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*Los Sueños en la terapia psicoanalítica
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**THE ONEIRIC DIMENSION IN THE COUPLE IN
PSYCHOTHERAPY: LINK DREAM AND FIELD DREAMS¹**
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Introduction

Psychoanalysts who work with couples and families generally acknowledge the existence of a common psychic organization which has built up between the partners in a couple which entails a shared structure and shared psychic processes.

I draw on the tradition of study and research of the Tavistock Clinic in London, from the pioneering work of Henry Dick (1967) on the unconscious fit to that of Stanley Ruzschynsky (1993) on the couple as patient, but also look to the French psychoanalytic school's theories on the concepts of links.

On these theoretical foundations, a methodology and clinical technique have taken shape which, as well as involving listening to the individual members of the couple, favours listening to the more commingled, joint aspects of their link, considered as a supra-individual product.

Indeed, the psychoanalytical session with the couple requires an attention to and interpretation of the phenomena that arise in the session and depict its joint significance. To whatever extent a dream, an account, or a fantasy are expressions of individual communication, they are nonetheless, since they are

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brought to a joint setting, the expression of a joint psychic organization: they are "about Us".

The dream in couple psychotherapy

A dream is produced by the individual, it occurs during sleep when the subject has minimal contact with the outside world, but it may be the bearer of shared elements in subjects who are united by a link, as maintained by Kaës (1993) who speaks of the *porte-rêve*, dream carrier, the member of a group who is best able to express something on everyone's behalf.

In this sense, we may affirm that a dream may belong not only to the dreamer.

On occasion, even the partners themselves are preconsciously aware of the importance of a dream for both of them and at a certain stage in the session one will invite the other to recount it: "*tell us the dream you had the other night...*".

Robert and Elspeth Morley (1986) in their essay *Conjugal dreams* observe how "*...what is important is not the fact that the experiences the couple share become part of their dreams, but that the less conscious shared aspects of their relationship may emerge in their dreams in a way which for them is significant*".

We must consider how the dream, as an intrapsychic fact, differs from the *telling of the dream*, which is an interpersonal fact. In a couple setting it is this latter aspect that prevails.

If the dreamer performs unconscious psychological work on the dream at a later time, then the dream will also be subject to the associations and analysis of the partner.

We therefore have the dreamer's own associations related to his dream, and the partner's associations related to the dream *and* to the dreamer's own associations, in an *associative multiplication* which is typical of multi-personal settings (with couples, families, groups).

The fact of the universality of the oneiric experience (we all dream) is conducive to sharing, to creating an area where, in the session, there are the conditions for playing with the dream and of lowering one's defences, an area characterized by transaction and which is highly conducive to exchange.

Recounting a dream generates an echo that resonates within the couple's psyche and fuels associations, fantasies, defences, *metaphorical multiplications*; it generates meanings and stimulates the imagination.

Sharing a dream with one's partner may give new impulse to intersubjective processes. Listening to the other's dream, for instance, can be a different way of establishing contact with his internal world and of modifying certain feelings one has about him.

The dream may be a way of sharing unexpressed feelings and experiences that cannot be shared in another way: feelings and experiences that are in search of a means of psychic representation.

In the follow-up to the telling of a dream, the couple may also reveal to the therapist some undisclosed aspects of themselves that until then they had not felt inclined to express (out of a sense of shame, modesty, etc.) and which

they feel are important to communicate at a certain stage of the therapeutic process.

Friedman highlights two intersubjective functions of the dream. The first is that of an appeal for external containment (reverie) for emotions in the dream that the dreamer is unable to work through on his own. In this case the dreamer is seeking a *psychic partnership* to work through intolerable emotions.

The second function is that of influencing his listeners, prompting them to experience different emotional states: love, fear, pity compassion, anger, etc., feelings that have been aroused by the events of the dream (or more often by its structure and atmosphere, by the way it is told or when the telling takes place) in order to establish a new type of relationship with them.

