The Bonny Method of Guided Imagery and Music in Relation to Gestalt Therapy:

Present Centered Healing

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Abstract

This paper presents a working definition for Gestalt therapy and the Bonny Method of Guided Imagery and Music (BMGIM). Gestalt therapy is defined by Clarkson’s three principles of Gestalt therapy (Clarkson, 1989). The definition of BMGIM is restricted to Bonny’s individual method as defined by Bruscia (2002). The similarities between these two modes of treatment are highlighted. These two therapeutic processes are shown to be vehicles to mindful present centeredness, which expands the client’s consciousness or awareness, facilitating the unfolding of his or her own organic healing capabilities. Two case studies demonstrate how these therapeutic processes bring awareness into the present and how, by remaining with this awareness, clients are able to work through difficult psychological processes and increase self-awareness.
The Bonny Method of Guided Imagery and Music in Relation to Gestalt Therapy:

Present Centered Healing

From a superficial perspective, the two approaches to therapy discussed in this paper seem very different. For example, the Bonny Method of Guided Imagery and Music (BMGIM) always involves music, Gestalt therapy almost never does. In BMGIM the client is always in a supine position, in Gestalt the client usually sits. The eyes are closed during a BMGIM session, while in Gestalt therapy eye contact usually plays a big role. However, if one looks deeper into what is taking place internally for the client and the therapist, the above-mentioned differences become insignificant. In both of these approaches the client and therapist move into a heart-to-heart relationship and enter fully into present centeredness within the session. Present centeredness means bringing one’s awareness fully, at least to the best of one’s ability, into all present phenomena. In most individual therapy settings the bulk of these phenomena are part of the relationship between the client and therapist, because that is the core of the present moment in therapy. It is not that one ignores the past and future; those blend into the relationship, flavoring the nature of the current relationship. It is this entering into present centeredness in relation to another human being that facilitates the healing process. This paper will explore the similarities between these two approaches to healing. The journeys of two women, Melody and Teri, will illustrate how these processes facilitated present-centered awareness, leading to their healing and personal growth.
Literature and Discussion

In order to explore the relationship between the Bonny Method of Guided Imagery and Music (BMGIM) and Gestalt therapy, it is first necessary to define each for the purpose of this paper. Both terms are subjected to frequent misinterpretations. Guided Imagery and Music (GIM) has often been confused with the many varied forms of guided meditation utilizing imagery and music. In addition, Helen Bonny developed group methods, and a few practitioners of GIM have come up with creative variants of Bonny’s individual method. Because of a need for clear terminology, the term “Bonny Method of Guided Imagery and Music” was developed to indicate Bonny’s individual method (Bruscia, 2002a).

BMGIM may be defined as: 1) an individual form, 2) of exploring consciousness (e.g., in healing, psychotherapy, self-development, spiritual work), 3) which involves spontaneous imaging, 4) in an expanded state of consciousness, 5) to pre-designed (taped) programs of classical music, 6) While interacting with a guide, 7) who uses non-directive, non-analytical, music-based interventions, 8) within a client-centered orientation, 9) all within a session that has the following components: preliminary conversation, relaxation/induction, guided music-imaging experience, return, postlude discussion. (Bruscia 2002b, p. 46)

We will rely on this narrow definition of BMGIM.

Gestalt therapy is often associated with the use of the “hot seat” and the “empty chair” techniques used by Fredrick Perls in his demonstration films. These techniques were borrowed from Moreno’s Psychodrama methods (From, 1984), and were being demonstrated on professionals who had already had personal analysis or therapy (Perls, 1992). They are not appropriate techniques for everyone. Gestalt therapy is not defined by these methods, and there will be little discussion of these particular techniques in this
paper. Gestalt therapy is more of a philosophical approach than a method. “The basic concepts of Gestalt therapy are philosophical and aesthetic rather than technical. Gestalt therapy is an existential-phenomenological approach and as such is experiential and experimental” (Perls, 1992, p. 149). This means that a Gestalt therapist is more interested in who a person is in front of them than in any technique they may use. The nature of a Gestalt therapy relationship involves two humans on an equal basis, as opposed to an expert therapist and subservient client. The experiments set up in Gestalt therapy are not prescriptions to fix the client or the change the cognitions of the client in a way more suited to what the therapist thinks is healthy. The experiments are designed to bring awareness to what the client wants in life and what he or she is allowing him- or herself to have.

A source of confusion in attempting to define Gestalt therapy is in the distinction between Gestalt therapy, Gestalt psychology, and Gestalt. Gestalt psychology was developed by a group of German psychologists studying the nature of perception (Perls, 1973). A major component of Gestalt psychology has to do with perceiving things as a whole. Events and objects are not perceived as isolates but in context of their environment. If a person has interest in what is being perceived, the field of perception will appear organized (Perls, 1973). Without interest chaos is perceived. An example would be, if a person with no interest in football attended a game, the perception would likely be noisy chaos, people randomly smashing into each other on the field, and meaningless announcements. A fan would find excitement, camaraderie, and precisely executed strategies being displayed on the field. This perceptual difference is important to
Gestalt therapy because it has to do with the nature of reality. Gestalt psychology
discovered that what we call reality is created by the individual (From, 1984). This means
that therapist and client hold different views of what reality is and both are correct.

Gestalt therapy is a psychotherapeutic treatment philosophy and approach
authored mostly by Frederick Perls. Isadore From used the term “Gestalt” to describe the
use of techniques “harvested” from the various Gestalt therapy demonstrations by Perls in
the sixties. From addressed the Gestalt Therapy Conference in 1984. The subtitle for his
address published in the Gestalt Journal that year was “A Requiem For Gestalt”. He was
lamenting and expressing anger about many of the developments of Gestalt therapy.
From was disturbed about the indiscriminate use of “Gestalt methods.” The use of
techniques associated with Gestalt therapy without the existential I-Thou relationship that
is central to the Gestalt approach can and does result in cruelty. An I-Thou relationship
here means that therapist and client meet each other’s humanity on an equal basis:

Buber describes this ‘I-Thou’ relationship as a genuine meeting between two
unique people in which both openly respect the humanity of the other. Buber
writes that there are two primary attitudes, the I-Thou and the I-It relationship.
The I-It relationship occurs when we turn others into objects. (Clarkson, 1989, pp.
16-17)

If a person sitting in front of you is an It instead of a Thou, it is impossible to attend to
the needs of the entire organism. In fact the human core is being ignored.

