HOW CHANGE ACTUALLY HAPPENS IN SOVEREIGN NARRATIVE THERAPY: SEPARATING ARCHITECTURAL FLOW FROM OPERATOR MECHANISMS

Gary Ow

Swinburne University of Technology.

Email: garyow77@yahoo.com

ABSTRACT: *Sovereign Narrative Therapy (SNT) has been articulated across multiple theoretical, mechanistic, and applied publications; however, as the framework has matured, a recurring source of conceptual ambiguity has emerged concerning the status and function of its core process models. This paper formally distinguishes and stabilizes two canonical but orthogonal process chains within SNT: the Architectural Flow and the Formal Operator Chain. The Architectural Flow (Symbolic → Somatic → Narrative → Operator → Recursive System → Sovereign Stance) maps the vertical traversal of experience through layered domains of the psyche, specifying where clinical techniques may be appropriately applied. In contrast, the Formal Operator Chain (Symbolic Cue → Identity State → Affective Loop → Counter-State → Closure → Recursive Stability → Sovereign Stance) defines the horizontal, procedural mechanism by which identity states are actively re-authored in session. The paper argues that confusion arises when these chains are collapsed or treated as interchangeable, obscuring the distinction between system topology and the mechanism of change. Drawing on prior SNT publications, the paper clarifies that the Formal Operator Chain is mechanistically invariant but descriptively modular, allowing its steps to be named at different levels of resolution without altering the underlying recursive process. The Phase Shift Checklist and associated markers of clinical transition from Intervention to Fortification are presented to demonstrate how these dual processes converge in practice. By formally separating architectural mapping from operator execution, this paper consolidates SNT as a dual-process psychotherapy system. It resolves a key source of interpretive drift in its application and evaluation.*

KEYWORDS: Sovereign Narrative Therapy (SNT), Process Architecture, Identity Re-Authoring, Symbolic Activation, Operator Model.

INTRODUCTION

As integrative and post-integrative psychotherapies increasingly combine symbolic, somatic, narrative, and affective dimensions, a recurrent problem emerges: frameworks often blur the distinction between **where experience is processed** and **how change is produced**. Sovereign Narrative Therapy (SNT) was developed to address this fragmentation by treating the psyche as a recursive, operator-driven system rather than a linear interpretive sequence (Ow, 2024a; Ow, 2025a). This position builds on established narrative approaches to identity and meaning-making while extending them beyond linear re-storying (Angus & McLeod, 2004; White & Epston, 1990; Neimeyer, 2006). Additionally, SNT draws on depth-psychological and imaginal traditions that treat symbolic material as ontologically and clinically consequential rather than merely representational (Jung, 1968; Hillman, 1975, 1983; Corbin, 1972; von Franz, 1972). However, as SNT has expanded across conceptual, mechanistic, and applied domains, there has arisen a need to formally differentiate its internal process models to prevent conceptual conflation.

This paper argues that SNT operates across **two canonical but distinct process chains**, each answering a different analytical question. The first is the **Architectural Flow**, which describes **what domains of information pass through** as experience is transformed into stable identity authorship. The second is the **Formal Operator Chain**, which specifies **what interventions actually change identity** during clinical work. While both chains are integral to SNT and share certain terminological elements, they function on different axes and should not be collapsed.

The Architectural Flow—Symbolic → Somatic → Narrative → Operator → Recursive System → Sovereign Stance - maps the vertical traversal of experience through layered domains of the psyche. This flow has been articulated across SNT's theoretical foundations, demonstrating how imaginal material is registered somatically, organized narratively, claimed through agency, stabilized recursively, and consolidated as a sovereign stance (Ow, 2024a; Ow, 2025b). The somatic registration of symbolic material aligns with contemporary affective and trauma-informed models emphasizing embodied regulation and neurophysiological sequencing (Levine, 1997; Fosha, 2000; Porges, 2011; van der Kolk, 2014). Its function is architectural rather than procedural: it identifies **where** clinical techniques may be applied and clarifies the level at which therapeutic disruption or stabilization occurs.

In contrast, the **Formal Operator Chain** - Symbolic Cue → Identity State → Affective Loop → Counter-State → Closure → Recursive Stability → Sovereign Stance - defines the horizontal, procedural mechanism by which identity re-authoring is enacted in session.

