Refinding the Object and Reclaiming the Self

The Dream as Communication between Self and Others

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The Dream as Communication between Self and Others

Dreams told in the interpersonal setting reveal a new aspect of the unconscious: family members know things unknown to the dreamer. Using this perspective, we can apply the use of dreams to the communication between self and object in family and marital therapy.

Use of the dream as communication in the interpersonal field was first brought home to me in a session with the family of the first psychiatric patient assigned to me as a resident. Judy Green was 14 upon admission, an acting-out girl with the diagnosis

of borderline personality. As a fledgling psychiatrist, I found her immensely appealing. I treated her individually for almost two years when difficulty that her younger brother, Bob, was having brought the whole family to therapy with me. At the time of the session reported here, I had been seeing the family for almost a year. Their treatment was about to terminate because I was moving from Boston to Washington, DC.

The family included Judy's mother and stepfather; Judy, who was now 17; her 12-year-old sister, Deb; Bob, age 11; and Sam, age 6, the only child of Mr. and Mrs. Green's marriage. An older brother was away at college and did not attend. The family as a whole had been intensely dedicated to the therapy. As the session began, Mrs. Green said she had had a dream that followed her guilt that the family had picked on 11-year-old Bob in the car on the way home after the previous week's session.

Mrs. Green dreamt that there was a friendly purple lion near her son Bob. In

the dream, she was unsure if the lion was a threat. She wondered if she should protect Bob, who was a baby in the dream, or even if she needed to evaluate the situation. She was so unsure. Was the lion really friendly?

Mrs. Green related the dream to her neglect of Bob when he was little. She remembered a time when he was 2 years old. He had been unsupervised and had wandered into the middle of a main road in his diapers.

Mr. Green thought the dream had to do with his wife's lack of trust in men, including himself. Then Mr. Green, whom the children often teased for his bad jokes, quipped that perhaps "lion" meant "lyin' " and he cited the pun in support of the idea that he, who was often not believed, was the menacing lion.

Mrs. Green replied that she felt that in the dream Bob was saved, although perhaps she would not be. Perhaps it was she who was threatened.

Bob, who had sat quietly so far, now countered his mother's earlier focus on him

as the endangered one in the family by saying that perhaps the lion was really his little brother, 6-year-old Sam, who was, after all, the baby of the family. This was a particularly interesting idea, because it ran against the reality of Sam's charmed life in the family. It was rare for anyone —except Bob —to direct aggression at him.

Meanwhile, Sam was having a ball. As soon as his mother had reported the dream, he had gone to work drawing a picture of it (Figure 8-1). He asked if anyone had noticed that his father's tie was purple. We could all now see that Mr. Green indeed had a purple tie. Sam drew a picture, which he called "Andy, the purple lion." As with many youngest children in family therapy, Sam had an ability to speak the truth without remorse and without anyone minding. It must be her husband who was Mrs. Green's original "purple lion" and her dream revealed her sense of him as a threat to her and her children. She had held this view for many years, both when Bob was small and now too, when Sam was the current baby.

Figure 8-1. Sam's "Andy the Purple Lion"

Meanwhile, my own association was to the words "David in the Lions' Den" with the complete conviction at that moment that "David"-not Daniel —was the name of the Biblical hero so endangered in the lions' den. In another moment I realized I felt in the lions' den, that the Greens had become threatening to me.

While I was countertransferentially taken over by the sense of danger and confusion in the family, Judy, who had lately often taken the role of resident therapist, spoke up. She thought that the dream represented the way

the family blamed Dad when things got tough. Now, in the therapy, it was not so clear that Dad really was the bad guy. She thought that just as Mom was confused in the dream, so were they all in the session, but it was better that they were thus confused. They used to blame each other with conviction, she said, but now they weren't so sure there was really a raging lion to pin everything on. Grinning at her stepfather as she copied his way with words, she quipped that maybe the lion was "lyin' in waitin' " inside each of them. With Judy's interpretation, I also felt relieved.

During the rest of the session, the projections of aggression onto Bob and Mr. Green, were considered, with the result that the family felt less like a "lions' den" — less that way to me and less so to them. At the end of the session, the family agreed that "Andy, the purple lion" had indeed become considerably friendlier.

I knew at the time that this dream was an interpersonal communication. It provided material that led to insight into the family as a group.

