

6-24-2012

Dream-Work in Psychotherapy: Jungian, Post-Jungian, Existential-Phenomenological, and Cognitive-Experiential Approaches

William Caperton

Marquette University, william.caperton@marquette.edu

Follow this and additional works at: <http://epublications.marquette.edu/gjcp>

Recommended Citation

Caperton, William (2012) "Dream-Work in Psychotherapy: Jungian, Post-Jungian, Existential-Phenomenological, and Cognitive-Experiential Approaches," *Graduate Journal of Counseling Psychology*: Vol. 3: Iss. 1, Article 3.

Available at: <http://epublications.marquette.edu/gjcp/vol3/iss1/3>

DREAM WORK IN PSYCHOTHERAPY

Dream-Work in Psychotherapy: Jungian, Post-Jungian, Existential-Phenomenological, and Cognitive-Experiential Approaches

“Once Zhuangzi dreamt he was a butterfly, a butterfly flitting and fluttering around, happy with himself and doing as he pleased. He didn't know he was Zhuangzi. Suddenly he woke up and there he was, solid and unmistakable Zhuangzi. But he didn't know if he was Zhuangzi who had dreamt he was a butterfly, or a butterfly dreaming he was Zhuangzi. Between Zhuangzi and a butterfly there must be some distinction! This is called the Transformation of Things” (tr. Watson, B., 1968, p. 49).

“A dream that is not understood remains a mere occurrence; understood, it becomes a living experience” - C.G. Jung, CW 16, para. 252

Dreaming has perplexed, fascinated, and mystified people throughout history, and dreams have been seen as ubiquitous and meaning-laden phenomenon in disparate cultures and times (see Cartwright, 1977; Dombeck, 1991). The quote above from Zhuangzi (4th century BCE) highlights some of the questions of the nature of consciousness, epistemology, and self-understanding that contemporary theorists and researchers continue to grapple with. The field of psychology and psychotherapy in particular has been historically interested in the use of dreams for therapeutic ends. Freud and Jung at the beginning of the last century considered dreams to carry significant weight in their approach to treating psychological problems. Since that time, a number of theoreticians and practitioners have refined, refuted, combined, synthesized, questioned, and established their own approaches to dream work. While we may in some ways be living in a “society where dreams are of little or no social importance (in which we) have been devoted to a mastery over nature, including our own human nature” (Ullman, 1996, p.1), it remains true that clients in our therapeutic practices will bring dreams into sessions. The ways in which practitioners approach this material will be informed by their theoretical orientation as well as their level of training, interest in, and sophistication with

DREAM WORK IN PSYCHOTHERAPY

different dream work models. Thus, the focus of this literature review will be a specific look at a few of the theoretical models for working with dreams, as well as a review of the empirical research that has investigated utility, efficacy, and outcome's of specific dream work models. Due to the space constraints, this review will necessitate certain lacunae; in the interests of researching in depth specific theories, omissions of certain approaches or perspectives will be necessary. That said, a more thorough examination of Jungian and post-Jungian (Archetypal) approaches will largely displace a focus on historic and contemporary psychoanalytic (Freudian) models. While certain neurobiological studies of the nature of dreaming will be included, these will also not be exhaustive. Of specific interest to this current work will be Jungian, Post-Jungian, Existential-Phenomenological, and Cognitive-Experiential approaches to working with dreams within psychotherapy. We will seek to elucidate the theoretical understandings of these approaches, and examine the clinical use and efficacy of this type of work.

Jungian Dream Work

Early psychoanalysts considered dreams to be powerful tools in the process of bringing unconscious desires and motivations into the light of day. Freud referred to dreams as the “via regia” to the unconscious and suggested that dreams primary function was the satisfaction of primitive and infantile wishes (Freud, 1900/1966). As an early acolyte to the practice of analysis being developed by Freud, Carl Jung also saw dreams as a source of unconscious information. One of the key rifts which developed between the two theorists revolved around their conceptualizations of the nature of the unconscious and the function of dreams. Jung saw dreams as providing access to the various layers of the unconscious and through this access a means for ascertaining

DREAM WORK IN PSYCHOTHERAPY

potential messages for psychic equilibrium and healing. Jung conceptualized the etiology of non-organic / biological neurosis and psychosis as developing from an unbalanced reliance on one portion of the personality, in which splitting and projection of unrecognized portions of the total personality occur. One of the fundamental splits is that between unconscious and conscious understanding, and thus one of the aims of psychotherapy was to bring conscious awareness to these unconscious psychic contents. While Freud thought of unconscious contents as having once been conscious and subsequently repressed, Jung conceived of unconscious contents as having a tripartite origin. Unconscious contents could have been once conscious and forgotten but additionally contain “all those psychic components that have fallen below the threshold, including sense perceptions” (Jung, *Collected Works*, 7, para. 204, hereinafter referred to as *CW*). The third sources of unconscious material in Jung’s conceptualization are archetypal contents. Through cross-cultural mythological and religious empirical study, Jung came to believe that “inherited human mental experiences created a collective unconscious, comprised of universal, culturally transcendent symbols seen in fairy tales, myths, esoteric practices, and dreams” (Eudell-Simmons, E., & Hilsenroth, M, 2007, p. 333). The collective unconscious is comprised of archetypes, which are not specific images or motifs, but rather typical propensities for representation. An archetype is “not an idea which has been acquired by humanity” (Mattoon, M., 1978, p. 19), but rather a “possibility of representation” (Jung, *CW9-I*, par 155). Jung likened the archetype to the concept of instincts, stating that archetypes are “typical modes of apprehension” (*CW8*, par. 280) while instincts are “typical modes of action” (*CW8*, par. 273).

DREAM WORK IN PSYCHOTHERAPY

Jung thought of dreams as serving a compensatory function toward the dominant conscious attitude (Jung, 1974). Jung differed with Freud on the notion that a dream presents manifest content which occludes an underlying latency in which the actual “meaning” resides. This is not to say that dream images are simply non-symbolic phenomenon presenting a picture “as is” with no need for further elucidation. Jung states that “dreams do not deceive, they do not lie, they do not distort or disguise, but naively announce what they mean...they are invariably seeking to express something that the ego does not know and does not understand” (Jung, 1946, para. 189). A subsequent Jungian oriented clinician has described the “superordinate function of dreams (to be) the development, maintenance (regulation), and, when necessary, restoration of psychic processes, structures, and organizations” (Foshage, J. as quoted in Whitmont, E., & Perera, S., 1989, p. 2). This theory posits the dream as a representation of the current psychic situation of the dreamer, pointing out the manner in which the personality is functioning as well as suggesting potential amendments or adjustments to this attitude. In the conscious apprehension and working through of personal subjective, objective, and archetypal associations, dream images have the potential to unfold a deeper psychological understanding of one's current situatedness and patterns of behavior. John Beebe summarizes the assumption which overlays and informs all of the unique contributions of Jungian dream work as the foundational idea that “the unconscious exists to enlarge consciousness, and...it does its work by means of symbolic suggestion” (Beebe, J., 1993., p. 81).