This chain has been demonstrated across symbolic-somatic protocols, adolescent counselling applications, and affect-regulation models within SNT (Ow, 2025c; Ow, 2025d; Ow, 2025e). Hence, SNT conceptualizes identity change as a recursive system rather than a linear causal chain, drawing on cybernetic and embodied systems theory (Bateson, 1972; Wiener, 1948; Varela, Thompson, & Rosch, 1991). The treatment of identity as state-based rather than trait-based parallels integrative and parts-oriented traditions while extending them through symbolic and ritualized operators (Assagioli, 1965; Schwartz, 1995; Norcross & Goldfried, 2005). Crucially, while the naming of steps may vary depending on clinical resolution or pedagogical context, the operator sequence itself remains unchanged. Accordingly, the SNT Formal Operator Chain is mechanistically invariant but descriptively modular; differences in

terminology reflect shifts in analytical zoom rather than substantive alteration of the change process.

Failure to distinguish these two chains can lead to category errors, such as treating architectural layers as intervention steps or mistaking procedural actions for system topology. This paper addresses that ambiguity directly by formalizing the dual-process structure of SNT and specifying its respective roles.

Sovereign Narrative Therapy (SNT) extends the foundational work of narrative therapy by moving beyond the social construction of preferred realities (White & Epston, 1990) toward a recursive system that treats the psyche's "unthought known"—those deep, internalized patterns that govern identity—as actionable data (Bollas, 1987). By navigating the vertical topology of the Architectural Flow, the framework enables the construction of "possible worlds" (Bruner, 1986), where the neuropsychology of the imaginal acts as a legitimate clinical driver rather than mere representation (Brown, 2005). This process is anchored by the presence of mature archetypal structures, such as the King or Warrior, which provide the mythic scaffolding necessary for the client to transition from a "Ghost-driven" state to a stable Sovereign Stance (Moore & Gillette, 1990).

The stability of this transition is further validated by contemporary research in interpersonal neurobiology and symbolic–somatic feedback, which suggests that true identity modulation occurs when internal physiological signals are successfully re-indexed through externalized symbolic markers (Siegel, 2012; Wiesepape et al., 2024). SNT situates clinical work within **Phase I (Mapping)**, which establishes the symbolic and architectural conditions necessary for later operator-driven change. Phase I focuses on identifying the client's active **Identity States**, their associated **Symbolic Cues**, and the **Affective Loops** through which these states are recursively maintained. The primary clinical task in this phase is not intervention but **cartography**: rendering the client's inner system visible, differentiable, and intelligible as a set of states rather than fixed traits or global self-definitions (Ow, 2024a; Ow, 2025b). Successful completion of Phase I is marked by the client's capacity to recognize recurrent symbolic triggers as activators of specific identity programs and to describe their affective consequences with increasing precision. This phase culminates in what SNT terms *symbolic satiation*, wherein the client can anticipate the activation of a loop without being captured by it, thereby establishing the minimal conditions of agency required for Phase II intervention.

To anchor this distinction clinically, the paper also situates both chains within SNT's phase-based model of change, particularly the transition from **Phase II (Intervention)** to **Phase III (Fortification)**. This transition is tracked using the **Phase Shift Checklist**, which differentiates effortful, therapist-prompted identity enactment from stabilized, self-initiated sovereignty. Key markers include shifts in effort (from conscious and strenuous to automatic and fluid), affective regulation as measured by Erotic Voltage (Ve) (from peak–crash cycles to high-baseline stability), narrative stance (from "I am trying to be…" to "I am…"), and symbolic agency (from therapist-cued to spontaneously initiated symbols). Together, these markers demonstrate how architectural stabilization and operator execution converge in the emergence of a sovereign stance.

By explicitly distinguishing Architectural Flow from Operator Chain, this paper consolidates prior SNT work into a coherent dual-process model. In doing so, it strengthens the framework's

theoretical clarity, clinical teachability, and evaluative robustness, while preserving continuity with its existing published foundations (Ow, 2024a; Ow, 2025a; Ow, 2025b; Ow, 2025c; Ow, 2025d).

METHODOLOGY

Design and Clinical Orientation

This paper employs a **theory-informed clinical methodology** combining structured case vignette analysis with the formal mechanisms of Sovereign Narrative Therapy (SNT). The aim is not outcome generalization but **mechanism explication**: demonstrating how identity re-authoring occurs through the SNT Formal Operator Chain when symbolic, somatic, and affective processes are deliberately sequenced (Ow, 2024a; Ow, 2025a).

