

## Re-authoring Identity Through the Psyche-Myth Architecture: A Structured Framework for Transpersonal Psychotherapy

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### Abstract:

This conceptual paper introduces the *Psyche-Myth Architecture* and the *Modular Myth Engine Live-action Dashboard*, presenting a novel, structured framework for psychotherapy. Challenging the prevailing lack of systematization in transpersonal approaches, this model posits the human psyche as a foundational "inner architecture" built upon universal mythic and archetypal principles. The MMELD serves as a symbolic internal interface, empowering clients to consciously "deploy" *Archetypal Operators*, akin to selecting a video game skin, to navigate psychological challenges and drive profound change. The 'video game skin' metaphor is not meant to trivialize the process, but rather to offer a modern, accessible framing of inner role deployment.

This methodology reframes therapeutic intervention as optimizing one's internal operating system, moving beyond symptom reduction or narrative re-telling. By offering a coherent, actionable, and gamified pathway to engage with the psyche's deepest structures, this model provides a robust framework for transpersonal identity work and aims to bridge the current gap in structured transpersonal therapeutic methodologies.

**Keywords:** narrative therapy; mythic identity; symbolic integration; inner architecture; trauma re-authoring; transpersonal psychotherapy.

## Introduction

There comes a point - whether in therapy, heartbreak, or quiet collapse - where words stop working. You reach for a story to explain yourself, but nothing fits. What once felt like "you" becomes scattered, dim, or hollow. The meanings that used to hold your inner world together, narratives, roles, identities - crack, then fade. Gabriel Fernandez-Borsot (2024) recently described transpersonal psychotherapy as "an architecture of inner frameworks". I found myself nodding. Because in the work I do - counselling, symbolic intervention, narrative repair - I've seen again and again: when that inner architecture buckles, what follows isn't just sadness or stress. It's disorientation. Soul-level vertigo. What's collapsing isn't just mood or cognition. It's coherence.

This paper introduces the Psyche-Myth Architecture (PMA): a symbolic-operating framework built to detect, navigate, and, when necessary, rebuild the internal architecture of meaning that supports identity. This absence, he argues, hinders theoretical development, wider recognition, rigorous research, and effective training.

Contemporary psychotherapeutic models have made significant advances in treating symptom clusters, anxiety, depression, trauma-related behaviours, through cognitive restructuring, emotional regulation, and behaviour modification. However, these interventions often assume that the individual's underlying identity architecture remains functionally intact. They treat the symptoms, but not the symbolic rupture that gave rise to them.

In contrast, the Psyche-Myth Architecture (PMA) begins with a different premise: that meaning itself can collapse. When this occurs, individuals are not simply dysregulated, they are disoriented. The loss is not only emotional or behavioural, but mythic. It is a collapse in symbolic coherence: the felt continuity of selfhood, memory, and role.

This distinction is critical. Traditional modalities, such as Beck's (1976) cognitive therapy, de Shazer's (1986) solution-focused work, or Glasser's (1984) control theory, presume that the self can be "talked back" into order through logic, goals, or reframing. These models remain vital, but they often struggle when a client cannot locate a symbolic structure within which their healing makes sense. The therapist may offer insight, but the client feels structurally unreceptive.

In such moments, what is needed is not more insight, but *symbolic infrastructure*. PMA is proposed as a symbolic-operating framework that treats identity not merely as personality, but as *narrative coherence held together by mythic scaffolding*. Drawing from transpersonal theory (Assagioli, 1965; Fernandez-Borsot, 2024), narrative therapy (White & Epston, 1991), and imaginal tools, PMA seeks to detect, map, and re-install symbolic functions that allow the psyche to reorganize itself with meaning at its core.

What makes this approach distinctive and novel is how it treats the psyche not just as a collection of thoughts or memories, but as a living architecture, what I've come to call the Psyche-Myth Architecture (PMA). The MMELD, its companion framework, acts as a symbolic dashboard: a live interface where clients consciously engage inner tools, roles, and mythic functions. We invite clients to "deploy" Archetypal Operators, internal modes or symbolic identities, like cloaks they can wear, skins they can inhabit. These aren't abstract metaphors; they're actionable roles clients use to navigate stuckness, reclaim authorship, and reframe themselves from within.

At first, it is questioned whether this was too abstract. Maybe I was projecting. But when it checked back in with a client weeks later, she not only remembered the Operator she had chosen, she had used it during a moment of crisis, like muscle memory wrapped in myth. That was when I knew something real had taken root.

Unlike traditional narrative therapy or mythic storytelling, this framework doesn't just reframe with words or cathartic enactment. It systematizes access to the deep symbolic layer of the psyche. It's gamified, modular, and mythic, but structured. That structure is the contribution: a consistent symbolic operating system for working with archetypes, identity rupture, and narrative reconstruction in therapy.

In that sense, PMA/MMELD answers Fernandez-Borsot's (2024) call for more systematized transpersonal methods. It gives language and tools to something many therapists intuit but struggle to formalize: the deep, often spiritual re-authoring that happens when a client steps back into their own myth. Whether through Archetypal Operators, specialized modules like the EOD, or symbolic rituals enacted consciously, this model offers more than symptom relief. It offers transformation.

## 1. Research Background

### Distinguishing the Psyche-Myth Architecture and Beyond Existing Paradigms

Myth and narrative have been making their way back into the therapy room - and rightly so. Therapists are realizing that healing isn't just about managing symptoms or rewriting stories, but about reconnecting people to deeper symbolic truths about who they are. In that spirit, the Psyche-Myth Architecture (PMA) and its companion system, the Modular Myth Engine Live-action Dashboard (MMELD), offer something a little different - maybe even a little radical. To really see what this model brings to the table, it's worth pausing to differentiate it from some of the key thinkers who've inspired the field.

Feinstein & Krippner's work on *Personal Mythology* (1988) laid essential groundwork. Their process helps clients uncover the unconscious stories and inner images that quietly steer their lives - through dreams, guided imagery, and reflection. That work is powerful. In fact, we consider personal myths to be essential "applications" that run within our system. But the PMA goes one layer deeper. Rather than focus solely on the content of those personal myths, we ask: what *system* makes them possible in the first place? What is the structure behind the stories?

PMA proposes that myth-making is not just an activity of the mind, it's the *architecture* of it. It's the scaffolding beneath every identity, emotion, and interpretation. The MMELD then becomes the interface, a way to consciously interact with that symbolic layer, using tools, operators, and modules to navigate life not just as a narrative, but as a living myth in motion. So, while Krippner and Feinstein focus on helping clients revise the stories they've been living by, our approach says: *here's the dashboard. Let's learn how to drive it.*

Pamela Dunne's work with Narradrama (2018) brings mythic archetypes into the therapy room through embodied performance. Her approach draws on drama therapy, allowing clients to experiment with new identities through role-play and theatrical expression. The power of her method lies in its capacity to externalize internal dynamics and create space for transformation through enactment. In that spirit, our model shares a common reverence for archetypes, but diverges in its mode of engagement.