For example in session two with my client Teri, internal conflict, self-hatred,
frustration and a feeling of being stuck emerged during a psychodrama experiment. My
task was to invite all of Teri into the room with respect and reverence for the humanity of
each part her being. By inviting all of Teri, without trying to change or fix her, her
awareness of herself increased, and core material surfaced in the next few sessions, eventually leading to Teri finding her own strength and ability to heal. According to Kurtz (1990) core material is a mixture of images, beliefs, and memories about who we are, what the world will give us, what is possible for us, and what kind of world we live in. Core material remains outside of consciousness while dictating the way we organize our experience and how much experience of life we allow ourselves. It is the recognition and respect of the whole human being that invites the whole human being to enter into the present moment. This I-Thou relationship facilitates present centeredness. Present centeredness brings awareness, and awareness facilitates movement towards wholeness.

The various methods associated with Gestalt therapy are not Gestalt therapy itself. According to Resnick (1984), Gestalt therapy is completely independent of any techniques associated with it. “Gestalt therapists could abandon any Gestalt technique that ever had been done and go right on doing Gestalt therapy” (Resnick, 1984, p.19). Clarkson (1989) lists three defining principles of Gestalt therapy:

Principle One: Gestalt therapy is phenomenological: its only goal is awareness and its methodology is the methodology of awareness.

Principle Two: Gestalt therapy is based wholly on dialogic existentialism, i.e., the I-Thou contact withdrawal process.

Principle Three: Gestalt therapy’s conceptual foundation or worldview is based on Gestalt, i.e., based on holism and field theory. (p. 26)

These principles are wholly interrelated. The understanding of any one will encompass the other two. This means that a full understanding of awareness brings a full understanding of holism. A full understanding of holism brings a full understanding of I-Thou contact (Clarkson, 1989). Therefore, as Naranjo (1993) states, awareness is all that
is needed. It is the deep respectful relationship between client and therapist and the
courage to remain fully present that bring about awareness.

Gestalt therapy and BMGIM are both experiential therapies. This means that
healing and growth happen through and within the actual experience of the session. The
focus in the session is on what is being experienced. The focus of most talk therapies is
on what is being said, or even more removed, on the meaning of what is being said. Perls
talked about the “now” and the “how” of Gestalt therapy (Perls, 1969). The now is what
exists. It is what we are experiencing; our thoughts, sensations and emotions; it is what
we are involved in, the phenomena of the world around us and the awareness of all the
above (Perls, 1969). The how is the structure. The structure Gestalt therapy is most
interested in is the lifescr ipt, which “is mostly taken up with self-torture, futile self-
 improvement games, achievements and so on” (Perls, 1973, p. 122). The core of Gestalt
therapy is being present and taking responsibility for who we are (Naranjo, 1993, Perls,
1969).

This emphasis on experience itself rather than on the interpretation of experience
reflects the spirit of protest against the authoritarianism that entitles one person,
who presumably knows more, to put something over another person, who
presumably knows less. Instead of playing intellectual guessing games, we prefer
that a patient get inside his own experience, trusting that when he gets a clear
sense of what is happening inside him, his own directionalism will propel him
into whatever experience is next for him. (Polster & Polster, 1973)

Music therapy is an experiential therapy because of the very nature of music,
which happens in time. The music of one moment is gone in the next. In the next moment
is either the memory of the music of the previous moment, the music of that moment or
dissociation. This phenomenon makes music a perfect tool for helping clients enter into
the here and now. The process of BMGIM helps a client connect fully with the music as it unfolds in each moment. The music helps facilitate the client’s ability to remain fully present with the material as it arises within the container of a BMGIM session. For example in the case of Melody described in the case material of this paper, in her first session she was in the beginning stages of a relationship, and was sitting with unfinished business from two previous relationships that were chaotic and contentious. The dialogue between the various voices within the music helped formulate imagery dealing with relationships. The imagery served as a metaphor of present and past relationships in her life in a way that felt safe enough for Melody to stay with the process. Within the imagery she began to deal with the energies of past relationships and fear of a new relationship on a symbolic level, even while taking the role of an observer in the image.

BMGIM is a psychotherapeutic process developed by Helen Bonny in the early 1970s. In this process imagery arises out of a combination of carefully programmed music and deep relaxation (Bonny, 1978a, b, 1989; Wrangsjo, 1994). Imagery is defined as any sensory or emotional experience that arises within the BMGIM experience. BMGIM is a method with a multilevel approach, drawing most heavily from the theories of Jung, Perls, Reich, and Rogers (Sommer, 1988). Jung is the most frequently mentioned theorist in the BMGIM literature. References of Jung were found in Brooks, (2000), Short, (1996), Clark, (1995), Weiss, (1994), Tasney, (1993). However in the first publication on BMGIM, GIM Monograph #1 (Bonny, 1978a), the use of Gestalt techniques is mentioned several times:

A more directed use of suggestion (always giving the subject the choice of several alternatives) and of imagery, using the Gestalt model, are often helpful. (p. 6)"

BMGIM and Gestalt
He is supported and directed by the guide who uses techniques of reflection, introjection, Gestalt, and empathy to more deeply involve the client in what is being experienced (p. 20).

The guide asks the client to report images, feeling states, kinesthetic reactions, thought patterns, etc., which are currently being aroused by the music (p. 29).

“If a client reports falling, the guide will encourage falling by saying ‘let yourself fall as far and as fast as you can’ (p. 30).

Clarkson (2002) combined Gestalt dream work methods with the Bonny Method. Two case studies are presented in which the clients narrate their dreams, in the present tense, before traveling to the music. “In both cases the music added profundity to the Gestalt dreamwork” (p. 254). Clarkson also recommends incorporating the use of “Gestalt techniques” into BMGIM sessions; “During the preliminary discussion, for instance, guides might increase their clients’ self-awareness by pointing out significant changes in tone of voice, posture, or facial expression, rather than focusing on the content of the issues being raised” (p. 255). Goldberg (1992) developed a “Field Theory Model of GIM” (p. 11), paralleling the Gestalt Cycle of Awareness (Clarkson, 1989). In Goldberg’s model, music facilitates the arousal of the autonomic nervous system, which evokes emotion, which evokes imagery, and more imagery, which deepens the relationship to the music, evoking more emotional responses, and so on. Goldberg (2002) later expands the above model to a “Holographic Field Theory.” The model becomes quite complex here, incorporating Wilber’s Spectrum of Consciousness theory and Bonny’s Cut Log Diagram of consciousness. Essentially what is taking place is that the original Field Theory Model of GIM cycle is taking place on each level of consciousness, and these levels are in turn,
interacting with each other. This model brings forth eight propositions. Of particular interest here is proposition seven:

Proposition seven: The Self is both a centering, organizing principle and a part of all states of consciousness that knows what it needs, and seeks and finds it through its own personal hierarchy. (p. 369)

This sounds strikingly like the concept of organismic self-regulation from Gestalt therapy.

