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JLS-7 ARE WE LEGALLY RESPONSIBLE FOR THE CONTENT OF DREAMS?

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Dear Mr. Nolte.

Here I begin two concurrent series of newsletters on the areas I've been researching over the past months:
1) the nature of psychiatric diagnostic categories, and
2) the possibility of a psychoanalytic jurisprudence. Writing both series and further research on them will occupy me for many months ahead. I have persuaded myself to report what I've been thinking on condition that the reader agree to regard it as exploratory only, and highly tentative.

In describing the pseudopatient experiment of D. Rosenhan in JLS-4 and -5: Looking For Sanity, I sketched some questions about diagnostic rubrics that his experiment raised and some I felt it ought to have raised. The answers may carry disturbing implications not only for the legal status of psychiatric evidence, but also for the scientific status of psychiatry itself. I plan to write, within two or three weeks, several newsletters that start to answer the questions raised in JLS-4 and -5.

Today I begin the series on psychoanalytic jurisprudence. By this I mean the study of ways that problems in law at several levels of substance and process may be created or clarified by psychoanalytic thinking. And by psychoanalysis I mean the theory of mind, the tool of research, and the mode of therapy discovered and developed by Sigmund Freud and his lineage.

Regards,

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ARE WE LEGALLY RESPONSIBLE FOR THE CONTENT OF DREAMS?

Psychoanalysis is identified with the discovery that beneath the conscious, evident appearances of our affairs there lie unconscious causes and meanings.

One would expect psychoanalysis to be a source of considerable distress to law because law, after all, is concerned with the externals of our lives, with the surfaces, not the depths. Law aims to regulate our actions, not our motives. It seeks to treat us evenhandedly, not idiosyncratically; as free men, not as determined or predestined. It judges us by our appearances, takes us at face value. It relies on objective facts, on verifiable circumstances.

For Freud, the 'royal road' to understanding our unconscious mental processes was the dream. And so to explore the relations between the surface of our experience and the depths, we can begin by retelling the story of the first dream ever psychoanalyzed.

ONE: Irma's Injection

'Gloomy times, unbelievably gloomy,' Sigmund Freud wrote to his friend Wilhelm Fliess in the spring of 1895.

Freud was 39. There were money problems, his waiting-room was often empty, his wife was just into her sixth pregnancy. Studies in Hysteria, written with the eminent Dr. Joseph Breuer, had distressed most readers with its novel claim that neurosis has, at bottom, a sexual source, and Breuer had begun to disengage from their association. Freud's controversial theories and the growing anti-Semitism of the times restricted his chances of attaining a secure academic post, and more than once he was tempted to turn his brilliance from the uncertainties of psychoanalytic exploration to the practice of conventional neurological medicine. Except for his friendship with Dr. Fliess, his professional isolation was nearly complete.

These were days of depression, doubt, and inhibition. Freud's cardiac problem had flared up again, and Fliess had made him give up his twenty daily cigars, but by summer he was smoking again. Freud could scarcely concentrate on his writing. At times his consciousness entered a curious twilight state in which he saw the world as if through a veil.

Deliverance came in the form of a dream, on the night of July 23-24 on the outskirts of Vienna where Freud and his family spent the summer in a house named Bellevue. That afternoon as his wife prepared for her forthcoming birthday party, Freud had met with a colleague, Dr. Rie. who had just returned from a summer resort where Frau Emma. a young widowed patient of Freud's, was staying. Freud had worked an only partially successful cure of hysterical anxiety and somatic symptoms in her, and he inquired about her health. Rie reported that she was 'better, but not well, and Freud took this as a reproach. When he arrived back home, he wrote a long clinical report on Emma's illness for his senior collaborator, Breuer, and went to bed feeling he had squared matters. Emma, after all, had not accepted an analytic interpretation Freud had offered just before they broke off treatment for the summer: it was she who was therefore to blame for her failure to recover.

