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J Am Psychoanal Assoc 2008; 56; 223

DOI: 10.1177/0003065108315694

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AFFECT INTEGRATION IN DREAMS AND DREAMING

The processes by which dreaming aids in the ongoing integration of affects into the mind are approached here from complementary psychoanalytic and nonpsychoanalytic perspectives. One relevant notion is that the dream provides a psychological space wherein overwhelming, contradictory, or highly complex affects that under waking conditions are subject to dissociation, splitting, or disavowal may be brought together for observation by the dreaming ego. This process serves the need for psychological balance and equilibrium. A brief discussion of how the mind processes information during dreaming is followed by a consideration of four component aspects of the integrative process: the nature and use of the dream-space, the oscillating “me / not me” quality of the dream, the apparent reality of the dream, and the use of nonpathological projective identification in dreaming. Three clinical illustrations are offered and discussed.

The role of affect as an organizing principle in human motivation and behavior has been increasingly acknowledged in the psychoanalytic literature. The capacity to integrate intense and conflictual affective experience into the personality is viewed across psychoanalytic theories not only as an essential component of emotional health, but as essential for survival (Salonen 2000). Different models address different aspects of this capacity: interpersonal models of affect regulation focus on the unconscious mutual, bidirectional regulation of affective communications, and internalization of a caretaker’s own self-regulating, soothing, and mirroring functions (Beebe and Lachmann 1988; Kohut 1977). Attachment theory suggests that the capacity to represent the idea of an affect is crucial in the achievement of

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The author thanks the following for their help in preparing this paper: James Grotstein and Barnet Malin for helping him understand the centrality of Bion’s work to his thesis; Eve Golden for her editorial assistance; and Barnett Kaplan for helping him sharpen and clarify his thinking. Submitted for publication May 4, 2006.

control over overwhelming affect (Fonagy et al. 2002). Bion (1962) emphasizes the projection of primitive unprocessed affect into the containing caretaker who mentalizes the affect, enabling the creation of thought that may then be used to regulate affect.

The capacity to integrate affect, in dreaming and waking, is the capacity to sustain affects of varying kinds and intensities, and to host conflictual ideas and ambivalent positions without loss of ego integrity or self-object organization, and without having to resort to primitive defenses. Malin (1999), discussing affect integration in the context of the organization of self experience, described it as “the unmeasurable open-system processes by which the entire range of raw affective sensation and response develops into relatively coherent, modifiable, and meaningful dimensions of self-experience” (p. 375). I take as my starting point that at those times when our self experience is one of greater affect integration, we are better positioned to operate with ego efficiency, and so are optimally posed to accomplish our tasks and goals.

We also appreciate the obverse: when affect states are unregulated or unintegrated, mental life may be disrupted and affects are then experienced as threats to one’s established psychological organization. Indeed, in those highly stressful situations that threaten the equilibrium of the self—when conflictual or overwhelming affects emerge unexpectedly; when there is a momentary or chronic failure of mentalization capacity; or even as a normal artifact of waking—we cope by shunting affect aside. Defenses against affect such as splitting, disavowal, projection, and isolation allow us to press on undistracted with the tasks of the day. Specific affect states may come to be a source of shame when they are experienced as intolerable to the early caretaking surround; in these cases repetitive disavowal of affect may become an embedded mode of defense, leading to reliance on stereotyped or primitive defense mechanisms that protect the self from even deeper schisms. The more persistent defensive segregation of the affective self becomes (i.e., the more memories and affect are walled off from consciousness), the more the individual is at risk for abrupt and serious pathological dysregulation (Stolorow and Brandchaft 1987).

When affect is not integrated comfortably, the negative effects may not be only psychological. In a cross-disciplinary review of models of affect regulation, Westen (1994) cites experimental studies showing that people who make customary use of avoidant or repressive (nonintegrative) coping strategies to deal with adverse events are at heightened risk for serious disease.

The kernel of my thesis is that dreaming (which may include the phases of dream recall and analytic elaboration) is one aspect of a self-regulatory system that attempts to restore psychological equilibrium by bringing the dreamer's attention to contents of mind that have been warded off. I am proposing that dreaming helps restore the integrative process when it has been disrupted by defensive operations. I will focus on the way dreams help to relink experiences with dissociated affects by portraying conflictual aspects of the self within the same psychic space, by invoking temporal orientations that are precluded by the pull toward "realism" in waking, or by invoking a self-representation that is disavowed in waking life. This makes possible an integrative dialectic that the linearity of waking thought discourages. A dream may bring to awareness both thesis and antithesis, and so permit affective rifts to be bridged.

While aspects of this topic have been addressed before, I think it reasonable to reassess it in the light of certain developments of the last twenty years, including contributions from philosophy, linguistics, anthropology, cognitive psychology, and neuroscience, as well as psychoanalysis. Further, previous considerations of the topic seem to me both too broad and too narrow. While the *results* of affect integration have been broadly acknowledged, the *processes* of affect integration in dreaming have been less explicitly articulated. On the other hand, most writers keep strictly to their own theoretical confines, and so unnecessarily restrict their exploration of the dream phenomenon. Theoretical perspectives complement each other, and I have found that a comprehensive understanding of affect integration in dreaming requires recourse to more than one. I will also note that too little has been written about the nonpathological, progressive use of nondefensive projective identification in dreaming. I believe that affective integration in dreaming depends on this device, and I will use this paper to explore that idea.

LITERATURE REVIEW

The idea that dreaming serves a compensatory function has been addressed from various theoretical perspectives, including the Freudian, where dreams may be seen as compensating for the effects of superego strictures by allowing for the symbolic gratification of infantile needs repressed in waking. Jung (1916) understood the equilibrating function of dreams as a natural reaction of the self-regulating psychic system. His model is described as compensatory or complementary, suggesting that

dreams express aspects of the personality not fully developed in the waking day (Domhoff 2003). In the 1960s, French and Fromm (1964) and Bonime (1962) began a very significant trend away from the marginalization of the manifest dream content by writing about dreaming's adaptive nature. Subsequently, theories that viewed dreaming as an unconscious attempt to restore equilibrium to the personality were described as "self-balancing" or "self-righting" (Fosshage and Loew 1978). Bion, writing in 1959 but published posthumously (1992), was one of the first to postulate that dream work facilitates the encoding of raw experience into memory by making such experiences "ideogrammaticized" (p. 64) and hence suitable for storage and recall, thus anticipating aspects of Palombo's contributions (1976) to understanding dreaming and the memory cycle.