With the passage of time and further experience, I now realize that the dream spoke to the family's transference to me. They knew, because I was moving away, that I could not provide an adequate holding environment for much longer. This already presaged their fears, which soon surfaced in the termination phase. And in this session, they were trying to deal with shared anger at me for leaving, which then threatened them all.

This dream was more than a report of an intrapsychic experience. It was more than the intricate combination of day residue with internal fantasy or the fulfillment of an infantile wish as Freud originally described in *The Interpretation of Dreams* (1900). It did not merely represent the comparison of old and new affective experience during the matching process fundamental to the storing of new information in the memory tree (Palombo 1978). Beyond these individual functions,

it also expressed something for the family group, especially in relation to the therapist.

FAIRBAIRN'S DISCOVERY THAT DREAMS DEPICT THE STRUCTURE OF SELF AND OBJECT

For me to make a case in object relations theory for that dream I heard more than 20 years ago and described in the previous section, I present here an overview of the status of the dream in, and its extension into, object relations theory.

At the end of his project of building an object relations theory of the personality, Fairbairn (1954) emerged with a six-part model of psychic structure: a central ego and its ideal object, characterized by reasonable internal harmony; the rejecting object and the internal saboteur (which he later called the antilibidinal ego), characterized by anger, the anxiety of persecution, and frustration; and the

exciting object and the libidinal ego, characterized by longing and the anxiety of excessively aroused neediness. (This theory is pictured in Chapter 3, Figure 3-1.)

These internal structures were built around the images of the parents or other primary objects and later modified by new experience with primary objects such as spouses or children. But what is crucial to this view of psychic functioning is that the internal structures of the ego are capable of generating meaning and action and that they are in constant dynamic relationship with each other (Fairbairn 1952, Ogden 1986).

The development relevant to consideration of dreams is the step taken in Fairbairn's 1944 paper, "Endopsychic Structure Considered in Terms of Object Relationships." Through analysis of the dreams of his analysands, he demonstrated the action of the six internal psychic structures and drew

his conclusion that dreams were to be understood not as wishes, but as *statements of internal psychic structure*. He was then able to demonstrate the nature of the relationship between the elements of the psyche as illustrated in the dreams. For instance, in the dream of a woman (1944, pp. 94-101) he located her central or observing self; an ideal object in one rather reasonable version of her experience with her husband; an exciting object as another image of her husband; and an image of the persecuting object in the form of her mother attacking her.

In a later paper (1954), a patient, "Jack," now understood to be Fairbairn's analysand Harry Guntrip (Hughes 1989), dreamt of being tempted with enticing but poisonous milk, being caught between the exciting object and the persecuting one.

In none of these cases did Fairbairn say that these dreams, or the internal objects they depicted,

gave form to the actual mother or husband. They were painful internal versions of these figures, constructions of the dreamer, which represented internal objects, not the actual living people.

Fairbairn reasoned that for dreams to express either wishes or conflicts, they necessarily must express aspects of the structure that derive from those wishes and conflicts. This led Fairbairn to the idea that the dreams could, themselves, be seen as statements of the underlying psychic structure. Since he defined these structures as made up of self and object in relationship, the dreams described the nature of internal object relationships, which, in themselves, made up psychic structure.

THE DREAM AS INTERPERSONAL COMMUNICATION

If we accept this view of the dream as a statement of the internal object relations of an individual, then when a dream is reported in the hearing of others, it will convey the dreamer's internal object relations. When Mrs. Green reported her dream in the family situation described in the opening section of this chapter, her husband and children understood intuitively that it gave expression to the way images of them lived inside her. In describing her internal psychic situation, she was describing her internal family and her internal family was made up of primary objects based on her images of the people in the room with her, namely, her husband and children, who had inherited their role relationships in her intrapsychic realm from her original primary objects based on experience with her own parents. So this dream, reported in the therapy setting, formed a communication from Mrs. Green's internal object relations to her external objects.

In the first instance, the dream is a statement of Mrs. Green's internal object relations to herself. She began by considering her relationship to her son Bob, who probably stood also for her own needy self. She projected her own "lion bits" onto her husband, the painful part of herself that was a rejecting, angry, or negligent mother. We also heard about her in the dream as an observer, wanting the best for her child, Bob, who is her ideal object. But in the dream Bob also represents herself both as needy and as exciting of a longing for need and protection. She is unsure if she can function parentally under the threat of the lion —the persecuting object—but she is also unsure of the nature of the threat: the lion is friendly looking and should perhaps be trusted.