The moment of sharing a dream is a precious occasion given that, if we postulate that the purpose of the work of psychoanalysis is to intervene in the phantasmic life of the couple, their *interfantastication* is brought out into the open especially well through the use of dreams.

Link Dreams

The dream may be observed as an expression of the nature and ways of collusion between a couple and it is a complex synopsis of the continuous process of transformation that alters the psychic configuration of their link.

We could, in this case, speak of a two-person dream or link dream.

Maria dreams that she is in bed, lying hand in hand with her mother who died 10 years previously. She is aware of her mother's death and wonders if it might not be she who is lying beside her, but the figure's physical appearance is unequivocal. During the dream she tries in vain to wake up, as she is frightened. When she does wake she is disorientated for a while, it takes her some time to reconnect to reality and she realises that it is her husband who is lying beside her.

She says that this dream greatly disturbed her and that she felt anxious and tearful all day, but she could not find a specific reason for feeling that way.

She associates her feeling of fright with the fact that her mother might want to take her away with her and acknowledges her childhood yearning to be with her, in spite of her being a severe alcoholic who maltreated her.

Carl, her husband, listens carefully and remarks that his wife had always had a very difficult relationship with her mother, but he does not seem to have particular associations to make.

The couple then immediately speak of a row during which, as is a common occurrence, Carl abruptly and irritably makes a unilateral decision, in this case to have a tennis lesson, presenting his wife with a *fait accompli* to avoid what he thinks would be her disapproval that would prevent him from doing what he wants to do.

This behaviour greatly irks Maria and a furious argument ensues where Carl, in a frenzy of rage, reacts violently and destroys his tennis racket.

When Carl acts one-sidedly and dictatorially, suddenly excluding Maria, she re-experiences the unexpected and destabilizing emotional detachment that for a long time was a feature of her life with her mother: *"I never knew what state I would find her in"*.

At times like these, Carl makes her feel that her need for closeness is inopportune and wrong and that her criticisms are disturbing, to the point of having to be repressed with violence, just like her mother, who rejected with anger and contempt Maria's entreaties and appeals for her to stop drinking.

The couple have a symbiotic and mutually pervasive relationship. In normal circumstances Carl is affectionate and sympathetic, as is Maria, but in some situations (where Carl seems to be in a dissociative state) he feels that she is extremely humiliating and he attacks her, even physically. Maria, in his mind, seems suddenly to become his own mother, who was belittling and emotionally insensitive towards him and towards whom he may harbour unmentalized experiences and emotions.

The dream, which unites a conjugal dimension with one related to primary relations, seems to create a connection between Maria's mother and Carl.

Who is the person beside us?

The dream is a sign of a common internal representation, a shared internal object, as Teruel (1966) would say, each one's mother, an object with which there exists a deeply destabilizing relationship. These conditions resurface in the relationship between the couple, provoking violent, uncontrolled rows.

The dream provided an opportunity to observe that for both of them there exists "another emotional dimension", distant and unconnected, that runs parallel to their present mental state.

Maria shows that she is more aware than her husband of the traumatic suffering she endured in her primary relations, but the violent emotions that assail her in moments such as these are so overwhelming as to defy being psychically processed.

Carl's more severe traumatic dissociation prevents him from acknowledging the significant suffering with which he suddenly and uncontrollably comes into contact and although he is aware of his actions, he is incapable of understanding what has taken hold of him.

The dream highlighted distressing aspects of their respective internal worlds, elements that do not have a psychic shape or representation, beta elements that require an alpha function in order to be assimilated and not dissociated. The dream was used, therefore, as a means of developing the functions of thought rather than as a vehicle for content, in a slow and delicate process of weaving together meaning.

Field dreams

A different way of understanding dreams in couple psychotherapy is to consider them as a three-person phenomenon, related to the intersubjective analytic field.