Working from their knowledge of the organism’s tendency to self-regulate, Gestaltists assume that people know at some level what is good for them…This organismic self-regulation, if left undisturbed, usually leads towards a healthy, balanced and self-actualising outcome. The goal of counseling is to re-establish this natural and healthy functioning. (Clarkson, 1989, p.19)

In the area of dream work the similarities between Gestalt therapy and BMGIM are apparent, even though BMGIM does not usually work with dreams. The client does not bring a dream to work on in a BMGIM session. An exception in the literature is the one by Clarkson (2002) mentioned above. In BMGIM the client, in a way, dreams while partially awake and reports what is happening in that dream while it is happening. The guide or therapist offers suggestions on what to focus on and a supporting presence (Wrangsjo, 1994). With support and encouragement the client is able to stay with the frustration that is present in what can seem like nightmares. Images and symbols provide us with a safe way of tapping into disturbing material (Bruscia, 1991). The holding environment provided by the music and the guide enables the client to stay with this disturbing material until it is worked through.

Perls considered dreams a way of projecting disowned parts of the self into imagery. He worked with dreams by having clients identify with or become disowned
parts represented in the dream symbols (Perls, 1969). If a person had to cross a road in a dream Perls would encourage that person to become the road during a session. This brought the transference that took place within the dream into the present moment of the session, and then reversed that transference back to the dreamer. In BMGIM this process unfolds naturally within the imagery. For instance, clients or travelers often recognize in the context of a session that a helper that comes to them in the imagery is actually an aspect of himself or herself in the form of a helper, giving the client a new sense of his or her own inner strength.

An important parallel between Gestalt therapy and BMGIM is in the area of beliefs and attitude. Both assume an inborn goal to self-actualize (Bonny, 1978a, Perls, 1969, Naranjo, 1993). Bonny claimed that the way tones in western music possess a desire for completion and resolution parallels the human striving for self-actualization. This helps a traveler attune to his or her own self-actualizing drive when they are fully connected to the music. Working in BMGIM involves trusting the self-regulating nature of the organism. Perls (1969) saw the maturation process as moving from environmental support to self-support. If a therapist is overly supportive it creates a dependency and can stifle the maturation process (Naranjo, 1993). Summer (1995) proposed a theory of providing a “good enough” musical space within a BMGIM session, drawn from Winnicott’s concept of the “good enough” mother. Summer’s idea is to provide music with enough ground for a safe container and with enough challenges to provide exploration and risk taking.
An example of this in the case material is Teri’s first two BMGIM sessions. Her imagery was limited to mostly somatic experiences. Near the end of the first session she got in touch with feelings of grief, and in the second session the grief returned briefly. The program chosen for session three, “Creativity I-R/M,” is considered appropriate for a beginner’s program, but contains considerable musical challenges, for instance, the energetic Sibelius symphony can begin to stir things up and the traveler is dropped into the Vaughan Williams piece which can hold the traveler in one place for an extended period. This is exactly what happened for Teri. There was just enough challenge for her to drop into her grief and begin to move through it.

BMGIM and Gestalt therapy both operate with the belief of organismic self-regulation. When left alone the organism’s wisdom takes over. BMGIM has the ability to tap into a person’s strengths and creativity, which are not readily available in talk therapy. Within the imagery travelers can contact helpers, nurturing entities, powerful forces, unforeseen solutions, all from within the traveler (Wrangsjo, and Korlin, 1995). In deep altered states of consciousness achieved in some BMGIM sessions travelers are able to enter into transpersonal states and tap into psychic energy (Bonny, 1978b). The term transpersonal here refers to moving beyond the ego, as opposed to the pre-personal state of oceanic bliss that can also be entered into during a BMGIM session (Wilber, 2000). Deep altered states are achieved by being fully present with the music in a BMGIM session. The term altered state is really a misnomer. The state is really a more fully conscious state; that is, the traveler moves into full awareness of all present phenomena. The powerful psychic forces are always present. This is the phenomenon Welwood
(1992) speaks of when discussing “unconditional presence.” Unconditional presence happens when we step out of the conditions for remaining present, letting go of the shoulds, the stories and the self-judgments. The conditions we put on our existence narrows our awareness and our experience.

Instead of building bigger or fancier boxes, we need to develop the antidote to all our partial views of reality; being present to our experience as it is. We could call this *unconditional presence*.

But in the gaps between thoughts a larger background awareness is operating. When we open to this awareness it becomes unconditional presence – just being what is, without any agenda.

So we don’t have to manufacture unconditional presence; in fact we cannot, because it’s already there, like the sun, when we see through the clouds of our busy minds. (Welwood, 1992, pp. 164-165)

The healing mechanism for both Gestalt therapy and BMGIM is present centeredness. Fritz Perls equated present centeredness with experience, awareness and reality. Present centeredness is at the core of Gestalt therapy in both attitude and technique (Naranjo, 1993). It is only in the *now* that can we make contact or choose to not make contact. An error around this theme happens when therapists try to force clients to focus only on the present moment. The core of here and now focus or present centeredness is awareness, not narrowing of focus. The whole person, past, present, and future is invited into the room and experienced in the present moment. The goal is for awareness of one’s full experience, including how the past is now being experienced. This is an important distinction. The present is eternal. The past and the future exist in the eternal now (Wilber, 1977). As Polster (1985) stated, narrowing our focus to the present moment out of context is a form of dissociation. If a person is discouraged from bringing
in their past this encourages a split from the past. This dissociation inhibits our movement from figure to ground. Perls (1969) said that by staying in the center of our world we are able to see the “two poles of our experience” (p. 18). Thus, the present moment out of context is not the present moment. It is a fantasy about the present moment.

