The richness and creativity of early classical work with dreams became narrowed through doctrinaire obedience to Freud's brilliant hypotheses. Interpersonal psychoanalysis, though originally little interested in problems of mind and private mentation, may be well suited, in part due to its lack of a comprehensive dream theory, to a clinical approach to dreams that is relatively open-minded, pluralistic, complexly layered, collaborative, and playful. Multiple possibilities for the meanings of dreams and multiple ways of approaching dreams in analytic therapy are suggested. Although many therapists for complex reasons shy away from working on dreams, an interpersonal approach recognizes that several wishes of both patient and analyst may be significantly fulfilled in the pleasures of working together on dreams. If it is mindful of what is unfortunately a growing tendency to project into all dreams a single-minded preoccupation with transference and countertransference, and if it respects the world of dream imagery in its own right, interpersonal psychoanalysis can make a genuine contribution to our understanding of dreams and dreams can lend an important dimension to interpersonal concepts. Several clinical examples are presented in an effort to highlight an approach that “stays with the image” and allows the dream images to make their way into the psychoanalytic dialogue.

When we tug at a single thing in nature, we find it attached to the rest of the world [John Muir].

Of all the many pleasures in our work, engaging with dreams is among the very best. In this increasingly busy and complex modern life, in which unfortunately more and more psychoanalytic...
therapists work in back-to-back 45-minute hours, harassed by managed care, and in which the possibilities for reflectiveness are severely reduced, it does the soul good to turn to the mysteries of the world of nighttime imagination. The opportunity to come close to our patients' most private mental experience and to be invited into that unwilled world of dream creation is a rare privilege.

The dream is an extraordinary work of nature. Flowering in the dark of night, disappearing in the daylight back to its unknown origins, it leaves behind barely a trace, a wisp of mood or image, or it can take possession and profoundly alter the day or an entire life. Such a strange flower of the unconscious, it shows itself briefly and then quickly withdraws to its own world for reasons unknown. Its mystery has fascinated and perplexed poets, philosophers, and scientists across the centuries and from every known culture.

Therefore, to be trusted in the midst of our day's work with the occasional remembered pieces of dream life that emerge from the fevered brain of the REM sleep of our patients, is indeed a delight. Surprises, ambiguities, puzzles, streams of layered memory lit up like the aurora borealis, secrets, wishes, frightful ghost hauntings, ugliness, ordinariness, and playfulness beyond measure—all of it lights up our work like the dream itself illuminates the night.

It must be that telling dreams and listening to them can gratify many wishes on many levels in both participants. For example, we often sense a patient's deep wish to have a dream appreciated and paid attention to, and at times a patient's wish to puzzle and perplex in a subtle play of hide-and-seek within a wish to be understood. We can experience the listener's wish to be told stories, especially original and unique ones, which is perhaps akin to the wonder and delight of receiving Odysseus returning from the ends of the world bearing tales and sagas of wonderous, frightful, and puzzling adventures. And also we can imagine for both dreamer and listener the shared wish to discover meaning and coherence together in the midst of ambiguity, metaphor, and symbol; to experience together the creative workings of unconscious mind; to catch sight, at times, of the very architecture of mind; and, in all this, the wish to play together as we often can on the field of dreams. Further, in the young child's experience as well as in the practices of many preindustrial cultures, the telling and the sharing of dreams may be of central adaptive importance. Thus, the shared
activity of the analysis of dreams in our work brings with it wishes and fulfillments galore. In an extension into the interpersonal world of Freud's central wish fulfillment hypothesis (Freud, 1900), it could be said that wishes may be deeply involved, not only in the basic construction of dreams, but also in many aspects of the experience of telling, listening to, wondering about, and working together on dreams within psychoanalytic psychotherapy.

A broadening of Freud's wish fulfillment hypothesis can be found in such diverse sources as Fromm (1951), Erikson (1954), States (1988), Frieden (1990), and many others who have found in Freud's brilliant work inspiration rather than dogma. Hillman (1979), from the tradition of Jung (1974), for example, suggests that the experience of dream imagery fulfills the soul's deep wish to see itself, like Narcissus peering into the pool. Without evaluating the merits of this hypothesis, it could be said that it shows a refreshing playfulness with the wish fulfillment hypothesis that could be of interest to interpersonal psychoanalysis.

