

The Triad of Triangulation Mechanisms in Poetry Therapy Or: What cannot be said might still be written

Tamara M. Trebes

Faculty of Psychotherapy Science, Sigmund Freud University, Vienna, Austria
Tamara.Trebes@sfu.ac.at
ORCID ID: 0009-0000-7296-0674

Abstract

Psychotherapists are confronted with the fact that patients often lack words for their inner world and their experiences. Yet, studies suggest that the healing process requests verbal expression. It is the task of the therapist to guide and accompany their patients to find a way to express what is inside them or what has happened to them, which sometimes is indeed almost unspeakable terror and dread. But “the grief that does not speak whispers the o'erfraught heart and bids it break”. Shakespeare knew to poetically capture how remaining silent about pain not only leads to isolation, but ultimately to psychological death. In this regard, expressive poetry therapy offers unique opportunities for the endeavor of coming to language and thus can play an important role in the process of transitioning to verbal expression, entailing a triad of specific, unifying features that facilitate the progression from speechlessness to speech. The triangulation mechanisms include 1) *contentual triangulation*, in which lyrical language and symbols serve as a transition between the non-verbal and verbal expression in social communication; 2) *spatial triangulation*, which addresses the constitution of a transitional space and 3) *temporal triangulation*, which addresses a retrospective reappraisal level, the current level of the here and now, as well as a prospective level. The respective mechanisms will be illustrated by presenting practical examples of poetry therapy.

Keywords: poetry therapy; triangulation mechanisms; metaphors; figurative language; psychodynamics; verbal progression

Introduction – Poetry and the Path to Language

*“Give sorrow words: The grief that does not speak
whispers the o'er-fraught heart and bids it
break.”*

(William Shakespeare: Macbeth)

William Shakespeare already knew to poetically capture a knowledge that has – more than 400 years later – found its way into academia and is now considered valid. It might also confirm Sigmund Freud's observation that “psychoanalysis is better understood by writers and artists than by doctors” (Papini, 1934). These days, Bessel van der Kolk, a contemporary psychiatrist and researcher, illustrates in his classic about trauma *The Body Keeps the Score*, that indeed, remaining silent about pain not only leads to isolation, but ultimately to

psychological death. Especially regarding trauma, we are confronted with speechlessness and silence; oftentimes images instead of words; unspeakable terror and dread, which are not translated into words but are re-enacted and re-lived, through flashbacks or symptoms for example, and become a persisting time loop, preserving overwhelming feelings of fear, panic and paralysis.

Van der Kolk (2021, 276) postulates in his book, that “visual art, music and dance [could] circumvent the speechlessness caused by horror”. These non-verbal forms of expression are indeed used in specific therapeutic settings like music, dance or art therapy (Van der Kolk, 2021). However, as Pennebaker and Krantz (2007) found, the mere expression of trauma is not sufficient for therapeutic processing. In order to recover, patients must translate their experiences into verbal form. Healing, in this view, depends on verbal articulation—it is about *naming, voicing, phrasing, disclosing*, and thus: acknowledging.

“While the trauma leaves us speechless, the path out of it is paved with words that, carefully put together piece by piece, finally result in a communicable story.” (Van der Kolk, 2021, 277) As psychotherapists, it is our task to guide and accompany our patients to their expression of what is going on inside of them and/or what has happened to them. Poetry therapy offers unique opportunities for this endeavor and thus, can play an important role in the process of transitioning towards verbal expression. I have come to find that this transition can be characterized by three specific linking features, that assist in the triangulation process of the patient, each on a different level. They will be outlined in the sections that follow and are summarized below as the Triad of Triangulation Mechanisms in Poetry Therapy (*Figure 1*).