Carlsson (2001-2002) points out that several of the practices used in yoga to awaken kundalini are also present in BMGIM—turning one’s attention inward, relaxation, focusing, visualizing an image, and bringing awareness into the present moment. She speculates that life force or kundalini could be released during a BMGIM session in varying degrees contributing to a client’s ability to self heal in the context of a session. A small release of kundalini can influence a person’s growth and awareness in significant ways. Some of the peak experiences encountered in some BMGIM sessions could be attributed to kundalini (Carlsson, 2001-2002). Clarkson (2001-2002) draws several parallels between awareness meditation practices and BMGIM: turning attention inward; relaxed body; focused mind; increased awareness of inner sensations, perceptions and feelings; psychodynamic insights; entering into transpersonal realms; perceptual shifts; and feelings of transcendent bliss, peace, and openhearted compassion. Of note here is that the practice of awareness meditation involves attending to what is in the present moment.

Central to the issue of present centeredness is the issue of acceptance. Naranjo (1993) talks about the importance of being in the room in the present moment, being authentic in our actions, being aware of and accepting of our experience, and taking responsibility for our feelings and choices. Trungpa (1984) said it this way; “If you are
unable to experience now, then you are corrupted because you are looking for another
now, which is impossible. If you do that, there can only be past and future” (p.72). This
relates to The Buddha’s second and third noble truths. Roughly translated these are that
non-acceptance is the source of unnecessary suffering and acceptance leads to the release
from unnecessary suffering (Epstein, 1995). The idea of present centeredness was not lost
on Freud either, whose later decision to focus on transference was in part, to focus on
how the past is manifesting in the present, with the eventual goal of bringing the patient’s
awareness to this phenomenon (Epstein, 1995). Polster and Polster (1973) also discuss
this aspect of Freud’s approach to transference providing the following quote from Freud:

   Another advantage of transference is that in it the patient produces before us with
plastic clarity an important part of his life history, of which he would otherwise
probably have given us only an unsatisfactory account. It is as though he were
acting it in front of us instead of reporting it to us. (p. 13)

Present centeredness is a way of moving past the stories of the abouts and whys of
our experience, and moving directly into our experience. We cling to explanations such as
blaming, especially blaming our parents, in order to avoid the immediate experience of
pain-- but there is a price to pay. The price is neurosis. Our lives become centered on our
victim identities, and the avoidance of the ever-threatening experience of real pain. We
lose our authenticity, joy and vibrancy in this process. Muller (1992) talks about moving
past the explanations. Instead of saying “I hurt because my mother was cold and
insensitive and never showed me love”, we can simply say “I hurt,” and then experience
that hurt. In this process we experience the rest of our life with our hurt -- joy, passion,
creativity-- and we are no longer locked in the dysfunctional struggle of avoiding our
pain. This is the process of maturation, “the transcendence from environmental support to self-support” (Perls, 1969, p. 30). If we are able to experience our lives in the moment, our happiness no longer depends on someone else’s behavior. Both BMGIM and Gestalt therapy facilitate the client’s ability to move fully into the experience of the present moment. Awareness is expanded in such a way that taking responsibility for one’s state of being happens naturally. Awareness is facilitated by the BMGIM and Gestalt therapist’s ability to remain open and present, along with the client’s ability to remain open and present. When this happens, healing is a part of the natural course of events.

The cases chosen for illustration are those of two adult females. Both fit well within the population for which Bonny recommends GIM. Both women are well motivated, are dealing with issues around individuation, interpersonal relations, and self-image. Both have had previous therapy and have established spiritual practices. One client, Melody worked with me for BMGIM sessions while seeing another therapist. Teri worked with me for several sessions before her first BMGIM session, and my approach had been essentially Gestalt therapy with the use of some Hakomi methods. The theoretical basis held for each of these sessions was- humanistic- client centered, Gestalt, and transpersonal. Essentially this means that clients are met with unconditional positive regard in the context of their own unique life experience (Monte, 1999), and that an intention of keeping the Gestalt principles mentioned above is held along with the intention to meet and be with whatever arises in the moment. Bruscia (2002a) warns against adhering to one orientation for all clients for the entire GIM process. He suggests
following Wilber’s guidelines, matching therapeutic approaches with whatever developmental/evolutionary stage a particular problem originated.

There are some matters of definition to consider when discussing this topic.

Transpersonal psychology is not a particular orientation but broader:

A therapist may use an approach that is informed by behavioral, psychoanalytic, or humanistic orientation (ideally a therapist is open to all theoretical models, though in practice most therapists tend to favor one), but transpersonal therapy proceeds by no technique or formula. Transpersonal therapy lies not in what the therapist says or does, but in the silent frame that operates behind the therapist’s actions, informing and giving meaning to specific interventions. It is thus a wider container, which can hold all other orientations within it. (Cortright, 1997, pp. 15-16)

The guiding approaches developed for the music-listening portion of a GIM session are consistent with a humanistic orientation (Bruscia, 2002b). BMGIM can always be considered transpersonal in the realm of process because it involves entering into altered states of consciousness, and was developed with the belief that entering into altered states of consciousness can facilitate healing (Vaughan, 1979; Cortright, 1997; Bonny 1978b).

Vaughan drew a distinction between transpersonal context, content and process. In his view transpersonal content is the experience that may emerge during a psychotherapy session. Transpersonal context consists of the beliefs, attitude and container held by the therapist. Transpersonal process is the actual technique used by the therapist, such as GIM, Hakomi, Holotropic Breathwork, or Meditation (Vaughan, 1979). Vaughan’s concept of content, context and process can be applied to all the orientations mentioned by Bruscia in the preceding paragraph. A facilitator can hold the humanistic contextual belief in the healing power of unconditional positive regard and still find it necessary to
work on self-destructive cognitions held by client. This would mean that a therapist could hold a humanistic context mixed with cognitive behavioral therapy content and process.

An example of this is in my client Teri’s fifth session. She was given an assignment to experiment with new behaviors of assertiveness at home and work. This assignment falls into the realm of cognitive behavioral therapy. What led to this experiment was an awareness resulting from the two of us observing what arises and holding what arose together. This is a mindfulness practice, which can fall under the definition of transpersonal or humanistic. My trust and openness to whatever arises provided a therapeutic container that Teri felt safe enough to enter into, which can be viewed as both humanistic and transpersonal context. The use of the term ‘context’ in this way implies holding your seat as a therapist and as a human no matter what unfolds or emerges during the session. By remaining present the guide or therapist can work with what arises in the session’s field of awareness. The relationship with the client, facilitated by the therapist’s presence, is more important for growth or positive change than orientation or technique. The relationship attitude held by the therapist in both cases in this paper is the one defined by Gestalt therapy, one based on present centered awareness and trust in organismic self-regulation.