This confusion between threat and trust of parental figures was a feature in this family throughout generations. Here represented in a dream

is the telltale combination of a parental figure who is seductive and threatening at the same time, and a negligent parent who looks the other way. Her dream revealed Mrs. Green's internal constellation, but it was her children who had acted out the unsolved conflict between dynamic structures: Judy and her older brother had had intercourse several times a few years earlier during the height of family distress.

THE FAMILY'S OBJECT RELATIONS

When Mrs. Green reported her dream, it became a communication between family members. It informed them about her individual conflict at that moment, and in the ensuing discussion, it facilitated expression of the way internal relationships between self and objects influenced the family group.

When the family heard the report of Mrs. Green's dream, they heard it through the ears, as it were, of

their own internal objects. Children in a family therapy setting are in the room with the very people who are the stuff of which their own internal objects have been fashioned. These internal objects act as a kind of scanning device (Ogden 1986) or lens through which events are perceived. So Mr. Green heard the dream in terms of what it said about him. He understood that he was cast as the ambiguously threatening object. That made Mrs. Green his accuser, as she had often been. Their previous therapeutic work had let him develop an observing part of his central ego so that he had enough distance to see the situation and deal with it, which he did by employing the helpful defense of humor.

Bob understood that he was being placed in a threatened position. In a way he was being offered to the lion by his mother, who was, in the dream, failing to protect him.

And Sam understood a great deal about the situation: that the proposed lion was none other than his father, whom he was determined to rehabilitate by coloring him a friendly and perhaps royal purple.

The index patient, Judy, saw the dream as a picture of the family's projective identificatory system in which her mother was putting parts of her own internal quandary into other members of the family, who for reasons of their own psychic economy introjectively identified with these.

And finally, although I did not see it then, the family as a group were letting me know of their alignment in regard to me and my leaving them.

PROJECTIVE IDENTIFICATION AND UNCONSCIOUS COMMUNICATION

For the individual, projective identification is the mental process in which hated or threatened parts of the self are put into the other person as a defense against one's own aggression or as a way of controlling oneself and therefore the other person unconsciously (Klein 1946, Segal 1973). Here we can look at the process as applied to the family. In Chapter 3, we reviewed the way projective identification, along with its counterpart, introjective identification, is the mechanism of fundamental unconscious communication, the vehicle through which each person makes unconscious identifications with others. In the couple or family, the group divides up personal qualities and lodges some more or less in one person, others in another (Dicks 1967, Zinner and Shapiro 1972).

In this dream, and especially through Judy's interpretation of it, we can see the way that the telling of the dream demonstrates projective and

introjective identification in action. All of the family members in the room had a response to the dream in terms of their understanding of Mrs. Green's quandary. But most important, each of them interpreted the dream in terms of the meaning for his or her own relationship to her. Since she was a primary object for each family member, each association from a family member has to be understood in that light of their implications for that person's internal object relations and psychic situation.

THE TRANSFERENCE MEANING OF THE DREAM

Finally, there is the matter of the transference implications of the dream. From an intrapsychic perspective on the dream, we might speculate that Mrs. Green felt threatened in the therapy and that I was being experienced as a lion.

The family's combined transference was first spoken for by Mrs. Green as an ambiguously combined hope and fear. But the family members, who understood this, worked to modify her opening statement and developed a mature view of hope in the presence of uncertainty about the object. The dream was reorganized as belonging to them all. The whole group, including the therapist, worked on the dream through the sharing of associations to uncover the unconscious themes, much as a dream might be dealt with by a single dreamer in an analytic session. The result was a gain in understanding about the nature of relationships inside the family, and, by implication, about the family's relationship to the therapist as well.

THE DREAM AS INTERPERSONAL COMMUNICATION IN INDIVIDUAL THERAPY

Dreams convey interpersonal meaning even within the intrapsychic focus of individual therapy or psychoanalysis. Three examples underscore the point that the telling of a dream in psychoanalysis or individual therapy is an interpersonal communication. Dreams join in the conversation of the therapy and express the issues between therapist and patient, now expressing the resistance of the dreamer, now the shift in psychic structure. And on occasions, therapists have dreams about their patients that indicate they have joined in the process, as in the following example.

A male supervisee reported that his patient had the following dream:

> A guy at work had control over me. He was involved in sexual abuse along with a woman who was there at his apartment. He took me there. He had captured my girlfriend and forced me to have sex with her against my will. They took her pants off, and I was excited at the prospect of

finally making love to her, especially since it wasn't my responsibility. I moved my mouth toward her genitals, but then I rebelled against the man so that at least she would know it was done with a struggle.