The Triad of Triangulation Mechanisms in Poetry Therapy

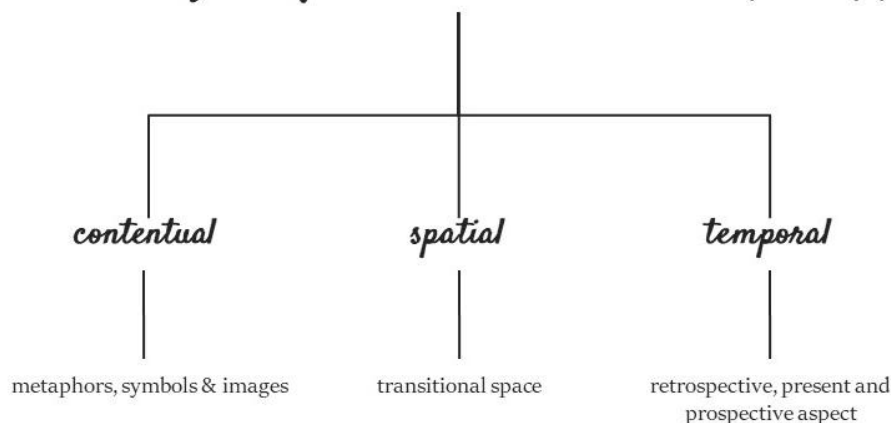


Figure 1. *The Triad of Triangulation Mechanisms in Poetry Therapy*

The Architecture of Triangulation: A Prelude to Poetic Mediation

Before these features are introduced, the technical term *triangulation*, which was first established by Ernst Abelin (1980) and is now commonly used in psychoanalysis, depth psychology and developmental psychology, shall be explicated.

The fundamental idea of triangulation is that a relationship between two is expanded by a third. The most prominent example in psychotherapy is probably the triangulation of the mother-child relationship by the father, as described by Sigmund Freud (Grieser, 2017).

Thus, triangulation indicates an opening and with it, a development and a helpful expansion; it signifies recognition, mediation and regulation, stabilization and therefore security.

Triangulation also creates space and enables movement, it grants the possibility to move back and forth, and hereby, it includes the ability to regulate proximity and distance. Finally, triangulation facilitates the ability to take an eccentric position and change perspective, thus enabling creative reflective thinking (vs. black and white thinking) and the ability to see and reflect oneself and relationships from the outside, which is also known as mentalizing (Grieser, 2017).

In that way, triangulation opens new options for perception and action by designing alternatives between which someone can choose, which ultimately means more freedom, but it also allows for different positions to stand side by side, thus enables the ability to endure contradictions. Nonetheless, it can also indicate a possible threat *because* of the fact that it enables critical thinking (e.g. second opinion) and that it might limit immediate wish fulfillment. In sum, it represents the expansion of the psychic space, but also the consideration of the limitations of one's own possibilities (Grieser, 2017). A simplified sketch of this core concept is provided below (*Figure 2*).

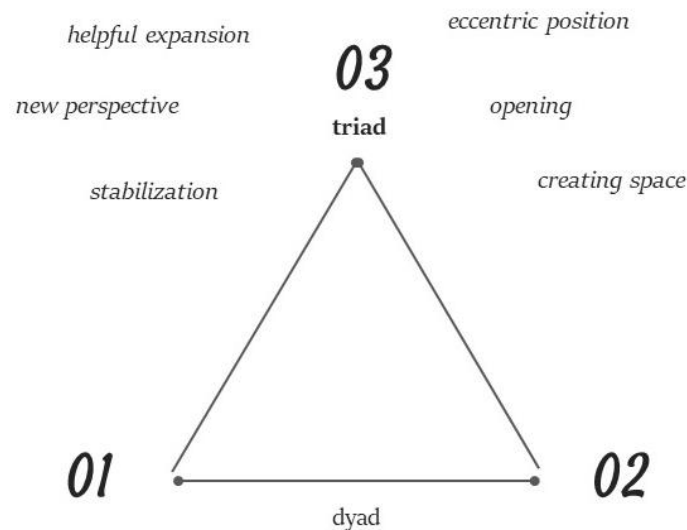


Figure 2. Triangulation

There are many possible third parties—not just people or representations of them, but also symbolic elements such as laws, norms, cultural guidelines—and language (Grieser, 2017). With that background information, I'd like to present the three specific triangulation mechanisms in poetry therapy, which facilitate the progression from speechlessness into language and accompany each of them with examples out of the practical field of poetry therapy.