The manner in which Jungian therapists work with dream images has been characterized as a circumambulation. Jung was critical of the method of free-association

DREAM WORK IN PSYCHOTHERAPY

developed by Freud in that he believed it led away from the primacy of the information contained in the manifest content of the images. In Freud's method of association, images yielded personal associations, which in turn yielded further associations to those associations. Jung found that this process led invariably to an identification of a dream's complexes, but not in a way unique to the dream. That is, any image or thought could lead through a similar associative chain to a core complex. Mary Ann Mattoon states several problems with this method as read through Jung. She positions the most important of these problems in the fact that "free association does not reveal what the dream says about the complex(es) to which it leads, and the dream message may be lost completely (Mattoon, M., 1978, p. 55). Rather, in the Jungian method association and elaboration is employed in the interest of filling out the nature and character of the images in the dream, as they are presented, until their meaning begins to become clearer. Mattoon draws a nice image differentiating these approaches, stating that "free association leads by "zig zag" lines away from the dream image; circumambulation makes possible looking at the image from all sides, and describes a metaphorical circle, the content of which suggests the meaning of that image" (Mattoon, M., 1978 p. 56).

Several steps can be discerned in the classical approach to Jungian dream analysis. Mattoon, in her synthesis of Jung's writings on dream theory has elaborated the following general framework. The first step is stating the dream text in terms of structure, generally including exposition (who is there, where we are, what time it is), development of the plot (what begins to happen), and peripetia or culmination in which something happens decisively or a change of some kind occurs. The next stage involves establishing the context of the dream. This would include associations, explanations, and

DREAM WORK IN PSYCHOTHERAPY

amplifications of the dream images, including the personal, cultural, and archetypal (i.e. mythical, religious, literary) levels. The context also includes illuminating any themes which tie the amplifications together, the current and long-term conscious situation of the dreamer, and whether or not the dream is a part of a series. Stemming from these observations, the interpreter reminds themselves of the “appropriate attitude” to bring to an interpretation. This includes the notions that nothing can be assumed about the meaning of the dream or images, that the dream does not disguise but presents a set of “psychic facts”, and that the dream likely is not an instruction to the dreamer. The interpreter should also maintain awareness of the personality characteristics of the dreamer and themselves. The following step is to characterize the images as either objective or subjective, or indeed at many times both. One way to conceptualize this is to consider; if people populate the dream image, whether the people are actual acquaintances of the dreamer, or if they represent splinters or projected aspects of the dreamers’ personality. At times, both an objective and subjective approach to images may reveal deeper levels of meaning. The next stage is to consider what compensatory meaning or message the dream may be revealing. This is achieved through considering the problem or complex the dream seems to point to, what the conscious situation the dreamer is faced with, and whether the dream seems to require a reductive or constructive characterization (Mattoon, M., 1978, Hall, J., 1983).

Whitmont and Perera (1989) make a modification to the notion that dreams *always* present a compensatory view to the dominant egoic standpoint. They note that often clients in therapy have no clearly elaborated, static sense of self in which a strong ego is operational. They suggest that in addition to compensation, dream images may

DREAM WORK IN PSYCHOTHERAPY

complete a situation through complementation. Complementation and compensation are considered overlapping concepts, both of which serve to balance a one-sided conscious position. A compensatory image works to do this by presenting a polar opposite version of the conscious standpoint. They suggest that this opposition may serve to point out the negative aspects of an idealized waking conscious viewpoint, for example.

Complementation on the other hand, does not present polar opposites, but rather adds missing elements to a conscious viewpoint. Whitmont and Perera also report occurrences of dreams that complement a tentatively held conscious position, in a manner which serves to reinforce this attitude.

Compensation and a consciousness of the precursor to the compensatory impulse have many potentially therapeutic effects. Jung suggested that an ongoing experience and encounter with compensatory unconscious material could have a cumulative effect of bringing a new waking attitude and a “new level of consciousness” (CW11, para. 779). Mattoon (1978) describes some of the salutary potentials of compensation including a coming to understand the basis for emotions, changes in attitude, and accepting the “other” in oneself (p. 131-132).

James Hall (1983) points to two ongoing tensions in dream work within a Jungian frame. He suggests that the first is the tension between objective and subjective interpretation of dream images or motifs. An objective interpretation is one in which the dream image is considered a representation or referent of a person, thing, event, etc. occurring in the dreamer's waking life. A subjective interpretation is one in which the image is considered a representation of a portion of the dreamer's own psyche or self. Mattoon (1978) suggests the method for determining a subjective versus objective

DREAM WORK IN PSYCHOTHERAPY

interpretation lies in the closeness of the dreamed character to the dreamer. She states that images of persons close to or important to the dreamer in waking life such as parents, siblings, close friends, or lovers, an objective interpretation is likely indicated. For persons unknown or who are remote or not significant to the dreamer in waking life, Mattoon suggests a subjective interpretation is likely more applicable. Whitmont and Perera suggest that the decision to interpret on an objective or subjective level can be decided by determining which avenue will “most likely fulfill a compensatory or complementary function” (1989, p. 79) or provide information or insight previously unavailable to the conscious standpoint. In dealing with clients with fragile or undeveloped ego's, Whitmont and Perera stress the importance of avoiding interpretations that challenge the fragmented ego position. They suggest that clients with inadequate ego development may not be able to tolerate integrating negative projections presented by dream images as their self-image is already overly negative (1989, p. 64). These authors illustrate the fact that there can be multiple subjective levels in a given dream image, including the emotions induced in the dreamer *by* a dream character or situation, and the emotion ascribed *to* those same characters or situations. They suggest that in working with clients with fragile egos, the primary focus should remain on the emotions felt by the dream ego in relation to the dream situation, until “there is a minimal capacity for integrating psychological contents that are foreign and negative to the self-image and ego ideal” (Whitmont, E., & Perera, S., 1989, p. 64).