In the rest of the dream, the patient overcame the man and took him to the police station. In the process, a boy assisting the man was killed.

The patient associated the abusing man with the therapist, who he remembered had recently said that the patient regarded the therapist as a "cockteaser." Patient and therapist were able to connect the patient's ambivalence about genital sexuality with his ambivalent attitude toward therapy and to his fearful, yet aroused feeling about his therapist.

A few days later, the patient extended the theme when he had fantasies during his therapeutic hour of a car crash while he was driving his girlfriend, and of performing fellatio on a childhood boyfriend who,

in the fantasy, did not respond. He linked these fantasies to feelings about the therapist.

That night, the therapist had a dream, which he reported to me in supervision with an embarrassed forthrightness. He said the following:

> I was with a baby. I moved down to kiss or suck its small, retracted, and gentle penis. Surprisingly, I felt no revulsion, and I had a sense on waking of empathy for the patient you and I discuss, and for a homosexual patient I see as well. I thought of "mouth-to-mouth resuscitation" and of trying to bring my patient to life through this act, which I would in fact find personally repulsive.

The patient's dreams and fantasies had gotten underneath the skin of the therapist. In a way, this dream was a communication from the therapist to himself, a countertransference dream of the kind reported by Searles (1959). But the therapist's dream had expressed itself *in the language of the patient*,

indicating an introjective identification, which had reached a depth of resonance that touched the therapist deeply and that touched me in the supervisory hour. The therapist's dream demonstrated that the patient's dreams and fantasies had gone further than merely reporting on his inner condition. They had penetrated the therapist to convey a message that altered the therapeutic relationship itself. The dream's representation of the patient's object relations had also been a communication to the therapist about the relationship of the patient's self to the therapist as an object. And in making this communication, the patient had modified his own object relationship with the therapist. The therapist felt that his understanding of the patient was changed-as must happen if a therapy is to progress—but also that his notion of himself was altered to include a greater tolerance of the ambiguous sexual identification of the patient and of his own more successfully

repressed perverse impulses. This expansion of the therapist's self-image made greater acceptance of the patient possible.

Two further examples underscore dramatic variations of the process of the dream as an interpersonal communication in individual therapy.

The first comes from my work with a woman whom I saw in consultation after her female analyst had committed suicide. The patient, in grief and agitation, described her gratitude to her analyst for the major gains she had made in her life, and her rage at her for committing suicide. The patient's mother had died in childbirth when the patient was 3, leaving her with a profound sense of abandonment, which was painfully aggravated by the trauma of her analyst's sudden death.

The patient said that although she herself had never felt suicidal, she had a dream that struck her as oddly alien some weeks before the therapist's suicide.

> In the dream, I was driving my car. The grim reaper appeared in the rearview mirror. Looking back, I could see it clawing at the rear window of the car, its face pressed against the window.

She had reported this dream to her analyst, who had insisted that it represented death wishes of the patient despite the patient's denial.

The patient's identification with her dead analyst was profound. My work with her focused first on sorting out whether she herself had a suicidal identification with the analyst. I came to believe that this patient had introjected the analyst's determined suicidality as an identification with the analyst's self being hunted by a murderous internal object. The grim reaper in the rearview mirror was also the analyst. The patient's report led me to believe that before her death, the analyst had been pursuing and even hounding the patient, projecting her own internal situation without insight. Her analyst's deathly intent was still pursuing the patient like a foreign body lodged inside her that would not relent. I learned that on the margin of some clinical

notes found near the dead analyst, the analyst had written, "I wonder if this patient knows of my plan to kill myself."

Clearly this dream represented the receiving of an unconscious message of deadly accuracy. Whereas the dream, on the one hand, stated the unconscious communication the patient had received from the analyst, on the other, it must also have been the patient's desperate, half-knowing attempt to communicate with the analyst about the state of affairs in the analysis and about the analyst's own situation. If the analyst's note in the margin was not about this analysand, then at least one other of her patients had unconsciously also perceived the depth of the analyst's despair.

The second example comes from a young analytic patient, Paul, who at one phase of analysis regularly reported dreams of a girl in whom he was interested. She refused to be romantically or sexually involved with him, but she would tell him intimate details of her life and relationships with other men. I was puzzled by Paul's detailed and insistent reporting of her dreams. It was not that my

patient did not report his own dreams. He also reported many of them vividly. In an identification with me, he consciously played analyst to this girl and valued her dreams.