Case Material

Teri, a female in her late thirties, was transferred to me from a previous therapist. She has a history of bulimia and some alcohol abuse, both of which she managed to overcome on her own. She initially presented with problems setting boundaries in interpersonal relationships in both her personal and business life. Teri felt as if she was
allowing her boyfriend and work colleagues to walk all over her and ignore her needs. She attributed this behavior to growing up with a mother who controlled every aspect of her life. Teri remembered having to constantly run errands for her mother and could see that she was repeating this pattern in current relationships. She expressed frustration with herself in the way she related to people. She felt she should be more assertive with her work colleagues and not be a “gofer” for her boyfriend when they worked on projects together. As a Gestalt therapist I wanted to know who this was in front of me, and what she wanted, not what I could fix. My initial sense was that Teri was timid about asserting herself in the world and reacted to her timidity with self-aggression. My immediate agenda was to establish a relationship of mutual respect with Teri, where she felt safe enough to explore who she was and how she related to herself. This exploration was facilitated by remaining present and aware while in relationship to another human being, who was meeting all of Teri’s humanity with deep respect.

The approach taken in session two was to reflect to Teri my observation of the conflict between the Teri that appeases and the Teri that wants to set clearer boundaries. I proposed an experimental dialogue between these two aspects of Teri that were in conflict. Intense self-aggression surfaced in this experiment. The boundary setter accused the appeaser of ruining her life, of making her afraid of everything and everyone, or “turning her into a doormat,” and said that she “hated her” (the appeaser) and wished that she would just get out of the way and let her get on with her life. The appeaser accused the boundary setter of being unrealistic, saying it was not easy to set limits, and that it was preferable to give in rather than to have to deal with conflict. There was no clear path
to resolving this conflict by the end of the second session. Teri was able to recognize and
sit with the frustration she felt towards herself for putting others’ needs before her own.
This experiment led to an uncomfortable self-awareness for both of us. My trust in the
principles of the I-Thou relationship, and organismic self-regulation were being tested.
The aggressor in me wanted to fix her, because Teri’s frustration felt uncomfortable. I
was able to sit with my own discomfort. This is an example of how Gestalt therapy can
be like meditation between two people. Each of us observing what arises in the field of
awareness and holding it together. My trust that awareness eventually leads to healing,
authenticity, and wholeness helped me to sit with my own discomfort around Teri’s
discomfort.

During the course of the next couple of sessions Teri had a major confrontation
with her boss. This confrontation, along with the internal conflict uncovered in the
second session, began to reveal layers of self-criticism and unyielding perfectionism. Her
perfectionism made it difficult for her to acknowledge any progress made in her personal
growth because she could always find something else wrong. The therapeutic approach
taken here was to help Teri remain present and mindful of her experience by focusing her
attention on the mind-body connection. Questions like, “How do you know you need to
be perfect?” eventually led to Teri exploring how perfectionism and self-criticism are
experienced somatically. By staying present with this process Teri was able to uncover
“core material” around the feeling of not being welcomed and not belonging in this life.
Teri’s inability to assert herself in the world led right back to a core belief that she did not
belong here in this life. How could she assert herself where she did not belong? In this
light it made sense that Teri was drawn to behaviors that encouraged hiding, drinking in private, and purging. If one doesn’t belong somewhere, the natural tendency is to hide.

During the weeks of the fourth and fifth sessions Teri grew increasingly frustrated with her submissiveness. She recalled a time when she almost entered into a marriage simply because she was unable to tell the man who proposed to her, “no.” She was becoming more and more aware of her submissiveness in her relationship with her current boyfriend and her current business relationships. By staying with this awareness without an agenda on my part Teri was eventually able to recognize some of her more positive characteristics that arose out of her core material, that she was able to compromise in situations of conflict, and was often a peacemaker. In the fifth session Teri was encouraged to experiment with being more assertive at home and work. She began by asking her boyfriend to bring her things - drinks from the refrigerator, books, her jacket from inside the house - the type of favors she granted her boyfriend that made her feel overly submissive. By the sixth session her behavioral changes at work were more apparent. When conflict arose with her boss she was able to assert herself in ways that led to structural changes in the work environment, which were viewed as positive by both her peers and her manager. Teri was finding that her attitude toward herself was beginning to soften. Her need for perfectionism had begun to diminish. Teri was reorganizing her way of being in the world. By bringing awareness to core material about not belonging in this life, Teri was beginning to recognize how she belonged. It was becoming less necessary to compensate with perfectionism and self-aggression.
In the eighth session Teri talked about how she was integrating her progress in therapy. She was feeling more confident, she was better able to communicate feelings, was taking better care of herself physically, she felt much closer to her boyfriend, and they were beginning to talk about marriage. Her peers at work viewed her as a leader now. Her perfectionism had not gone away but had taken a much less prominent role in her life. Teri was still operating with the same belief system about herself and the world. She had just become friendlier to herself and more accepting of the world. In this session we discussed exploring the Bonny Method of Guided imagery and music in therapy, and decided to try BMGIM in the next session. We both felt that Teri was moving to a different stage in therapy, that her goal of being able to set more healthy boundaries had pretty much been met. I felt that the present centered work that Teri had done in previous sessions had prepared her for the possible intensity of altered states of consciousness that occur within a BMGIM session.

The music programs used in the following BMGIM sessions are listed in the appendix.

The music chosen for the first BMGIM session, which took place in her tenth session, was the Relationships-M Program (Bruscia, 1996). Teri’s first imagery experience was mostly somatic: feelings of floating, feeling the music in her body, “all around me, coming up from behind me.” She experienced electric-like jolts appearing randomly in different parts of her body and a rather intense back pain that she would later reveal was connected both emotionally and physically to a climbing accident. When
chimes appeared in the Respighi piece, Teri associated them with church bells and opened up to strong feelings of grief. She imagined herself at a funeral.

In the next session Teri associated the back pain and the grief from the previous imagery session with a rock-climbing incident where she fell and hit her head and back. This incident led to her feeling abandoned by her two roommate friends. She said, “they were not there for me when I needed them the most.” Teri felt that she was holding the emotions from this incident in the place where her back was injured, just behind the kidneys. By stepping into the music, and therefore into the moment, she was releasing what her body had been holding onto, and subsequently, the back pain that she had been experiencing decreased.

