feature monsters attest to extreme anxiety, unfocused fear and escape from reality. An extremely tough phase is causing the dreamer to see the black side of everything. If he does not take time off to muster his strength, he can expect a deterioration in his physical and mental state, even to the point of hospitalization. Confusion, uncertainty and mental chaos are in the offing. This is a warning sign that the situation must be dealt with immediately..." (Goldberg, pp. 586-587).

In a very strange way the above quotation seems relevant to the whole of this thesis. The monsters of a visual hallucination may, if it causes fear or anxiety, be the monster in the closet, or mind, of the mental health sufferer waiting to get loose from the subconscious mind having been programmed by the collective unconscious in a universally archetypal

form. The monsters may also be a "wake up call" from the Higher Mind to try and calm the person down into not leading such a stressful life. This may seem odd, as one may not suspect the Higher Mind to shock or upset people and indeed it does not, however, the intuitive message may be blocked psychically and/or altered in such a way that the censor may let through fearful unpalatable emotions (fear, for example) during a psychosis as the stress the person is going through may numb the censor and put it off guard. Hospitalization may indeed occur after a psychotic episode or more than one.

Jayanti writes on archetypes earlier in her book:

"...Archetypes are embedded in your subconscious mind - the part of your mind that is free from conscious awareness..." Jayanti, page 11)

To carry on further with the psycho-metaphysical nature of this paper, I will now look at the tarot card The Sun bearing in mind Jayanti's reference to tarot in the quotation above. In the book JUNG and TAROT an Archetypal Journey, Sallie Nichols writes:

"...Behold the sun!...The Tarot Sun possesses inherent human characteristics with which man can establish conscious relationship...This is the world of Blake's Songs of Innocence, where lamb and "tyger" moved in harmony and one sees the world with new eyes of wonder.." (Nichols, p. 327).

The description above speaks of harmony, light and joy: emotions that we can all relate to easily. It also illustrates how humans can draw on the collective unconscious to tell tales, stories and songs as well (Blake) and inspire people to create wonderful things in life.

But what is an archetype? Jayanti states that the lives of human beings are shaped by symbols that are passed onto them or handed down to them from their culture, or race, or

background: this includes social groups and peers, as well. Magazines, newspapers and television have a very similar impact upon people as well. She writes further on in the book that "...These symbols or archetypes - ideas or ways of thinking inherited from all these sources and present in your subconscious - are the model you pattern your life after..." (Jayanti, p. 10).

In his book, *FREUD: A very short introduction*, Anthony Storr writes:

"...The psychoanalyst must turn his own unconscious like a receptive organ towards the transmitting unconscious of the patient...." In other words, he must be as a phone receiver is to a transmitting microphone when engaging or dealing with the patient (Storr, p. 119).

Furthermore, he writes:

"...Any practicing psychotherapist will recognize this as sound advice. One of the commonest mistakes is premature interpretation: jumping to wrong conclusions on insufficient evidence..." (Storr, p. 119)

I feel that the system, I have come across (as explained in the Methods chapter) is quick and efficient but must be carried out in a slow and methodical manner taking every word the patient says into consideration from past, present and a possible future angle too. This is because the psychosis may be referring to a future event such as a mental malady or breakdown in the future that could lead to hospitalization. (See Method and Findings Chapters for clarification of this point if needed.)

John Rowan in his book, *The Transpersonal: Psychotherapy and Counselling*, quoted Carrington when he wrote that Carrington added an interesting point when commenting on the relationship between meditation and psychotherapy. Carrington stated that he had seen many people become "...more emotionally responsive, tranquil, personally insightful,

energetic and sensitive to the world around them through meditation..." (Rowan, p. 200).

Rowan continues that Carrington stated that long-term meditators still had unresolved personality issues such as "...sexual adjustments, social maturity, marriage, career..." (Rowan, p. 200)

All of these could cause one stress and psychotic breakdowns.

According to Rowan, Carrington continues by stating that such conflicts should be dealt with through some form of psychotherapeutic intervention. However, Carrington has also known of and witnessed people who had learned to meditate and were benefiting from it tremendously, enter psychotherapy (after starting meditation) to work out specific personality areas of difficulty in their lives:

"...According to them, meditation had reduced their anxiety to a point where they could contemplate exploring their emotional problems in depth for the first time..." (Rowan, p. 200).