> He reported one of her dreams in which she dreamt that a man was walking down the road. She thought the man was Destiny-not her destiny, just "Destiny." Then there was a pimp trying to push her off on a boy who was to be "the date of her lifetime." She got dolled up and as she walked to the elevator, she wondered why her hand was mangled. Now holding a dog on a leash, she met the boy. In his car, she asked him if she could kiss him. They kissed, and then she felt she had to leave. Three women were present as she left, and so was the figure of Destiny. She passed by him, ignoring him, but knowing she was not getting away. Her hand had been bloodied again, so it was twice mangled.

Paul had tried to work on the dream with the girl and told her that the dog was symbolic of her genitals, showing that she feared that if she became sexually active, she would be endangered. She had been most

interested in the three women, who Paul thought stood for three parts of herself.

Paul had begun this session by discussing his use of this girl as a surrogate for himself, that in a way he had been living through her. Then he associated further to her dream himself. He identified himself as the pimp in the dream. He was in the process of breaking up with this girl. The dream was painful for him because it reminded him of a recent time when she had spent the evening with him and then spent the night with another man. He said that the girl had once told him she felt he forced her on another man.

This dream was another in the list of examples of Paul's attempting to find himself vicariously. On the one hand, his focus on someone else kept him away from his own analytic work. And on the other hand, the search in someone else did further his search for himself and his own sexual identity. Just before reporting this dream, he mentioned his decision to give up his relationship with this girl, because he thought he should focus on the psychoanalytic relationship with me and because he thought I would no longer want

him to use this woman as an externalization. He felt that he was thereby taking me up on the opportunity that I offered within the treatment, rather than continuing to run from it.

I offer Paul's comments not to suggest what he should have done about the relationship with the woman or about her dream, but to illustrate that there was a chain of communication, conscious and unconscious, in which the dream played a role. When the girl told him the dream, it communicated powerful things to him, only some of which he may have understood consciously. The dream certainly functioned to maintain an emotional intimacy between them despite the sexual distance. My patient had much to say about what the dream meant about his friend, and he identified himself as a meddlesome character in her life. He was threatening her sexually, and at the same time he felt threatened by the arousing effect she had on his own sexual feelings. He was also identified with her as a

girl and said, "I think she wants me to be her girlfriend." That thought was not unwelcome to him.

This dream clearly conveyed the ambiguous quality of this patient's identifications and the way in which he attempted repeatedly to find himself through others. It also conveyed a message to me in the transference, given as it were by the proxy of his friend's dream, namely, that the effect of sexual relationships is to mangle a person. The dream represented his fears about his relationship with me in which he felt he was like a girl I might mangle. This dream was part of a chain of communication to me as his object. One of the elements it conveyed most clearly was my analysand's identity confusion, the fundamental confusion about himself in which he found it easier to know who he was through identification with his objects.

DREAMS IN COUPLE ASSESSMENT

In therapy formats specifically designed to deal with the relationship between a man and a woman, dreams are also an especially useful vehicle of unconscious communication. This example comes from a couple seen in a single consultation. The therapist who was seeing them in marital therapy asked me for a consultation concerning the question of whether the wife's loss of interest in sex might respond to behavioral sex therapy methods.

Matt, age 43, and Edie, age 36, had been married five years and had lived together for the previous five. Matt had already had one failed marriage. When his relationship with his former wife was deteriorating and they were already financially strained, she had gotten pregnant for a second time by going off birth control pills without telling him. He felt so deceived that he left soon after. Although he continued to support the two children of that marriage, he had not seen them since leaving his former wife eighteen years previously. He noted that he would make his

last alimony payment in two years, when he would be 45.

Both Matt and Edie were frightened of committed intimacy. In addition to the sexual issue that led them to seek consultation with me, they were facing the question of having children. Edie, who had not thought she wanted children, now felt she did. They both thought that having a child would require commitment to each other more urgently than before. Their shared fear of commitment was embodied in Edie's loss of sexual interest and fear of arousal since the marriage. Although she had hardly ever been orgasmic, her sexual desire, level of arousal, and functioning had been satisfactory before the actual marriage. After marriage she not only lost interest, but became generally aversive to sex. As happens not uncommonly, just before the consultation they had a sexual encounter that had gone pretty well, but that had not happened in years.