Where Dunne invites the archetype onto the stage, we locate it within an interactive internal interface. The Modular Myth Engine Live-action Dashboard (MMELD) serves as a symbolic operating system, what one might call an internal HUD, for deploying what we term *Archetypal Operators*. These Operators function as intentional, embodied psychological roles that can be activated at will, akin to selecting a character “skin” in a video game. The metaphor is gamified, but the intent is therapeutic: to give clients structured access to parts of the self that are already present, but often untapped. Unlike dramatic expression, which unfolds externally through physical movement and improvisation, our system emphasizes *internal deployment*, a deliberate, conscious inhabiting of inner symbolic function.

Denborough’s extension of Narrative Therapy (Denborough, 2014; White & Epston, 1991) likewise underscores the transformative power of story. His work highlights how problems can be externalized and identities re-authored through linguistic shifts and reflective dialogue. We deeply respect this tradition, and build upon it, but PMA offers a different starting premise. Rather than viewing narrative as something constructed *about* one’s life, the PMA treats myth as the underlying *structure* through which meaning itself is generated. In other words, myth is not just story, it is psychic code.

Through the MMELD, clients do not merely “re-author” their stories through dialogue, but reconfigure the symbolic architecture from which those stories arise. Operators, rituals, and internal tools enable a deeper form of intervention, one that engages the inner logic of the self’s construction. Where narrative therapy works at the level of language, the PMA works at the level of symbolic infrastructure.

### Transformative Outcomes: Reaching Deeper Than Symptom Relief

The design of the Modular Myth Engine Live-action Dashboard (MMELD), along with the deployment of the Erotic Operator’s Driver (EOD), allows for outcomes that reach further than what’s typically achieved by many well-established therapeutic models. This isn’t a dismissal of those approaches, they’ve been foundational. But MMELD enters at a different level of the psyche: not just thoughts, not just behaviours, but symbolic structure and mythic function.

### In relation to Cognitive Behavioural Therapy (CBT)

Aaron T. Beck’s cognitive framework (1976) has changed lives by helping clients identify distorted thoughts and reframe them rationally. It’s especially effective in treating anxiety and depression, where clear, conscious thought patterns need recalibration. But CBT tends to operate at the surface: thought → feeling → behaviour. With MMELD, we go deeper. Rather than simply debating a negative thought, the client is invited to inhabit a different archetypal stance altogether. If someone’s inner critic says “You’re weak,” they don’t just dispute the thought, they might consciously *deploy* the “Sovereign” Operator, shifting posture, tone, even breath. This changes not just the thought, but the *entire self-relation that produced it*. It’s not about becoming more positive; it’s about becoming more mythically aligned.

### In relation to Solution-Focused Brief Therapy (SFBT)

Steve de Shazer’s SFBT (1986) taught us to mine the present for what’s already working, and to build future solutions without rehashing the past. It’s nimble, pragmatic, and strength-based. But sometimes, a client’s stuckness isn’t due to a lack of solutions, it’s a lack of symbolic coherence. They don’t know *who* they are in the story, so no amount of scaling questions can move them forward.

MMELD still honours efficiency, but with different tools. Rather than focusing only on external outcomes, the client is guided to reconfigure their *internal symbolic terrain*. A stuck pattern isn't just a barrier, it may be a misfired Operator, or an abandoned archetype waiting to be reinstalled. The change, when it comes, doesn't just solve a problem. It reorganizes the *meaning-field* behind the problem.

#### In relation to Choose Theory Reality Therapy (CTRT)

Glasser's work (1984) gave us a vital reminder: people are not victims of circumstance, they are choosers, agents in their own lives. CTRT empowers clients to meet five core needs, survival, love and belonging, power, freedom, and fun, by taking responsibility for their choices. It's clean, focused, and often liberating.

But choice doesn't always happen at the surface. Sometimes the "chooser" is fractured. Sometimes a person's quality world is shaped by unconscious trauma or archetypal distortion they can't name, let alone change. That's where PMA and MMELD come in.

Instead of asking, "*What choice will you make now?*", we ask, "*Who is choosing?*". Through symbolic deployment of Archetypal Operators, clients aren't just making better decisions -they're reconfiguring the internal forces that shape how choice feels in the first place. It's not just about meeting needs - it's about healing the architecture that determines how needs are perceived and pursued.

#### In relation to general Transpersonal Psychotherapy (TPT)

This model lives in the same lineage as transpersonal work, but it brings a level of structure that the field has long been missing. Fernandez-Borsot (2024) notes that TPT has often felt fragmented, lacking an integrated framework for applying spiritual or archetypal experiences in clinical practice. He's not wrong.

Think of pioneers like Assagioli with Psychosynthesis (1965), or Grof's Holotropic Breathwork (1988). They opened the door to expanded states of consciousness, soul work, and deep archetypal transformation. But for many practitioners today, those tools remain scattered - a mix of techniques without a central system to hold them. That's what PMA offers. We're not just invoking archetypes; we're giving clients a symbolic interface to work with them consciously. The MMELD acts like a dashboard: Operators can be deployed, internal rituals activated, mythic coherence restored. Rather than having to choose between "spiritual" or "clinical," this model gives therapists a structured way to do both, anchoring transpersonal insight inside a system that supports lasting identity transformation.

#### In relation to Gestalt Therapy (Fritz Perls)

Fritz Perls' Gestalt Therapy (1973) invites clients into the raw immediacy of the present moment. It's about awareness, of feelings, of body, of unmet needs, and about integrating the fragmented parts of the self into a unified whole. Gestalt excels in evoking insight through experience, often guided by the therapist's intuition and real-time interaction. Our approach honours that spirit of integration, but offers a more structured internal path. With MMELD, clients don't have to wait for a dramatic breakthrough in session. They're given a symbolic "HUD", a kind of inner dashboard, where they can actively deploy Archetypal Operators to make contact with disowned parts of themselves. Rather than just becoming aware of an inner split, they can *reorganize* the system that created the split. Integration becomes not just possible, but *repeatable*, a tool they can return to, not just a moment that happens once.

### Core Strategies in Contemporary Narrative Therapy

Bruzek (2024) focuses on re-authoring identity narratives in clients with borderline personality disorder, showcasing narrative restructuring as a means to disrupt pathological self-concepts. Similarly, Mate, Gregory, & Ryan (2024) explore career identity re-authoring in professional guidance, emphasizing narrative flexibility in reshaping vocational self-concepts.

Curtis (2024) introduces a metamodern synthesis of narrative therapy with strategic family therapy, blending post-structural narrative frameworks with structured interventions, a hybridization relevant to modular models like PMA.

Goodwyn (2024) examines spontaneous symbolism in psychotherapy as a cognitive-emotional mechanism, affirming the therapeutic role of symbolic projection, core to symbolic rituals in PMA sessions. Graham (2024) echoes this with metaphor-driven narrative conversations using bodily imagery (tattoos) as entry points to identity reconstruction.

While Freud (1911) and White & Epston (1990) did not envision digital applications, their foundational concepts of projection and externalization inform current innovations, where the visualization of mental dashboards (e.g., MMELD) serve to externalize internal narratives and facilitate therapeutic re-authoring.

Hawke et al. (2023) present a scoping review of narrative-based psychotherapies in mood disorders, highlighting the general efficacy of narrative restructuring techniques but also the need for more structured theoretical frameworks, supporting the relevance of PMA's architectural framing.