Since the 1960s other researchers have addressed various aspects of this topic, including dreams' problem-solving function and portrayal of current life issues (Greenberg and Pearlman 1980); ego integration of affect in dreams (De Monchaux 1978); and emotional contextualization in dreams (Hartmann 1995). As Greenberg et al. (1992) state, "Without dreaming, we might have greater difficulty in emotionally integrating new experiences, and consequently would be much more fixed in our behavior" (p. 548).

Fosshage (1997) synthesized contributions from cognitive psychology, developmental theory, and ego and self psychology, creating his "organizational model." Fully embracing the utility of the manifest dream in understanding the dreamer's deepest concerns, he proposed that dreams are a mode of visually mediated cognition whose primary purpose is to organize data: "Dream mentation, like waking mentation, processes information and contributes to the development of psychological organization through the representational consolidation of newly emergent psychic configurations. In contributing to development, new perceptual angles are achieved and new ways of behaving are imagistically portrayed. New self- and object representations (or schemas) and new relational scenarios emerge" (p. 434). Fosshage's model encompassed the developmental, self-maintaining, self-regulatory, and restorative capacities of dreaming.

Self-Monitoring in Dreaming

In a sense, normal dreaming is the canary in the coal mine of affect unintegration. It is our early warning system that allows microruptures of the balanced self to heal while they are still small. If the normal, non-pathological function of reintegration of affect did not occur on a nightly basis, I suspect we would see with much greater regularity the type of

dreams described by Kohut (1977)—barely symbolized “self state” dreams that shore up a fragmenting sense of self by “covering frightening nameless processes with nameable visual imagery” (p. 109). While it is not possible to experimentally isolate integrative dreams in sleep research, one study that examined the overall effects of REM deprivation found evidence of personality disintegration in the form of excessive aggression, sexuality, orality, anxiety, confusion, and reduced ability to cope (Fiss 1989). Indeed, Bion (1992) has indicated that if it were not for successful dreaming, we would fail to fully mentalize inchoate aspects of consciousness, resulting in psychosis.

This premise suggests that the dream is one component of a metacognitive feedback system of affect regulation, ensuring that psychical equilibrium is being continuously monitored outside of conscious awareness in both waking and sleeping. We need an ongoing sense of self over time, and this includes the perception of emotional stability. Damasio (1999) proposes that we make use of multiple, self-monitoring, closed-loop feedback systems that operate autonomously and unconsciously. This system, which he refers to as “extended consciousness” (p. 195), is able to take into account and keep track of immediate and recent sensory experience, autobiographical memory, inchoate and fully organized affects, etc. Kokkou and Lehman (1993) describe these preattentive processes as “a neuronal multimodal and multidimensional model of the momentary internal realities (thoughts, plans, goals, emotions, feelings, functions of the body) and of the external realities of the individual” (p. 57).

Similarly, Bion’s characterization of “dreaming while waking” (1992) recognizes a continuity of consciousness, which he referred to as dream-work- α , operating during waking and sleep. Ogden (2004), clarifying Bionian theory, envisions this complex psychological work as a type of roundtable discussion between preconscious aspects of the mind and unconsciously disavowed feelings and fantasies, all in the service of transforming those mental contents into symbolized representations that are organized for dreaming. McManus, Laughlin, and Shearer (1993), approaching the subject of dreaming from a cross-cultural perspective, echo Bion’s belief that dreaming is universally the “psychic glue” (p. 21) that holds thought together, enriching it with the capacity for expansion and development.

Early sleep laboratory studies focused on REM sleep and how it serves to regulate and stabilize affectual information by integrating it into existing memory systems (Breger 1969). More recently, Kramer (1993)

proposed that REM sleep functions to integrate and contain physiologically measurable affect surges during sleep. He concluded that even though there may be full sleep amnesia, successful dreams assimilate the affect. Greenberg et al. (1992) considered whether dreaming representations of life problems are related to disequilibrium requiring adaptation in waking life. A large sample of dreams was collected in the sleep laboratory and rated for their relation to waking mental activity. They concluded that basic functions of waking cognition, including recognition, representation, and trial solutions of dilemmas, could be found in both sleeping and waking states, and that this process was continuous across states of consciousness.

The influence of dreams may have a beneficial effect on the waking life of the dreamer, particularly if the dream reflects a possible solution to the problem. For example, in Cartwright's sleep laboratory study of the stress of divorce (1991), people who incorporated the ex-spouse into their dreams at the time of the breakup were less significantly depressed and showed increased measures of life adjustment. Cartwright concluded that the dreams seemed to help these individuals "work through" their depression. The overarching hypothesis of all such studies is that dreams enable the individual to integrate present affectively charged material with past material that has already been successfully assimilated.

Dreaming Cognition and the Increased Likelihood of Integration

Recent neuroimaging studies of REM sleep show heightened activity in the association cortices and the appetitive-emotional systems in general, including limbic and paralimbic structures, the amygdala and hypothalamus (Cartwright 2000; Krippner and Combs 2000; Panksepp 2000). These studies do not attempt to explain the *psychological* functions of dreaming, yet they underscore that areas of the brain involved in processing emotional data play key roles in dreaming, lending support to my belief that dreaming serves affect integration. Reiser (2001), having reviewed much of the recent literature on the psychobiological status of the dreaming brain, offers this summary statement: "Dreaming in man can be regarded as the subjective experience in dream consciousness of vital memory and cognitive operations made possible by the special psychophysiological conditions that obtain in mind/brain during REM and comparably activated brain states during sleep" (p. 351).

Waking thought is largely focused, boundaried, self-reflective, rapid, and goal-oriented. Waking thought is oriented toward the external world and is relatively stable and unfettered by stray thoughts and images. If outlying thoughts do enter consciousness, they are either quickly discarded or assimilated into previously learned experience; under stress we are more likely to make rapid, dichotomous evaluations concerning the affective valence of events (Breger 1969; Dorpat 1983; Hartmann 2000).