The battling, alcoholic marriage of Edie's parents gave her internal reasons for fearing marital commitment. Matt's parents had held together in an unhappy marriage. That

experience coupled with the hurt about the loss of the family of his first marriage increased his fear of ever making another commitment.

Toward the end of the interview, I asked the couple if they had any recent dreams. Edie initially answered my question in terms of her hopes for the future. She said that she had dreamt of a life together with children and a happy family.

Then Matt, understanding that I meant nighttime dreams, said, "But she has nightmares. In one of them her face was coming off in chunks."

"Oh, yes," Edie said. "I was losing parts of my face. Pieces of it were falling off. My therapist and I had just terminated individual therapy, so it may have had to do with that. I couldn't understand it. It made no sense."

"Could you make anything of it, Matt?" I asked.

"No, I couldn't," he answered. "She usually has chase dreams, not ones like this."

Edie said, "I often have nightmares, but this one was particularly frightening. Usually in my dreams, I'm having sex, but I'm having sex with a man without a face. Sometimes, I wake up having an orgasm. That makes me hopeful. If I can have them in my sleep, maybe I can have them someday when I'm awake."

I said, "I think it's hopeful, too." Turning to her husband, I asked, "How about your dreams, Matt?"

Matt said, "If I have an erotic dream, I'm not even looking to see who it is." He laughed as though it didn't matter. "They don't have a face, or even a head. It's just sexual contact with their body."

This couple had no understanding of the dreams, which they reported in a particularly interpersonal way. It interested me that Matt reported Edie's dreams, and only then did she elaborate. They did it together. He was interested in her dreams in her sleeping state, whereas she was interested in the life dreams of the waking state. When Matt told of his

dreams, they had an interesting, if alarming, congruence with hers. Edie's dreams of faceless men in an erotic situation were matched by Matt's sexual dreams of faceless, and even headless, women. After Edie reported her dream, which she felt to be particularly alarming, of her own face coming off in chunks.

This couple was not yet able to understand their dreams in the way the Green family (discussed at the beginning of this chapter) could toward the end of successful therapy. Nevertheless, even in an assessment session with a couple not experienced in therapy together, we can still understand their dreams as communications between self and object.

Both Matt and Edie were fearful of a committed relationship, and the sexual distance had been one way of avoiding some aspects of intimacy and commitment, which then had to be found in other ways. It also avoided the question of children. Each

member of this couple had a severe problem of loss of self. Edie saw herself in Matt and saw there the loss of herself. Usually her excited object was faceless, but as things got closer between them, she feared the loss of her own face. I took this to mean the loss of herself, both of her identity and of her internal cohesion. Either the self or the object would be annihilated. The precipitant was the threat of the couple's intention to move closer, toward more commitment and sexual closeness. So far, Edie had kept her self together by an hysterical conversion reaction, of the kind described by both Freud (Breuer and Freud 1895) and Fairbairn (1954). She acted as though the threatening objects, both the exciting and rejecting kind, were contained in genital interaction. By repressing genital sexuality and the bad part objects it contained for her, she was able to maintain relations with a good, accepting object in Matt. She substituted a way of relating for an internal problem, and her dream expressed the terror

implicit in the new way of relating. She was afraid she would lose herself.

For Matt, an object with a face was also an ultimately threatening object. His exciting object had been split so thoroughly from a whole object that it lacked both a face and a head. We can speculate that a woman with a face was a persecuting object for him, just as a man with a face and a woman without a face were for Edie.

These dreams tell us of the congruence of the marital partners' inner states. The way the dreams are told and related to in the session tells us more about the intertwined identities of the partners. The dreams reveal how they find themselves in each other, and how they share the fear that a relationship complete with sexuality will kill them, individually and as a couple. Between them, they divide the rejecting and exciting objects through mutual projective and introjective identification. Edie takes

on the qualities of the exciting and rejecting object for both of them, and Matt takes on the qualities of the withdrawn object they both seek (Guntrip 1969). Underneath this collusive division and supported by Matt's interest in Edie's dream, we can see their fundamentally shared psychic state. For each of them, and for the two of them together as a couple, a whole object containing both face and genitals threatens them with annihilation of the self.

Finally, we can note that this nightmare, in which both Matt and Edie shared, was dreamt just before the consultation interview, which was conducted as a teaching interview in front of an audience. The dream was a communication to me and to their regular therapist about their shared fear of "loss of face," of the exposed intimacy of the interview. Under these circumstances, it is no wonder that Matt had such an interest in Edie's dream. He usually relied on her for the emotional responses in their

marriage, and similarly he put her dream forward as the emotional communication to me in the consultation.