This paper concerns itself with an interpersonal contribution to our understanding of dreams and with the dream's contribution to interpersonal psychoanalysis. Of particular interest is an exploration of those factors that could enhance the quality, depth, and pleasure of working with dreams in psychoanalytic psychotherapy. An interpersonal approach has certain advantages and limitations in working with dreams, and these will be considered as we go along.

From the beginning, the dream occupied a place of special importance in the theory and practice of psychoanalysis. As we approach the 100th anniversary of the publication of Freud's (1900) remarkable opus The Interpretation of Dreams we recognize that Freud opened the door of the 20th century both to the ancient mystery of dreams and to the ancient art of dream interpretation. In so doing, he brought the realm of science to the imagery of soul and the latter to the soullessness of modern times. And, in turn, the dream opened to psychoanalysis no more nor less than the mysteries of the unconscious. An intimate relationship, dream and psychoanalysis, rooted in an ancient practice—dream and interpretation. No wonder psychoanalysis reveled in the dream, at first. The “royal road” was a broad, happy, bustling thoroughfare. Through free association to the elements of the manifest dream, Freud deconstructed the dream as dreamt, and thought he laid bare the underlying nature of the dream, its latent meaning. That is,
Freud believed he was describing both the unconscious operations of the mind and the dynamic content of the unconscious mind at the same time. While exploring the unknown reaches of unconscious mind, Freud reduced its vast range to fit his theory of repressed infantile sexual wishes.

But too soon, the adventurous and creative spirit of early psychoanalytic work with dreams lost its originality and fresh vitality. Under the domination of Freud's genius, his remarkable gift became a noose. Dreams were often subjected to a rigid method with the eventual outcome of inquiry never in doubt. Dreams were reduced to a predictable few doctrinaire interpretations reflecting classical psychoanalytic preconceptions. When psychoanalytic theory peered into the mysteries of the dream, it saw reflected only its own familiar face. The quirky freedom and highly unique and individual nature of dreams was too frequently replaced by dogma. The adventure down the royal road had become a lockstep for the faithful on a narrow and rigid path.

In contrast, Jung and his followers, not unknown for their own doctrinaire predilections, recommended a consistent attention to the dream images themselves. Respect for the imagery of the manifest dream, echoed in the writings of Fromm (1951), the existentialists (e.g., Boss, 1958), cognitive theorists (e.g., Hunt, 1989), and a wide range of contemporary analysts (e.g., Rycroft, 1979), departs sharply from Freud's devoted interest in the latent unconscious thoughts underlying dream imagery.

In addition to an increasing interest in the richness of manifest dreams, there is a growing literature from neuroscience, cognitive science, contemporary psychoanalysis, and the burgeoning “new age” field concerning the multiplicity of dreams. What might an interpersonal psychoanalytic point of view contribute to this growing discussion of dreams?

First, there has been, to date, no clearly articulated general interpersonal point of view about the nature of dreams and their usefulness in psychotherapy. I believe there are several advantages and disadvantages, particularly for clinical work, that follow from this observation. Although the contributions of Fromm (1951), Tauber and Green (1959), Bonime (1962), Ullman (1962), and others are of considerable merit, they have not cohered into a general point of view. This is not unusual in an interpersonal tradition that fosters an individualized
clinical pragmatism. As to working with dreams, the lack of a unified theory has the advantage of leaving the interpersonal analyst free to make use of a wide range of hypotheses drawn from Freud, Jung, Fromm, the existentialists, the neuroscientists, and other dream theorists. It allows, in practice, for a necessary flexibility in integrating dream material with other clinical matters. It does not force the analyst into premature knowing and can thus allow the dream more of its own room to tell its own story in its own way. Although no dream listener is free from the risk of projecting personal concerns and theoretical interests into the interpretation of a dreamer's ambiguous and many-sided images, an organized set of hypotheses about the nature of dreams often increases the probability of premature closure and of reading into the dreamer's dream extrinsic formulations. The best work with dreams, in my opinion, requires a freedom in approach, an openness to surprise, a willingness to move with a change in set that characterizes dreams, a playfulness and flexibility that follows from a lack of presumption, and, above all, the possibility to be unknowing, puzzled, and curious rather than a dream authority (see, e.g., Bonime, 1962; Tauber, 1963; Lippmann, 1996). These qualities, combined with a pluralist approach to dreams rooted in the observation that there are as many kinds of dreams as there are dreamers, finds a receptive home in the interpersonal tradition. Certainly, these qualities are not the exclusive province of interpersonal analysts. Good and had dream analyses are found throughout the analytic spectrum. There is just less to get in the way, I believe, in interpersonal dream analysis.