By contrast, dream cognition is characterized by its bizarreness; the emotional, inwardly oriented dreaming brain readily moves among classes of images and thoughts, easily incorporating seemingly random scene shifts (Kahn and Hobson 1993). In dreaming there is a suspension of goal-directed, volitional, problem-solving thought (Blagrove 1996; Breger 1969). Archaic memory stores (retrieval of memory elements, rather than complete, episodic memories) are more accessible in dreaming, enabling the integration of present affective data with past data (Kokkou and Lehman 1993). Of course, these descriptions are not meant to imply discrete categorizations; rather, they represent a continuum across levels of arousal.

Hartmann (1995) describes cognitive processing in waking as relatively direct, linear, and serial, with the neural net¹ functioning primarily as a “feed forward” net. In dreaming, however, the neural net functions as an autoassociative or hyperassociative net, making use of associational pathways that are holistically activated. This yields a nonlinear, broadly operating, diffuse hyperconnectivity that is less constrained by daytime reality and more open to novel connections (Globus 1989; Reiser 2001). Globus finds the connectionist model, as seen in a dream’s manifest content, to be analogic, constructivist, and holistic—better fitting the Jungian view of dreaming than the more linear processing of Freudian models.

Hartmann believes that the connections in dreaming are *not random*. Based on his extensive research with the dreams of trauma survivors, he suggests that the emotional concerns of the dreamer guide the process of neural networking. He proposes that we dream in metaphor in order to “contextualize” our experiences. He also suggests that the unique neural

¹Palombo (1992) defines a neural network as a set of neurons with varying connective strength between units, which are linked by connections that provide feedback when the cells are stimulated. Such neural networks are the basic structure of the brain’s organization.

connections made in dreaming utilize information processed at the periphery of the “nets”—affectively based information not normally accessed in waking.² “In brief,” he says, “our view is that at the dreaming end of the [sleep/wake] continuum there is more overlap of cortical activation patterns, or more bringing into conjunction elements often kept separate. Thus, we can presume that at the cortical level there is greater connectivity; connections are made more readily at the dreaming end of the continuum” (Hartman 2000, p. 949).

Van den Daele (1996) suggests that while awake, the language-dominated left hemisphere, with its reliance on the linearity of language, sets the agenda for neural activity. During sleep, however, the nondominant right hemisphere tends to be more active, allowing for emotions, reflections, and the gestalt functions to emerge, and enhancing neural connectivity. Further, the oscillation of lateral dominance produces a “complementary hemispheric dominance” (p. 262), and these organizational modes operate noncompetitively. He concludes that cortical activation in the dreaming mind often exceeds cortical activation in the wake state. The mind in the dream state, he concludes, “actively constructs and deconstructs experience, likelihoods, possibilities, and outcomes” (p. 263).

DISTANCE AND THE DREAM

From my analytic perspective on the process of integration in dreams, I find myself focusing on an overarching dimension that regulates this process—the dreamer’s ambiguous distance from the dream. The dream must be held at a safe enough distance to allow the problematical elements of the dream to be worked through, yet not so far away that it can’t also be felt as one’s own. I have attempted to look at this principle specifically by considering four mechanisms that I believe serve it: the “dream-space,” the “me / not me” paradox, the apparent reality of dreams, and the use of projective identification within the dream. While these mechanisms may not be manifest in the dream report, I propose that they are nonetheless “behind-the-scenes” elements of dreaming cognition.

²Hartmann (1995) clarifies that he is not referring to neuroanatomy or locale when invoking the metaphor of the “neural net.” The periphery he speaks of refers to the *sequencing* of sensory processing of primarily visual images in the cortex. Waking involves orderly serial processing leading to motor output; dreaming involves parallel peripheral processing without motor activity.

The Dream-space

Damasio (1999) describes how boundary, structure, and stability are requisite for the maintenance and regulation of internal states of all biological life. He cogently observes that boundary and structure, both requiring spatiality, become an organizing “blueprint and anchor” (p. 136) for the evolving mental representation of self. In this context, the use of spatial metaphors to help describe the process of integration is meaningful. Not that we necessarily perceive spatiality in the dream; as in waking, spatiality is a property of perception that may be called into the focus of awareness, but usually operates in the background. Nonetheless, we are able to experience the dream in spatial terms because spatiality is a primal construct that permeates, and helps create, our thought and language. Spatially driven metaphors of “containment” abound in dreaming and waking; as Katz (2005) has reminded us, the Sapir-Whorf hypothesis holds that language structures reality by shaping thought (see also Lakoff 1993).

As Pontalis (1974) observes, “The dream accomplishes itself in a specific inner space” (p. 129) also referred to as a “dream-space” (Khan 1974). Khan distinguishes the usage of the dream-space from Lewin’s “dream screen” (1948) by noting that “the dream screen is something *onto* which the dream imagery is projected, whereas the dream-space is a psychic area *in* which the dream-process is actualized into experiential reality” (p. 99). Bion (1992) describes the dream-space as a “storehouse” for sensory impressions that have been transformed into higher-level, symbolically representable affects. I use the term “dream-space” in the present context to denote the dreamer’s unconscious experience of the dream narrative unfolding in a bounded spatial context.³ It is within these boundaries that affective components normally splintered off from everyday experience may be unified into a meaningful whole: the dream. The dream-space may be thought of as a psychical container for mental content that the waking ego cannot contain—abhorrent or repudiated wishes, for example, or threatening or dysphoric affects, or antagonistic thoughts that instigate a state of cognitive dissonance. In this space the dream, like a mother⁴ or a psychoanalyst (Sedlak 1997), offers a person

³The notion that dreams inhabit, and perhaps create, a type of transitional psychic space recalls Winnicott’s description (1953) of such space as “an intermediate area of experience.” This is an area that captures both reality and fantasy, is unlimited by temporal realistic constraints, and involves enacting imaginary scenarios.

⁴Pontalis (1974) noted that for Freud the dream “was a displaced maternal body” (p. 127).

the experience of being held in a state of reverie in which archaic and disordered affects may be simultaneously experienced and transformed into higher-level symbolic representations.

I view the dream-space as an active, dynamic, permeable repository for disparate aspects of self experience that have been subject to dissociation or splitting. Grotstein (2000) comments that it has the capacity to modify its content: "Dreams can be seen as containers of the content of communication, a content that is constantly being revised and redefined by the container . . ." (p. 22). By providing this contemplative space, often unavailable in waking, dreams aid in the integration of affect into the narrative of self. Quinodoz (1992) also describes the distinction between the "container-as-thing" (an inert vessel) and the active container that acts on its contents.