Contentual Triangulation

According to Freud, there is a close connection between poetry and psychotherapy because both use preconscious and unconscious material to explore inner feelings, and both attempt the resolution of inner conflict while also using words to give it form (Mazza, 2022). As we have heard, it's ultimately important to put things into words, but using figurative language, metaphors, images and symbols while writing poetry is not nearly as threatening as directly and concretely voicing and talking about *real* incidents. In that way, it is possible to break resistance or rather, circumvent the reality principle and defense mechanisms through the nature of the *primary process*—where the libido flows freely from one imagination to another, without the censorship of the secondary processes (Shaddock, 2020).

The primary process is oblivious to the constraints of the laws of time, space and logic. Instead, it implies an all-connecting logic where contradictions coexist (*as well as* instead of *either/or*). Early childhood is filled with those primary processes, as the secondary processes are not yet established, later they are mostly found in dreams, fantasies and daydreams (Leichsenring, 2024).

So, one could claim, writing poetry is like *dreaming onto paper*—in a lucid way. And indeed, we do find the same mechanisms in both: *symbolization*, *displacement* and *condensation*. The poem has the advantage of not leaving one passive though—as might be experienced in a dream or a nightmare, in a memory or a flashback. It preserves self-agency and autonomy, and in that sense, the feeling of control and safety. Certain topics can be hinted at, without being fully disclosed. They can linger in the air and take an effect—which can be shared. They can invite to associate to them, to draw a little closer. Or they can insist on staying under the veil—for now. In that kind of way, figurative language and metaphors create space and can serve as a third in a triangle with the patient and their experiences, but also in a triangle with the patient and the therapist (Grieser, 2017).

Acting as a third, poetic symbolization exerts an organizing and structuring effect within the psyche, quietly unfolding beneath the surface. As David Shaddock states, “metaphors [...] are adhesive: they draw meaning to them” (Shaddock, 2020, 7).

Practical Examples – Poems from Psychotherapy Practice

what the time machine revealed

(give me your hand for a split second & you'll see everything)

i'm in the making—
an arrow sent forth
to be reversed

forge me strong
so i can contain heavy

so i can endure ages
of rage and desperation and loneliness

i'm 2 years old
and exchanged for 16:
long hair, great ass, good at giving head
this
is how i learn—
i catch the tears of my mother
she smothers me differently than you will do later

i'm 4 years old
and i don't belong

i'm 4 years old
and i'm a stranger

i'm 4 years old
and very alone

and i forget how it feels to be frightened
for it turns into white noise ever present
and i learn how to leave my body
while it magically keeps breathing to the static
(a ghostly metronome
that conserves it in time
and somehow
keeps it alive)

i'm 6 years old
when i learn i can't catch all of your tears
can't suck in all of your pain—
i learn i'm a faulty vessel
i leak and lack and lose

i'm 7 years old
someone looks at me and nods
when i raise my hand and say something smart
someone nods and smiles

when i pay attention
and repeat the things i've learned—
i think i like it
i think
i want more of it
i think i may become ever hungry for this:
nod at me
smile

i'm 9 years old now
this is too close
you are too heavy
this is where i learn men who smell of beer are dangerous
this is where i learn men who cry need to be sheltered
this is where I learn
about you
on the floor

i'm 10 years old
when i write my first poem about the red
drained from my body
my teacher looks at me in silence for a long time
i'm used to being a stranger now
i can sense his sadness
like i was trained to do
but he hides his tears from me
and from himself
only cries inwards
which means
he will drown himself in drinks tonight—
like you, father

i'm 13 years old
and about to leave.