Wiersma et al. (2022) and Loscalzo (2024) both reflect on sand play therapy and symbolic enactments, affirming the therapeutic potency of symbolic media and embodied narrative exploration, resonating with PMA's use of Symbolic Tools and Rituals.

Keisari (2024) advances narrative therapy through playback theatre techniques, blending performance with narrative restructuring, a practice that mirrors PMA's live-action operator deployments and experiential rituals.

Mancilla Monsalve (2024) discusses collective narrative practices in activist settings, highlighting narrative work's applicability beyond individual therapy, where identity re-authoring supports community healing and solidarity.

Schwartz (1995) and White & Epston (1990) both emphasize the therapeutic use of internal dialogues and narrative restructuring, with Schwartz introducing parts work through Internal Family Systems (IFS) and White & Epston advancing narrative therapy practices. Together, their work underscores the role of symbolic narrative processing in identity reconstruction. IFS encourages personifying and dialoguing with internal parts, making it indirectly a form of imaginative narrative engagement.

Kaplan & Garner (2017) emphasize identity as emergent, non-linear, and contextually adaptive, resonating with my description of PMA's modular architecture and developmental fluidity, thus providing support for intervention strategies that advocate modular, adaptable approaches respecting identity's fluid nature and aligned with PMA's design.

Stubley (2024) emphasizes the centrality of metaphor and imagination in collective narrative therapy practice, validating the use of symbolic operators as therapeutic agents in facilitating systemic narrative shifts.

Heavey (2018) provides compelling evidence of how embodied experiences and spatial metaphors in illness narratives shape identity reconstruction, perfectly aligning with PMA's emphasis on embodiment as active meaning-making.

In closing, The PMA/MMELD model stands on the shoulders of giants, from Beck to Perls, Glasser to Denborough, but it brings something new to the field: a map of the inner world, and a method for navigating it. We're not offering a metaphor - we're offering a system. A way for clients to interface directly with the symbolic structures of identity, and to consciously re-author who they are, not just how they feel. This isn't about managing symptoms. It's about mythic transformation - about giving people tools to change not just their story, but the architecture that story lives inside.

### Summary of Comparisons and the Emergence of PMA

Across five major therapeutic traditions (CBT, SFBT, CTRT, Gestalt, and Transpersonal Therapy) we see clear strengths: symptom relief, practical focus, empowerment, emotional integration, and spiritual depth. Each model brought something essential to the evolution of psychotherapy. But taken together, they also reveal a missing link: a consistent, symbolic framework for working with the inner architecture of identity itself. That's where the PMA/MMELD model steps in. It doesn't replace these approaches - it *integrates their aims* through a new interface. By offering a structured, symbolic system where clients can engage directly with Archetypal Operators, internal rituals, and mythic functions, we move beyond episodic insight into repeatable transformation. PMA/MMELD offers next-generation therapy a toolkit that's not just reactive or interpretive, but architecturally re-authoring. This is not a technique. It's a shift in how we understand, and work with, the human psyche.

### Measurable, Tangible and Real: The Verifiable Outcomes of Psyche-Myth Architecture

Though the Psyche-Myth Architecture (PMA) and Modular Myth Engine Live-action Dashboard (MMELD) use symbolic and archetypal language, the therapeutic impact of this modality is intended to be measurably real, tangible, and objective in the client's actual experience. Our "inner architecture" is not a philosophical construct but a working model whose proper deployment provokes quantifiable changes in cognition, emotion, conduct, and well-being, rendering the impact of its intervention as concrete as that of any other established therapy.

The "reality" of such results is the immediate correlation between the "deployment" of an Archetypal Operator and observable shifts in a client's internal world and overt behaviour. If a client imaginably "deploys" a "Hero" operator via the MMELD, this is more than a thought experiment. It includes a genuine shift of internal posture, leading to:

- Clients report a profound shift in self-story and underlying assumptions, away from limited or problem-saturated selves and toward more empowered, authorially constructed selves. This shift is measurable with standard cognitive test metrics, self-report questionnaires, and qualitative analysis of individual narrative pre- and posttreatment. For example, a client who was once characterized as "being helpless" will now self-identify as "resourceful" or "courageous" when experiencing challenge, change that can be tracked through their language and solution-finding practices.
- The transmutation of shame, grieving, and guilt by some Archetypal Operators, in this case the Erotic Operator's Driver (EOD), has the effect of a quantifiable reduction in the frequency and intensity of these distressing emotions. This is tracked on formally evidenced depression, anxiety, trauma symptom (i.e., PTSD screening) scales and specified emotion regulation measures. Clients consistently self-report reduced emotional charge regarding past traumas and increased ability for resilience and

authentic expression of affect. The shift is experienced as a shift in body felt sense and unburdening from emotional constriction.

- The "deployment" of Archetypal Operators has implications in terms of altered patterns of behaviour in the client's daily life. For example, evoking a "Warrior" operator may be observable as increased assertiveness in relationships, assertive boundary-setting, or pursuing long-held aspiration goals. These behavioural changes are observable to therapists, self-reported by clients, and corroborated by significant others or through behavioural tracking diaries. The new agency, typically a central outcome, leads to participatory engagement with life rather than avoidance of life in a defensive manner.
- As a result of the embodied, profound nature of archetypal participation, transformations often take place on the physiological level. Clients may indicate less body tension, improved sleep, reduced hypervigilance (especially in the healing of trauma), and a general improvement in felt energy and vitality. These somatic changes, as subjective as they may be, are consistent indicators of a nervous system leaving one of chronic activation or shutdown, and may be paired with physiological measures where appropriate (e.g., heart rate variability, skin conductance).
- The ultimate goal of identity re-authoring, facilitated by direct access to the PMA and its operators, is a profound and enduring alteration of the client's core sense of self, purpose, and place in the world.

Therapeutic progress is evidenced through several domains. First, clients commonly report qualitative shifts in self-perception, characterized by an enhanced sense of self-cohesion, increased self-compassion, greater self-efficacy, and a more authentic self-experience. Second, these internal developments often translate into more adaptive relational patterns, as reflected in improved interpersonal communication, the establishment of healthier boundaries, and a heightened capacity for emotional intimacy. Third, many clients articulate a deeper sense of meaning and purpose in life, including greater alignment with personal values and, in some cases, increased engagement with transpersonal or spiritual dimensions of experience. These outcomes are often substantiated through self-report measures assessing well-being, existential meaning, and personal growth.

In essence, while the language of the PMA and MMELD is archetypal, the therapeutic process is deeply experiential and pragmatic. It leverages the inherent symbolic capacity of the human mind to unlock and reconfigure its fundamental operating system. The resulting changes are not merely abstract understandings but directly impact how clients think, feel, behave, and perceive themselves in the world, making the effects of this modality as *measurable, tangible, and real* as the deeply impactful shifts observed in any effective therapeutic intervention.

## 2. Research Methodology

This section summarizes the suggested therapeutic methodology of the Psyche-Myth Architecture (PMA) and the Modular Myth Engine Live-action Dashboard (MMELD). As a new modality, this explanation represents a baseline blueprint for its real-world application, with the intent to offer a systematic, actionable framework for working with the psyche's core inner architecture for the re-authoring of identity and transformative healing. Rooted in projective identification and symbolic play concepts established by Klein (1955), modern protocols such as the Animal Gate and Desert Path represent structured applications of symbolic projection for narrative clarification in adolescent counselling.