The second ongoing tension in Jungian oriented dream work suggested by Hall (1983) is that between personal and archetypal meaning of dream images and situations. Hall suggests that for a person overly identified with the collective culture (“collective

DREAM WORK IN PSYCHOTHERAPY

consciousness”), realization and integration of archetypal contents can be freeing. However, he noted that for persons in which a schizophrenic (non-diagnostically), fragmented experience of reality dominates and in which archetypal images appear as assaultive, the experience of a stable ego standpoint can be felt as “liberation” (1983, p. 114). Mattoon suggests that archetypal interpretations should not be attempted until all of the dreamers personal and cultural associative and amplificatory material have been exhausted. She describes two ways in which archetypal dreams can have therapeutic value. In the first instance, analysis of these dreams can help the dreamer to feel less isolated, in being confronted with the realization that other human's have similar problems and that “every subjective difficulty has to be viewed from the standpoint of the general human situation (CW 10, par. 323 as quoted in Mattoon, 1978, p. 70). The second therapeutic value stems from the dreamer experiencing an opening to increased horizons for personal wholeness, through coming into contact with transpersonal contents. (Mattoon, 1978). Whitmont and Perera (1988) note the importance of grounding archetypal dreams and their associations and insights with more personal material. They stress that when working with archetypal material, a negative outcome can be the dreamer becoming lost in “sermonizing about abstract philosophical or religious principles” (p. 90). They point out the necessity of connecting the archetypal themes from so-called “big” dreams with the personal concerns and situation of the dreamer, by pulling out the particular actions, behaviors, and emotions within the dreamer’s actual world that are reflected or connected to the archetypal or mythological amplifications. One of the ways in which they suggest this can be accomplished is through comparing themes from “little” personal dreams with the themes of “big”, archetypal dreams. These

DREAM WORK IN PSYCHOTHERAPY

authors suggest avoiding exploring archetypal and mythological amplifications in ways that detract from the here/now dynamics of the analysand's experience, and note that these excursions can detract from a working through of personal material necessary for ego building and resolving unconscious complexes. On the other hand, they highlight the usefulness of connecting a client to transpersonal themes evident in their material especially when faced with existential, "insoluble life problems" (Whitmont, E., & Perera, S., 1988, p. 109). They suggest that in these instances archetypal parallels can serve to relate personal, egoic discomfort with its spiritual, collective matrix.

A question which arises here, or around any body of interpretive theory is how to assess a given interpretation's validity. This is certainly true for dream interpretation, and a number of strategies have been established within the Jungian framework. At the same time, a recognition is made that symbolic material as depicted through dreams is by its nature manifold in its potential for disclosure. Richard Kradin remarks that "as symbols in dreams potentially convey inexhaustible meaning, no single dream interpretation can ever be 'correct'" (Kradin, R., 2006, p. 36). He instead advocates, as do a number of other Jungian writers, a perspective that acknowledges a dream image may reveal multiple levels of depth and interpretive material over time. Kradin goes on to suggest that one of the best indicators of an interpretation's "correctness" is if it has an impact on the dreamer which includes an element of surprise. This is congruent with Jung's theory that unconscious factors as depicted in dreams often serve a compensatory function. Mattoon describes a four-factor model for verifying a dream interpretation, in descending order of applicability. Step one echoes Kradin and Jung's (1974) suggestion that above all the interpretation should "click" for the dreamer. The second factor is assessing whether or

DREAM WORK IN PSYCHOTHERAPY

not the interpretation “acts” for the dreamer; this acting may show itself most readily in the analytic session as an experience of increased “flow” between the client and analyst. In contrast, Jung expressed the notion that errors in dream interpretation may result in “bleakness, sterility, and pointlessness”(CW7, para. 189) during sessions. The third factor is assessed through the analysis of subsequent dreams. Mattoon, following Jung, suggests that if a dream has been incorrectly or inadequately interpreted, the dreamer may bring in additional dreams which repeat the major motifs of the misinterpreted dream. The final test for validity according to Mattoon is assessing whether the “events” anticipated by the interpretation come to pass in the dreamer's life.

The Jungian analyst Margaret Wilkinson has brought insights from contemporary neuroscience to bear in her examination of Jungian oriented dream-work. She contends that this research supports Jung's assertion that dreams reveal rather than conceal the central emotional concerns of the dreamer. Wilkinson reports that in REM sleep (the period of sleep most associated with dreaming (Solms & Turnbull, 2002) the limbic system is activated while the executive areas of the brain are deactivated. This activation of the centers of the brain (especially the amygdala) crucial for emotional processing and regulation points to the importance of REM sleep and dreaming in processing emotion. She notes the congruency of this view with Jung's contention that emotion is the “prime mover in dream plots” (Wilkinson, 2006, p. 47). Wilkinson cites these recent neuroimaging studies evidencing the primacy of emotion in dreaming as confirmatory to the Jungian practice of focusing on the “mood and affect that underpin the dream, and the relation to the dreamers waking emotional life” (2006, p. 47). Wilkinson marshals evidence from Hobson and Pace-Schott, who have determined that dreaming

DREAM WORK IN PSYCHOTHERAPY

consciousness is differentiated from waking consciousness in that the executive organizing functions of the brain are inhibited during REM sleep, in disconfirming Freud's notion that dreams are censored and disguised (2006, p. 50). She proposes a neurologically informed view of the as yet hypothetical goal implicit to Jungian dream work of strengthening the Ego/Self or Conscious/Unconscious axis. Wilkinson states "in working with dreams...the individual develops a creative capacity to make conceptual and affective links across different realms of knowing; material may begin to move from unconscious implicit memory towards the explicit realm of knowledge and memory where it may be thought about" (2006, p. 53). In making this connection Wilkinson seems to be stating that dream images are connected with underlying, implicit emotions which through their vivid presentation begin to emerge for the dreamer, who, through working the material is able to bring the unconscious / implicit into a conscious / explicit sphere, an inherently creative act which may serve to resolve the underlying emotional complex. Hobson's research supports the Jungian notion that dreams present an undisguised emotional concern for the dreamer, stating that "dream content is emotionally salient on its face, and the close attention of dreamers and their therapists is all that is needed to see the feelings they represent" (2004, p. 89). Cambray and Carter stress the transference importance of dream work as presenting a psychic state at a particular moment in which it is "critical for therapeutic value...that the dreamer discovers/recovers in the analytic process the affective experience residing in the dream" (Cambray, J., & Carter, L., 2004, p 131). Dyane Sherwood responds to the importance raised by Wilkinson's work of the affective content of dreams and the affective interchange between analyst and client. She summarizes this importance as presenting the

DREAM WORK IN PSYCHOTHERAPY

“way an empathic resonance between the analytic pair fosters symbol formation and, with it, the anticipation of a more passionate engagement with life” (Sherwood, 2006, p. 61).

Wyatt, Goodwyn, and Ignatowski present a series of case-examples of the beneficial effects of working with dreams reported by soldiers in modern combat zones. The authors took a Jungian-informed approach to working with dreams, and their interpretive methods emphasized the symbolic nature of the material presented by the soldiers. They conclude that working with the dreams of soldiers in active combat can serve to help “otherwise psychologically un-insightful patients” gain insight into the emotional factors related to their dreams, and may help the soldiers begin to feel less threatened by the sometimes disturbing images and ideas contained in these dreams (Wyatt, R., Goodwyn, E., & Ignatowski, M., 2011). There is further empirical support for the attainment of insight in working with dream material, to be discussed later in this paper.