The "Me / Not Me" Quality of the Dream

We generally organize our dream recall into a narrative, and while there may be debate over whether this narrative is constructed during sleep or upon awakening,⁵ I am proposing that the narrative quality of the dream permits the sense of ownership to fluctuate along a continuum between ownership and depersonalization. As the sense of dream ownership varies in response to the requirements of the dream-ego, it regulates the reciprocal flow of projective and introjective data within the dream-space. In essence, when ego-dystonic elements of affect-laden material are in ascendance, the depersonalization is greater. As the metabolizing process is engaged, it becomes safer to reintroject and own the dream.

This view is consistent with the idea that the act of constructing stories is a natural human process that helps individuals understand, organize, and integrate their experiences, and that cogent narratives make complex experience understandable (Aron 1989; Pennebaker and Seagal 1999). Newell and Cartwright (2000) propose that increased levels of cognitive elaboration in dreaming are necessary for integrating the associations of emotionally salient memories. Hence, we find that the dreams of depressed subjects are less elaborate in their narrative structure, presumably because the negatively tinged affect has not been meaningfully integrated into the dreamer's life (Kramer, Whitman, and Lansky 1966).

⁵Antrobus (2000) suggests that recall of dream content is *wholly* produced upon waking. That is, upon waking the brain is attempting to account for a variety of neural activity and the interpretive process accelerates as the dormant verbal and meaning modules of the left temporal and prefrontal cortexes come on line.

Grotstein (2000) describes the illusion of dualistic consciousness that allows for the reintroduction into the experienced self of previously disowned aspects. He offers a metaphor of the two aspects of the dreaming mind, the “dreamer who dreams the dream” and the “dreamer who understands the dream” and argues that both “participate in a holographic paradox of at-one-ment *and* separateness” (p. 13; emphasis added). Because this dream-space is felt to be both separate from and part of the self, it permits a dynamic continuum of “dream ownership.”

De Monchaux (1978) notes that it is precisely *because* the dreamer can experience a dream as split-off, as not self, that the dream-space can accommodate disparate elements. Because of the “illusion” that the dreamer is not responsible for the dream, apparently intolerable thoughts “may be permitted to remain alive” until they can be reintegrated with conscious thought. She focuses on the dissociative aspects of the dream (specifically, temporal dissociation, as in “Last night, I dreamt . . .”) as the means by which the dreamer gains distance from troubling dream content. Or, as Loden (2003) says, “The dream teller temporarily disclaims responsibility for that which seems to him or her to come from the outside, as a perception” (p. 63). Indeed, were the dream-space not to be experienced as both separate from and attached to the self, the requisite components for dreaming projective identification and reintroduction would be absent.

The Apparent Reality of the Dream

When we talk about psychological processes of “containment” or “metabolization” we clearly understand that these are metaphors. When we dream, however, things are far less clear. The psychological sequence of dreaming—of projective identification into the transitional dream-space, and the subsequent reintroduction into the dreamer’s self—must be experienced by the dreamer, at least in part, as *actual and nonmetaphorical*. In other words, if the dream-space were *not* unconsciously believed or experienced, at least to some degree, as a “concrete place in the mind” (Meltzer 1976, p. 429), the dreamer would mistrust the structural integrity of the dream-space and the containing function would fail. I believe that in order for the dream to successfully contain the dreamer’s projections, there must be a sense that the action is taking place in a safe “container” or, as Anzieu (1989) has described, a three-dimensional psychic envelope (p. 137).

Yet at other moments there must be a sense of unreality that permits the dreamer the safety of remaining asleep. Hence, I am suggesting that as with

the variable property of dream ownership, dream reality varies according to the need to distance oneself from what is conflictual or overwhelming in the dream.

This issue has previously been touched upon by investigators from different disciplines. The cognitive psychologist Foulkes (1985) takes the position that dreams are phenomenologically indistinguishable from waking. He notes that the same cortical motor neurons fire in REM and waking; the difference is that in dreaming, firing inhibitory neurons blocks movement peripherally, yet information about the lack of movement at the periphery is not fed back to the cortex. This perpetrates the illusion that movement has been actuated. The sleep researcher Revonsuo (2000) proposes that dreaming is evolutionarily adaptive. His “threat simulation” model depicts dreaming as a mechanism for realistically simulating threat-perception and rehearsing threat-avoidant responses. For this to be effective, the dream must be extraordinarily persuasive in its realism. Rechtschaffen (1978) has described the *single-mindedness of dreams*: with the rare exception of lucid dreaming, dreams are in effect non-reflective experiences. This believability increases the likelihood that the integration depicted by the dream will be accepted as an emerging or abiding aspect of the self.

The question of the dream’s subjective authenticity has been examined in the philosophy literature. Descartes, Leibniz, and the contemporary philosopher of mind Daniel Dennett all considered the paradox of attempting to demonstrate one’s wakefulness (Globus 1987). Globus extends Husserl’s position of the *epoché* (the acceptance at nonreflective face value the belief that existence is precisely as it is existentially experienced) into the phenomenon of the dream. He concludes that there is a dreaming life-world, indistinguishable from the life-world of waking. This dreaming life-world is felt to be authentic; it does not call itself into question as fictive. We question that we are dreaming no more or no less often than we question that we are awake. I will extend Globus’s notion into the present topic and suggest that we make use of this personalized “virtual space” for the purpose of organizing and integrating problematical affects, drives, cognitions, and relational configurations.

Nonpathological Projective Identification in Dreaming

The literature is replete with descriptions of the overly defensive, evacuative use of projective identification in dreaming. I will therefore offer only a brief outline of these ideas to contrast my present proposal.

As Grotstein (2005) observes, the original Kleinian model of projective identification was narrowly intrapsychic and was primarily concerned with how one defensively rids oneself of noxious content by extruding the intolerable (along with the good) aspects of self into the object representation of the caretaker. By maintaining a psychic, if destructive, link with the projected-into object, the individual keeps a kind of omnipotent control over it.