Procedural Framework

Clinical work was conducted according to SNT's **phase-based model** (Mapping → Intervention → Fortification). The present vignette illustrates Phase II (Intervention) transitioning into Phase III (Fortification) via the Formal Operator Chain:

Symbolic Cue → Identity State → Affective Loop → Counter-State → Closure → Recursive Stability → Sovereign Stance

The chain is treated as **mechanistically invariant**, with step labels used at a resolution appropriate for clinical illustration (Ow, 2025b).

Affective Regulation and Erotic Voltage (Ve)

Affective intensity was tracked using **Erotic Voltage (Ve)**, defined as a neutral, non-sexualized index of vitality, motivational charge, and libidinal energy available to the system (Ow, 2025c). In SNT, Ve is not suppressed or discharged indiscriminately; it is **reinterpreted and reassigned** through symbolic and identity-level interventions.

When erotic or libidinal charge is implicated in trauma-linked affective loops, SNT deploys the **Erotic Operator's Drive (EOD)** as a regulatory submodule. EOD refers to the psyche's capacity to convert erotic or libidinal energy from compulsive, dysregulated loops into **authorial fuel** that supports agency, containment, and identity coherence (Ow, 2025c; Ow, 2025d). Importantly, EOD does not involve sexual enactment; it involves **symbolic re-coding of arousal and vitality signals** within ethically bounded imaginal work. The mechanisms in this methodology have been progressively articulated across the SNT corpus (Ow, 2024a; Ow, 2025a; Ow, 2025b; Ow, 2025c; Ow, 2025d; Ow, 2025e).

Analytic Strategy

Clinical markers of change were assessed using the **Phase Shift Checklist**, focusing on transitions in effort, Ve stability, narrative stance, and symbolic agency. These markers were used to determine whether change had progressed from effortful intervention to self-sustaining fortification, indicating the emergence of a sovereign stance.

Case Vignette 1: Jeff and the Healing Potion (Revised)

The Situation

Jeff presented with persistent rage following the loss of his inheritance due to his mother's involvement in a financial scam. He described his internal state as "poisoned," reporting chronic agitation, intrusive resentment, and a sense that his life force had been irreversibly stolen. Despite cognitive insight, he remained locked in a high-intensity affective loop for approximately two years.

The SNT Formal Operator Chain for Jeff

1. Symbolic Cue: The Breastmilk (The Healing Potion)
A spontaneously resonant image emerged around breast milk provided by a trusted female friend. Within the session, this was symbolically reframed not as food but as a **Healing Potion**—a representation of care untainted by betrayal or contamination.

2. Identity State: The Poisoned Heir

Jeff identified his active identity state as *The Poisoned Heir*: a figure whose inheritance and bloodline had been corrupted. This state framed rage as both justified and unavoidable.

3. Affective Loop: The Rage Cycle

The dominant loop was mapped as: *Anger → Sense of Betrayal → Loss of Control → Intensified Anger*. Erotic Voltage (Ve) was elevated but chaotic, experienced as destructive heat rather than usable vitality.

4. Counter-State: The Nurtured Sovereign

Through guided imaginal work, Jeff entered the Counter-State of *the Nurtured Sovereign*. In this chamber, vitality was not extracted through rage but restored through containment. Crucially, this phase engaged the **Erotic Operator's Drive (EOD)**: Jeff learned to reinterpret the previously dysregulated libidinal charge driving his anger as **fuel for restoration rather than retaliation** (Ow, 2025c). Erotic energy was symbolically reassigned from compulsive activation to sovereign stabilization.

5. Closure: The Ritual Consumption

The imaginal act of consuming the milk functioned as **symbolic closure**. Framed as a system flush, it terminated the Poisoned Heir loop without requiring further narrative processing of blame or injustice. The action completed what the rage had been attempting—but failing—to resolve.

6. Recursive Stability: Building the Fortune

In the weeks following the intervention, Jeff reported a marked leveling of Ve. Energy previously expressed as agitation became available for sustained action. He began rebuilding his financial and vocational life incrementally; each concrete gain reinforced the Counter-State. These repetitions consolidated the Nurtured Sovereign as his default operating position.