Archetypal Dream Work

James Hillman presents a somewhat darker re-visioning of the nature of dreaming and its applicability to psychotherapy. Trained as a Jungian analyst in Zurich, Hillman was the director of studies at the Jung Institute for ten years before developing what has become a post-Jungian psychology referred to as Archetypal Psychology. A brief synopsis of this differentiation may facilitate an understanding of the Archetypal approach to dreams. While analytical (Jungian) psychology is concerned with the manifestations of the Self and the path of individuation, Archetypal psychology is focused centrally on *psyche*, or soul (Hillman, 1983). Archetypal psychology is rooted in

DREAM WORK IN PSYCHOTHERAPY

the Jungian idea that the psyche is purposeful, but rather than enunciate this purposefulness, this approach seeks to “foster the sense of purpose as therapeutic in itself because it enhances the patient's interest in psychic phenomena...as intentional” (Hillman, 1983, p. 43). The poetic basis of mind, the notion of “soul” as imaginative possibility engendered by this approach, seeks to explore images (fantasies, dreams, etc) rather than explain them. A looking at and elaborating in detail the nature of the images produced in fantasy, dream, and pathology, produces meaning endogenously. Rather than accepting the notion of a centrally located, organizing Self, Hillman stresses the poly-centric and mutating nature of our being, and the manner in which we become caught in narrative “images”. He states that “an essential work of therapy is to become conscious of the fictions in which the patient is cast and to re-write...collaboratively, the story by re-telling it in a more profound and authentic style” (Hillman, 1983, p. 45). Along those lines, Hillman takes a drastically different view on pathology, seeing in pathological conditions diminished versions of situations and modes-of-being exemplified in myths, or archetypes (hence the name). He notes that Archetypal psychology views pathological conditions as the prime conditions thru which “the gods” enter the human, in as much as symptoms provide “the most palpable manner of bearing witness to the powers beyond ego control and the insufficiency of the ego perspective” (Hillman, 1983, p. 39). “Gods” in this sense stand as a metaphor for the various ego dystonic behaviors, fantasies, dream images, etc that buffet therapeutic clients relentlessly. Pathology, when experienced and examined imaginatively, begins to be seen as a foundational and necessary aspect of the person affected. This work is based in an understanding that images (fantasies, dreams, etc) are the foundation of depth psychology, that our psychology is essentially imagined

DREAM WORK IN PSYCHOTHERAPY

and imaged. The focus of Archetypal psychology then becomes a refinement of imaginative capacity, and “the aim of working with dreams or life events as dreams is to bring reflection to declarative and unreflected discourse...so that...speech becomes imagistic, self-referent, descriptive of a psychic condition as its very expression” (Berry, 1982, as quoted in Hillman, 1983, p. 46).

Dream work is central to the practice of Archetypal psychology in as much as dreams are one of the primary sources of seemingly autonomous and emergent images. Hillman disagrees with the more classical Jungian notion of dreams as presenting a compensation, stating that dreams tell us where we are, not what to do (Hillman, 1979). Hillman's approach to dream work is less analytic and interpretive and more phenomenologically descriptive, congruent with the assumption that the development of refined imagination is consistent with the “soul-making” aims of the psyche. He elucidates this approach in stating “for me therapy is basically the evocation of imagination: it's training, working, struggling with imagination. If I were to say what it has to do with healing, I'd have to say healing the imagination or healing the relationship to the imagination” (Hillman, 1998, p. 48). Claiming at times to be a-theoretical, Hillman notes that a Freudian, Jungian or other any other theory can utilize his overarching approach of sticking to the images specificity, as the metapsychological stories that explain dreams are irrelevant to the method of investigating the images in detail (Hillman, 1979). However, at other times he makes statements the would seem to preclude some of the assumptions of alternative dream theories especially in their reliance on taking a dream as a communication about the waking life situation of the individual, or as potential messages relating to avenues for development (see classical

DREAM WORK IN PSYCHOTHERAPY

Jungian approach above, as well as the existential/phenomenological and cognitive-experiential approaches to follow). Rather, Hillman wishes to emphasize the “disintegrative effects” of the dream, which “confront us with our lack of a central hold on ourselves. Dreams show us to be plural and that each of the forms that figure there are the ‘full man himself’, full potentials of behavior” (Hillman, 1979, p. 41). Consistent with the polytheistic and multiple view of the self within the Archetypal approach, Hillman contends that the value in encountering these images inheres in our ability to extend consciousness or our sense of personal identity to contain these potentials. Hillman contends that the archetypal is brought to the foreground even through seemingly objective dream characters. In an example of encountering a friend in a dream, Hillman expands the objective, subjective, and archetypal view of this projected image. While the dreamer may describe the actual friend (objective level) and the emotions or potentials this type of person holds for the dreamer (subjective level), there is also

an archetypal sense that now begins to emerge from “She-who-is-passive,” “He-who-is-poisonous,” and from the “Other-who-wonderfully-listens.” In the one figuration of my friend are my subjective personal traits and potentials and the archetypal personae who are the deeper potentials within each of our subjectivities (Hillman, 1979, p. 100).

The central focus for Hillman's approach to dreams seems to be sticking to the image, describing it in its fullness, encountering it as autonomous and non-egoic, deepening our capacity to hear and explore psychological experience; keeping the dream itself alive. This work is a conservation which implies “holding on to what is, and even assuming that what is is right” (Hillman, 1979, p. 116). This conservation and encounter with the images of the psyche on their own terms is a goal in and of itself for the archetypalists.

DREAM WORK IN PSYCHOTHERAPY

Hillman counters the notion of dreams as compensation with his idea that dreams are an *initiation*. In elaborating his underworld metaphor, Hillman suggests that dreams are not intended to complete ego consciousness, but to temper it, qualify it, and in his more bombastic enunciations, to erase it (Hillman, 1979). He asserts that dream images serve to highlight the mythological dimension in which we are situated, and devalue almost completely our usual, logos-centered mentality. He also rejects the Jungian notion of wholeness, progress, and individuation, stating “this model fundamentally devalues the existential importance of depression and the descent into dissolution *per se*” (Hillman, as quoted in Shelburne, 1984, p. 44). Hillman seems to suggest that wholeness, for instance, is but one of a set of applicable fantasies and psychological experiences. Similarly, Hillman rejects the traditional Jungian approach to verifying an interpretation, in which the dreamers surprised, automatic assent or resonance with the interpretation serves as verification. According to Hillman, this approach to verification shows that the interpretation agrees with the values of the ego, which in his view the dream seeks to supplant (Shelburne, 1984). He also rejects the method of objective interpretation of, for example, known figures within dreams. According to Hillman's psychology, these dream characters cannot be taken as representatives of persons from real waking life, but rather refer to archetypal persons (Hillman, 1979). Thus, my father dressed in a black suit may become The Father Who Wears Black, a figure of applicability well beyond my personal, biological father.