At the same time, however, the interpersonal approach has not turned to dream life with the lively interest shown by classical psychoanalysis or by the Jungians (as seen in the relative paucity of writings on dreams in the interpersonal literature). In addition to Sullivan's wariness toward dreams and their interpretation (Lippmann, 1990, 1996), there has been a general disinclination to engage in problems of “mind” aside from the valid critique of the classical position found in the interpersonal insistence that “mind” does not develop or exist in a social vacuum and that human relationships contribute at all stages to the origins and maintenance of all mental processes. An interest in problems of “mind” and an interest in dreams go hand in hand, in my opinion, and the interpersonalists have replaced a central concern with private mental experience with a theoretical and clinical preoccupation.
with the workings of social process (as they affect both external and internal psychological events).

However, this seeming limitation in approaching the privacy of dreams presents the possibility of a contribution to thinking about dreams. Certainly the dream is a most private experience: existing within sleep, separated from others, experienced within the private mind itself, unseen by anyone else, incapable of being communicated to anyone else at the time of its occurrence. Yet the dream can be thought of as rooted in social (as well as neurophysiological) experience. The supporting culture, the web of ongoing human relations, and the specific nature of the therapeutic relationship within which the dream has emerged, all serve as complex stimuli for the dream. Further, in the special case of dreams in psychotherapy, the dream is destined to find its way into the complex social experience of the interaction between patient and therapist (whether reported or not, whether worked on or not), and in addition will affect the subsequent ongoing experience of the therapeutic situation consciously or unconsciously. This whole cacophony of private and social experience intricately interwoven, internalized, externalized, and transformed over and over is the very stuff of psychic life. The dream in psychotherapy invites us into a larger, more complex, more layered, integrative, and interactive view of the relation between the private and the social.

Yet, there is a new problem emerging in some interpersonal and relational work with dreams, that is, the possibility of overstressing relational, transferential, and countertransferential themes. On sees a growing tendency to read prematurely into all dreams the story of the therapeutic relationship to the exclusion of other themes. The therapist is presumed to be present and the patient's feelings about the therapy and the therapist are presumed to be represented almost no matter what the actual images. This tendency can lead us far away from the dream's own story, just as reading into all dreams an instinctually based world of infantile wishes can distort the dream's own messages. The most egregious example of this tendency I have ever come across was in the report of a therapist who interpreted the number 8 hidden in a corner of his patient's dream to represent the $800 owed him from the last bill. Although we know what was on this therapist's mind, the dreamer's own meanings were ignored to serve the therapist's need. A more subtle and prevalent variety of our need to pursue the transference
(i.e., our own clinical and theoretical interests) can easily obscure concerns that may not be relational in nature. The pendulum swings sometimes too far from a one-person to a two-person approach. I have come to appreciate Andrew Morrison's metaphor of “the one-and-a-half person psychology” as having particular relevance to the analyst's engagement with the patient's dream.

The relationship between dream and interpretation is an ancient one. It is the special contribution of psychoanalysis, from its beginnings, to rely on the patient's own ideas and associations about the dream at the outset of most dream analysis. The complex layering of meanings calls for an approach that can appreciate the possibilities of an interweaving of many meanings on several levels of awareness. Freud opened the way to an appreciation of the multilayered texture of dreams (and all mental life). Concepts such as condensation, displacement, manifest and latent meanings, disguise, secondary revision, symbolization, and so on, all point to the probability that dreams mean more than one thing at a time, and that the search for the single meaning is futile. The mind brings together an enormous amount of material in a single image or thought. The economy of image in the construction of dreams needs to be met by a willingness to be patient and to allow the image to unpack itself, so to speak. The therapist's knowledge of the patient, in particular, and of psychological processes, in general, must not push itself into the collaborative work. If one allows the dream room to breathe, it can move both patient and therapist to new ground.

In the following examples, the dreams' own meanings move to the foreground when the therapist sits back a bit and relies on respect for the image's own power to reveal and surprise.