SNT Clinical Note

Jeff's case illustrates how SNT integrates symbolic action with affective regulation. By engaging EOD, erotic or libidinal charge linked to betrayal trauma was **neither indulged nor suppressed**, but re-authored as sovereign capacity. The Healing Potion operated as a Mythic Identity Chamber that replaced the Poisoned Heir architecture, enabling rapid loop termination and long-term stabilization.

Case Vignette 2: Cecilia and the Personal Symbol

The Situation

Cecilia presented with prolonged distress related to religious identity. Raised within a highly prescriptive religious tradition, she reported increasing cognitive dissonance, guilt, and internal fragmentation as her adult values diverged from inherited doctrine. While she no longer believed in key tenets of the faith, she experienced persistent anxiety, moral paralysis, and a fear of symbolic abandonment if she were to formally leave. Previous attempts to "choose a new belief system" remained purely intellectual and failed to resolve the somatic and affective tension associated with disaffiliation.

The SNT Formal Operator Chain for Cecilia

1. Symbolic Cue: The Empty Altar
Cecilia repeatedly described an internal image of an empty altar—representing the loss of structure that would follow leaving her religion. This image functioned as a symbolic cue triggering anxiety rather than freedom.

2. Identity State: The Faithless Orphan

The active identity state was identified as *The Faithless Orphan*: a self-position marked by moral exposure, fear of punishment, and loss of existential containment. Cecilia experienced herself as unprotected and symbolically "unmoored."

3. Affective Loop: The Guilt–Vacuum Cycle

The affective loop was mapped as *Questioning → Guilt → Fear of Meaninglessness → Retreat into Compliance*. Although belief had weakened, the loop preserved behavioral and emotional allegiance to the prior system.

4. Counter-State: The Symbolic Architect

Rather than directing Cecilia toward an alternative institutional religion, SNT introduced the Counter-State of *the Symbolic Architect*. In this identity chamber, Cecilia was positioned not as a rebel or apostate, but as an author capable of designing symbolic containment appropriate to her lived values. This reframing preserved the need for meaning while restoring agency.

5. Closure: The Creation of a Personal Symbol

Closure was achieved through a deliberate symbolic act: Cecilia designed a personal religious symbol integrating values of compassion, inquiry, and ethical responsibility. The act was

treated not as artistic expression but as **ritualized authorship**—a formal replacement of the inherited symbolic authority. The empty altar image was imaginarily replaced with the newly created symbol, terminating the Faithless Orphan loop.

6. Recursive Stability: Symbolic Reinstatement

Cecilia reported a marked reduction in guilt-related affect following the intervention. Over subsequent weeks, she engaged in brief, self-initiated rituals involving the symbol (e.g., reflective pauses, ethical decision anchoring). Each use reinforced the Symbolic Architect state, stabilizing her identity without reliance on external doctrine.

SNT Clinical Note

Cecilia's case demonstrates how SNT differentiates **symbolic loss** from **belief loss**. Rather than treating religious transition as a cognitive choice, SNT framed it as an architectural problem requiring symbolic replacement. By enabling the client to generate a personal symbol, SNT preserved containment while restoring authorship. This vignette illustrates the application of the Formal Operator Chain to ideological and existential domains, showing that sovereignty can be achieved without dismantling the human need for ritual, meaning, or symbolic structure.

The Final Green Light: The Zero-Finch Response

The ultimate clinical indicator of **Recursive Stability** in Sovereign Narrative Therapy (SNT) is termed the **Zero-Finch Response**. This marker is used to determine whether an identity re-authoring process has fully transitioned from effortful regulation to embodied sovereignty. The Zero-Finch Response occurs when the original **Symbolic Cue**—previously capable of triggering affective collapse, compulsive behavior, or identity destabilization—is reintroduced and the client exhibits **no observable neuro-somatic flinch**.

From a technical perspective, this marker distinguishes Phase III (Fortification) from earlier phases of change. In Phases I (Mapping) and II (Intervention), clients typically report the need to actively regulate, reinterpret, or resist the activation of familiar triggers. By contrast, in Phase III the regulatory effort itself has ceased. The **Sovereign Stance** has become the system's default setting, rendering active resistance unnecessary.