In the context of his work concerning the development of the apparatus for thinking, Bion (1992) significantly extended these ideas into dreaming. He examined “hallucinations”—that is, “dreams”—that involve no adaptive dream work (p. 37). In these pseudo-dreams, often reported by psychotic patients, the processes of hallucination and evacuative projective identification are privileged over introjection, as is the gratification of the pleasure principle, privileged at the expense of frustration tolerance. Moreover, if the dream has in fact created a dream symbol, Bion claims, it is not for the purpose of introjection but for the projection of intolerable affect into the symbol, which is “not for the purposes of digestion mentally, only as receptacles to contain, to imprison the idea or feeling, and then to eject it” (p. 66). This then results in what Khan (1974) described as “hybrid and bizarre intrapsychic structures” that “negate dreaming and any personal use of it” (p. 96).

More recently, Ogden (2003) has suggested that repetitive, unchanging “dreams” and “dreams” for which the individual has no associations are actually a *failure* of dreaming: “If a person is unable to transform sensory data into unconscious elements of experience that can be stored and made accessible for linking, he is incapable of dreaming (which involves making emotional linkages in the creation of dream thoughts)” (p. 18).

Bion, however, also offered a model of *normal* and nonexcessive use of projective identification in dreaming that emphasized the use of the dream-space as a transformative “container” (1962, p. 90). In essence, he proposed that in healthy dreaming the mother’s receptivity to the communications of the infant is recapitulated by the dream container’s receptivity to the content of the projections. This model depicts a dream-space that not only retains the link between subject and object, but in which both are continuously modified by the image-making properties of the dream container. Again by way of contrast, in pathological projective identification an *empathic* linkage between subject and object would be vacated by the destructive omnipotence of the projections (only the destructive, omnipotent, and controlling linkage would remain).

Others have considered the communicative, linking, and symbol-formation capacities of projective identification (Rosenfeld 1983; Segal 1981). Nonetheless, I find that the application of these concepts to the dreaming process has been greatly overshadowed by an emphasis on the pathological uses of dreaming.

In nonpathological projective identification, I believe, once the dream contents are acted on by the dream process, the dream-ego makes the evaluation that it is safe to reintroject the previously intolerable, split off, or unsymbolized affect. In other words, the dream is not only an evacuative container but a dynamic, reciprocal route of affect transmission and regulation. While poorly defined, conflictual, or traumatic aspects of the self may be split off and disowned in dreaming as they are in waking, in dreaming they are more often acted on in a way that enhances development. Sensations, primitive affects, and germinating ideas are subject to mental and neurophysiological processing that transforms them into elaborate images or representations of objects into the transitional dream-space—a space which I have previously described as subjectively experienced during dreaming as oscillating between “of the self” and “outside the self.” In that form, they can be reintrojected into the self. The dream, that is, permits the *illusion* of a momentary *deidentification* with a conflictual aspect of self. What is projected “out” feels like it is no longer part of us, and we unhesitatingly accept that to be so. However, the “out-ness” also gives us a perspective on it that we might not otherwise have, and we maintain an accessible link to that new perspective.

For this reintrojection to be successful it must occur unconsciously and in a titrated manner that keeps arousal at a modicum and preserves sleep. Mancia (1988) describes the way dreams, like poetry and other forms of narrative, use projective and introjective identification to confront primary feelings such as envy and jealousy, transforming them from raw emotional experiences into knowledge and mental growth. He describes the process of projection into internal objects as “an internal communication with the self using language whose aim is to transform an emotional experience into a representation of a state of mind” (p. 424).

CLINICAL ILLUSTRATIONS

In the following three examples, taken from the classical psychoanalytic setting, I will attempt to illustrate how the constructs just described can be used to understand more about the dream. This will be a rough

schematization, as the processes I am discussing are known for the most part by inference and are unavailable for direct observation. Nonetheless, I suspect they are requisite elements, in varying degrees, in the construction of the successful dream.

Dream 1

I am playing a piano. It was like I was playing for the first time, as I had no concept of what the notes were. To my surprise, no matter what keys I hit, everything sounded great. I was just playing the keys, and every time I hit the keyboard some beautiful music played. Though it was odd, because in the dream there were two pianos: an old piano, like the one I grew up playing, and a newer piano. In contrast, the old piano sounded terrible and the new piano sounded wonderful.

This dream was first presented in this journal in a paper considering the use of dreams as indices for termination of psychoanalytic treatment (Grenell 2002). At that time I did not highlight the integrative aspects of the dream *process*, as the paper was more concerned with the output of that process. In the present context, however, I will note that the patient, Lauren, had a very difficult time in her waking life keeping in mind contradictory or conflictual aspects of self. She customarily described herself and others in dichotomous terms, and the use of splitting as a defense was apparent. While it may be true that the dream content also suggests some dichotomous thinking (terrible/wonderful-sounding piano), nonetheless both pianos are present in the dream-space; this represents an increased capacity to consider both positive and negative self-representations simultaneously. I use this dream to illustrate the capacity of the dream to contain conflictual aspects of the self. It came near the end of her analysis, and Lauren was able to use the dream, and the dream report, as a vehicle to depict the emotional understanding that she had gained but not yet articulated—that while the analysis had been quite helpful to her in many ways, it had not magically eradicated aspects of herself that still dissatisfied her. She was, however, now able to represent what she liked and disliked about herself within the same psychic space. I think it likely that Lauren's unconscious experience of that space as both metaphorical and nonmetaphorical contributed to her accepting the premise of the dream: that although her life was now filled with new and beautiful "music," that did not mean an escape from some of the painfully discordant memories of the past. Of course, the dream took place in the context of the ending of a psychoanalytic treatment, and there was certainly a great deal of therapeutic work that had preceded and influenced the dream as well.

Dream 2

Florence, a business executive, carried herself imperiously, wore designer fashions, and projected an aura of impermeability. Her gait was carefully measured and she cautioned me not to follow her too closely as we walked to my office. She presented complaining of anxiety, intermittent depression alternating with mania, frequent speeding tickets, and compulsive shopping.

Florence's belittling, depression-prone mother told her in her adolescence that she should have aborted her. Envious of Florence's close relationship with her father, her mother said, "Don't think you'll ever come between me and your father!" The eldest of three sisters, Florence claimed the disdained family position of "bookworm," while her sisters received praise for their beauty. Their mother described Florence as the "ugly older sister."

Her childhood was filled with boundary incursions, including sexual molestations by an uncle and then a rape by a physician during a pelvic exam. She underwent multiple abdominal surgeries accompanied by lengthy hospitalizations. In college Florence became depressed, suicidal, paranoid, and sexually promiscuous. I was her eighth therapist, though her first psychoanalyst. She felt she had been "too much" for her previous counselors and kept a list of faults that each had committed.