A patient dreamed of balancing an unbalanced checkbook. She was an independent woman in her mid 50s, a highly regarded but underpaid editor in a small publishing house who was struggling to make a living and to support herself. Her parents, she felt, never taught her anything about managing money. She was frugal, and although she needed little, she daydreamed about lottery millions. She often felt unbalanced in many ways and was working in therapy on balance both in her daytime and nighttime (dream) thinking. A lonely person, she had loved dreams since childhood, and in therapy she showed her ability to allow herself to turn them over and over until they “spoke” to her. I was
privileged to join her with a light touch in this turning. She usually led most of the way. In beginning to reflect on this dream, she speaks of hating her bank and about the rudeness of the teller the day before. She smiles shyly that both she and I are tellers, in a way. She feels we both can be rude at times in our rush for understanding. The session before, she heard my signal to end our meeting and my move from the chair as a bit hasty. We speak about this for a while and then move on. “Checks and balances,” she says, returning to the dream. “Checks and balances” is her middle name, she says, and we are momentarilly at rest, the dream seemingly understood, in part, especially in its opening of our discussion of her experience of the rude teller-therapist. But we go on and I ask about the “unbalanced” aspect. She breaks in to mention the O. J. Simpson trial (this dream occured at the trial's beginning) while I think to myself about my own unbalanced checkbook, my own unbalancedness as she might experience it in our work together. I think about the therapy fee, her reactions to it, the last session, my “rudeness,” and then my own reactions to the trial and thoughts about her reactions. She speaks briefly of her father and stories of his inability to make a living for the small family. “If he ever had a checkbook, I'm sure it would always be unbalanced.” Her voice is taking on a familiar sound whenever she speaks of him, wavering between a tender yearning and a harsher angry disappointment. He was a dreamer, a “luftsmensch,” a poet, not unlike my own father. I see his face briefly as she brushes the memory of her own father. Both fathers for a moment sit with us. But hers was lost in the Holocaust. A Jew in Czechoslovakia, a mystery, a phantom of a man. She returns to the Simpson trial and the dreamlike, Kafkaesque quality of the Bronco chase. Then suddenly: “The Trial! Kafka! The Czech! … the unbalanced Czech! … the book writer! … the unbalanced Czech book writer!” She had struggled with Kafka for years, imagining in his pages her father's soul. She always wished she could have been a boy so that her father could possess her like Kafka's father, like Mozart's father, like fathers possess their beloved sons, like perhaps I would take possession of her and thereby guide and shape and liberate her fantasy of considerable unshaped genius. Her father, the unbalanced Czech book writer, was always near to her yearning and angry spirit. She tried deeply in her life to balance her father's unbalanced, unlived life. We go on to speak of
these things as the hour continues and as our fathers take shape between us.

There is in this dream the specter of the Holocaust itself as shadow background. Somehow the concept “day residue” seems narrow. Perhaps a concept such as “cultural or historical context” is more useful. In listening to this dream, it was important not to know too soon and yet to sense everything at the same time. This paradoxical state requires patience and an ability to yield control to what remains unknown. Freud called this “evenly hovering attention” in the analyst. This attitude is sometimes taken in by patients and often helps in the general struggle with life's uncertainties. This attitude also assists in the creation of an atmosphere where both participants have room to breathe and move and discover meanings together, as opposed to an airlessness that develops with premature interpretation and closure, particularly when, in the current fashion, everything has to refer sooner or later to the transference, a major victory for analytic narcissism that can leave the dream itself out in the cold. And yet, it seems almost unavoidable that the dream's listener reads himself or herself into the dream. Natural experience outside of therapy confirms the ordinariness of this tendency. I suppose that because the mind is complex and layered, it can do more than one thing at a time, and, thus the analyst can read himself or herself into the inner experience of the other while at the same time staying with the singular uniqueness of an image, possibly far removed from the listener's concerns.