The Barangers' (1961) theory of the analytical field suggests that the analytical situation be interpreted as a dynamic field composed of a bipersonal relationship between analyst and patient where the resulting dynamic makes subjective contributions indistinguishable from each other.

The field model can trace some theoretical roots to Bion (1961), in particular in the idea that in a group a shared field is created, characterized by common mental elements (basic assumptions) whose origin is not to be found in the single participants, whose psychic uniqueness nonetheless contributes to their formation, and who are in turn influenced by these common elements.

The concept of the field encompasses the idea that in the meeting between individuals something is created which is different from that which each individual is when separate from the other.

Emotive positions and mechanisms of internal relations accompany the relational sphere of each subject *in a state of potential* but every encounter specifically and uniquely influences their expression. (Monguzzi, 2006, 2010) .

The concept of field emphasizes the aspects of dynamics and process and the reciprocity of exchange between couple and therapist in the session, giving considerably broader scope to the notion of relating.

Observing the couple session from this perspective means considering the way that the latent structure of the field, that the Barangers call unconscious fantasy, is the product of a dynamic process to which the therapist's characteristics and mental functioning in the session also contribute.

It is a process of coupling of minds in which the therapist is no longer involved as an observer-participant, but as a *participant-observer* in the emerging pathological configurations, those blind areas that resist transformation and must be worked through and overcome in order for the therapeutic process to proceed.

From this viewpoint the dream becomes a way of describing an arrangement or layout of the session, something towards which the therapeutic work is proceeding.

At a later stage in the psychotherapy Maria recounts another dream.

She is in a very untidy room with things carelessly thrown around the floor and on a chair sits her mother, drunk, holding two small children in her arms. The room is a mess and there is cigarette ash all over the floor. Maria is aware that her mother is incapable of looking after these two children and tries to let her know this but her mother, aggressive and contemptuous, brutally sends her away.

In her associations Maria says that the two children are a boy and a girl and she recognizes elements of the dream as corresponding to reality, for example the dirty untidy rooms of the house where she grew up and her mother's behaviour when she was drunk.

Carl remarks that it is painful for him to think of his wife as a child in that situation.

This dream is brought to a session during a particular phase of the therapy. Some weeks earlier there had been a serious incident in which, during a violent row, Carl had threatened to leave Maria and she, in desperation, had cut her wrist and had to be treated in hospital.

This incident took place during a period when the couple had achieved greater control over their emotional life and the seriousness and frequency of their clashes had reduced considerably. Following this episode Maria had entertained the thought that it might be necessary to take more serious measures to protect them both (a temporary separation, a protection order against Carl, individual psychotherapy or drug therapy, for one or both of them).

From the point of view of the countertransference, I was very concerned about their situation and felt like a neglectful parent or, when I imagined taking a more forceful approach, like an interfering and judgmental parent.

The dream is an expression of the meanings and symbols that are circulating at a particular time in the therapeutic process and is representative of what we are facing together.

We may observe an affective configuration emerge: *an unreliable parent figure who neglects and maltreats his children.*

The image of a mother hugging her children in an apparent gesture of affection, nonetheless highlights a binding and suffocating bond which exposes the children to danger.

The dream seems to draw attention to some danger signals inherent in the situation that has developed between us in the sessions, after the couple's clashes intensified again resulting in Maria's gesture of self-harm.

Is this danger given adequate consideration by the therapist?

Has the work of stabilization achieved during therapy gone up in smoke, as the cigarette ash on the floor would seem to indicate?

Through Maria's dream the couple comment on the analytic work in progress. If we are to accept this, then we must also agree with the hypothesis that the same dream recounted by the same patient would be interpreted differently by different analysts, and would assume an entirely different significance if it were related in an individual rather than a couple (or group) session.

As early as 1913 Ferenczi, in an article entitled *For whom does one relate ones dream?* speaks of the relational aspects of dreaming and of recounting dreams. In this particular case, the approach for interpreting the dream, rather than focusing on the fear of each partner of a "drunk" therapist, or another version of an internal parent unable to take care of them, was to explore the obstructions in the field that impeded my being able to consider more decisive positions, therefore allowing myself to be helped by communications contained in Maria's dream.