Shelburne presents a number of critiques to Hillman's views on dreams. One of the major limitations disclosed by Shelburne resides in Hillman's total rejection of attending to *logos* in relation to dreams. He highlights this point noting that, if we accept

DREAM WORK IN PSYCHOTHERAPY

this view “all future empirical discoveries about dreams and sleep must be considered irrelevant to our dream theory...the consequence of following through on such a view would mean that almost any imaginative construction could be put forth as archetypal” (Shelburne, 1984, p. 52). Additionally, Shelburne argues that Hillman's rejection of all egoic concerns goes too far, and states that the ego does have a *special* role to play within the psyche. He argues that the ego function has come to be through a process of evolution which has enabled us to live successfully in the *actual* world (Shelburne, 1984).

Shelburne additionally argues that Hillman's disavowal of the traditional Jungian means of interpretive verification misses the mark, arguing that a successful interpretation does not simply reinforce the egoic point of view but challenges and brings something new into ego consciousness.

Knudson, Adame, and Finocan take up Hillman's archetypal account of dreams as a context into which we enter and are embraced in their exploration of the possibility of repositioning self-narratives in so-called “significant dreams”, which are analogous to those dreams referred to by Jung and classically trained Jungian analysts as “Big Dreams”. These authors propose that significant dreams, or dreams which are highly charged, remembered, and subjectively retro-actively felt to carry “significance”, can “motivate or animate personal repositioning” (Knudson, R., Adame, A., & Finocan, G., 2006, p. 221). They utilize concepts of discursive self-positioning against master narratives taken from deconstructive theory and narrative psychology to exemplify the manner in which significant dreams can impel this repositioning. In this article, the authors stress the importance of sticking to the images and feeling how one becomes moved by and taken up by the images, which Hillman suggests is the nature underlying

DREAM WORK IN PSYCHOTHERAPY

dreams. In other words, these authors present a usefulness of the mythologizing process explicated by Hillman for disclosing narratives, and “seeing through” their seeming literal reality into a new personal horizon, what Hillman calls “deliteralizing”. In another article discussing the ongoing significance of “significant dreams”, Knudson again accords with Hillman, stating “perhaps the significance of the significant dream lies precisely in the fact that the dream images do not become pinned down by any particular interpretation, are never literalized into any single fixed concept or “meaning. Instead the dreamer returns or is drawn again and again to an experiential “living in the image,” with new meanings potentially emerging over time as one goes, in Hillman’s words, ‘more deeply into the image’” (Knudson, 2003, p. 13). Knudson argues for the primary importance of the act of imagining, over and above interpreting, in working with dreams. He suggests that images, including dream images, are not *representations* of objects that require interpretation, but are rather *presentations*, “acts that transform reality, freeing the imaginer from the constraints of both past and present” (Knudson, 2003, p. 15), a corrective concern with *re*-presentation that will reappear in phenomenology. He accords with Hillman in not reducing images from dreams, especially “significant” dreams into reified, singular interpretations. Knudson, following Hillman, returns to the ideas of Gaston Bachelard, who suggests that images, as they are ever changing and hard-to-pin-down, are things “of beauty and self-fulfillment, not usefulness...they release the imagination from the confines of personal and interpersonal life”(Knudson,2003, p. 16). It is through encountering and paying respect to the autonomy and mutability of images that arise through fantasy and dream that, Knudson and Hillman suggest, psychotherapy may best offer its original etymological sense; *care of soul*.

DREAM WORK IN PSYCHOTHERAPY

Existential-Phenomenological Approaches

The existentialist-phenomenological approach to working with dreams suggests a more radical move away from underlying metapsychological assumptions, focusing on the manifest content of dreams, returning again and again to the “things as they are”. This model suggests that rather than conceiving of dreams as emanating from a hypothesized “unconscious” or other fundamentally internal or external “other”, dreams should be seen from a phenomenological perspective as presenting further modes of being-in-the-world. In relation to dreams, Medard Boss presented the first articulation of this approach, and he emphasizes that dreams are “not something we have, they are an aspect of our being – we are our dreaming state” (Boss as quoted in Langdrige, 2006, p. 5). Boss recognized that a dreamer is confronted with a particular way of being through the experience and images of a dream, and made a phenomenological description of this content the primary mode of his analysis. Another way of stating this is that Boss and other existential-phenomenological oriented analysts suggest that a dream discloses a dreamer's current concerns (Langdrige, 2006). Boss understood dreams as one of the many “givens” of human existence, and as such, suggested that the only way to appreciate the meaning inhering in this given was by sticking to the images and experiences within the experience of dreaming itself. This was a radical departure from the prevailing psychoanalytic tradition which sought in dreams confirmation of pre-established theoretical constructs; whether they be reductive (Freudian) or synthetic (Jungian). Boss suggested that we could be freed from these theoretical “acrobatics” by responding to two questions, whether awake or dreaming. Those were; “1. For what givens is a person's existence at a certain time open enough to be able to grant them entrance into the

DREAM WORK IN PSYCHOTHERAPY

understanding openness of his world-domain by virtue of his being able to be addressed and his being able to be alert? 2. In what special way is he, as alert and answering, bonded with what he encounters?" (Boss, in Scott, C. (ed), 1977, p. 10). That is, what are the phenomenon that a person is *open* to understanding, and how does this understanding evolve within a rigorous encounter or focusing to disclose as yet concealed or unrecognized possibilities. Dreaming, according to Craig & Walsh (1993) presents us with three sorts of existential possibilities. They suggest that in dreams, we are concerned with "those possibilities of our lives that we openly acknowledge on a daily basis while fully awake; those possibilities that we acknowledge in our waking life but which...we choose to ignore; (and those) possibilities that help constitute our waking experience but that...we do not recognize at all" (Craig, E. & Walsh, S., 1993, p. 108). Rather than focusing on constructs like underlying personality characteristics, interpersonal patterns, or unconscious conflicts that contributed to the dream material, the existential-phenomenological practitioner considers the explication of the dream and the here-and-now experience of the dream narrative to be the salient clinical material (Eudell Simmons & Hilsenroth, 2007). Through investigating the specific images and characters in the dream as they reveal themselves to the dreamer, an unfolding of wider horizons or possibilities for action and/or meaning may occur. Boss emphasizes the importance of not interpreting or transforming the images to meanings outside of their actuality, but in lifting out what is already in the image, ontically and ontologically. The ontic layer of a dream image refers to the immediately understood, everyday meaning of a particular being or image. The ontologic layer of meaning refers to the reflected upon, formal structure of beings, the things which define a set of beings as beings. As examples of this

DREAM WORK IN PSYCHOTHERAPY

differentiation, a client may be asked to consider not just this particular cat, but *cat-ness* as such; not just this particular tree, but *tree-ness* as such. These layers reveal themselves only through the client's elucidation of the specificity of the phenomenon, in which it is imperative that the analyst seeks to bracket their presuppositions about given images. What is important is not the therapists understanding of symbols and their translations, but the clients coming into a fuller awareness of the depth inhering to a dream image and its connection to their present existential concerns.