Work with couples and families such as these demonstrates that a dream is the royal road to more than the individual unconscious described by Freud (1900). In the conjoint therapies, the dream is also the royal road to understanding shared unconscious communication and mutual projective and introjective identification. In Chapter 9, I consider in detail therapeutic work with the dream in ongoing couple therapy. This gives further illustration of the role of the dream in communication between spouses and between the couple and the therapist in the transference.

DREAMS IN GROUP AND INSTITUTIONAL SETTINGS

In groups and institutional settings, dreams also communicate unconscious components of the inner life of one individual, making these available for resonance with the internal object lives of members of the entire group. When a group therapy member reports a dream, it is understood by the various group members in differing ways. These differences contribute to an enlarged understanding of the dreamer, and also elucidate issues for the group. The same is true, however, in work groups. The following illustration is from a group of eight therapists meeting to study concepts of object relations family therapy in an intensive and demanding week-long institute. The group's task also included the examination of their own process in relation to learning these concepts.

> In a small group meeting, a man reported his dream of the previous night. The phone rang and his dead father was on the line. The man awoke and was

momentarily convinced that his father
was actually speaking to him.

This man was a psychiatrist who practiced family therapy in another city where he felt somewhat isolated from his colleagues because of his interests. He told the group that his father had been a businessman who died some years before. He had a close relationship to his father, who had stood by him and offered frequent advice. Lately, the man had felt he had moved beyond his father's own achievements in life.

A woman in the group said that this was a dream about the loss involved in growth. She, too, had been practicing family therapy of a different kind than she was learning here. She was drawn to new psychodynamic concepts, but she realized that it meant moving beyond the old precepts and away from her old teachers, the "fathers" of family therapy she revered. She wondered: Did the dream of the return of the dead father mean that the man was missing his old mentors.

Other members of the group responded that they, too, had been feeling a loss of the inner companionship of the leaders of family

therapy, such figures as Jay Haley and Salvador Minuchin. Another man said that he had found himself reaching back to his old teachers and their theories for comfort against the strain of learning such a new way of working and the threat he felt to his sense of himself.

At this point the man who had shared the dream said that these comments made sense of the dream for him. In feeling overwhelmed by the new ideas and experiences of the institute, he must have been reaching back to the simpler comforting advice of his father, now dead, to offer him support and the comfort of the old ways. The group acknowledged sharing this regressive longing and returned to considering the ideas and clinical experiences that were before them.

The next example comes from an outpatient mental health clinic in the middle of a major reorganization that was taking place in the wake of the resignation of the previous director and amid accusations that the clinic management might not be competent. The staff was developing new

procedures, and three clinicians were taking up new roles as leaders of therapy teams.

At the first meeting of the newly constituted leadership group, consisting of the three newly promoted clinicians and the clinic administrator with Dr. Thomas, the new director, Sarah, the clinic administrator, entered the room laughing and said that she had a dream the night before.

> I dreamt that Bonnie (one of the team leaders) wanted to rearrange the notebooks I had put together for the new procedures. It upset me a lot. Bonnie wanted to reverse things so that the blank pages were in front and the sections I've organized were in the back.

Having reported her dream, Sarah set out three beautifully organized binders as her administrative contribution to the reorganization. The three team leaders and the other staff burst out laughing in acknowledgment of the way she feared they would undo her work.

Bonnie had also had a dream.

> This clinic had turned into a giant cake bakery. It was a huge operation. There were a hundred or so dump trucks, and Dr. Thomas (the director) was overseeing it all. There were all sorts of comings and goings, a very big operation.

The group laughed harder. The reference to "the big operation" spoke to the shared sense of being disrupted and overwhelmed by the expectations of the new director, who was experienced as "dumping" the mess on the team leaders and expecting them to make cakes out of it.

Sam, another of the team leaders, said that his dream was more pointed.

> Patrick Swayze of *Dirty Dancing* fame and an unidentifiable woman celebrity had somehow gotten onto our staff and were seeing patients, all by my arrangement. I realized to my horror that I had not assigned them to teams or given them any cases. It was a mess.