What induced the patients to extract this particular way of feeling from their internal set at *this* particular time?

What emotions in circulation do still not have access to our thinkability?

It is up to the analyst, as Mitchell (1988) asserts, *"to find a new way of participating, firstly within his own personal experience, and then with the patient"*.

Using dreams in couple psychotherapy

In approaching the theme of using dreams with the couple as patient, I would firstly consider how dreams can be a means of helping the partners to veer away from a tendency to cling to concrete factual aspects. Indeed, we know that the more a couple session is abounding in facts, actions and behaviours the more often we meet with resistance to gaining access to a level of psychic and emotional reality, and how difficult the couple finds the principle of suspension inherent in psychoanalytical work.

There are some therapists who, in the rules for the psychotherapy setting, specify that the couple bring their dreams; and there are others, among whose numbers I would count myself, who do not explicitly invite them to do so, letting the analytic space, with its characteristics of containment and guarantee of allowing each partner to express himself, guide them to recounting aspects which are less subject to conscious control. In this sense we may say that recounting a dream is also an expression of trust in the therapist and in his capacity for interpreting it.

Once we have the dream in front of us, I feel that it may be beneficial, after the dreamer has recounted his dream and made his associations, to involve

the dreamer's partner by hearing his associations, in order to observe the emotions and connections that the dream arouses for him, and only then elicit the associations related to the partner's associations. We must try to avoid a situation where the couple lean more towards interpretation than association, in a sort of imitation of the therapist. Patients often do, in fact, try to interpret their dream as a defence against the emotions it induces.

We have seen how the dream may be considered not as an object in itself, a text to be deciphered, but rather as a particular means of communication, and how less clinical attention need be given to the interpretation of content than to what is contributed on an intersubjective level by the telling of the dream.

If we agree that when we speak of a dream we mean "a dream told by someone to someone else in a given situation", then we may consider that there is less of an obligation on the therapist to reach a conclusive interpretation, as highlighted by Ruffiot (1981). The oneiric holding that is created is of therapeutic value in itself. Processes of transformation are set in motion in which the therapist participates but not as a bridge to a definitive pronouncement on the unconscious material of the dream.

We have examined two possible levels of interpretation which I have called the link dream (two-person dream) and the field dream (three-person dream).

From the perspective of the link dream, greater attention is given to what the couples express about themselves and each other, to the awareness they show of the link that characterizes them, to how well they can move away from an attitude of mutual blame, in order to recognize aspects of reciprocity and complementariness. Although these objectives are present throughout the entire course of therapy they are more associated with the initial phases of treatment in which a sense of unity must be achieved and shared.

From the perspective of the field dream, the therapist is open to grasping a further aspect of the whole in which, moving beyond the more traditional relationship of transference-countertransference, through the use of "the ship's instruments", he concentrates on verifying that the navigation "route" of analysis is proceeding well and overcoming episodes of bad weather, running aground and drifting.

The Barangers speak of the "second look", the movement on the part of the therapist that allows him to contribute to co-constructing the phenomena of the field while simultaneously observing and interpreting its functionings and disfunctionings.

In conclusion, we may say that the dream is an indicator that can be used on several levels, levels that unfold during the course of the therapeutic process and call on the analyst to position himself differently in the intersubjective space of the session, a place of optimum coming-together with the patients.

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La dimensión onírica en la psicoterapia de pareja: sueños de unión y sueños de campo

El marco psicoanalítico con la pareja exige prestar atención e interpretar los fenómenos que se manifiestan durante la sesión para detectar un significado conjunto.

Un sueño, un relato o una fantasía, aunque sean comunicaciones individuales, al manifestarse en dicho marco conjunto constituyen la expresión de una organización psíquica común, es decir, pertenecen al «discurso del nosotros».