Clinically, the Zero-Finch Response is observable through the absence of somatic indicators associated with prior loops, such as changes in heart rate, muscular bracing, heat spikes, or urgency to act. For example, in Jeff's case, references to his mother or the lost inheritance—previously sufficient to provoke intense rage—no longer produced physiological activation. His body remained settled, affect neutral, and attention unhooked from the prior narrative. Similarly, in cases involving relational compulsion, such as Thomas, exposure to formerly salient cues (e.g., unavailable partners or rival figures) failed to activate the prior identity imprint; there was no magnetic pull, no affective drop, and no measurable decline in Erotic Voltage (Ve).

The Zero-Finch Response functions as a **post-intervention immunization marker**. It indicates that the former trigger has been effectively de-indexed from both the threat response and the libidinal system. At this point, the Sovereign Narrative is no longer sustained through conscious rehearsal or symbolic effort; it has become the operative "hardware" of the nervous system. As Ow (2024) argues, sovereignty is fully realized when the Operator no longer needs

to guard against intrusion because the previously active "Ghost" has ceased to function as a viable program.

The Complete SNT Clinical Milestone Map

To situate the Zero-Finch Response within the broader trajectory of change, SNT conceptualizes therapeutic progress as a sequence of four clinical milestones. These milestones clarify the relationship between phase-based work and observable indicators of sovereignty. A summary of these developmental inflection points is presented in Table 1 ("Sovereignty Evolution: The SNT Clinical Milestone Map"), which consolidates the observable clinical markers associated with progressive stabilization of the Sovereign stance.

Table 1

Sovereignty Evolution: The SNT Clinical Milestone Map

Milestone	Phase	Indicator
I. Visibility	Phase 1 (Mapping)	The client identifies the "Ghost" as a program rather than a fixed personality or trait.
II. Agency	Phase 2 (Intervention)	The Client successfully executes the Formal Operator Chain with therapist support.
III. Ownership	Phase 3 (Fortification)	The client self-corrects emerging loops without therapist prompting.
IV. Immunity	Post-Phase 3	**Zero-Finch Response:** complete neutrality toward the former Symbolic Cue.

Together, these milestones provide a structured, observable framework for assessing therapeutic progress beyond symptom reduction. The Zero-Finch Response, as the final indicator, confirms that identity change has shifted from symbolic performance to embodied authorship, completing the SNT change cycle.

Differential Loop Resolution Across Affective and Ideological Domains

The contrast between Jeff and Cecilia illustrates the domain-general applicability of Sovereign Narrative Therapy while clarifying how different loop types require distinct symbolic leverage within the same operator architecture. Jeff's presentation was organized around an **affective–erotic loop**, in which libidinal intensity and rage functioned as a dysregulated energy source sustaining identity collapse. In this context, therapeutic efficacy depended on **Erotic Voltage (Ve) reinterpretation** via the Erotic Operator's Drive (EOD), allowing previously destructive arousal to be reassigned as stabilizing vitality within the Counter-State. Closure was achieved through ritualized symbolic action that directly engaged the somatic and libidinal registers, producing rapid loop termination and subsequent recursive stabilization. By contrast, Cecilia's distress was structured as an **ideological–symbolic loop**, characterized not by affective overload but by symbolic deprivation following the erosion of inherited religious authority. Her intervention did not require erotic charge modulation; instead, it required the restoration of **symbolic containment** through authorship. The creation of a personal religious symbol functioned as an architectural replacement rather than an affective discharge, resolving guilt and anxiety by reinstating meaning without external doctrine. Despite these domain

differences, both cases followed the same Formal Operator Chain and converged on the same terminal markers of sovereignty, including spontaneous symbolic agency and the absence of trigger-based capture. This comparison demonstrates that SNT's mechanism of change is invariant across affective and ideological domains, while its symbolic content and leverage points remain context-sensitive—supporting its claim as a unified but adaptable psychotherapy system.

Limitations and Ethical Considerations

Methodological Scope and Generalizability

The present paper is clarificatory and synthetic rather than experimental in design. Its primary contribution lies in formalizing the dual-process architecture of Sovereign Narrative Therapy (SNT) and explicating its mechanisms of change through illustrative case vignettes. As such, findings are not intended to support statistical generalization. While prior SNT publications have demonstrated feasibility across adolescent counselling, high-acuity clinical contexts, and symbolic–somatic protocols (Ow, 2024a; Ow, 2025a; Ow, 2025b; Ow, 2025d), further controlled studies will be required to establish comparative efficacy and boundary conditions across diagnostic categories.