Provided that the metaphysical or transpersonal counsellor is fully competent, they may help the client move on from these issues, say for instance with the help of a therapeutic background. For example, a knowledge of Cognitive Behavioral Therapy may help depending on the case. In other words, a traditionally acceptable therapeutic background blended with the metaphysical counselling style may work. (Please note that I see no reason at all why this should not be so however I ere towards metaphysical/transpersonal counselling as a preferred method as I practice it in my own work when not engaged in strict pastoral counselling. Sometimes I mix the two. I have a qualification in Sex Therapy, and this helps me deal with relationships, for instance). I hope this point is now clear.

If the subconscious is to be defined clearly as the part of the mind which we are not totally aware of during normal waking hours, provided we are in a stable mental health condition and feel well inside ourselves, and also be defined

as a part of the mind that influences our behavior but is filtered by the censor, please take this theory into account:

It is a common well-known fact that too much stress may induce a break down. The break down might be psychotic, for instance, if the person has taken too many recreational drugs. The censor would then give way and a cacophony of images, audible voices and/or tactile hallucinations would occur as they would all stem from the subconscious mind. The same place that dreams do too.

Bearing this in mind, and the fact that dream psychoanalysis does exist as seen above, would it not make sense to analyze a psychosis on the same level ground in the same manner more or less, to start off with any case. It seems it does due to these logical statements that I have just made.

One point Jung made in his book *Dreams* is that when asleep, the conscious mind and unconscious mind have touched during sleep they "...fly asunder on account of their mutual antagonism..." (Jung, p. 225) and also states that any conflict between the conscious and unconscious mind is stopped whilst dreaming and the conscious mind is made to stand the tension by means of the circumambulation. Jung writes the "...magic circle..." (Jung, p. 225) prevents the unconscious from spilling forth dramatically and thus causing what could be the equivalent "...to psychosis..." (Jung, p. 225).

A circumambulation is an act of moving around something sacred: therefore, the above refers to the circular motions between the conscious and unconscious minds.

Joel S. Goldsmith wrote, in the book *Metaphysical healing of the individual undergoing metaphysical healing via a metaphysical healer*,

"...That individual is I AM, Life, Truth and Love and his body exists as perfect spiritual harmonious idea subject only to the laws of Principle, Mind, Soul, Spirit - and it is our privilege, duty and responsibility to know this and

the truth will make free everyone who turns to us..." (Goldsmith, p. 10).

It is important to bear in mind that one has to make sure that the patient knows their True Self and Higher Mind or their "...I AM..." (Goldsmith, p. 10). In doing so it is hoped that the patient would find a sense of inner peace and calm when they access what some metaphysicians call God Mind or the Higher Mind,

Only this ultimate mental state can, I feel, bring total peace and confidence to the patient while other treatment is in progression or progress.

This statement brings to mind the value of the science of metaphysics when practicing the art of metaphysical and/or transpersonal counselling and teaching or care. The metaphysician is responsible for showing the patient the way and the truthful way of accessing his/her higher mind via metaphysical practice and technique.

This should be done in a diligent, non-pressurizing, non-judgmental, calm, friendly, warm and caring and patient manner making sure, obviously, that such things as transference and misplaced guidance do not occur at all.

A transpersonal counsellor would find it useful to use metaphysical knowledge in their counselling work, but what is metaphysics? In the book *METAPHYSICS: A very short introduction*, Stephen Mumford writes:

"...Meta can be interpreted to mean 'above' or 'beyond,' and what we do in metaphysics is indeed above or beyond physics..." (Mumford, p. 100)

This shows how beautifully metaphysical counselling, metaphysics, psychology, dream analysis fit and gel well together in one seemingly fluid scientific art form to enable the healing of the patient who is suffering as the metaphysical as a metaphysician would know would mean the practice of thinking deeply, perhaps in

an abstract or non-linear way, meditation of a mystical type or not, bearing in mind the knowledge of Jung and Rowan and people like them and also using the psychological and metaphysical knowledge of New Thought ways to aid the patient's mind in recovering and healing during counselling treatment.

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