make the full stop
a semicolon;
cause they pump the poison out of me
(not the red for a change)

i don't understand why they wouldn't let me go
and why they're mad
and scream words I cannot comprehend

i'm 13 years old
replaying
the scene
too heavy
on top of me
heaviness muffles the screams
they are sent inward
like arrows
and confirm what i know

i'm 15 years old
an arrow out of control
lost bow and lost target
the emptiness festered
i learn to fill it with trash
i learn to swallow up front
& vomit behind your back

i'm 18 years old
car crash stops time
i become a loop
of crashes
a broken record
noise replaying
and forever repeating:
stranger, too heavy, can't leave

i'm 19 years old
black bird keeps visiting
it's my job to keep him at bay
can't leave—
neither can you, father

i'm 20 years old
and drunk driving on the highway

look at me and nod, dad
i learned from you
i payed attention and repeat
we don't talk
but i wish you would nod at me
and smile

i'm 21 years old
and about to vanish—
if i do it *softly*
maybe they will let me dissolve -
starvation feels like home
she says i'm perfect
for the first time I don't feel faulty
but i'm about to disappear, mother—
so i learn
about the sweet spot
of disintegration
about edging
about the fact that who is about to leave
is loved the most

Comment: This poem displays topics like emotional and sexual abuse, self-harming behavior, suicidality and disordered eating, or rather, it hints at them, without fully disclosing them. It almost sounds like we witness the described scenes from the perspective of the child, the teenager or the young adult, in the way the language is used here. The symbols and metaphors are representations for her experiences, narratives, conclusions and emotional processing. The patient had extensive psychotherapeutic experience, where she had worked through those topics. The poem almost gives an overview of the critical life events of her past, which patterns had formed and why they might have formed.

untitled

the moment you realize
that your lover
is not your lover
but the repetition of abuse;
a symptom

it makes perfect sense to me:
broken people
accidentally
cutting others
who come near
their shards

but what does that make *me*?

an incurable romantic?
seeing patterns of roses in blood stains
a starry-eyed idealist?
refusing to give up on the idea of love
even at post nuclear bleakness

where does the line
between hope and denial blur?

on the other side of hope
I am just a pointless martyr
a blind fool
a futile victim
a desperate masochist
an infinite loop
or
an unteachable child
handing you the whip
and kneeling before you
morphing
into a punching bag
turning each and every eye blind
to forever objectifying herself

repeating the same patterns
over and over
spinning in circles
like a passionate dancer

See, I never thought this could be true

but apparently
hope
has always been
my biggest mistake
and self-worth
my greatest lack

Comment: This piece of poetry insinuates the topic of domestic abuse. In therapy, it has become clear, that the relationship the patient was in, was not a happy nor a healthy one. For a while, she wasn't able to talk about the fact that she experienced not just verbal violence from her partner, but also physical violence. This experience brought about a deep sense of shame and also denial. The patient brought this text into the therapy session to let the therapist know—without actually having to nominate the physical abuse or being too specific about it. The poem spoke for her and implied physical violence, using metaphors, figurative language and analogies. With the shared knowledge and the therapist carefully modeling words and expressions, it became possible to gradually work towards voicing the unspeakable for her and in that manner, acknowledge her experience.

Spatial Triangulation

The spatial dimension of the triangulation triad takes us to the so-called “transitional space”, a term that was characterized by Donald Winnicott (2005). This transitional space (also called potential or intermediate space), creates a third sphere between the inner and outer world, between fantasy and reality (Mazza, 2022); it is the place where the metaphor exists and performs its task, which can be derived from the original meaning of the word, as the Greek *metapherein* means *to transfer*. It's also an intersubjective field, because it opens up a communal world based on shared meanings.