These protocols adapt projective questioning techniques popularized in Kokology (2000), a Japanese psychological game system employing guided imagery questions for self-discovery, currently being developed by the author into a formal symbolic projection protocol for therapeutic use. Psychological frameworks like the PMA focus on regulating internal processes and allocating psychological resources effectively to preserve identity coherence and system stability.

### Therapeutic Setting and Client Engagement

The PMA/MMELD modality is designed for delivery within a therapeutic context, typically via one-to-one counselling sessions, though eventual modification for group work is considered. The initial phase of therapy includes a thorough client intake process, assessing presenting issues, background data, and therapy goals, in accordance with ethical psychological practice. Foremost, however, the therapist's role includes a clear introduction to the PMA/MMELD theoretical framework, explaining the premise of the psyche as an "inner architecture" and the MMELD as a symbolic "internal HUD". This ensures client buy-in and establishes common language for the therapeutic process. Specifically emphasized is the client's active, collaborative role as "operator" of his or her own internal system.

The PMA is the meta-model, outlining the overall conceptualization of the mind. Therapists use this model to facilitate clients to see their current psychological patterns, problems, and aspirations as manifestations of more profound archetypal configurations. This encompasses:

- *Mapping Personal Narratives to Archetypal Patterns:* Guiding clients to realize how their life stories, dilemmas, and relationship patterns resonate with universal mythic patterns and archetypes (e.g., Hero's Journey, the Shadow, the Anima/Animus, the Trickster).
- *Identifying Dominant and Subjugated Archetypal Energies:* Diagnosing which archetypal energies are currently "active" or "dominant" in the client's life and which are repressed, underdeveloped, or fragmented, often underlying presenting problems.

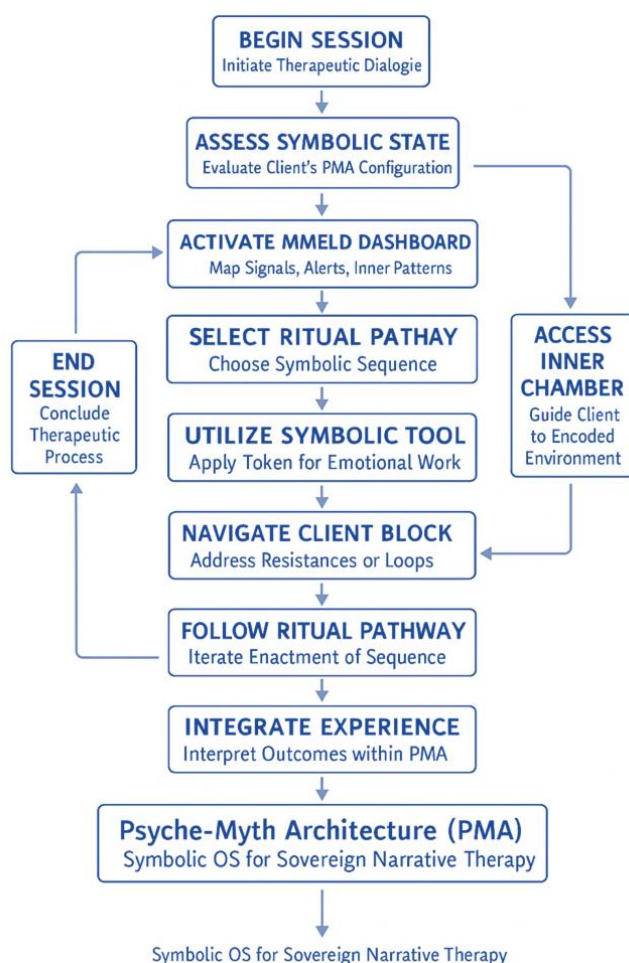
As working with the mind is a non-linear process, the PMA framework is likewise non-linear in its application. A suggested flowchart is provided in Figure 1.

The MMELD is the primary interface for therapeutic action within this modality. It is an internal symbolic dashboard from which clients learn to become aware of and actively invoke and deploy specific Archetypal Operators. The therapeutic process involves:

- *Operator identification and selection:* Based on the client's goals and identified archetypal configurations, the therapist collaboratively identifies relevant Archetypal Operators for deployment (e.g., the "Warrior" for courage and boundary setting, the "Healer" for self-compassion, the "Wise Old Man/Woman" for discernment). This selection is akin to choosing a "video game skin" or a specific tool from an ample toolkit.
- *Deployment protocol:* The deployment of an Archetypal Operator is facilitated through a range of experiential techniques, tailored to the individual client. These protocols involve:
  - *Guided visualization:* Leading clients through vivid internal journeys where they metaphorically step into the "skin" of an operator, experiencing its qualities and capabilities.
  - *Active imagination to deploy-and-embodiment the operator:* Encouraging clients to actively engage in dialogues or scenarios with the chosen archetypal energy.
  - *Symbolic ritual and gesture to re-author inner architecture:* Utilizing specific internal or subtle physical rituals and gestures to embody and activate the operator's energy.

- **Journaling and creative expression:** Employing writing, drawing, or other creative outlets to reinforce the relationship with and understanding of the deployed operator.
- **Psychoeducation:** Providing clear explanations of the archetypal energy, its potential benefits, and how its deployment can manifest in real-world situations.
- **Integration and Application:** Following deployment, a critical phase involves integrating the newly accessed archetypal energy into the client's daily life. This includes:
  - **Reality testing:** Discussing how the deployed operator's qualities can be applied to specific challenges and goals in the client's external world.
  - **Tracking progress:** Monitoring the tangible effects of operator deployment on the client's thoughts, emotions, behaviours, and relationships.
  - **Troubleshooting:** Addressing any resistance, challenges, or "bugs" encountered during deployment or integration, reframing them as part of the learning process within the "system".

Figure 1: Session flowchart deploying Psyche-Myth (PM)



Source: Author's conceptualization and design.

To assist tracking the acronyms, here is a simple guide: PMA = the psyche's symbolic operating system (foundation) - a symbol in PMA is an imaginal construct that condenses emotional meaning, narrative memory, and actionable function; MMELD = the *deployable dashboard interface* (live-action module control, visualized internally) for symbolic operator/

tool/plugin deployment; Plug-ins = domain-specific symbolic protocols (e.g., the EOD, to be discussed at length in a following paper).

While this paper presents the conceptual framework and proposed methodology, future empirical research will be essential to rigorously validate the efficacy of the PMA/MMELD model. Mixed-methods approaches are envisioned, combining:

- *Quantitative measures*: Standardized psychometric scales assessing symptom reduction (e.g., PCL-5 for PTSD, PHQ-9 for depression, GAD-7 for anxiety and STAXI-2 for anger), identity integration (e.g., measures of self-concept, self-efficacy), emotional regulation, and overall well-being.
- *Qualitative measures*: In-depth interviews, thematic analysis of client journals, narrative analysis of identity shifts, and therapist observations to capture the rich subjective experience and meaning-making processes.
- *Process research*: Investigating the specific elements of operator deployment and their correlation with observed changes, providing insights into the mechanisms of change within the MMELD.