By now the group had given over completely to laughter at the caricature of their fears of incompetence and the hint of destructive pairing in Sam's dream. This

dream, more than the previous two, seemed to pick up the fears and accusations of a wild underlife full of impropriety and craziness already being made by some staff members. Dr. Thomas said that it made him think of a part of the movie Dirty Dancing in which the doctor/father makes false accusations with no knowledge of what is going on among the children.

Finally, the third team leader, Janet, said,

I had a dream. But I couldn't relate mine to the clinic. It was weird and uncertain. People who might be dead were there, but they were people who aren't dead. Things were all reversed and uncertain.

Dr. Thomas noted the sense of dread that there would be deadly mistakes. He was reminded of a patient of Janet's who had recently had to be hospitalized, and he wondered if he would be called on to deal with casualties among the staff.

These dreams occurring simultaneously in an administrative group under strain expressed even in their manifest content both the shared anxieties

during the clinic's transition and the personal anxieties of staff members. All four dreams represent accusation, incompetence, wildness, and threats of patient deaths. They reflected the day residue of the climate in which the reorganization occurred, where staff shared the fear that efforts to make something organized out of chaos would be undone. The laughter, joking, and elaboration of the dreams became part the group's way of acknowledging and bearing these anxieties as they promptly went on to attack the practical problems before them. Their work proceeded smoothly and resulted in a thorough reworking of the clinic procedures, an eventual enhancement of morale in staff and patients, and clinic stabilization and growth. The telling of the dreams to each other and to the new director was an act of communication and sharing from which to build structure out of unconscious chaos.

THE DREAM IN SOCIAL AND CULTURAL COMMUNICATION

The most famous example of the large-scale institutional effect of the dream is found in the Bible. Joseph's interpretations of Pharaoh's dreams incorporated the national interests of both the Egyptians and the Jews. Joseph took full advantage of the use of the unconscious of this singularly important single dreamer, because Pharaoh's individual concerns embodied the concerns of his nation and therefore were of national importance. I like to think that Joseph unconsciously assumed that the nation was inside Pharaoh's unconscious and that the dreams represented that aspect of Pharaoh's understanding that was beyond himself.

A more recent dreamer of note, of course, is Freud. He has had, for us, as broad an influence as Joseph on the Egyptians. The details of Freud's

dreams and their relation to his life issues as revealed in self-analysis convinced his readers, as no amount of theorizing would have done, of the power of the unconscious. His dreams and findings about them, originally reported only in professional publications, reached the imagination of writers who transmitted them to Western culture at large, where they have altered and deepened our life experience and given us our richest tool for understanding our inner worlds. Freud's literary contribution, *The Interpretation of Dreams* (1900), is perhaps the richest and most creative example of the interpersonal effect of the dream. As W. H. Auden wrote in his eulogy "In Memory of Sigmund Freud" (1945):

> If often he was wrong and at times absurd,
>> To us he is no more a person
>> Now but a whole climate of opinion.
>
> Under whom we conduct our differing lives…

(p. 166)

And most especially, Auden wrote, it was Freud's understanding of the dream that changed the way we live.

> But he would have us remember most of all
> To be enthusiastic over the night
>   Not only for the sense of wonder
>   It alone has to offer, but also
>
> Because it needs our love: for with sad eyes
> Its delectable creatures look up and beg
>   Us dumbly to ask them to follow;
>   They are exiles who long for the future
>
> That lies in our power. They too would rejoice
> If allowed to serve enlightenment like him,
>   Even to bear our cry of "Judas,"
>   As he did and all must bear who serve it.

(p. 167)

We live in Freud's "climate of opinion" and with a way of thinking about personhood and development that is continually being modified, but that stems from the dreams of one man. There has never been a more striking example of the capacity of the dream to communicate from one man to others, and to influence our entire intellectual culture.

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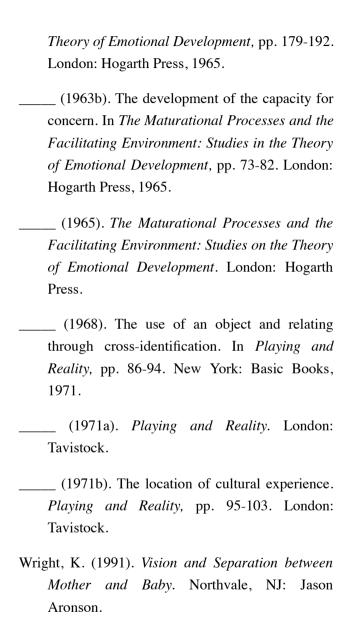
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