Beginning cautiously with weekly psychotherapy, she gradually moved to the couch and increased the frequency of sessions. She lay rigidly, her arms straight at her sides, clutching her car keys and covered with a white blanket she brought. She recalled her early hospitalizations and anticipated that something negative would occur in my office. I attempted to help her see that she feared I would rob her of control, and that her blanket was a way of calming and protecting herself. She was soon able to relinquish the blanket, though the entire first year of the analysis was characterized by Florence's stormy and often hostile affect and behavior. She could not remain in a cooperative and reflective mode for very long, and would quickly harangue me for my "inconsistencies." She experienced my suggestion that she say what came to her mind as "invasive" and my curiosity as "penetrating and humiliating." When her discomfort became unbearable she bolted from the office.

In one early session, she heard me shift in my chair and became very alarmed. She fantasized that in leaning closer, even by inches, I would "pound" my ideas into her. She was certain that I might get out of my chair and grope her or walk around the couch and look down at her. She repeatedly

asked for guarantees that this would not occur. I told her that it seemed that my slight movements, as well as my suggestion that we meet more frequently, had made her fearful of mental and physical penetration, and that she feared her former traumas would be literally reenacted in the present setting. Following this comment, her arms relaxed, her hands unclenched her keys, and she turned on her side with her knees drawn up. Crying softly, she recalled an early childhood idea that if she “lay still and let people do what they needed to do” the doctors soon would help her feel better. She recalled her childhood “mantra” for coping with hospitalizations: “Just do the three P’s: pain, passivity, and patience.”

Calm repeatedly gave way to conflict as she perceived our relationship as adversarial. She demanded that she not have to pay for missed appointments, and attempted to capriciously alter the weekly schedule. She frankly admitted that she wished I would be as conciliatory to her demands as her hairdresser was—*he* never questioned her last-minute schedule changes, and she was *never* disappointed by *him*. On occasion I attempted to accommodate her almost reasonable requests, though she then critiqued my sloppy technique and told me that I had pulled the rug out from under her. She revealed her nickname for me: “G-squared,” the initials of my name, meaning “twice as good as any other therapist and possibly able to help” (though when I failed to live up to this expectation G-squared meant “twice as bad”).

After falling headlong into multiple enactments, I began to sense the rhythm of this dance, and to anticipate my own countertransferential pull toward enactment. This enabled me to interpret her oscillation between wishing for steady boundaries and her attacks on the analytic frame: “It seems to me that you unconsciously engineer situations in which I’m felt by you to be ‘unempathic’ if I don’t go along with your demands. But I’d be pulling the rug out from underneath you if I were to accede to your requests for sudden schedule changes. Somehow, these lose/lose situations are created, here.” Florence acknowledged that this had the ring of truth to it and admitted that she wanted to test me. She recited again the list of the eight therapists she had bullied and dominated, and wondered if I would succumb as readily. I commented that her wish to control me was both a test of my boundaries and a wish to have some safe yet distant engagement with me. “After all,” I told her, “a hostile engagement is better than having none”—and that was what she had had with her emotionally distant mother and physically absent father.

In the sixth month of treatment, following a particularly trying period, she calmly told me that she had decided to begin referring to me by name and title, as I had now earned her respect. In the following session she opened the hour with a dream (the first manifest dream reference to me in the analysis):

I am in a college class and you are the professor. The walls are white. It is a very stark environment. You are teaching about psychological concepts. To illustrate your lecture, you tell the story of an eight- or a nine-year-old girl, recounting her life. It then begins to rain outside and in the story that you tell, the girl as well had to contend with the rain. Then class is over, and I and another student stay behind to talk with you about the lecture. She leaves, and then I am the last person to address you. I tell you that I was very taken with the story, and that I found it personally moving. Then the dream switches and I am with the eight- or nine-year-old girl. I am responsible for her now. It's gone from just raining to pouring! I feel very responsible for this girl because she is now lost. Then I realize, she wasn't my child, she was yours! I had to then find my way to your home to get your daughter back to you. When I finally come slogging through the rain to get to your home, your wife answers the door. I am quite surprised, because she had bright red, shocking hair! She is thrilled to see me and exclaims, "Oh, here's my daughter. Haven't you been responsible for getting her back to me?" I respond, "I'm just glad she's home." I was frantic and I was sure that you and your wife were frantic as well, I was very relieved to return her to you, and it was a terrible burden to be carrying with me this lost child. It all ended quite well.

Florence's associations to the dream were that she felt she had been so "impossible" lately, impulsive and bitchy, that she wondered how anyone could deal with her. She thought of the child in the dream and noted that she wore a sweater similar to one she owned as a child. She then considered that given the fact that she was dreaming about me, perhaps the dream had something to do with our relationship, though she couldn't imagine what. I mentioned that even though she felt she's been "difficult" lately she nonetheless found her way to me in the dream, even permitting me to take care of her, as depicted in the dream metaphor of bringing her "child" self to me. This made sense to her. I added my impression that the dream may have depicted some of the turbulence in the analysis leading to this point. She acknowledged this too, and added that, for her, rain likely stood both for the historical struggles of her life and for the "stormy weather" she and I had endured in the analysis.

What struck me most, however, was how the dream had been able to bring to Florence's dreaming awareness the vulnerability of herself as portrayed by the young girl. Florence, who in waking life kept vulnerability

strictly at bay, had unconsciously projected the vulnerable aspects of herself into the young and vulnerable girl, and that believed-to-be-real projection allowed her to visualize and consider a representation of herself as asking for help. That characterization is itself a remarkable depiction of the truly chaotic feelings she experienced as a child, and of their present transference manifestations. Bringing the lost child to the parent is an elegant metaphor for bringing her lost “true self” to the analyst and his presumed wife, the analytic couple. Further, the translocation of herself into the nighttime “classroom” is an additional distancing feature that permits the drama to be played out and ultimately owned. The dreaming mind has a pithy and poetic way of choosing its imagery, and the vision of herself as a child both encapsulated her defensiveness and overcame it, and somehow makes it more distant and palatable and available for consideration.