Teri experienced her second BMGIM session in her 13th session with me. The music chosen for this session was the Imagery-M program (Bruscia, 1996). Her imagery during this session was almost entirely somatic. During the Mendelssohn piece she experienced a crushing weight on her chest and heart, and she associated this feeling with grief. During the Suk Serenade she experienced her body wanting to tighten up. When she inquired as to why, the response she heard from her body was, “I have to protect my heart.” Teri was beginning to recognize how she was holding grief in her body. The nature of this I-Thou relationship facilitated her having this awareness with compassion for herself. Her realization about protecting her heart came as discernment as opposed to a judgment.

Teri experienced her third BMGIM session in our next meeting. The music chosen for this session was the Creativity I-R/M program (Bruscia, 1996). Teri had a
broader sensory experience during this session. During the Sibelius Symphony she reported, “When I listen to the music my head gets all tingly.” Then she reported images of old friends she would soon visit during the Christmas holidays. This image triggered “painful memories from high school.” She then reported feeling the music in her eyeballs. When the Vaughan Williams piece began, she experienced a pain in her back and side that she had associated during a previous session with her climbing accident and grief. As she moved closer to the pain she said, “It seems alright.” She then saw a “bright crystal light” and her arms started feeling “all tingly”. Shortly afterwards she reported feeling “relaxed,” “tingly,” a faint ache in her side, and then said, “I don’t want to feel past pain any more.” After a long pause without speaking, her face relaxed and she said “I’m moving on, growing up and changing.” She then moved through a series of memories, then body sensations, and then she reported a warm feeling in her chest and said, “I feel love.”

In the next session Teri talked about being happy with life now. She felt closer than ever to her boyfriend. She had come to terms with the relationship conflict that arose around her accident. She was feeling physically better, more confident, more connected to her body. In just a few months Teri had developed compassion for herself, found the world to be more welcoming to her, and found the strength and confidence within herself to set healthy boundaries with those around her. This process happened organically, through self-awareness and acceptance, facilitated by the I-Thou relationship we established with one another and the safe container provided by the BMGIM process.
Melody, my second case study, is a female in her early thirties. She expressed an interest in BMGIM for reasons of personal growth. Some of the intentions she set for the first few sessions were, “I want to be more conscious,” “to accept my emotions without resistance,” and “to make friends with my inner critic.” Melody is both an accomplished musician and was working on a Master’s degree in psychology when she began exploring the Bonny method. Her presenting goals told me she was probably an ideal candidate for BMGIM; she was wanting to step into and embrace all of life, and was curious about how she was obstructing herself. She was also experienced in both spiritual and psychological exploration, and therefore could probably handle the intensity of BMGIM.

The music chosen for the first session was the Relationships-M program (Bruscia, 1996). When the program opened up she found herself lying in a field in the dark with an ex-lover. She was feeling happy but “out of balance, leaning to the right… weird.” When she looked into the face of her ex-lover she felt sadness. As Rachmaninoff’s Symphony unfolded Melody found herself sitting in a “fancy,” full auditorium observing a “full orchestra with dancers in front in period costumes.” She then began writing a ballet in her head. “Two lovers meet in a forest. They are meeting in secret. Another man, the woman’s husband being cheated on, appears. A fight ensues, and the husband is murdered. Very dramatic! … The ballerina is very upset that her lover killed her husband. The ballerina is dressed in a cream colored silk medieval costume, lose-fitting for dancing. Lots of curly hair. The audience is on the edge of their seats, watching, totally involved. The lover throws the dead body in a river. They try to go on with their lives but can’t come to terms with the guilt. The ballerina goes insane and the lover throws himself
into the river. I’m totally seeing this!” During the two Respighi pieces Melody found herself back in the field. It was now daylight, warm, the grass was soft and she felt content. She was feeling very “still” when she suddenly felt an urge to move her arms and legs. In post session discussion she reported feeling confused about the sudden urge to move.

The music chosen for session three was the Transitions M Program (Bruscia, 1996). During the Brahms Symphony Melody found herself in a medieval village in the French countryside watching a little girl walking down a cobblestone street. She said “I’m not sure if it’s me or not.” During the Beethoven she described the girl as “walking along, daydreaming, life is not serious, a peasant, not a lot of money, not poverty stricken, twirling around, maybe in love, maybe happy.” She came to a locked gate at the edge of the village and saw a long winding road leading away from the village. This “jolts” the girl out of her daydream. Melody said she wanted to help her find a way out but could not. “There are no guards. If she found a way out she’d be scot free.” A parade drew the girl back toward the center of town where she found a blacksmith shop. She entered the shop searching for a key to the gate and found a “giant key.” The girl did not know how to get away with it. “It’s big and greasy, nowhere to hide it, and she’s wearing a white dress.” As the Brahms Piano Concerto began she wrapped the key in rags so no one could see what it was, then walked down the street thinking where she might hide it. The girl counted off 20 paces from a tree to bury the key. “Very dramatic hiding the key.” The girl then felt scared and happy. “Now she’s like, ‘Oh I have to tell someone
my secret. Who can I tell’?” Melody began to analyze her image at this point. “The girl must be me. Why can’t I trust such an important thing? Pretty lonely place.”

The music chosen for session four was the Creativity II program (Bruscia, 1996). Melody found herself watching the little girl once again at the edge of the village. This time she managed to jump the gate, and felt terrified as she got to the other side. The little girl walked along the road, afraid that the villagers will miss her and come looking for her. She knew she had to find food and shelter. She wished she could find a horse to get away faster. Melody asked, “Why can’t I manifest a horse?” As the Vaughan Williams piece began she reported feeling anxious for the little girl. The little girl doubted herself because she had “no good survival skills… She knows she needs to find someone to trust, the right person. How will she find?” The girl walks for quite some distance along the edge of a forest and finally spotted a village about two hours walk in the distance. “She gets an idea, hang out on the edge of the forest and wait for nightfall.” When the Mendelssohn Symphony began a “Gypsy caravan comes by on the road, playing music, happy, joyful drinking from jugs.” She wanted to find a way to join them but could not. She began walking towards the town, “very curious about those people.” The little girl then crossed a bridge and comes upon “a stone house, with a fire and candle light. She’s hyper vigilant” wondering, “Is there a creepy caretaker? From what fairy tale? Don’t want to get sucked into a trap.” She looked in a window and sees, “an old man sitting at a wooden table writing. It’s plain in there, nothing comfortable, basic stuff. She knows he would help, but there would be a price to pay if she accepts help. Could be a trap. She doesn’t know what she’d have to do to escape.” As the Faure Pavane began “she kind of
thinks, ‘what the hell, get food and rest, worry tomorrow.’ My peasant girl is sarcastic, not as innocent as last week.” The girl pondered for a while if she should go into the house or not. Then Melody said, “Oh I get it! Choice point, like an allegory. She can’t go in the guy’s house. Has to take her chance with the village.” The little girl eventually entered the town and began to wonder, “What will people think when they meet her? What’s a girl doing traveling alone? Doesn’t want people to think she’s a beggar, which she’s not. Doesn’t know what to do. What if people think she’s a prostitute? Scary men could take advantage of her. Why didn’t she think of this before?” She continued to check out the perimeter, “thinking I’ve got to find the right person”.