Through this systematic methodology, the PMA/MMELD aims to provide a tangible and verifiable framework for achieving deep, lasting transformations in the psyche, moving beyond abstract theoretical constructs to empower clients as active operators of their own inner architecture.

### 3. Case Composite: Aaron (16 years old) - Navigating the Erasure Complex

Aaron is a composite of various clients and is a pseudonym.

Presenting Issue:

Aaron, a 16-year-old male, exhibits severe emotional dysregulation characterized by intense, prolonged screaming temper tantrums (2-3 hours duration) whenever he perceives correction or criticism from teachers. He describes these experiences as "shame-flooding," where he feels an overwhelming sense of invalidation and believes others are attempting to "erase" his existence or identity. This reaction, while seemingly disproportionate, is rooted in deep-seated shame and a fragile sense of self, leading to significant disruption in his academic and social life.

*Conceptualization within Psyche-Myth Architecture (PMA)*: Aaron's "erasure complex" can be understood as a manifestation of a highly activated and wounded *Shadow archetype*, specifically related to his sense of worth and belonging. The shame-flooding represents a direct confrontation with this wounded Shadow, triggered by perceived invalidation. His aggressive outbursts, while destructive, are a desperate, albeit maladaptive, attempt to assert his existence and resist the perceived annihilation of his identity, akin to a raw, untamed *Warrior* energy that has been overwhelmed and misdirected. The tantrums are a defensive mechanism against a deep fear of non-being, possibly linked to early experiences of invalidation or neglect. He lacks access to more adaptive archetypal operators for self-assertion and emotional regulation.

Therapeutic Goal:

The aim is to support Aaron in recognizing the "erasure complex" as an internalized pattern rather than solely an external reality. Therapy will focus on helping him regulate episodes of shame-flooding and manage perceived threats to

his identity. A key objective is to foster more adaptive responses to correction and criticism, allowing him to move away from reactive patterns. Through narrative and reflective work, Aaron will be guided to re-author his identity, from one that feels chronically threatened to one rooted in inherent worth and resilience. Additionally, treatment will emphasize building his capacity to consider others' perspectives by creating internal space beyond moments of emotional overwhelm.

### 3.1. Deployment of MMELD, Archetypal Operators, Symbolic Rituals, and Tools<sup>1,2</sup>

#### Phase 1: Understanding the Inner Landscape (Mapping the "System")

##### *Introducing the PMA & MMELD:*

*Mythic Language:* "Aaron, imagine your mind is like an incredibly powerful, ancient computer, with its own core programming, your *Psyche-Myth Architecture*. Right now, a particular program called 'The Erasure Complex' is running very hot, almost like a virus that makes you feel like you're being deleted whenever someone tries to update your system. We're going to learn how to access your *Modular Myth Engine Live-action Dashboard (MMELD)*, your internal control panel, to see what's happening and install some new programs."

*Initial Dashboard Visualization:* Guide Aaron to visualize a simple dashboard. "When a teacher corrects you, what lights up on your dashboard? What's the main warning sign?" (He might describe a 'red alert' for 'ERASURE' and a 'shame-flood' indicator.)

##### *Naming the "Erasure Complex" Archetype/Program:*

*Archetypal Operator/Program:* Help Aaron give this internal pattern a name, perhaps "The Annihilator," "The Vanisher," or "The Shadow of Non-Being." This externalizes the problem. "This isn't *you* doing it, Aaron, it's 'The Annihilator' program taking over."

#### Phase 2: Installing and Deploying New Archetypal Operators

##### *The "Observer" / "Witness" Operator:*

*Purpose:* To create critical distance from shame-flooding and impulse to tantrum.

*Mythic Language:* "First, we need an operator who can see clearly, even when 'The Annihilator' is screaming. We'll call this the '*Watcher on the Wall*' Operator (or 'The Sentinel'/'The Calm Seer'). This operator isn't emotional; they just observe."

*Symbolic Tool:* Aaron is given a small, smooth river stone or a clear glass marble. "This is your 'Watcher Stone.' When you feel that red alert starts to flare, imagine your 'Watcher on the Wall' Operator activating. Hold this stone, and for just 5 seconds, pretend you are *only* the Watcher, observing the red alert without *being* the alert."

*Symbolic Ritual:* Practice a brief grounding ritual: Aaron places the stone on his palm, takes a deep breath, and imagines a calm, steady light expanding from his chest, observing the internal chaos.

##### *The "Inner Sovereign" / "Dignity" Operator:*

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<sup>1</sup> For the complete clinical protocol detailing the deployment of MMELD, Archetypal Operators, Symbolic Rituals, and Tools, please refer to Appendix A.

<sup>2</sup> For a visual mockup of the MMELD, see Appendix B. Please note that the dashboard is customizable for each client, and clients are encouraged to create their own sketch of their personal MMELD.

*Purpose:* To cultivate an internal sense of inherent worth and unshakable presence, countering the shame-flooding.

*Mythic Language:* "Next, we need an operator that knows your true worth, a king or queen within you who cannot be erased, your '*Inner Sovereign*' Operator. This operator embodies your absolute dignity and inner strength, regardless of external opinion".

*Symbolic Skin/Visual:* Help Aaron visualize a regal, dignified "skin" for this operator on his MMELD. What colour is it? What does it feel like? (e.g., solid gold, ancient oak armour, flowing deep purple robes).

*Symbolic Ritual:* Create a simple "Dignity Posture". Aaron sits or stands tall, shoulders back, chin slightly raised, taking a deep breath, and feeling the weight of his own presence. This physical ritual helps to embody the "Inner Sovereign" even for a few seconds. "When you feel that 'shame-flood', activate your 'Inner Sovereign' Operator. You don't have to shout to be powerful; your true power comes from your inner knowing".

*Symbolic Tool:* A small, personal "crest" or "seal" drawing that Aaron designs, representing his unshakeable inner dignity. He can place this in his pocket or locker.

*The "Bridge-Builder" / "Empathic Eye" Operator:*

*Purpose:* To enable perspective-taking and understanding others' intentions.

*Mythic Language:* "Once your 'Watcher' is active and your 'Inner Sovereign' is stable, we can introduce the '*Bridge-Builder*' Operator. This operator helps you see from *another's perspective*, building a bridge of understanding instead of a wall of anger. It's like switching to a 'zoom-out' camera view on your dashboard".

*Symbolic Tool:* A pair of "compassion lenses", simple, perhaps non-prescription, glasses. "When you put on your 'Bridge-Builder' lenses, you imagine seeing the situation from the teacher's point of view. Are they trying to erase you, or are they trying to help you learn?"

*Symbolic Ritual:* Before reacting, Aaron practices a ritual of mentally "putting on" the "Bridge-Builder lenses" and asking himself: "If I were the teacher, what would I be trying to do right now?" or "What's the *other* story here?"

**Phase 3: Integration and Practice (Running the "Programs")**

*Pre-Emptive Activation:* Encourage Aaron to "pre-load" his "Watcher on the Wall" and "Inner Sovereign" Operators before entering environments where correction might occur (e.g., classrooms).