Dream work in this phenomenological mode further serves the goal in existential analysis of facilitating a greater sense of openness, autonomy, and responsibility within the client. Craig and Walsh(1993) explain that using this approach, the dreamer's own encounter and discovery of the meaning emerging from their dreams and connected to their waking life is primary rather than a reliance on the expertise of the analytic translator.

Darren Langdrige (2006) brings together insight from Winnicott, Boss, and the narrative hermeneutics of Paul Ricoeur in his explication of the possibilities of dream-work in an existential frame. Langdrige describes Winnicott's emphasis on the need to play and learn in a transitional space, safe from the demands of everyday reality. He notes that dreams present us with such a transitional space, as does the therapeutic frame; both are spaces in which "everyday concerns" can be relaxed or bracketed and make way for a creative play that is instrumental in how we establish self-narratives. Langdrige suggests that if approached from a phenomenological, playful and curious point of view, working with dreams within the therapeutic context can provide a "relatively unique opportunity for critical reflection on (clients) sense of selfhood" (2006, p. 4). Langdrige

DREAM WORK IN PSYCHOTHERAPY

notes a number of “fractions” which structure our experience including selfhood, sociality, embodiment, temporality, spatiality, projects, and discourse. He suggests that these structures of experience are equally present in our dreaming consciousness, and elaborates in specific the applicability of Ricouer's notion of narrative identity for strengthening a phenomenological dream analysis. Ricouer compares narrative identity to the psychoanalytic concept of “working through”, “where a client substitutes a coherent narrative for fragments of their experience that they find unbearable” (Langdrige, 2006, p. 7), and suggests that persons make sense of their own identity through developing a story about their life. Ricouer, along with other post-structuralist thinkers, suggest that identity is not comprised of an established, unitary, essential notion of self, but rather is continuously made through the stories that one identifies with. Langdrige states that this conceptualization highlights the importance of attending to the stories of self-hood that the client presents within the context of the “play space” of the dream. He articulates the following questions as primary to illuminating these narratives; “What story of the self is being narrated in the dream and why now; What limits and possibilities of selfhood are recounted in the story; How do these limits and possibilities relate first to the immediate context of the telling and then the wider context of the client's being-in-the-world” (2006, p. 8).

Finally, there is a potentially therapeutic value from the existential perspective inhering in the simple fact of becoming present to, and providing sanctuary for, the telling and investigating of dream material as a unique emergence from the subjectivity of the client. Craig and Walsh cite J.F.T. Bugental's notion of presence as “the quality of being in a situation in which one intends to be as aware and as participative as one is able

DREAM WORK IN PSYCHOTHERAPY

to be...Presence is carried into effect through mobilization of one's inner (subjective) and outer (the situation and other persons in it) sensitivities” (Bugental as quoted in Craig & Walsh, 1993). Bugental suggests that this coming-into-presence can have the effect of giving clients a vital sense of their capacity for self-direction and autonomy. As an avenue to this presencing, existential dream analysts may attempt to bring attention to the clients bodily sensations and emotions, question how the dreamer is experiencing the here-and-now process of working with the dream, and ask how the dreamer feels about the therapists questions (Craig E., & Walsh, S., 1993). They suggest that the establishment, maintenance, and reflection on the clients own presence can serve to develop insight in the form of “inner-sight of ones own being” (p.151), which for these authors is in and of itself a positive therapeutic outcome.

Ernest Hartmann, though not explicitly an existential psychotherapist, nevertheless presents an argument congruent with the notion that dreaming is one mode of thinking or being which is on a continuum with waking consciousness, rather than a totally “other” or “unconscious” phenomenon. He provides evidence from a variety of studies which reveal the similarities between waking and dreaming concerns, both emotional and otherwise (Domhoff, 2007, Schredl, 2007, Hartmann, 2010). Stemming from this position, Hartmann argues for a more phenomenological style of working with dreams within a therapeutic context. Hartmann rejects the notion that therapists must be trained in the specific metapsychological theories which inform traditional psychoanalytic approaches, in as much as he views dreams as a far edge of a continuum of thinking – or as an existentialist might suggest, an edge or horizon of being. Hartmann also accords with the existentialist view that dreams likely relate to underlying current-

DREAM WORK IN PSYCHOTHERAPY

life emotional concerns of the dreamer. He suggests that dream-workers, often working in time limited settings, begin their work with the Central Image, based on a number of studies pointing to the Central Image as being most loaded with emotional significance (Hartmann 2010). In this suggestion, Hartmann seems to depart from the existential-phenomenological view which emphasizes the epoche or bracketing of expectations inasmuch as he would have the therapist direct the focus of the client toward a specific image. This difference could be avoided by investigating what the dreamer considers to be the Central Image, and beginning from this point rather than the therapist's view of what is most "central", as it is likely these two viewpoints would often not wholly accord.

Cognitive-Experiential Model

A number of integrative approaches to working with dreams in psychotherapy have emerged in the last few decades. An approach which has ushered in the most empirical research is the Cognitive-Experiential model, developed and revised by Hill (1996, 2003). This model is informed by psychoanalytic, existential-phenomenological, gestalt, and behavioral approaches, and is described by three stages related to these theories. These stages are exploration, insight, and action, loosely conforming to the experiential (existential-phenomenological), analytic, and behavioral models. Hill describes her approach as resting on a number of assumptions, as follows. She assumes that dreams represent a continuation of waking thought; that their meaning is personal, and as such symbolic translations reside within the persons experience and not a codified rubric; that work with dreams requires collaboration between the therapist and client, rather than the therapist acting as expert interpreter; that dreams can be useful for developing a deeper self-understanding; that dreams are comprised of cognitive, emotive,

DREAM WORK IN PSYCHOTHERAPY

and behavioral elements; and lastly that therapists should be grounded in basic therapeutic skills prior to undertaking dream work (Hill, C.E., & Knox, S., 2010). Eudell-Simmons and Hilsenroth (2007) note the manner in which the cognitive component of this work emerges through the emphasis on assimilation and adaptation, which they suggest is an extension or elaboration of the manner in which the mind processes information.

The first stage in the Hill model is exploration, in which the dream is recounted in the present tense, in an attempt to re-enter the feelings and images presented by the dream. This stage is analogous to Craig & Walsh's "explication" stage, and is congruent with Hillman's emphasis on dwelling in the specificity of the images as they are. This exploration includes description, but also associations and indications of any waking life triggers that the client can connect to the images.