Let us look at another dream. Halfway into a session, a man in his late 30s says, “Oh, I just remembered a bit of a dream. I dreamed of a Mexican sculpture, a statue. I wonder what that could be about.” We had been talking for two sessions about his younger brother's new baby and the patient's jealous feelings regarding the blessed event. Then, suddenly, as if from left field, he bring up “a Mexican sculpture, a statue.” A reported dream's capacity to change the manifest conversation is one of its outstanding characteristics. In my own mind, I see a massive Aztec head and I imagine the patient's unmoving spirit, sculpted, frozen in time. The patient launches into his associations, unprodded. He speaks of his “honeymoon in Cozumel. That's always been and will always be Mexico to me. It was living hell. A disaster from beginning to end.” He knew immediately that the marriage
couldn't work. Their interaction was a nightmare. The union produced no children. Eight years later, there was a messy divorce. (So we begin with one possible theme: the honeymoon, the marriage, no children, failure. I tuck away my own image of the sculpture.)

He goes on in his associations, returning to Mexico. He mentions the current debate in California over Proposition 187. “Immigrants are always a problem wherever they go.” His father was an immigrant from Hungary. He goes on about his father—a hardworking, “tough, son-of-a-bitch.” It was a troubled relationship. His father obviously preferred the patient's younger brother. In my mind's eye, I see the father beaming at a playful boy while the patient's sculpted head scowls an Aztec scowl. (Theme 2: His father and his younger brother and jealousy.)

He says, “Oh yes, your trip to Mexico.” We go on about his mostly positive reactions to my having left for two weeks of teaching the previous month. But in my mind, the Aztec scowl grows more fierce. He goes on and mentions “a Mexican stand-off. Like me and you.” He laughs about the stalemate of the weeks since my return. (Theme 3: His complex and ambivalent reaction to my absence.)

Then he says, “Mexicans are pretty lazy, you know. Siestas and all.” He is teasing me (he knows of my political correctness), but is also making reference to his own laziness at work and in life, and perhaps also to his experience of my laziness in the analysis, all in contrast to his father's hardworking life. (Theme 4: Passivity and increasing evidence of his annoyance at my having been away.) But then he moves to Aztecs and what he knows of their blood sacrifices, and my own images grow darker. He speaks of his intense reaction to the film “Interview with a Vampire” and dives into a discussion of the power of the various perversions in his life, a theme that was buried since I interrupted our work but now resurfaces. My own image of a bloody Aztec head begins to leer. (Theme 5: The perversions and their possible relation to our separation.)

At any point along the way, the door is open to interpretation of the dream of the Mexican sculpture. But I decide to remain with the reported dream image, his image. “A sculpture of what?” I ask, “A statue? What makes it Mexican?” Immediately he responds: “Oh, Zapata! Emiliano Zapata. A statue of Emiliano Zapata. On horseback. The horse is rearing up. You know, like those hero statues.” My Aztec fades to the background and I ask “What comes to mind about
Zapata?” He speaks of the great Mexican hero, the revolutionary leader. The patient's great ambition, as a child, was to be a great leader. He feels his new nephew is destined to carry the seeds of his own failed heroism. He begins to talk about his childhood desire to save the world, to make it a better place, to carry on Christ's mission, to win his father's love. God had such a mission in mind for him, or did He pass him over in favor of the favored brother? He wished he had become a priest. (Theme 6: The hero).

Perhaps in part because we had worked on the specificity of dream images in the past, he says “You know? It's not really Zapata. It's Marlon Brando playing Zapata in the movie. I saw it last week with my girlfriend. That's what it was. A statute of Brando playing Zapata.” (Here is a specific visual day residue for the dream's image.) I ask about Brando and he speaks of his long identification with Brando. He pretended to be Stanley Kowalski calling out to his ex-wife “Stella!” the way Brando made famous in “Streetcar.” He felt like Brando in “that ‘Last Tango’ movie.” He “could have been a contender” like Brando “in that ‘Waterfront’ movie.” But the real Brando had changed. He had become dissolute, enormous, horrible. The patient speaks now through choked voice about his own enormously dissolute life experiences, his own strangeness in the world of others, his own fatness, his horrendously perverse living nightmares. The session continues with an outpouring of specific and detailed humiliations he has recently endured in his search for pleasure. His dream of a Mexican sculpture takes us beyond our recent stalemate to painful and rageful experiences of abandonment, to the darkest toll of failed ambition, to the horrors of pleasure and sadism in perversion, and more. Staying with the dream's own specific image, in this instance, was enormously beneficial. Moving in more quickly, at any point along the way, may have had its own rewards, but our approach left us with confidence that the patient's own nightly creations, in their specificity, can take us more deeply into his innermost struggles than into the wonders of analytic knowing.