We came to understand that Florence’s characterization of my wife with “bright red, shocking hair” represented a devaluation of her. The dream had helped her articulate what she had not been able to appreciate before, that she wanted to be “my favorite” and that my wife was standing in the way. The mobilization and acknowledgment of these sequestered self-object needs thus stood in sharp distinction to the shame that she had been made to feel as a child with respect to her love for her father. In sum, through the projective, identificatory, and reintrojective aspects of the dream process, as well as the apparent reality of the total visual metaphor, Florence was able to more fully assimilate aspects of self that had long ago been disavowed.

Dream 3

Mr. L. was a middle-aged man in a health care field. He had originally sought psychotherapy for periodic bouts of depression and disorganization, and because he had difficulty managing the details of his daily life. Our initial meetings were productive, and he soon increased his visits to four days a week and agreed to use the couch. The treatment went well over the first year. He made progress on his presenting issues and was willing to take up embarrassing concerns such as his excessive alcohol and food intake and some sexual difficulties with his beloved but challenging wife, who was disabled due to chronic pain.

As the first year of analysis drew to a close, Mr. L. began a Monday session by telling me that he had a dream to discuss. He had reported it to his wife that morning, he told me, and had said to her explicitly that he did not want to tell it to me. He was afraid that I would treat him

differently if he did. My curiosity was, of course, piqued. Mr. L. went on to say, “Whenever I have great ambivalence about telling you something I ask myself, ‘Are you in analysis or not?’” Letting out a deep sigh, he summoned his courage and told me his dream.

The dream takes place in your office. However, you are on the analytic couch and I’m sitting in the chair across from you. You’re on the couch with your arm casually propped on a ledge against the wall. I think, “I suppose everyone has a different style of being on the couch. I wonder how long it will be before he realizes that he is on the couch and I’m in the chair.” Then the dream scene switches: we are still in your office, but now the carpeting is gone and there is a hardwood floor. You and I are sitting cross-legged, facing each other. In front of you are four black pens and one by one you began to twirl them, spin them, on the floor. I say aloud, “Huh . . . that’s funny, they all end up pointing to you!” You respond, “I knew that!” I blurt out, “You did not . . . you knew it only after I said it.” At that point the feeling in the dream is that you are like my brother . . . not the way my brother really was, mean, but like a good brother. Then, we stand up, back to back, and push against each other’s backs, like kids. I say, “I could definitely win this!” and we both start laughing. I think to myself, “I’m bigger than he is, but I’ll let him win it.”

He reiterated his trepidation about telling me the dream, and I inquired further. He said it was because in the dream he was the analyst and I was the one being analyzed—that was like an insult. “I didn’t want to tell it to you,” he went on, “because I thought you might say, ‘You’re getting too big for your britches and from now on I’m going to be more distant.’” He then recalled a situation that had come up in the previous Thursday hour.

Mr. L. had recently had a tiff with his mother; he felt that she had disregarded his feelings, a chronic feeling that was reminiscent of his childhood. When Mr. L. and I discussed his handling of the event in the session, my take on it was different from his. In essence, I had felt, and stated, that he was hoping to resolve childhood battles externally with his mother, when they were best fought out intrapsychically. Mr. L. still wanted to take his mother to task in the present.

Nonetheless, on the day of the dream Mr. L. told me that he had thoroughly enjoyed our struggle of wills. He likened it to the part of the dream where we were back-to-back, pushing against each other and enjoying it. He contrasted that struggle with the battles he had as a child with his brother, in which the brother had been physically menacing and sometimes even violent. Similarly, disagreements with his mother had historically had to be muted and largely passive-aggressive, or he ran

the risk of being slapped across the face. Mr. L. relished my willingness to state my opinion in opposition to his, but to do so respectfully. He realized that we could oppose one another without either capitulating or becoming nasty.

As an adolescent, Mr. L. recalled, he had no one to rebel against. His mother and father, then divorced, were often away, and it had fallen to him to be precociously responsible for domestic duties. His "rebellion" against my observation was as much a measure of enjoying his capacity to rebel as an actual difference with the content of my position.

My patient's associations ran dry at this point, but I was curious about the spinning pens. I had my own associations to this part of the dream, and although Mr. L. claimed not to have any, I was sufficiently self-restrained to wait a bit more and not go headlong into analyzing my own connections. And, sure enough, he said, "It's probably nothing," but he did have a thought about the pens. I encouraged him to share. He observed that the pens in the dream were the type that he likes to use for his own writing, and when he does not have this pen he's "peeved." He observed that I was using *his* pens for my own amusement. I commented on how intriguing it was that in spinning the pens they would come to rest pointing toward me. He added, "I did have a thought about that. Somehow it made me think of last week . . . the question that you asked."

Mr. L. has particular expertise in an area of health care that occasionally overlaps an aspect of my clinical practice. The previous week I had been facing a particularly challenging clinical situation that I found to be just beyond my area of understanding. It occurred to me that I might briefly ask Mr. L. his opinion on this matter, feeling certain that he would have a quick and expedient answer. I understood that I was departing from my usual stance, and chose to ask my question at the close of the session. In a straightforward but casual way I prefaced the question by saying, "I'd like to ask your expert opinion about something that pertains to my own practice. I understand that this isn't for your therapy, it's for my own benefit." Mr. L. seemed pleased to participate and offered me his opinion; the entire exchange took no longer than a minute or two, and he joked as he left, "You owe me ten dollars."

Now, talking about the pens, Mr. L. said, "I think that the pens pointing at you came from your comment, and my understanding that this was something for *you*. The pens pointing at you signified that you had brought the focus of the discussion to something that *you* needed." He added, "I knew I didn't want to tell you the dream but I didn't understand why. Now

I think that the reason that I didn't want to tell you this dream is that when I felt that we were equal, *I liked it*. I didn't want it to stop. It was so different than how things ever were with my mother and my brother. With you it was playful aggression, with him and my mom there was nothing playful, it was just downright violent sometimes. They were both unpredictable."

I understand Mr. L.'s dream to be a reaction to two affectively charged situations that could not be integrated into his emotional life during waking. Mr. L.'s mother and brother had flown into borderline rages when confronted with mild displays of autonomy or rebelliousness. In the course of the first year of analysis we dealt extensively with his fears about expressing even mild aggression more directly. Heretofore such pleasure derived from "playful aggression" (his words) would literally have been unthinkable (and unfeeling), as it would have evoked inappropriate responsiveness from his caregivers. Certainly in the first year's analytic work a new self-object constellation was emerging; nonetheless there remained a vestige of fear that his archaic self-object longings would be met with rejection and loss. The fear of repeated disappointment that early on became structuralized, and is now carried into the transference, is evidenced by his fear that in telling me the dream I will begin to punish, resent, and withhold. His defense against such punishment was to not tell me the dream, and to limit his associations to it. Resistances of this nature serve defensively to split off affect.