*"Pause & Pivot" Protocol:* When the "red alert" for "ERASURE" appears on his MMELD, Aaron's new protocol is:

*Pause:* "Watcher on the Wall" activates (hold stone, observe).

*Pivot:* "Inner Sovereign" activates (Dignity Posture, deep breath, feel inner worth).

*Process:* If stable enough, "Bridge-Builder" activates (compassion lenses, consider other perspective).

*Response:* Choose a new, constructive response (e.g., "Okay", "Can you explain that differently?", "I'll think about that", or simply deep breathing until calm).

*Post-Event Review:* After a challenging interaction, review the "MMELD logs". Which operators were deployed? What was the outcome? What could be improved for next time? Celebrate small victories in managing the shame-flooding.

#### *Anticipated Outcome*

With consistent use of the Archetypal Operators and symbolic tools introduced through the MMELD, Aaron is expected to slowly gain traction over what I've come to recognize as his "erasure complex." In time, he'll start to realize that criticism, even sharp or poorly delivered, isn't an existential threat or a judgment on his worth. Instead, it becomes something he can receive, metabolize, and respond to from a place of internal sovereignty and grounded self-respect.

The shift isn't just behavioural, it's structural. Through repeated internal rituals and guided Operator work, Aaron's identity begins to rewire itself from that of a fragile, reactive adolescent into a more stable, capable young man. One who can take feedback without unravelling. One who can listen to another's view without feeling erased. I expect his episodes of shame flooding and explosive tantrums to taper, shorter, less intense, and eventually replaced by more resilient, adult modes of engagement. (I'll admit, when I first introduced this language to him, I wasn't sure it would land. But in a follow-up session, he surprised me, he'd remembered the Operator metaphor exactly, and even asked if he could "install a new one". That's when I knew we were on to something.)

### 3.2. Example of a Session Structure Using the PMA Framework: Cecilia's Case

Context:

Cecilia, a 16-year-old client, expresses anxiety about wanting to change her religion. Her family's rigid expectations have left her feeling trapped and ashamed of her spiritual exploration. She reports "feeling wrong inside" whenever she tries to consider alternatives.

#### *Session Structure*

##### 1. Begin Session: Establish Therapeutic Safety

The therapist initiates open dialogue, affirming that the session is a non-judgmental space where all thoughts and feelings are welcome.

##### 2. Assess Symbolic State (PMA Assessment)

Using metaphor, the therapist introduces the *Psyche-Myth Architecture (PMA)*, a symbolic model of the mind conceptualized as an inner world or system.

*Definition: PMA (Psyche-Myth Architecture)* – A structured internal map representing personal beliefs, narratives, and identity patterns as symbolic "architectures" inside the mind.

Cecilia is guided to describe her current state using imagery. She visualizes a crumbling temple and speaks of "invisible walls" preventing her from moving forward.

##### 3. Activate MMELD Dashboard

The *MMELD (Modular Myth Engine Live-action Dashboard)* is introduced as her inner "control panel", a tool for visualizing emotional signals, alerts, and patterns.

*Definition: MMELD (Modular Myth Engine Live-action Dashboard)* - An imagined internal dashboard where a client can visualize emotional signals, identity programs, and defence mechanisms.

Cecilia identifies that her “Red Alert” indicator lights up when she thinks about religious change. She names this inner program the “Judgment Wall”.

4. Deploy Archetypal Operator

The therapist helps Cecilia choose an *Archetypal Operator* – an inner role that can help her navigate emotional distress.

*Definition: Archetypal Operators* – Symbolic inner roles or personas activated to manage specific emotional or psychological tasks.

Cecilia selects the “Pathfinder” as her Operator – an inner guide who can explore without fear of punishment.

5. Select Ritual Pathway

The therapist co-creates a symbolic action sequence (Ritual Pathway) where Cecilia imagines the Pathfinder examining cracks in the Judgment Wall.

6. Utilize Symbolic Tool

A small river stone is offered as a *Symbolic Tool*, representing the Pathfinder’s compass.

*Definition: Symbolic Tools* – Physical or imagined objects assigned emotional meaning, used as anchors for therapeutic work.

7. Navigate Client Block

8. As resistance arises (Cecilia feels guilt), the therapist reframes this as encountering a programmed “Loop” on her MMELD. The Pathfinder pauses, and Cecilia holds the stone while breathing to activate calm.

9. Follow Ritual Pathway

The sequence resumes: Cecilia’s Pathfinder discovers a hidden door in the Judgment Wall – symbolizing a possible path forward.

10. Integrate Experience

Cecilia interprets this as evidence that she can explore other religions without betraying her core self. Her PMA “Temple” now has a new passageway.

11. End Session: Consolidate and Affirm

The therapist reinforces Cecilia’s new inner narrative: “You are not escaping your temple; you’re expanding it.”

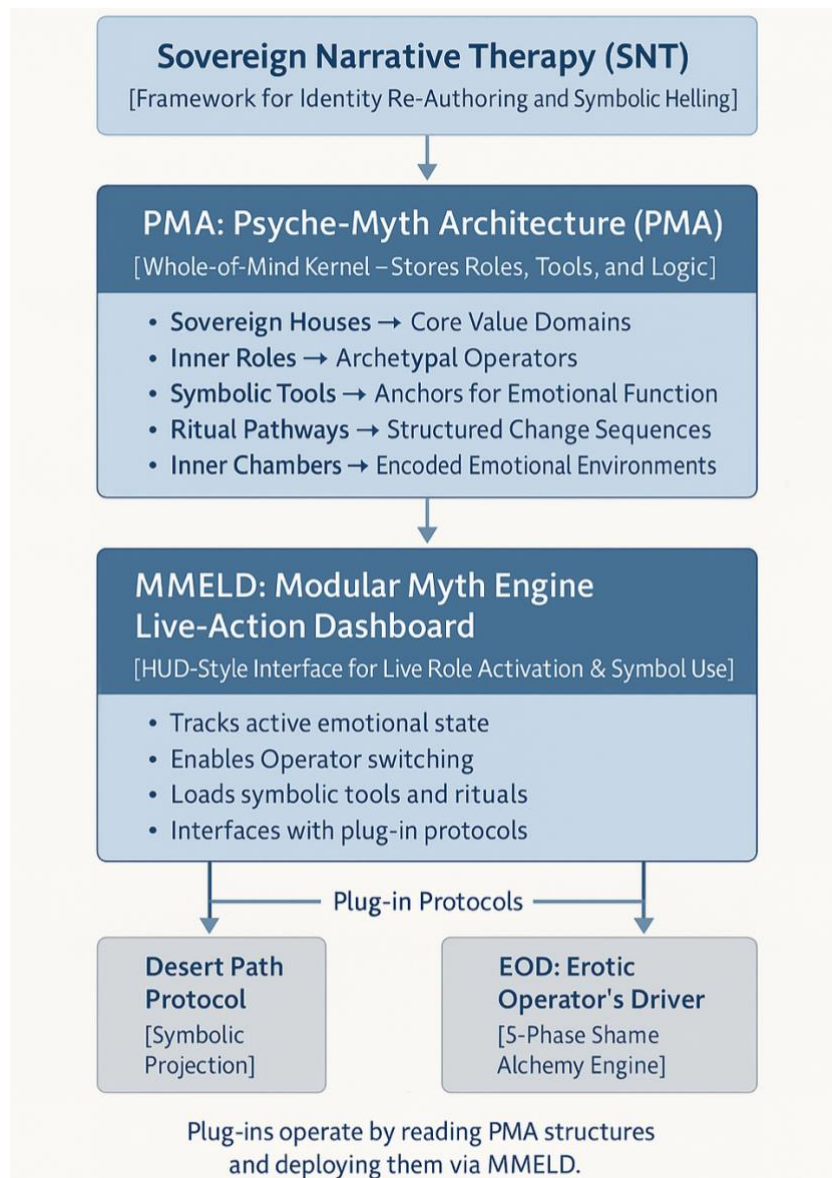
### Concept Clarification

Mythos Motif Encoding – The process of embedding personal experiences and struggles into symbolic narratives or motifs (e.g., Judgment Wall, Pathfinder), allowing abstract emotional processes to be externalized and reauthored.

