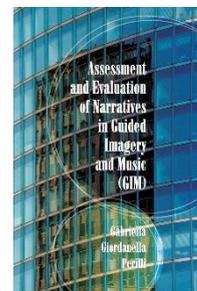# BOOK REVIEW

Assessment and evaluation of narratives in Guided Imagery and Music (GIM) (Perilli)

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As a practitioner in the Bonny Method of Guided Imagery and Music (BMGIM), I welcome Gabriella Perilli's *Assessment and Evaluation of Narratives in Guided Imagery and Music (GIM)*. Guided Imagery and Music (GIM) is an umbrella term for evolving styles of the original method (BMGIM) developed by Helen Bonny in the 1970s. Drawing from the fields of cognitive and neurological science, Perilli brings her experience to the analysis of GIM narratives. These refer to scripts generated through verbal interactions between client and therapist during GIM sessions. Established narrative coding systems are used to capture tacit or implied knowledge and bring it into conscious awareness through 're-description' (Perilli & Cicinelli, 2012, p. 1), providing a framework for how clients appraise, organise and respond emotionally to themes and scenarios in the imagery.

I find the text to be current and especially significant as we continue to build the evidence for GIM. Measuring and presenting the client experience more thoroughly may contribute to the current emphasis on client data over therapist reports as true indicators for evaluation. Perilli's contribution builds upon and reinforces the field of established GIM theory and practice by offering an additional component for cognitive assessment and evaluation of client narratives. A homework assignment is set as an extension to the BMGIM session structure and invites clients to revisit and reflect upon the listening experience and transcript, in an ordinary state of consciousness. Information can also be gathered in the form of interviews if clients require additional support from the therapist. Theoretical analysis aligns itself to established constructs and cognitive therapy narrative coding systems. These underpin a collaborative approach to self-reporting and analysis, guiding client and therapist as they formulate meaningful pathways and mutual clinical goals during the psychotherapeutic process.

The reader is guided carefully through an extensive and overarching perspective on personal narrative coherence and coding systems commonly applied in psychotherapy, with a clear summary

of each chapter. Comprehensive background information sets the scene for how clients are assisted to oscillate between primary and secondary cognitive dimensions, integrating implicit or tacit knowledge, perceived in non-ordinary states of consciousness, with more explicit coherent understanding realised in a cognitively aware state. In this way clients are invested in the meaning-making process and become active agents during the course of therapy, discovering inner resilience and constructive connections to self-identity.

Narratives in response to the music are an integral part of GIM mostly generated in a deeper or non-ordinary state of consciousness. The challenge in GIM when looking to define research methodology or create a broader evidence base is how to categorise client material that includes colourful imagery, multi-sensory responses, memories, emotions, physiological changes, metaphorical, spiritual and transformative qualities.

Perilli expands on the meaning-making processes adopted from cognitive science in relation to BMGIM client narratives, within the context of music and imagery, psychotherapy and cognitive structures. She proposes that the ability to self-integrate between 'in experience' and 'out of experience' situations in BMGIM is based on emotion as the 'basis of conscious experience' (p. 21) which holds tacit or unspoken knowledge from birth. As life becomes ever more complex, physiological and psychological patterns appear in response to events. Learned attitudes and coping strategies, although fundamental, are not always intentional.

Perilli acknowledges that imagery and metaphor can bring to the fore 'dissociative aspects of the self' (p. 41) which require reflexivity and metacognition for integration and sense of self. Throughout the duration of therapy, the re-descriptive technique is designed to highlight processes of integration, or any disruptive material, and discrepancies between primary and secondary cognitive processes in the transcript and re-description. I was curious about how these might be managed but Perilli conveyed that through the act of writing, clients will recognise, accept and articulate any themes affecting resilience and impeding their incentive to grow. The therapeutic model is intended to access underlying causes of an emotional situation before outdated automatic behavioural responses are activated. I'm not sure, however, that I understood the sequence of events here as, depending on the level of intervention, the music listening may have already triggered automatic responses. This led me to wonder about the level of music programming which could have perhaps been signposted at this point. Perilli believes that over time, with care, the mind will integrate knowledge from all modalities towards integrated coherent meaning.

Goal oriented categories are adapted from the Personal Narrative Coherence Coding Scheme (NaCCS) (McAdams, Hoffman, Mansfield & Day, 1996) and Narrative Processing Coding Systems (NPCS) (Angus, Levitt & Hardtke, 1999). The first scale is concerned with resilience, attitude and emotional regulation, the second with cognitive structural components which include concreteness, abstraction, integration, flexibility, sequencing and metacognition. Coding tables are presented with thematic material from transcripts, re-descriptions and vignettes.

My observations were that client narratives in the transcripts and re-descriptions appeared to be highly articulate and insightful, with intelligent, self-informed and reflective qualities, as one might gain with experience in this process. I was curious to know more about 'relational holding' (Gerge et al., 2019, p. 14) during cognitive assessments and whether the model was adapted or contraindicated for less resilient clients. The author has previously addressed the difficulty for some clients of alternating

between tacit and explicit processes. This led me towards thinking about a synthesis of the model for clients who display lower levels of emotional resilience and are not ready to work with BMGIM programmes. Might the re-descriptive technique play a role in building inner resources and self awareness in shortened, more supportive GIM adaptations and enable a broader range of clients to verbalise their imagery experience? This area was acknowledged briefly towards the end of this book but not elaborated on. Following the publication of this book, the author composed an article for Approaches about 'the integration of verbal and non-verbal modalities work with clients in relation to different pathologies' (Perilli, 2017, p. 230). I would have valued this information had it been included in the book.

In the final chapter, mapping of narrative coding methods, with case study narratives are organised at cognitive and emotional levels. Perilli writes that "both music and language lead to the creation of imagery by combining or modifying stored information" (p. 15). Once again, an indication of music programmes used and whether they influenced coding processes in any way would have been interesting. The book concludes with a clear synthesis of the differences between narratives from transcripts and those appearing in re-descriptions. Well-designed tables provide the reader with suggestions as to what to look for when charting progress in therapy.

Generating an ever-stronger evidence base for GIM requires a collaborative and reflexive approach to treatment goals. It is important for evaluative processes that have client self-reporting at their core to develop and remain in step with current cognitive psychotherapies, demonstrating more precisely, the efficacy of BMGIM methods as well as the development of "specific adaptations for different clinical purposes" (Papanikolaou & Beck, 2017, p. 193).

Perilli openly invites colleagues with different theoretical orientations to consider her evolving theory in practice. Therapists are welcome to offer feedback and share knowledge in a bid to test and improve reliability of the tools presented in this book. A second edition of this book might expand to include a compilation of the author's valuable writings on neuroscience and adaptations.

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