In another dream a woman in her late 50s dreams of making love with her husband. She feels his penis in her vagina and in her hand at the same time. She experiences deep pleasure. She loves him enormously. She awakens from the dream feeling profound love for her husband. He died 10 years ago that very week. She has been lonely, while gaining
increasing success in her thriving business. She is happy with the memory. It warms her morning. She is so glad to have felt him again. It has been so long. But she spends the rest of the day crying deeply, a great and necessary release for her. Her intense loneliness and desire for companionship, sexual and otherwise, has been building for a long time and her crying helped. She felt refreshed, lighter, and more hopeful.

But what of the dream, itself? Clearly nothing further needed to be done. The dream had served its purpose in its own way, that is, the release of long pent-up feelings. But again, what of the dream? When in the subsequent therapy session I request that we look at the dream together, that we stay with the image, she reports at first that the two penises were both her husband's. “No, they weren't,” she corrects herself. “The one in my hand wasn't his. It felt different.” “How was it different?” I ask. “Well, it just was different. It wasn't the same.” She hesitates and then goes on. She used to wish she could have two lovers at the same time. She laughs, embarrassed about her sexy mind. I try to imagine it. I find it hard to do and know I will need to follow her. She always wanted two men, to see what it would be like. She felt large, expansive, too much for her husband since, after the children went away to school, her success in business and her sexual desire grew while his diminished. This side of her made him exceedingly nervous. Would I be nervous or feel diminished or aroused as she explored her appetites? Were they my penises in her mouth and hand? Or was that just my wish? We could stop there. The dream, beyond affording pleasure and release, had now brought us to an important side of her desire—her desire rather than mine.

But the image called us to continue: two penises. “A bird in the hand …” she laughs but her eyes begin to tear. She had not only wished for two men—she had in fact made love to two men. She had a long-kept secret. She had had a brief flirtation at a Christmas party at the office. She had had too much to drink and was petting with one of her younger associates—his penis was in her hand. It was a secret she had mostly forgotten about. On New Year's Day, her husband had fallen ill with what was later diagnosed as a mild heart attack. However, he never recovered and died of a massive heart attack that spring. Her guilt was enormous. She felt sure that she had caused his death with the sin of her brief Christmas party adventure. She never confessed to her husband. She never spoke of it to anyone until this
moment. During the preceding session we had been talking about the
difficulties she was experiencing completing several small business deals.
We had spoken about her long-standing feelings of guilt and her self-
punishment, and the dream helped us to complete a part of the story. There
was an older story, however, which was about her father's death. She had
been playing with friends, having a good time with the other 14 years olds,
when she returned home to learn that her father had been killed in an accident.
Her play and laughter froze in her heart. Her deep guilt had been pursuing her;
the ghosts of these two men had been haunting her days and nights. In engaging
her dream of two penises, we could have stopped anywhere along the way.
But not closing our exploration of it prematurely, staying with the specific
image and remaining open to whatever would come proved helpful. (All of
the dreams discussed previously are short and do not convey the choices
involved in working with longer dreams, nor does the brief description of
dream analyses convey the full range of interactions and internal experiences
in both participants. My work in progress will describe these in fuller detail.)

Despite the potential for an experience of pleasure in working with
dreams, many analysts, from beginners to oldtimers, simply don't like to work
with dreams. Their minds freeze when an attitude of openmindedness is
called for. The ancient mantle of dream-knower is too heavy for many. There
are several underlying reasons for having difficulty working with dreams—
apart from the specific dynamics of a particular patient-analyst interaction—
for example, (1) the general culture's materialist attitudes toward dreams and
inner life in general; (2) the therapist's own life experience with dreams; (3)
the therapist's characteristic response to the creative work of others; (4) The
therapist's experience of working with dreams in his or her own analysis, that
is, an identification with one's own analyst's attitude toward dreams
(*Greenson, 1970*); and (5) pressures that derive from one's particular
theoretical orientation. All of these are amplified for the therapist because of
the pressures of the role of paid dream expert. The pressure to know or to
seem to know or to seem about to know—and to know fast—is very great in
many therapies. Freud, Jung, and almost all great dream writers have urged us
to take time to know a dream, to turn it over and over, to see its many sides
and faces, to live with it for a time. And yet, who has the time for this when
faced with a 45-minute, back-to-back
hour and a managed-care accountant's clerk instructing us we have only three sessions for this or that symptom? It is easier for the therapist to turn to more immediate matters. The temptation is often to control and dominate the unknown and the ambiguous by some hopefully useful and quick conclusion about some piece of the dream. Control and domination of dreams is like control and domination of nature itself—it reveals our fear and distrust of the strange and unfamiliar, and leads to nature's own rebellion (e.g., no remembered dreams).