After several images have been explored, the therapist moves the client toward the insight stage. In this stage, the client and therapist collaborate to establish some meaning from the dream. This meaning can be revealed at multiple levels, again reflective of the multiple theoretical schools the model is founded on. Pesant and Zadra (2004) describe some of these possible avenues for insight. At the waking-life level, the dream can be linked to current or past waking life emotional concerns, experiences, thoughts, or memories. The dream can also be understood from a Jungian-subjective interpretive mode, in which the images are thought to represent aspects of the self. The dream can reveal insight in the here-and-now of the therapy session itself, as the team works to explore how the dream was told, what the dreamer experienced in the telling *right now*, without relying on the notion of the dream as being a metaphorical

DREAM WORK IN PSYCHOTHERAPY

representation. The dream may also be probed for existential or spiritual insight. Lastly, the dream may reveal insight at the relational level, in which some aspect of the dreamers current relations whether within or without therapy are being expressed.

The final stage of this dream work diverges most explicitly from the previously reviewed models. In this stage, the client is encouraged to explore the ways in which she would like to change the dream. The therapist subsequently encourages the client to make a bridge between the changes they envision for the dream and changes they could bring to their waking life concerns, and assists in helping them plan how to implement these changes (Hill & Knox, 2010). Though not made explicit, this sort of development of a notion of personal autonomy both within the dream and in waking life is parallel to the existential-phenomenological concern with bringing increased potentialities into awareness and the analytic goal of encouraging conversation between the conscious and unconscious aspects of the self. What differentiates this approach is the direct line of focus on encouraging concrete behavioral change.

Usefulness and Effectiveness of Dream Work

The majority of literature illustrating the clinical utility and efficacy of working with dreams in therapy is comprised of case studies from within the various theoretical schools (Peasant & Zadra, 2004). Hill and Knox (2010) point out that these case studies are often anecdotal, and even when empirical may have an inherent bias in terms of selection factors and problems with generalizability. Nevertheless, a synthesis of these studies has indicated that there are three general types of gains described as a result of dream work. These gains are in the domains of client insight, increased involvement in the therapeutic process, and a better understanding (for the clinician and client) of the

DREAM WORK IN PSYCHOTHERAPY

client's dynamics and clinical progress (Peasant & Zadra, 2004). Eudell-Simmons and Hilsenroth (2005) differentiate the third factor into two domains; providing clinical information to therapists and indicating clinical change or improvement.

A significant body of empirical research has been emerging in the past decade examining the process and outcome of utilizing dream work, especially utilizing the Hill Cognitive-Experiential model. Hill and Knox (2010) summarize the research on outcomes following dream work along three domains; session quality, goals of dream-work (e.g. insight, action ideas), and broader outcomes for psychotherapy such as symptom change, increased satisfaction in interpersonal functioning, and well-being.

Session quality has been measured primarily by administration of the Depth Scale of the Session Evaluation Questionnaire (SEQ) to the therapist and client following a single-session of dream-work in the Hill model. The SEQ measures ratings of depth, working alliance, and session satisfaction. Ackerman, Hilsenroth, Baity, and Blagys (2000) found that high ratings of the quality and depth of a session are associated with clients feeling more engaged in therapy, as well as feeling more collaborative and supported by the therapist. Hill and Groates (2004) summarize 12 of these studies finding that clients consistently rated dream session quality significantly higher than regular therapy sessions.

Insight gains through dream work have been assessed via a variety of methods including open ended questions of clients following dream work sessions, standard measurements of insight and understanding, and objective ratings of insight described by clients interpretations of dream material (Hill & Groates, 2004). Hill and Groates summarize these various approaches and find significant evidence for gains in insight

DREAM WORK IN PSYCHOTHERAPY

following dream work. Hill et al (2006) also found that clients report increased functioning on target problems following dream focused therapy sessions based on pre and post-dream session assessment.

Hill and Knox (2010) also describe broader outcomes for therapy generally following dream work. They note that some research has described decreases in general symptoms and depression, as well as increases in existential well-being when “spiritual insight” is the focus of dream work. They note mixed results in terms of interpersonal functioning following dream work.

Researchers have also been establishing evidence regarding the process of dream work. Hill and Knox (2010) summarize a variety of factors that contribute to the therapeutic process of dream work. They note four studies that provide evidence for the importance of client involvement in contributing to positive outcome. Specifically, clients who are more involved (in terms of actively exploring, contributing ideas, coming up with insights) in sessions are more likely to report positive outcomes. Additionally, it appears that client's who are motivated and involved in the sessions, but not overwhelmed by affect are most likely to gain insight.

Hill and Knox also summarize evidence as to what types of clients appear to benefit most from dream work. Their findings suggest that the clients most likely to benefit from dream work are persons who have “positive attitudes towards dreams, high self-efficacy or confidence in their ability to work with dreams, who have salient dreams that are puzzling or...reflect underlying concerns, who have low insight and action ideas related to their dreams, and who are willing to discuss their dreams in therapy” (Hill, C.E., & Knox, S., 2010, p. 305).

DREAM WORK IN PSYCHOTHERAPY

Pesant and Zadra (2004) summarize major findings from their literature review of the clinical use of dreams. Their research indicates two major benefits to working on dreams clinically. The first benefit is the potential for insight gains after dream work. The second is the suggestion that collaborative dream interpretation may facilitate greater client participation in therapy generally.

Hill and Knox (2010) concede that the majority of these studies were conducted under conditions of experimental purity that are not readily generalizable to therapy in the real world. A specific feature that seems salient is the fact that most of these studies were based on single-session's. It would be worthwhile to develop a method for examining change and efficacy of dream work situated in more clinically parallel settings, including seeing how working with dreams over time may contribute to insight or other therapeutically valuable outcomes.

Conclusion

Over the last 120 years, dreams have moved from an object of fascination, speculation, and somewhat mysterious occurrence to a position in which they are beginning to be more typically understood both physiologically and psychologically. Clearly, there are a vast number of theoretical approaches that have attempted to describe the function, etiology, and clinical usefulness of dreams. This paper has attempted to summarize some of the theoretical understandings underlying four major approaches to working with dreams observed in clinical settings today.

There are major difficulties in empirically studying the utility and effectiveness of dream work. Inroads have been made, especially in the last decade, in beginning to tease apart some of what contributes to the process and outcome of working with dreams. This

DREAM WORK IN PSYCHOTHERAPY

work has been constrained mainly to the cognitive-experiential model, and has suffered somewhat from the nature of these studies. The fact is that much of the dream work that occurs in therapy happens in an ongoing setting, drastically different than the single-session experimentally controlled settings that much of this research has relied on in order to limit external variables.

The fact that clinicians from widely varied theoretical backgrounds appear to be interested in working with dreams, and the fact that clients may have an expectation that clinicians will be able to assist them in understanding their dreams points to the importance of training and exposure to theories of dream-work.

Effective implementation of any of the theories discussed above may serve to elaborate unconscious conflicts, examine patterns of behavior and implicit cognitive schema, and, when undertaken in a spirit of collaboration, serve to transfer authority over to the client.