According to Winnicott, the existence of this intermediate space, is required for the development from absolute to relative dependence of a child. It facilitates the illusion of being the creator of one's own experience (a feeling of healthy omnipotence), which is necessary, in order to be able to allow the gradual differentiation between self and non-self (object). The transitional space thus has a bridging function, allowing a step by step development towards an autonomous self, and in that way also building and finding meaning in the relationships to the outer world and others. The opportunity that lies within the opening or re-opening of that space through poetry therapy is a form of re- or post-maturing in that transitional space, together with the therapist (Winnicott, 2005). *Figure 3* illustrates this transitional space as conceptualized by Winnicott:

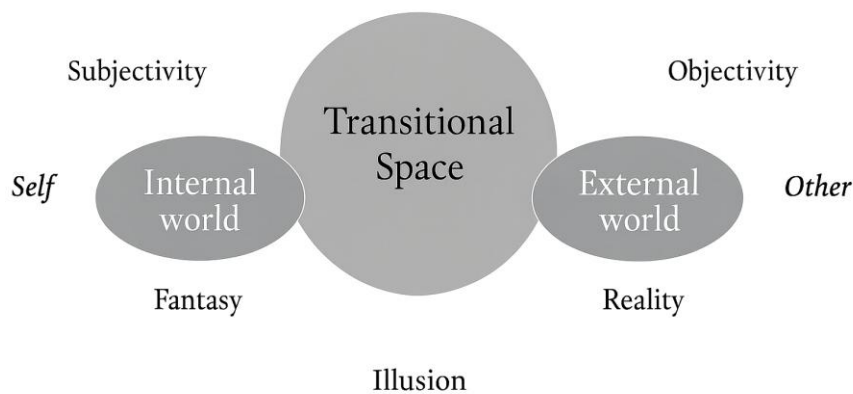


Figure 3. Transitional Space (Image created by the author based on Winnicott, 2005)

In addition to that, the writer, who listens to their own poetry or reads it out loud, is provided the opportunity to relate to themselves from an outside perspective, which creates a certain distance that can make it possible to see or feel certain aspects that might have been invisible or inaccessible before, and in that way improves self-awareness. This aspect ultimately entails a strengthening of the relationship to the self. In therapy it can also support the identification with the therapist's view of the patient.

The poem itself might also work as a transitional object, when new thoughts or perspectives from the therapy sessions find their way to be represented in the poem. The spatial dimension finally allows for a space where one can accept or reject the written word, as it doesn't have the pressing and distressing character of the spoken word due to its immediacy.

Practical Examples – Poems from Psychotherapy Practice

I/II
look at me, don't look at me

the wound
trying to cover itself

to
overgrow
the shame

the rawness

the nudity
the vulnerability
of its flesh

me
stubbornly fierce
unveiling
uncovering
ripping skin
disclosing
what's underneath

until
the wound
gives up

remaining
raw
red

mark of a whiplash
on display

witness
to the cruelty

resigning:
let us be seen

i win
we both lose

Comment: The topic of this poem is self-harm. We read about the patient and the wound, thus enter a dyadic scene. The poem is an illustration, a statement and a confirmation. The patient tells us that she was hurt and there almost seems to be a reassurance in the display of her open wound. She externalized the wound, which can be seen as a psychological dynamic of the symptom of self-harm itself, which is represented in the externalization in the poem as well. The wound becomes an interlocutor, which she can address, and which mirrors her struggle with hurting and healing. The wound also seems to be a metaphor for herself: she displays how she treats the wound and tells us, in that way, how she was treated herself. She repeats this harm- and hurtful treatment and there's almost something like a triumph in these lines,

when she talks about herself about being “stubbornly fierce” and how she “wins”, although they both lose with her victory. The triumph might entail that she has become even crueler (to herself) than any culprit ever was or ever might be. And herein might lie the reassurance – in the illusion of control by the identification with the aggressor and by narrowing the world down to her and her wound, hence shutting others out, which could be understood as a protective precaution.