#### *Visual Aids*

A visual map of the *PMA framework and MMELD Dashboard* is provided in Figure 2, illustrating how clients can visualize their inner systems and interventions.

Figure 2: Sovereign narrative therapy framework



Source: Author’s conceptualization, based on integration of narrative therapy (White & Epston, 1990) and transpersonal psychotherapy frameworks.

### 3.3. Research Design Proposal: Assessing the PMA and MMELD Framework in Clinical Practice

Given the conceptual nature of the Psyche-Myth Architecture (PMA) and Modular Myth Engine Live-action Dashboard (MMELD) frameworks, empirical validation is recommended. A small-scale, exploratory pilot study could assess the frameworks’ feasibility and therapeutic impact in clinical settings.

#### *Study Design:*

A mixed-methods pilot study involving 6–10 adolescent clients presenting with identity confusion, shame-based distress, or existential anxiety.

*Intervention:* Clients receive 6–8 sessions of therapy integrating the PMA and MMELD frameworks alongside standard counselling practices. Sessions focus on narrative

reauthoring, symbolic visualization, and deployment of *Archetypal Operators and Symbolic Rituals*.

*Variables / Outcome measures:*

- Quantitative measures:
  - *Shame Inventory (SI-5)*: Pre/post intervention
  - *State-Trait Anxiety Inventory (STAI)*: Pre/post intervention
  - *Rosenberg Self-Esteem Scale*: Pre/post intervention
  - *Session Rating Scale (SRS)*: After each session (measuring therapeutic alliance and perceived usefulness)
- Qualitative measures:
  - Semi-structured client interviews post-intervention to explore perceived changes in self-narrative and emotional processing.
  - Therapist session notes evaluating ease of integrating symbolic frameworks.

*Key outcomes of interest:*

- Reduction in shame-based distress.
- Improved emotional regulation (measured via anxiety and self-esteem scales).
- Client-reported sense of identity coherence or increased narrative flexibility.
- Feasibility of using symbolic and metaphorical tools in regular sessions.

#### 4. Limitations and Discussion

While the Psyche-Myth Architecture (PMA) and Modular Myth Engine Live-action Dashboard (MMELD) offer a new kind of symbolic map for the psyche, one that I believe can reshape how we do therapy, it's also important to be candid about where we're still exploring unknown territory.

Right now, PMA/MMELD is still a conceptual and clinical prototype with my preliminary data only. It's grounded in solid psychological foundations, Jungian theory, narrative therapy, symbolic ritual, even gamification, but we haven't yet built out a full body of empirical studies to confirm its long-term effectiveness. This paper lays the groundwork, but future research will need to rigorously test the model through trials and outcome studies to make it viable at scale.

Not every client will resonate with symbolic frameworks. Those with strong imaginal capacity, clients who naturally think in metaphors or story, often connect quickly. But individuals with acute psychosis, severe cognitive limitations, or those averse to abstract language may struggle to engage meaningfully with the system. Part of our next phase will involve identifying optimal client profiles and developing adaptations to make the model more inclusive.

To guide someone through PMA/MMELD work isn't just about teaching a technique, it requires a different orientation. Therapists will need fluency in symbolic processing, archetypal pattern recognition, and the ability to guide clients through internal rituals and Operator deployment while remaining grounded in practical outcomes. We're imagining a new kind of role: part therapist, part narrative engineer, part system guide. Training and credentialing pathways will be essential to ensure safe and consistent application.

There's always a risk, especially with symbolic or gamified systems—that clients might engage with the framework at a purely conceptual level. They might "collect Operators" like Pokémon but avoid the harder, more embodied emotional work. On the flip side, if the language or metaphors feel too abstract or eccentric, some clients may dismiss it before they give it a real shot. Therapist attunement and flexible pacing will be key in managing these risks.

Despite these limitations, the PMA/MMELD framework opens up something we haven't really had before: a structured, symbolic-operational model for internal transformation that goes deeper than language, faster than insight, and more consciously than habit alone.

It gives us a *shared language for transpersonal experience*, responding to Fernandez-Borsot's call for systematization in transpersonal psychotherapy. Instead of scattered spiritual methods and esoteric interventions, we now have a symbolic operating system that helps make sense of expanded states, mythic breakthroughs, and inner shifts with precision and coherence.

It also puts *agency back in the client's hands*. Rather than waiting for a session to process something with their therapist, clients can go inside and engage directly with Operators, rituals, and archetypes. MMELD functions like an intuitive dashboard, a way for people to actually *do* something with their internal states, not just analyse them.

Finally, because the MMELD is modular, we can integrate other therapeutic tools right into its framework. It's like installing plugins, Mindfulness Operator, Attachment Repair Module, even trauma-focused or somatic components, all anchored within a cohesive inner map. What results is a living system that's fluid, structured, and scalable. In short: we're not replacing traditional therapy, we're upgrading it.

In conclusion, the PMA and MMELD offer a compelling vision for the future of psychotherapy, providing a structured, interactive, and deeply archetypal approach to human development and healing. While acknowledging the limitations inherent in presenting a novel framework, this discussion underscores the immense potential of this modality to contribute significantly to the field, particularly in systematizing transpersonal therapy and empowering clients to become conscious architects of their own inner transformation.

## Conclusion

This paper introduced a new way of looking at the mind, what we call the Psyche-Myth Architecture (PMA), alongside its practical counterpart, the Modular Myth Engine Live-action Dashboard (MMELD). At its heart, the model suggests that the psyche isn't just metaphorical or poetic, it's built on an underlying architecture of mythic and archetypal patterns. The MMELD acts as a kind of internal interface, allowing clients to consciously "deploy" Archetypal Operators to navigate inner conflicts, reframe experience, and shift long-standing emotional patterns. Rather than just managing symptoms, this work aims to help clients fundamentally re-author who they believe themselves to be.

This system emerged as a direct response to Gabriel Fernandez-Borsot's (2024) observation that Transpersonal Psychotherapy remains fragmented, often lacking a clear, unified structure. PMA/MMELD steps into that gap by offering a systematic internal map, one that combines conceptual clarity with operational tools. The inclusion of archetypal deployment, gamified interfaces, and specialized modules (like the Erotic Operator's Driver, or EOD) creates a framework that is both symbolically rich and practically usable.