More work remains in empirically validating the process and outcomes of longer-term, ongoing dream work as well as establishing experimental validity for some of the less tested theories of working with dreams. Part of the difficulty of this sort of work resides in arriving at common terms about the ultimate goals of therapy – whether symptom reduction or an increased acceptance of both one's autonomy and limitations, increased societal adaptation or increased imaginative capacity of one's psychological reality.

Whichever of these aims emerges in therapeutic work, it appears that working with dream material can provide avenues toward these divergent ends.

DREAM WORK IN PSYCHOTHERAPY

References

DREAM WORK IN PSYCHOTHERAPY

References

- Ackerman, S.J., Hilsenroth, M.J., Baity, M.R., & Blagys, M.D. (2000). Interaction of therapeutic process and alliance during psychological assessment. *Journal of Personality Assessment*, 75(1), 82-109.
- Beebe, J. (1993) Working with Dreams: A Jungian Approach. In *New Directions in Dream Interpretation*, ed. G. Delaney. Albany, NY: State University of New York Press.
- Bosnak, R., (2007) *Embodiment: Creative Imagination in Medicine, Art, and Travel*. Routledge. New York, NY
- Boyd, J (2005) Where two worlds meet: an exploration of client's experience of dream-work in time limited therapy. *Psychodynamic Practice*, 11(2), 189-204
- Cambray, J., & Carter, L. (2004) *Analytical Psychology. Contemporary Perspectives in Jungian Analysis*. Hove & New York: Brunner-Routledge
- Cartwright, R. (1977). *Night Life: Explorations in dreaming*. Englewood Cliffs, NJ: Prentice Hall, Inc.
- Craig, E., & Walsh, S. (1993) Phenomenological challenges for the clinical use of dreams. In *New Directions in Dream Interpretation*, ed. G. Delaney. Albany, NY: State University of New York Press.
- Dombeck, M.T.B. (1991). *Dreams and professional personhood: The contexts of dream telling and dream interpretation among American psychologists*. Albany, NY: SUNY Press
- Domhoff, W.G. (2007) Realistic simulation and bizarreness in dream content: Past findings and suggestions for future research. In D. Barret & P. McNamara (Eds.), *The New Science of Dreaming* (Vol. 2, p. 1-27). Praeger. Westport, CT.
- Eudell-Simmons, E., & Hilsenroth, M. (2007). The Use of Dreams in Psychotherapy: An Integrative Model. *Journal of Psychotherapy Integration*, Vol. 17(4), 330-356. doi: 10.1037/1053-0479.17.4.330
- Hartmann, E. (2010) Meteorite or Gemstone? Dreaming as One End of a Continuum of Functioning: Implications for Research and for the Use of Dreams in Therapy and Self- Knowledge. *Dreaming*, Vol. 20(3), 149-168. doi: 10.1037a0020575
- Hall, J., (1983) *Jungian Dream Interpretation*. Inner City Books. Toronto, Canada.
- Hill, C.E. (1996). *Working with dreams in psychotherapy*. New York, NY: Guiliford Press.

DREAM WORK IN PSYCHOTHERAPY

Hill, C.E. (2003) *Working with dreams in therapy: Facilitating exploration, insight, and action*. Washington DC: American Psychological Association.

Hill, C.E., & Groates, M.K. (2004). Research on the Hill cognitive-experiential dream model. In: *Dream Work in Therapy: Facilitating Exploration, Insight, and Action* (C.E. Hill, ed.), American Psychological Association, Washington, DC, pp. 245-288.

Hill, C., & Knox, S., (2010) The Use of Dreams in Psychotherapy. *International Review of Neurobiology*, 92, 291-317. doi:10.1016/S00742(10)92013-8

Hillman, J. (1979) *The Dream and The Underworld*. Harper and Row. New York, NY.

Hillman, J. (1983) *Archetypal Psychology: A Brief Account*. Spring Publications. Dallas, TX.

Hillman, J. (1998) *Inter-Views*. Spring Publications. Dallas, TX.

Hobson, J.A. (2004) Freud Returns? Like a bad dream. *Scientific American*, 2004

Jung, C.G. (1954) *The Development of Personality, CW 17*. Princeton, NJ: Princeton University Press

Jung, C.G. (1954) *The Practice of Psychotherapy, CW 16*. Princeton, NJ: Princeton University Press

Jung, C.G. (1958) *Psychology and Religion, East and West, CW 11*. Princeton, NJ: Princeton University Press

Jung, C.G. (1959) *Aion, CW 9, II*. Princeton, NJ: Princeton University Press

Jung, C.G. (1960) *The Structure and Dynamics of the Psyche, CW 8*. Princeton, NJ: Princeton University Press

Jung, C.G. (1974) *Dreams*. Princeton, NJ: Princeton University Press

Knudson, R. (2003) The Significant Dream as Emblem of Uniqueness. *Dreaming*, Vol. 13(3), p. 121-134

Knudson, R., Adame, A., & Ginocan, G. (2006) Significant Dreams: Repositioning the Self Narrative. *Dreaming*, Vol 16(3), 215-222. doi:10.1037/1053-0797.16.3.215

Langdrige, D. (2006) Imaginative Variations on Selfhood: Elaborating an existential-phenomenological approach to dream analysis. *Existential Analysis: Journal of the Society for Existential Analysis*, 17(1), pp. 2-13.

DREAM WORK IN PSYCHOTHERAPY

- Mattoon, M.A. (1978) *Understanding Dreams*. Spring Publications, Dallas, TX.
- Pesant, N., & Zadra, A. (2004) Working with dreams in therapy: What do we know and what should we do? *Clinical Psychology Review*, 24, 489-512. doi: 10.1016/j.cpr.2004.05.002
- Scott, C., (editor) (1977) *On Dreaming: An Encounter with Medard Boss*. Scholars Press, Chico, CA.
- Sherwood, D. (2006). Response to Margaret Wilkinson. *Journal of Analytical Psychology*, 51(1), 61-65. doi:10.1111/j.0021-8774.2006.00572.x
- Shelburne, W.A. (1984) A Critique of James Hillman's Approach To The Dream. *Journal of Analytical Psychology*, 29, 35-56.
- Schredl, M. (2007). Dream Recall: Models and Empirical Data. In D. Barret & P. McNamara (Eds.), *The New Science of Dreaming* (Vol. 2, p. 79-114). Praeger. Westport, CT.
- Watson, B (translator), (1968). *The Complete Works of Chuang Tzu*. New York: Columbia University Press
- Wilkinson, M. (2006). The dreaming mind-brain: a Jungian perspective. *Journal of Analytical Psychology*, 51(1), 43-59. doi:10.1111/j.0021-8774.2006.00571.x
- Wyatt, R., Goodwyn, E., & Ignatowski, M. (2011) A Jungian approach to dreams reported by soldiers in a modern combat zone. *Journal of Analytical Psychology*, 56(2), 217-231.
- Ullman, M., & Zimmerman, N., (1979) *Working with Dreams*. Jeremy P. Tarcher, Inc. Los Angeles, CA