II/II
untitled

I find a longing in me
to stop by
at your place
and cry in your company

cry on your floor
and tell you
how sometimes
I feel like a wound that will not close

how sometimes I feel
I lost so many years to sadness
and self-torture

how I ridiculed my culprits
by becoming worse than them
how I felt powerful at first,
how I felt lifeless later

Will you witness
my being-all-wound
will you hold it in your presence
without attempts of stitching,
cleaning, closing, covering—

let me be
bright red tonight
wet and open
in absence of wishes and world and word

will you

give me the grace
of being wound in the open
shepherding the pain out
just by being
in its company

for me to discharge the agony
without masking it
without being sent off into the corner
without means to fix or resolve or soothe

will you allow me
to be wound
here

until I'm not

Comment: The second poem was written by the same patient several months later, after the first poem was discussed for a while during therapy sessions (which already created a triangulation). We can see a clear development out of the dyadic state – now, the patient addresses her therapist, thus, reaches out. This illustrates that she can utilize helpful relationships and is able to ask for help at this point, instead of staying isolated in her pain. She integrated her wound. Henceforth, she speaks of herself and of “feel(ing) like a wound that will not close”. It seems like the patient has realized the underlying function of the self-harm and is now capable of talking about her emotions in a rather tangible and soft way, instead of numbing her emotions or externalizing them.

Temporal Triangulation

The temporal aspect of the triangulation triad contains three levels of time. There is an exploration, perception and expression of what *is*, as a result of what *was*, determining what *will be*. Which means, there is a

- *retrospective aspect* to it, where experiences, events, encounters, recollections and memories can be looked at, from a distance – where they can be replayed, paused, rewound, digested, worked through, rephrased or rewritten;

- *present aspect* to it, being in the here and now, expanding awareness, establishing a connection to one’s own feelings, emotions, thoughts, fantasies, images, reveries, establishing or reinforcing a relationship to one’s own self and being attentive to what rises up and what wants to show itself;

- a *prospective aspect*: what is written can serve as a prophecy and the writer can write himself into a new reality, thus construct it with his words – almost like a magic spell. Here

we are touching the constructivist and narrative approaches to therapy (Brown, 2007; White & Epston, 1990).

The interplay of past, present, and future – and their transformative potentials – is illustrated below (*Figure 4*):

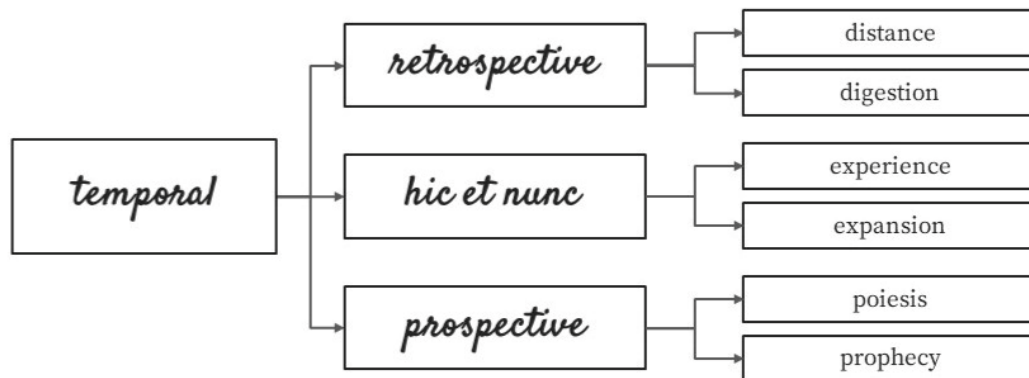


Figure 4. Temporal Triangulation

Poetry therapy not only offers a great chance for the introduction of new perspectives but in fact, to a *range of possible worlds* for the writer. In this way, it becomes possible to reauthor lives and relationships. *But* it is not as simple as just *retelling* a story; the existing stories need to be unpacked first, in order to be able to rewrite more helpful ones, pointing to the need for a deconstructive process before a reconstructive process can follow (Mazza, 2022).