What sets this model apart is its ability to create real, measurable change, not just in how clients think, but in how they feel, behave, and even process experience physiologically. Rather than operating only at the surface level of cognition or emotion, PMA/MMELD engages with the deep structure of the psyche, creating space for longer-lasting, more embodied transformations.

Looking ahead, there's still more work to do. We need robust research studies, therapist training pathways, and deeper exploration of plug-in tools like the EOD. A separate paper is already in development to explore how the EOD helps clients process and reclaim identity after experiences of erotic trauma.

But even in this early stage, the PMA points to something powerful: a model where clients don't just heal, they become architects of their own healing. By engaging with their inner world not as a passive observer, but as an active myth-maker, clients can reclaim lost parts of themselves, shape new identities, and begin to live with greater depth, agency, and meaning. While PMA/MMELD is designed to complement existing therapy models, it also offers something new, a language, a system, and a set of tools for the next generation of therapeutic work.

#### Credit Authorship Contribution Statement

Ow, G. was solely responsible for the conceptualization and development of the theoretical framework presented in this article. He conducted the literature review, formulated the methodological structure, and authored the original manuscript draft. He also performed all revisions, finalized the text, and ensured alignment with scholarly and editorial standards. As the sole contributor, Gary OW takes full accountability for the integrity and accuracy of the work.

#### Conflict of Interest Statement

The author declares that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

#### Acknowledgments

N/A

#### Data Availability Statement

This study is conceptual in nature and does not involve primary empirical data. All information supporting the findings is derived from the cited literature and the author's theoretical development. No datasets were generated or analyzed during the current study.

#### Ethical Approval Statement

This study does not involve human participants, clinical trials, or identifiable personal data. Therefore, ethical approval was not required. The paper is based on theoretical development and illustrative composite cases, which are fully anonymized and used solely for explanatory purposes.

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## **Appendix A**

### Deployment of MMELD, Archetypal Operators, Symbolic Rituals, and Tools: Clinical Steps

#### Phase 1: Mapping the Inner System (Psyche-Myth Architecture Introduction)

1. Introduce the PMA and MMELD Concept:
  - a. Use mythic/metaphoric language to describe the client's mind as a system or architecture.
  - b. Explain that inner patterns (e.g., shame-flooding) can be conceptualized as "programs" or "archetypes" running within this system.
  - c. Frame the MMELD as an internal dashboard or control panel that allows conscious observation and modification of these processes.
2. Visualize the MMELD Dashboard:
  - a. Guide the client to imagine a personal dashboard.
  - b. Ask what signals, alerts, or warning indicators appear when distress triggers (e.g., correction, failure) arise.
  - c. Label significant responses (e.g., "Red Alert," "Shame-Flood," etc.) to externalize and map them.
3. Name and Externalize Problematic Archetypal Patterns:
  - a. Assist the client in naming the dominant inner program/archetype (e.g., "The Annihilator").
  - b. Emphasize that this is not the client themselves, but a process within their system.

#### Phase 2: Installing and Deploying New Archetypal Operators

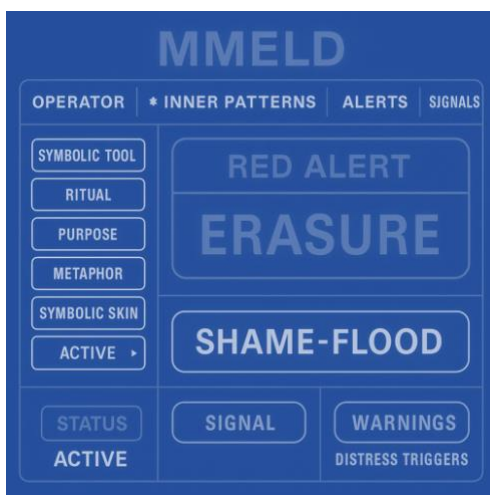
1. Develop the "Observer/Witness" Operator:
  - a. Purpose: Create critical distance from reactive emotional states.
  - b. Metaphor: Frame as a neutral inner observer (e.g., "The Watcher").
  - c. Symbolic Tool: Provide or co-create a tactile object (stone, marble) representing this operator.
  - d. Ritual: Teach the client to hold the object, breathe, and visualize observing their internal state without reacting.
2. Develop the "Inner Sovereign/Dignity" Operator:
  - a. Purpose: Reinforce intrinsic worth and psychological stability.
  - b. Metaphor: Frame as an internal sovereign or ruler embodying dignity and inner authority.
  - c. Symbolic Skin/Visual: Co-create a visual representation (armor, robes, aura) for this operator within the MMELD visualization.
  - d. Symbolic Ritual: Teach a physical embodiment practice (e.g., "Dignity Posture" – upright stance, deep breath, settled presence).
  - e. Symbolic Tool: Co-create a crest, seal, or small token representing inherent worth, for physical anchoring.
3. Develop the "Bridge-Builder/Empathic Eye" Operator:
  - a. Purpose: Enable perspective-taking and reduce defensive responses.
  - b. Metaphor: Frame as an operator that can "zoom out" or "see through another's eyes."
  - c. Symbolic Tool: Use or imagine "compassion lenses" (e.g., symbolic glasses).
  - d. Ritual: Teach a brief reflective pause where the client mentally "puts on" these lenses to consider others' perspectives before reacting.

#### Phase 3: Integration and Practice

1. Pre-Emptive Activation:
  - a. Encourage the client to mentally activate the "Observer" and "Inner Sovereign" operators before entering predictable high-stress environments.
2. "Pause & Pivot" Protocol (For Real-Time Situations):
  - a. Pause: Activate "Observer/Witness" (tactile tool, observation ritual).
  - b. Pivot: Activate "Inner Sovereign" (posture, breath, inner visualization).
  - c. Process: If stable, activate "Bridge-Builder" (compassion lenses, reframe situation).
  - d. Respond: Choose a constructive response.
3. Post-Event Review:
  - a. Debrief using MMELD as a metaphorical "logbook."
  - b. Identify which operators were or were not activated.
  - c. Reflect on outcomes and areas for refinement.
  - d. Reinforce and celebrate successful activations, no matter how small.

### Appendix B:

An Inner Visualization of the Modular Myth Engine Live-action Dashboard



Buttons (User-interactive controls – metaphorically clickable)

These are elements the client or therapist could select to reveal more detail (like dropdowns or toggle options):

- SYMBOLIC TOOL
- RITUAL
- PURPOSE
- METAPHOR
- SYMBOLIC SKIN
- ACTIVE ▶ (dropdown toggle for operator status)

These correspond to the Operator panel and represent the deeper symbolic layers that can be selected or modified.

Indicators (System diagnostics – showing live internal states)

These are visual readouts of what's going on inside the psyche-myth system:

- RED ALERT (Urgency Indicator)
- ERASURE (Specific triggered complex or archetypal pattern)
- SHAME-FLOOD (Emotional overflow indicator)
- STATUS: ACTIVE (Current activation state of selected Operator)
- SIGNAL (Category label or toggle panel for signal-specific readouts)
- WARNINGS / DISTRESS TRIGGERS (Context-sensitive alert category)