Session five took place after a two-month break. The music chosen was the Emotional Expression II program (Bruscia, 1996). As the imagery opened, Melody found herself standing at a fence that went a long way into a wooded area, “in a pasture, nothing else around, giant trees. I am wondering, whose fence is this? Where am I? How did I get here? I know this fence belongs to someone important. No animals. I imagine cows or goats or horses. Would like a horse…Nobody around. Not sure where I came from.” As the Shostakovich Symphony began she said, “There’s nothing, no houses, animals… confusing! Is it real? A movie set? A joke? No path leading to where I was. Like I was just dropped in there.” Melody then began to separate herself from the image once again, and related to her imagery as though it were a story about to unfold. I then encouraged her to role-play and be the character in the image. Melody replied, “It’s difficult to be this character. I can see more from a distance… I can see something coming. It’s safer from a distance, is a more desired perspective.” As she moved more fully into the character she
“I feel like there’s something holding me down, like I’m stuck, like I’m asleep… Feeling like everything is big. I’ve lost all sense of control. I’m not scared. I have no physical sensations, but in my hands. I don’t like it… I’m not willing to move. Frustrating! I don’t want to draw attention to myself.” Melody began to get a double perspective, from inside and outside the character. “The girl is small, shorter than the fence, like Alice in wonderland. The child, or something, is not right about sizing. The fence is too big or the child is too small… someone is trying to scare me with all this scary music. The child is thinking this. Play all the scary music you want. I’m not going anywhere till I get bigger… I’m not going to give in. I’m not sure if the other person’s going to give in. Forced me to be in a child’s body. If I back up an area view, I’m safe at a distance. In girl’s body I can look up. With area view I can look only down. I can’t see a big bird coming. Didn’t have all bases covered. Didn’t realize till I came back out. Maybe I can take turns. I realize this little girl doesn’t want to look around for danger. She wants to have fun, skip by the fence, pretend she’s a guard marching.”

The music chosen for session six was the Searching program (Bruscia, 1996). She set an intention “to be brave and go there and explore the boundaries of responsibility”. Melody remained herself within the imagery. During the Liadov piece she found herself alone at night in a warm pool, a wolf was near, sitting on the rocks. She remarked, “Strange, I would never do that, too modest. I’m all alone. I would never do this, alone, standing in deep water, at night, naked… all OK.” She spent this entire session in this pool with a large deer on one end and a wolf on the other, no-one feeling threatened by the other. The session ended with her at the edge of the pool leaning on her elbows,
staring into the wolf’s eyes, “feeling warmth. He’s looking at me, no expectations or anything.”

The music chosen for session seven was the Mostly Bach program (Bruscia, 1996). Melody moved back and forth between the role of active participant and observer within the imagery. The setting for this imagery was a “fairy tale” like castle. She found herself in court before the king and queen, who sentenced her to the dungeon. Melody came upon an interesting revelation about her relationship to music during the Bach Concerto for Two Violins; “I’m listening to the violin, wishing I could play like that… feel the violin inside my heart, dungeon doesn’t seem so bad with violin. One of the guards is playing for her. She’s listening and smiling. She feels her whole body. She’s swaying and moving…It feels separate from what was going on before.”

Until this point, Melody had played the role of an observer in her imagery. In the first session she was observing herself as actors on the stage. In the next five sessions she observed herself as a little girl, not quite ready to step into an adult world. In session three, the “key” to this outside world was at the center of town, her Self. The key was too big and dirty for a little girl to be handling and she found it necessary to hide it right away. In session four she managed to go out into the world, still as a little girl, “with no survival skills”. In the observer role Melody began to discover some aspects of herself, she was drawn to the passion and wildness of the Gypsies. She discovered a cynicism within herself, “My peasant girl is sarcastic, not as innocent as last week.” In session five Melody was given the directive to role-play the character in the image. She discovered that being disconnected from her body provided only an illusion of safety, that she “didn’t
have all bases covered.” Session six ended with her in a pool, nude---I interpret this as deep in the subconscious, exposed and open---staring into the eyes of a wolf; a wolf can represent many aspects of her, but in this context it was clear that the most salient aspect was that of animal, embodiment. By session eight, Melody had stepped fully into her body within the imagery. The music chosen for this session was the Searching program (Bruscia, 1996). The imagery opened with Melody “waking up in a grassy foresty area, lush, colorful, like magic fairy land, colorful, grass is so soft.” Later she saw “dust particles, not sure if they’re fairies or dust, fluttery, twinkley, glittery. Feel conflict between wanting them to be fairies or dust. … I’m me but not me. I don’t look like me. I have long curly hair. I’m that young girl.” During the Vaughan Williams piece she found herself “in darkness…running around trying to find light, looking under rocks.” As Holst’s Venus began, “I’m following a river to find light.” She found energy and began to run, “feels good/ strong.” As Holst’s Neptune begins “a horse puts his face in water right in front of her. They’re staring at each other. His eyes are soft and gentle, nose is soft. She wants to touch it. Holds her hand out. The horse moves toward her hand…she wants the horse to be hers. She doesn’t want to own, just follow her. She needs to ask the horse if he wants to come with her. Afraid he won’t. She’s very attached…She said ‘come on.’ He does.”

In the beginning of session nine, Melody discussed her progress in BMGIM. “I feel like I lost myself and now I got it back. GIM was my first transpersonal experience. It opened the door to seeing magic.” The music chosen for the ninth session was the Peak Experience-M program (Bruscia, 1996). Melody symbolically came full circle in session
nine. In session one she found herself in an auditorium watching a drama unfold on stage. In the ninth session she ended up on stage performing and could see the empty seat where she once was. She was now a full participant on the stage of life. She got here, not through a therapist’s interpretation or analysis, but through her own volition, by testing the waters little-by-little. Life was centered in the present, that is the only place we can enter it.