For language is more than a representation of our thoughts and feelings, it's part of a multilayered interaction, and as Drewery and Winslade state: "The words we use influence the way we think and feel about the world. In turn, the ways we think and feel influence what we speak about. How we speak is an important determinant of how we can be in the world. So, what we say, and how we say it, matter." (Drewery & Winslade, 1997, 34)

Practical Examples – Poems from Psychotherapy Practice

The Odyssey: A prophecy

I.
"Bulimia is an act of disgust and an act of need."¹
The disgust and the need are the same.

II.

¹ Hornbacher, 2006, 93.

On the other side of my double life
the self-torture has transformed into a full-time job.

Forever crouching over the toilet
(a sink, a bucket, a trash can
or whatever your own personal hell hole is at the time).
Head down.
Always down.
(This disease teaches you to bow your head just right.)

The symbol of
the abyss
always
staring right back at me.

Two-faced imposter,
doll-faced monster;
flushing your true self down the drain.

III.
Mirror Mirror on my wall, when I grow up I wanna be small,
Mirror Mirror, tell me the truth: is this my lifeline or is it a noose?
Mirror Mirror, your blessing's a curse,
beauty is pain and your embrace is my hearse.

IV.
Mother,
your heritage
is a poisoned apple
is the forbidden fruit
is the bottomless pit
is the never-ending hunger
and the sickness to my stomach.

I'm fed up with you;

still
always
empty.

[...]

VI.

The mother wound

The womb is a wound
and the (w)hole world is mother.
And yet, mother is never there;
mother is unreal,
mother was denied,
thus, I deny me myself
evermore -
for how could I exist?
How can love exist if pain is forbidden?
How can pain exist when nothing is real(ly here)?

[...]

XIV.

And isn't it ironic
that the end of this journey
was
losing hope,
was
a punch to my stomach,
(because a punch in the face was not enough anymore)
was finding my sense of ENOUGH,
was giving birth to my anger
from inside of my belly,
was taking the risk
of being empty
and hungry,
was not swallowing,
was regurgitating,
was spitting out

the toxic waste
the anger
the burden
the heritage
the past
the suffering

was taking the risk
of hurting
someone else
and setting a sign
for the newborn truth:

I love myself
more
than you.

Comment: This poem was written over the course of two years. In the beginning, the patient who suffered from bulimia, read a book on the subject matter and was haunted by a quote from it, which she said, “repeatedly echoed” in her thoughts. She felt the need to add a sentence to that quote, which was how “The Odyssey” started and with it, the examination, analysis and confrontation with her symptom. As can be seen in the progression of the text, she developed from borrowing words from someone else with the same symptom (Marya Hornbacher’s book “Wasted” is a memoir about Hornbacher’s own eating disorder) and building onto that, to the description of her symptomatic behavior, almost like an observer, displaying the scene for the reader (and/or herself) – to be looked at and to be confronted with the emotions it evokes. She then continues to dive deeper into the meaning of the symptom, of her own inner world, of the representations and dynamics of her relationships, especially the relationship to her mother, which wasn’t digested at that time. Through psychoanalysis and her writing throughout the process, as well as discussing her texts in therapy, the patient gradually worked through her topics. The last section of the text (XIV.) marks her prophecy – at that point in time, she knew what she had to do to heal. Even if she hadn’t been at that “end of the journey” yet, in her mind she knew what it would look like and she wrote herself into it. The knowledge was there and by that time, the disorder lost a lot of its distressing quality, the feelings of hopelessness and despair gradually subsided, even if it still took approximately another two years for her to really process it emotionally, to practice new behaviors and to internalize them. In the end though, the prophecy ultimately became true for the patient.