Dependence on Imaginal and Symbolic Literacy

SNT relies on the client's capacity to engage imaginarily with symbolic material. Clients with severe aphantasia, concretistic cognitive styles, or limited tolerance for introspective work may require extended Phase I (Mapping) before operator-based intervention is viable. In such cases, premature deployment of the Formal Operator Chain risks superficial enactment rather than genuine identity re-authoring. This limitation has been discussed in prior work emphasizing symbolic scaffolding and projection tools as preparatory supports (Ow, 2025c; Ow, 2025d).

Ethical Use of the Erotic Operator's Drive (EOD)

Earlier formulations referred to this construct as the Erotic Operator's Driver; the term Drive is now preferred to reflect its non-agentive, energy-based function. A central ethical consideration within SNT concerns the deployment of the **Erotic Operator's Drive (EOD)**. EOD refers to the system's capacity to reinterpret erotic or libidinal energy as a **regulatory signal** rather than as an impulse toward sexual enactment (Ow, 2025a; Ow, 2025e). Within SNT, erotic charge is treated as *informational*—a measure of vitality, intensity, and motivational availability—rather than as content to be gratified, suppressed, or moralized. Because erotic and libidinal signals are frequently implicated in trauma, attachment injury, and identity collapse, their symbolic re-authoring can be clinically powerful but ethically sensitive. Practitioners must therefore maintain clear boundaries between **symbolic engagement** and **interpersonal enactment**. EOD interventions are confined to imaginal, metaphorical, and identity-level work and explicitly exclude sexual behavior, suggestion, or relational ambiguity. The therapist's role is to contain and translate erotic charge into sovereign agency, not to amplify it relationally.

Accordingly, SNT contraindicates EOD-focused work in contexts of active psychosis, severe dissociation, or where symbolic boundaries between imagination and reality are compromised (Ow, 2025a). The framework assumes a therapist who is capable of maintaining a stable Sovereign Stance themselves, as inadequate containment risks either avoidance of vital affect

or inadvertent over-activation. These ethical constraints are not peripheral but constitutive of SNT's design, positioning EOD as a **regulated submodule** rather than an open-ended technique.

Practitioner Skill and Training

SNT is not a manualized, script-driven therapy. Effective use of both the Architectural Flow and the Formal Operator Chain requires practitioner competence in symbolic tracking, affect regulation, and phase-appropriate pacing. As noted in earlier work, the therapist functions as a temporary Operator until sovereignty is transferred to the client (Ow, 2024a; Ow, 2025b). Without sufficient training, there is a risk of misapplication—particularly the conflation of insight with closure or symbolic novelty with recursive stability.

CONCLUSION

This paper clarifies Sovereign Narrative Therapy as a **dual-process psychotherapy system**, formally distinguishing its **Architectural Flow** from its **Formal Operator Chain**. By separating the vertical topology of experience from the horizontal mechanism of identity change, the paper resolves a recurrent source of conceptual ambiguity and consolidates SNT's internal coherence across its published corpus (Ow, 2024a; Ow, 2025a; Ow, 2025b).

Through the contrasting cases of Jeff and Cecilia, the paper demonstrates that while the *content* of symbolic work may vary across affective–erotic and ideological–symbolic domains, the *mechanism of change* remains invariant. Identity re-authoring occurs not through insight alone, but through operator-driven closure followed by recursive stabilization, culminating in a Sovereign Stance that is embodied rather than rehearsed. The introduction of the **Zero-Finch Response** as a terminal clinical marker further anchors SNT's outcomes in observable neuro-somatic neutrality rather than narrative persuasion.

Importantly, this paper positions SNT not as a competing school among existing modalities, but as an **integrative operating system** capable of coordinating symbolic meaning, somatic affect, narrative authorship, and agency within a single recursive architecture. By formally articulating its dual-process structure and ethical constraints—particularly in relation to the Erotic Operator's Drive—this paper strengthens SNT's evaluability, teachability, and clinical accountability.

Future research may extend this clarification through controlled trials, cross-cultural applications, and training studies. However, the present contribution establishes a stable conceptual foundation: SNT is neither a metaphor-rich narrative therapy nor a somatic technique with symbolic ornamentation. It is a **mechanistically explicit system for sovereign identity re-authoring**, capable of operating across domains while preserving ethical containment and structural rigor.

REFERENCES

Angus, L. E., & McLeod, J. (2004). *The handbook of narrative and psychotherapy*. SAGE Publications.