Conclusion

The way BMGIM is practiced during the music listening portion of a session fits into the definition of Gestalt therapy as put forth by Clarkson (1989). The therapist, or guide, trusts in the traveler’s own innate tendency toward wholeness. He or she also enters fully into the present moment within the music and imagery along with the traveler, and recognizes the uniqueness of the traveler’s reality, withholding judgment and interpretation in that moment. The deep human relationship, with full awareness of the moment, supported by the holding container of the music provides opportunities for healing and growth. The music listening portion of BMGIM is not only compatible with Gestalt therapy; it is Gestalt therapy. One can move into this work with different orientations, and certainly practice those orientations in postlude and prelude, however, understanding the Gestalt therapy nature of the music listening portion of BMGIM can inform the therapist on how to hold his or her seat during a session. I practice BMGIM with a Gestalt therapy approach during the entire session, which limits my practice to those for this approach is appropriate (Bruscia, 2002a). This approach enables clients to take full responsibility for their own healing.
In both cases discussed here the clients were able to find their own way to healing with few directives from the therapist. The intention of operating within the three defining principles of Gestalt therapy listed by Clarkson (1989); the methodology of awareness, I-Thou relationship, and holism were adhered to. The non-directive humanistic approach was the primary context for these sessions, however; important exceptions were made. Teri was encouraged to engage in psychodrama experiments and given behavioral take-home assignments. In Melody’s case an exception to the non-directive approach was in session five when she was given the directive to step into the character. Melody then developed a significant negative transference with both the music and the therapist within the imagery at this point: “I feel like there’s something holding me down, like I’m stuck, like I’m asleep…feeling like everything is big. I’ve lost all sense of control…The child is thinking ‘Play all the scary music you want I’m not going anywhere till I get bigger. I’m not going to give in. I’m not sure if the other person’s going to give in. Forced me to be in a child’s body.’” At this point I doubted my own decision to give this directive even though this was the fifth session that Melody was in the role of observer. Melody was fishing for permission to step back into the observer role, because of the intensity of the emotions in the imagery. If she were given this permission it would have encouraged her to relinquish far too much control to the therapist. My decision was to allow her to sit with the feeling of fear within the imagery and the feeling of betrayal toward the therapist for encouraging her to go there, trusting her own ability to find her way. This led to the realization that not being fully present
gave her only a false sense of security. “With area view I can only look down. I can’t see a bird coming. Didn’t have all bases covered.”

Melody’s imagery was especially open to Jungian interpretation. Her journeys were rich with fairy tale and archetypal images, having to go to the blacksmith to find the key, the innocent little girl with long curly hair dressed in white, the care taker in the stone house offering help that could be a trap, the wolf, etc. We could have spent many hours together analyzing the meaning of these images for her. We usually only spent a brief amount of time in pre and post session discussing what was salient for her and how she was experiencing the imagery in a wakeful state. This method allowed Melody to tap into her own inner strength both within the imagery and in a wakeful state. At the end of session five Melody discovered some of the advantages of staying present. As the imagery closed in session six Melody found herself naked, on the edge of a deep pond, alone at night, leaning on her elbows staring a wolf in the eyes. Melody clearly found her own way into her own body.

In Teri’s third session she moved closer to her pain and discovered a “bright crystal light”, then began to feel “all tingly”; suggestive of a possible slight kundalini opening. Then she said “I don’t want to feel pain anymore.” After a long pause without speaking, her face relaxed and she said, “I’m moving on, growing up and changing” This was happening in that moment. She then moved through a series of memories then body sensations, and then she reported a warm feeling in her chest and said, “I feel love.” There was no room for interpretation here. Teri found what she needed within herself.
Appendix

The music programs

The source of information for all the following programs is *Music for the imagination* (Bruscia 1996). Information about authorship about each individual program is contained within that source.

Creativity I-R/M Program:

1. Sibelius: 2nd Symphony (1st Movement)
2. Vaughan Williams: In Fen Country
3. Delius: La Calinda
4. Kallinikov: 2nd Symphony (Andante)
5. Bizet: Intermezzo from Carmen

Creativity II program:

1. D’Indy: Symphony on a French Mountain Air (1st Movement)
2. Vaughan Williams: Norfolk Rhapsody
3. Mendelssohn: 3rd Symphony (Vivace)
4. Faure: Pavane
5. Ravel: Daphne & Chloe Suite #2 (Excerpt)

Emotional Expression II:

1. Menotti: Piano Concerto in F (2nd Movement)
2. Shostakovich: 5th Symphony (Moderato excerpt and Largo)
3. Mendelssohn: 3rd Symphony (Vivace non troppo)

Imagery-M Program:

1. Ravel: Introduction and Allegro
2. Copland: Appalachian Springs Excerpt
3. Tschaikovsky 4th Symphony (Scherzo)
4. Mendelssohn: 5th Symphony (Andante)
5. Suk: Serenade in E (Adagio)

Mostly Bach Program:
1. Bach: Passacaglia and Fugue in C minor
2. Bach: “Komm susser Tod”
3. Bach: “Mein Jesu”
4. Bach: Fugue in G minor (Little Fugue)
5. Brahms: Violin Concerto (Adagio)
6. Bach: Concerto for 2 Violins (Largo)

Relationships-M Program:

1. Chopin: 1st Piano Concerto (Romance)
2. Rachmaninoff: 2nd Symphony (Adagio)
3. Respighi: Fountains of Rome (Villa Medici)
4. Respighi: Fountains of Rome (Valle Giulia)

Peak Experience-M Program:

1. Beethoven: 5th Piano Concerto (2nd Movement)
2. Vivaldi: Gloria (Et in Terra Pax)
3. Bach: Brandenburg Concerto #6 (adagio ma non tanto)
4. Faure: Requiem (In Paradisum)
5. Wagner: Lohengrin (Prelude to act 1)

Searching Program:

1. Liadov: Enchanted Lake
2. Vaughan Williams: 2nd Symphony (Adagio)
3. Holst: The Planets (Venus)
4. Holst: The Planets (Mars)
5. Grieg: Cradle Song

Transitions-M Program:

1. Borodin: 1st Symphony (Andante)
2. Brahms: 3rd Symphony (POCO Allegretto)
3. Beethoven: 9th Symphony (Adagio Molto)
4. Brahms: 2nd Piano Concerto (Andante)
References