So when he dreamed of our playful confrontation, his dream was accommodating new information into an existing schema. Of course, the dream does this through its imagistic metaphorical constructs. The dream-space allows for the emergence of a new self-construct, portrayed in the face-to-face and then back-to-back encounters, in which respectful disagreement is tolerated and even encouraged. Similarly, his dreaming construction of the spinning, pointing pens is a condensation projected into the dream-space for the purpose of affect integration, this time of his anxiety over the growing perception that he and I were equals.

In this dream and its subsequent analytic consideration, we find the dreaming process representing one aspect of his ongoing effort to make sense and meaning out of emotional and affective situations that had arisen in waking. Intra-dream projective identification helps in this process, and reintrojection is continued via secondary elaboration of the analytic work, as part of that ongoing process of consolidating affects that had not been fully worked through in the dream.

CONCLUSION

How would a focus on affect integration influence therapeutic practice? It seems to me that most theoretical paradigms acknowledge the value of reintegrating mental contents that have been defensively kept apart. What is significant to me about this elaboration of theory has less to do with technique than with an overarching concern of how the dream report is heard and understood—a particular listening perspective. As the reader is likely aware, Fosshage's organizational model, mentioned earlier, and similar models that privilege the manifest dream report differ from the traditional Freudian view with respect to the role they attribute to defense in the dream. While both traditional and contemporary models allow for depictions of defensiveness in the dream (Goldberger 1989), it is the Freudian model that essentially depicted dreams as a defensiveness themselves—maneuvers of the sleeping ego, geared to keep the dreamer ignorant of the latent truths embedded in the dream. This theory led to a mind-set that prompts the analyst to seek out theory-driven disguised meanings removed from the dreamer's immediate experience of the imagery. The manifest content was seen as a defensive disguise or camouflage, not as a meaningful metaphorical communication. As Pulver (1987) cites Erikson's now famous 1954 quote: "Unofficially, we often interpret dreams entirely or in parts on the basis of their manifest appearance. Officially, we hurry at every confrontation with a dream to crack its manifest appearance as if it were a useless shell and to hasten to discard this shell in favor of what seems to be the more worthwhile core" (p. 100). On the other hand, a model that does not belittle the manifest dream report presumes that dreaming has a developmental function throughout the lifespan and that directly understanding the manifest imagery moves toward actualization of the healthy aspects of personality.

Take, for example the first dream, Lauren's. I did not presume the piano to be a symbol created to defend against the emergence of an underlying drive or fantasy. Rather, I listened with the mind-set that this particularly idiosyncratic juxtaposition was illuminating something about Lauren that could be best understood by attending to the meaning of the pianos to her alone.

These are not absolute positions, and I have no wish to revive old straw men here. Given the confluence of disciplines that has emerged in recent years, contemporary psychoanalysts feel far less constrained to be

loyal to the predilections of any particular theoretical slant, and feel freer to borrow from different schools. Aron (1989) has outlined a practical manner of considering transference implications in the dream, amplifying the meaning of the dream's images, affects, and themes, and also making use of the technique of free association to help unravel the dreamer's conflicts around drives/emotions. Pulver (1987) maintains that the traditional distinction between latent and manifest content is "irrelevant," as the manifest dream can never be taken out of the context of the patient's present life and associations to the dream. He is careful to demonstrate that to work with the manifest dream does not mean forgoing a thorough understanding of the usual mechanisms of dream work: condensation, displacement, reversals, and secondary revisions are ubiquitous in dreams and add a level of nuance to their understanding.

The question also remains open whether or not the benefits derived from neural connectivity occur *independently* of recall and interpretation of the dream. Some argue that adaptation is best served by *unrecalled* dreams (Kramer 1993). Yet others take the position that dreams must be remembered and worked through in waking in order to realize their adaptive significance (Breger, Hunter, and Lane 1971). Hartmann (1995) describes a tripartite process of dream work that optimally includes connections made in dreaming, dream recall, and dream analysis. He observes that while dreams are so infrequently recalled, so too are the elements of psychotherapy or psychoanalysis. How many among us recall with much specificity the great variety of interpretations offered to us by our own analysts?

Most dreams are forgotten, and neither of the two dominant theories that explain this amnesia, the physiological (Vertes and Eastman 2000) and the state-shift information processing model (Kokkou and Lehman 1993), point to repression as the culprit. Whether unrecalled dreams have psychological benefits may not presently be a testable hypothesis. I think, however, that from the perspective of psychobiological adaptation, it makes little sense that a phenomenon so ubiquitous as dreaming (setting aside the epiphenomenalist theory of dreaming) would be useful only on the rare occasion that a dream is recalled, let alone interpreted. People who recall none of the one to two hours that they dream every night function as well as those who do recall their dreams (Antrobus 1993). Additionally, fully polyphasic cultures such as the Senoi of Malaysia or the Kagwahiv of Brazil apparently have no adaptive advantage over

customary Western European monophasic cultures (McManus, Laughlin, and Shearer 1993).⁶

Ironically, while modern psychoanalysis is increasingly heralding the interpersonal, this view of dreams emphasizes the intrapsychic. But Pontalis (1974) has likened the dream-space in its solitary nature to an animal's sacrosanct territory, and Blechner (2001) describes dreams as "subjectless predicates . . . not meant for communication" (p. 95). Still, although dreaming may be healing in its own right, there is no doubt that secondary elaboration adds richness and furthers the integrative process that appears to be initiated by the dream. Particularly when the psyche's self-righting mechanisms are impaired or poorly aligned, it may fall to the psychoanalyst to help the psyche regain the appropriate developmental track; at such times our unique understanding of the workings of the unconscious vis-à-vis the dream may prove to be invaluable.

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⁶Phasicity is used in this context to refer to the relative value placed on experiences stemming from a particular "phase" of consciousness: waking versus dreaming. Monophasic cultures privilege experience gained from the waking end of the circadian cycle, while polyphasic cultures privilege multiple levels of reality, including dreaming.

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