Assagioli, R. (1965). *Psychosynthesis: A manual of principles and techniques*. Hobbs, Dorman & Company.

Bateson, G. (1972). *Steps to an ecology of mind*. University of Chicago Press.

Bollas, C. (1987). *The shadow of the object: Psychoanalysis of the unthought known*. Columbia University Press.

Brown, J. W. (2005). *Process and the unformalized: The neuro-psychology of the imaginal*. Oxford University Press.

Bruner, J. (1986). *Actual minds, possible worlds*. Harvard University Press.

Corbin, H. (1972). *Mundus imaginalis, or the imaginary and the imaginal*. Spring Publications.

Ecker, B., Ticic, R., & Hulley, L. (2012). *Unlocking the emotional brain: Eliminating symptoms at their roots using memory reconsolidation*. Routledge.

Fosha, D. (2000). *The transforming power of affect: A model for accelerated change*. Basic Books.

Hillman, J. (1975). *Re-visioning psychology*. Harper & Row.

Hillman, J. (1983). *Healing fiction*. Station Hill Press.

Jung, C. G. (1968). *Archetypes and the collective unconscious* (R. F. C. Hull, Trans.; 2nd ed.). Princeton University Press.

Levine, P. A. (1997). *Waking the tiger: Healing trauma*. North Atlantic Books.

Madigan, S. (2011). *Narrative therapy*. American Psychological Association.

Moore, R., & Gillette, D. (1990). *King, Warrior, Magician, Lover: Rediscovering the archetypes of the mature masculine*. HarperOne.

Neimeyer, R. A. (2006). Re-storying loss: Fostering coherence in self-narratives. *Journal of Constructivist Psychology, 19*(2), 127–145. https://doi.org/10.1080/10720530500508745

Norcross, J. C., & Goldfried, M. R. (2005). *Handbook of psychotherapy integration*. Oxford University Press.

Ow, G. (2024). Re-authoring identity through the psyche-myth architecture: A structured framework for transpersonal psychotherapy. *Journal of Contemporary Approaches in Psychology and Psychotherapy, 2*(2), 91–114. https://doi.org/10.57017/jcapp.v2.i2.05

Ow, G. (2025a). Inner architecture and narrative re-authorship: A contemporary psychotherapeutic approach for high-acuity clients. *Journal of Contemporary Approaches in Psychology and Psychotherapy, 3*(3), 7–24. https://doi.org/10.57017/jcapp.v3.i3.01

Ow, G. (2025b). The symbol does the work: Deploying somatic-symbolic tools for emotional recursion in therapy. *Human Arenas*. https://doi.org/10.1007/s42087-025-00527-5

Ow, G. (2025c). Symbolic projection tools in adolescent counselling: The Animal Gate and Desert Path protocols. *Journal of Humanities and Social Sciences, 4*(1), 34–49. https://doi.org/10.51317/jhss.v4i1.747

Ow, G. (2025d). Sovereign authorship: A model of meaning-making, stance selection, and affect regulation. *Journal of Humanities and Social Sciences, 4*(1). https://doi.org/10.51317/jhss.v4i1.870

Ow, G. (2025e). Precanonical symbolic rituals and the erotic archive: Mapping the roots of mythic selfhood through evocative autoethnography. *Ife PsychologIA, 33*(2).

Porges, S. W. (2011). *The polyvagal theory: Neurophysiological foundations of emotions, attachment, communication, and self-regulation*. W. W. Norton.

Schwartz, R. C. (1995). *Internal Family Systems therapy*. Guilford Press.

Siegel, D. J. (2012). *The developing mind: How relationships and the brain interact to shape who we are*. Guilford Press.

Van der Kolk, B. (2014). *The body keeps the score: Brain, mind, and body in the healing of trauma*. Viking.

Varela, F. J., Thompson, E., & Rosch, E. (1991). *The embodied mind: Cognitive science and human experience*. MIT Press.

Von Franz, M. L. (1972). *Patterns of creativity mirrored in creation myths*. Spring Publications.

White, M., & Epston, D. (1990). *Narrative means to therapeutic ends*. W. W. Norton & Company.

Wiener, N. (1948). *Cybernetics: Or control and communication in the animal and the machine*. MIT Press.

Wiesepape, C., et al. (2024). Advances in identity state modulation through symbolic–somatic feedback. *Journal of Computer-Assisted Psychotherapy, II*(2).