Aunque un sueño sea soñado por uno de los miembros de la pareja y, por lo tanto, se trate de un producto individual, trasciende la dimensión individual y se convierte en un acto intersubjetivo en el momento en que es contado, y adquiere un significado muy importante sobre todo por la elección del momento en el que se expresa.

Podemos diferenciar varios niveles de lectura del sueño en la psicoterapia de pareja: un nivel individual, que muestra el estado del escenario de los objetos internos del soñador; un nivel de pareja, que se refiere al estado y a las evoluciones de la organización psíquica conjunta de la pareja; y un nivel relativo al estado del campo intersubjetivo, que abarca al terapeuta y ambos componentes de la pareja, y que se refiere a lo que está revelando, aquí y ahora, el trabajo analítico.

Dichos niveles recurren a lecturas distintas y requieren intervenciones técnicas diferentes.

En el artículo, partiendo de una situación clínica, se examinarán los significados y las implicaciones ligadas a cada nivel interpretativo y se comentarán las posibles decisiones clínicas consiguientes.

Palabras clave

Unión - organización psíquica conjunta - teoría del campo – intersubjetividad - interpretación.

The oniric dimension in couple psychotherapy: link dreams and field dreams

ABSTRACT

The psychoanalytical setting with the couple requires attention to and interpretation of the phenomena occurring in the session in order to identify a joint meaning.

Although a dream, a story, a fantasy constitute individual communication, they also represent, when brought into the joint setting, the expression of a shared psychic organisation, i.e. a "We discourse".

Even if the dream is dreamt by only one of the two partners, and is therefore an individual product, it transcends the individual dimension and becomes an intersubjective act in the moment of its telling, and assumes a fundamental meaning especially in terms of when it is told.

We can identify different levels in the reading of dreams in couple psychotherapy: an individual, level which shows the status of the scenario of the internal objects of the dreamer; a couple, level related to the status and evolution of the couple's joint psychic organisation; a level, related to the status of the intersubjective field which includes therapist and both partners and that pertains to what is emerging, in the here and now, from the analytical work.

These levels refer to different readings and require different technical interventions.

In the paper the meanings and implications associated with the individual interpretative levels will be examined through a clinical case, and the possible clinical choices originating from them will be discussed.

Key word

Link - field theory - couple's joint psychic organisation - intersubjectivity - interpretation.

La dimension onirique dans la psychothérapie de couple: rêves de lien et rêves de champ

RÉSUMÉE

Le contexte de la psychanalyse de couple prévoit la prise en considération et l'interprétation des phénomènes qui se manifestent durant la séance, afin d'en identifier une signification conjointe.

Bien que constituant une communication individuelle, un rêve, un récit, l'imagination représentent, dans un contexte conjoint, l'expression d'une organisation psychique commune, c'est-à-dire un « discours du Nous ».

Bien que le rêve soit rêvé par l'un des deux partenaires, et donc produit individuel, il transcende la dimension individuelle et devient un acte intersubjectif lorsqu'il est raconté, prenant un sens très important, surtout au regard du choix du moment de sa narration.

Il est possible d'identifier différents niveaux de lecture du rêve dans la psychothérapie de couple : un niveau individuel, qui montre l'état du scénario des objets internes au rêveur, un niveau de couple, qui concerne l'état et les évolutions de l'organisation psychique conjointe du couple, et un niveau relatif à l'état du champ intersubjectif, qui inclut le thérapeute et les deux partenaires, et qui a trait à ce qui émerge, ici et maintenant, du travail d'analyse.

Ces niveaux se rapportent à différentes lectures et nécessitent différentes interventions techniques.

L'article examinera les sens et les implications liés à chaque niveau d'interprétation à travers un cas clinique, et abordera les choix cliniques possibles découlant de ces niveaux.

Mots clés

Lien - organisation psychique conjointe - théorie du champ – intersubjectivité
- interprétation.