Clearly, in these matters, the freedom to be ignorant, not to pretend to know, to be unsure, can prove helpful in knowing the inner story of a dream. There is no correct way of knowing that applies to all dreams. There is no correct theory that applies to all dreams. Dreams may concern wish fulfilling; problem solving; integrating the past; mastering trauma; anticipating the future; seeing more deeply into life's events; healing through image formation; hearing a gift for or bringing trouble to the therapist; supervising the analysis (Blechner, 1995); unpredictably changing the set through the dream's introduction of novel ideas, images, or topics into the therapy; simply having fun; picturing one's innermost nature in multiple forms and masks; showing the workings of mind itself; speaking to one's deepest needs, fears, and concerns; reflecting states of the self; reflecting aspects of the surrounding culture; revealing secrets; depicting the body's life; guarding sleep; giving hints to oneself and one's therapist or partner about how to be and not be together; visiting ghosts; rehearsing situations; rehearsing death; revisiting childhood haunts, schooldays, and long absent friends; revisiting old shames and humiliations, old and new failures, old and new victories and successes; absolving and atoning; forgiving and punishing oneself and others; creating and creating layers and layers of meanings. Dreams are all this and more, with their main purpose, it seems, to be briefly experienced in sleep and mostly soon forgotten. Thus in working with dreams, we work in the midst of shadow, mystery, and complexity. To be unknowing in such company reflects our respect for the richness of the unknown, a central virtue of psychoanalysis.

In addition to multiple possibilities for the meanings of dreams, there are multiple ways of approaching dreams, such as associating to dream elements; amplifying the images; simply accepting and appreciating;
clarifying unclear elements; attending to affect; listening for the overall story; attending to the structure of the dream as narrative; exploring underlying experiences in the therapy as revealed in parts of the dream; focusing on the imaginative, creative, original mind of the patient—particularly in situations of severe low self-esteem; opening new areas for consideration; using dreams as guides for the patient and for the therapy; helping some patients to learn to forget their dreams; playing together; learning to work together; and so on. The idea that there are countless ways of responding to dreams and that we haven't yet figured out the “right way” is often helpful to both participants in learning to work with dreams in a more relaxed fashion.

We can see that in addition to the many advantages of a complex and layered view of mental processes in dreams, there are also decided advantages in recognizing the many and varied approaches possible in working with dreams clinically. To be able to move freely and flexibly in order to stay in touch with the patient's immediate and deeper concerns is a central principle of interpersonal work with dreams. With Sullivan, we see the deeply social nature of all thinking, including our most private nighttime mentation. With Fromm, we see the relevance of broadly cultural forces (political, religious, economic, zeitgeist, national, etc.) in all aspects of mental life and in all aspects of dreams. John Muir said it well, that all is connected, the most social with the most private. In the dreams I have described—the unbalanced checkbook, the Mexican statue, the two penises—any conceptual division into social and private, into intrapsychic and interpersonal, loses relevance as we observe the intimate interweavings of these realms. But beyond the importance of central interpersonal concepts in thinking about dreams (which I will develop in a separate theoretical paper on the integration of classical dream theory with interpersonal concepts), this paper is concerned with clinical work with dreams in the interpersonal mode. Letting the dream speak its own language in its own time, staying with the dream's specific images, allowing oneself to be unknowing rather than dominated by any particular set of theoretical or personal concerns, being open to surprise and to play, allowing oneself to join the world of imagery and imagination both silently and openly, permitting the therapy and oneself to be moved along by the dream, trusting that the unwilling freedom of dreams can lead to what needs to be known, that is, trusting this voice of the unconscious,
respecting the dream's unique creativity, maintaining a lightness of touch—all of this is in the best tradition of interpersonal psychoanalysis as it is in the best tradition of the liberating spirit at the heart of psychoanalysis. If “what is real, matters,” how one really listens to and responds to dreams can have a significant effect on our work.

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