Turning Toward Language: Concluding Thoughts

This paper has introduced a theoretical model for understanding the transition from silence to speech in poetry therapy, framed by three interrelated triangulation mechanisms: *contentual*, *spatial*, and *temporal*. Each of these dimensions offers a unique way of mediating the movement from inexpressibility to articulation, from inner experience to shared language. Through the analysis of poetic texts written in therapeutic contexts, the triadic model demonstrates how symbolic language, transitional space, and temporal re-narration can support emotional processing, agency, and psychological integration.

These mechanisms do not replace traditional psychotherapeutic methods but offer an additional framework for working with patients whose inner experiences dwell on the threshold of language, particularly where trauma has disrupted symbolic expression.

Outlook: Future Research & Clinical Implications

Future research may explore how these triangulation mechanisms can be operationalized in clinical studies, especially with patients suffering from complex trauma, dissociative symptoms, or severe verbal inhibition. Further investigation could examine the therapeutic outcomes of structured poetry therapy interventions within diverse clinical populations. Additionally, the model could be applied and refined across different psychotherapeutic schools to evaluate its integrative potential. From a clinical perspective, the triangulation model may offer a valuable approach to facilitate verbal emergence in patients whose experiences resist direct narration. In such cases, poetry becomes more than a medium—it becomes a bridge: between silence and speech, between wound and word.

References

- Abelin, E. (1980). Triangulation, the Role of the Father and the Origins of Core Gender Identity during the Rapprochement Subphase. In Lax, R., Bach, S. & Burland, J. (Eds.), *Rapprochement* (pp. 151-169). Jason Aronson.
- Brown, C. (2007). Talking Body Talk: Merging Feminist and Narrative Approaches to Practice. In C. Brown & T. Augusta-Scott (Eds.), *Narrative Therapy: Making Meaning, Making Lives* (pp. 269-302). Sage Publications, Inc.
- Drewery, W. & Winslade, J. (1997). The Theoretical Story of Narrative Therapy. In Monk, G., Winslade, J., Crocket, K. & Epston, D. (Eds.), *Narrative Therapy in Practice: The Archaeology of Hope*. Jossey-Bass.
- Grieser, J. (2017). *Triangulierung* (2nd ed.). Psychosozial.
- Heimes, S. (2012). *Warum Schreiben hilft. Die Wirksamkeitsnachweise zur Poesietherapie*. Vandenhoeck & Ruprecht.
- Hornbacher, M. (2006). *Wasted: A Memoir of Anorexia and Bulimia*. Harper Perennial.
- Krantz, A. & Pennebaker, J. (2007). Expressive Dance, Writing, Trauma, and Health: When Words have a Body. In Serlin, I. A., Sonke-Henderson, J., Brandman, R. & Graham-Pole, J. (Eds.), *Whole Person Healthcare Vol. 3., The Arts and Health* (pp. 201-229). Praeger Publishers.
- Leichsenring, F. (2014). Primär- und Sekundärprozess. In Mertens, W. (Ed.), *Handbuch psychoanalytischer Grundbegriffe. 4., überarbeitete und erweiterte Auflage* (pp. 742-744). Kohlhammer.
- Mazza, N. (2022). *Poetry Therapy. Theory and Practice* (3rd ed.). Routledge.
- Papini, G. (1934). A Visit to Freud. In *Review of Existential Psychology and Psychiatry* 9(2), 1969 (repr.).
- Shaddock, D. (2020.) *Poetry and Psychoanalysis. The Opening of the Field*. Routledge.
- Shakespeare, W. (1996). Macbeth. In *The Complete Works of William Shakespeare* (p. 879). Wordsworth.
- Van der Kolk, B. (2021). *Verkörperter Schrecken: Traumaspuren in Gehirn, Geist und Körper und wie man sie heilen kann* (7th ed.). G.P. Probst.
- White, M. & Epston, D. (1990). *Narrative Means to Therapeutic Ends*. W. W. Norton.
- Winnicott, D. W. (2005). *Playing and Reality* (2nd ed.). Routledge.