Later that night, the Irma Dream. Emma becomes Irma; Breuer becomes Dr. M., and Dr. Rie is Otto. The scene of the dream is inspired by the prospective birthday party.

A great hall--a number of guests, whom we are receiving -- among them Irma. whom I immediately take aside. as though to answer her letter, and to reproach her for not yet accepting the 'solution.' I say to her: 'If you still have pains, it is really only your own fault.'--She answers: 'If you only knew what pains I have now in the throat, stomach, and abdomen -- I am choked by them.' I am startled, and look at her. She looks pale and I think that after all I must be overlooking some organic affection. I take her to the window and look into her throat. She offers some resistance to this. like a woman who has a set of false teeth. I think. surely, she doesn't need them .-- The mouth then opens wide, and I find a large white spot on the right, and elsewhere I see extensive grayish-white scabs adhering to curiously curled formations, which are evidently shaped like the turbinal bones of the nose. -- I quickly call Dr. M., who repeats the examination and confirms it....Dr. M. looks quite unlike his usual self; he is very pale, he limps, and his chin is clean-shaven.... Now my friend Otto, too, is standing beside her, and my friend Leopold percusses her covered chest, and says: 'she has a dullness below, on the left,' and also calls attention to an infiltrated portion of skin on the left shoulder (which I can feel, in spite of the dress).... M. says: 'There's no doubt that it's an infection, but it doesn't matter; dysentery will follow and the poison will be eliminated. '... We know, too, precisely how the infection originated. My friend Otto, not long ago. gave her, when she was feeling unwell, an injection of a preparation of propyl...propyls...propionic acid... trimethylamin (the formula of which I see before me. printed in heavy type)....One doesn't give such injections so rashly....Probably, too, the syringe was not clean.

Here I will summarize in very abbreviated form Freud's own associations, which run twenty times this length and which the reader may wish to consult in the original for the full flavor of Freud's thoughts. Reading these associations, we can anticipate the meanings Freud ascribed to this Rosetta stone, those he left out, and those supplied by psychoanalysts after Freud.

reproach Irma: Freud is anxious not to be blamed for Irma's pains

Irma's complaints: but these are not Irma's symptoms—whose are they?

pale and puffy: not like Irma--who is being substituted

- Irma resists like woman with false teeth: this is a governess Freud had examined who had bad teeth; a patient of Dr. M, a friend of Irma who is also hysterical but too reserved to seek Freud's help; Irma's friend is pale and puffy, but not docile enough either
- mouth opens readily: maybe she would tell more than Irma white spot: diphtheria, Irma's friend, Freud's daughter scabby turbinal bones: Freud's anxiety about own health, cocaine he used to suppress swellings in his nose; death of Freud's dear friend from misuse of cocaine he prescribed
- calls Dr. M.: Freud called on Breuer for help with a woman he had poisoned with sulphonal, then considered harmless; woman had same name as eldest daughter; retribution of fate; reproach for lack of medical conscientiousness
- Dr. M. pale, cleanshaven, limping: fused with another person; Freud on bad terms with both, they rejected his proposal
- infiltrated skin on left shoulder: Freud's own rheumatism; fusion with dream person; infiltration refers to lungs, to T.B.
- in spite of dress: but only children are undressed in the clinic
- Dr. M. says infection doesn't matter, dysentery: ridiculous statement: diphtheria. daughter's illness
- doesn't matter: consolation, organic affliction is not his fault; why is consolation so nonsensical? making fun of Dr. M.; a patient sent on sea voyage just wrote from Egypt he has dysentery after all; does Dr. M. realize Irma's friend is hysteric; again the dear friend who died from cocaine
- Otto gives injection: Freud's unfortunate friend propyl: a present of ill-smelling liqueur from Dr. Otto; poison
- trimethylamin: Fliess has theory of role of this substance in sexual metabolism; he has offered companionship in Freud's isolation, is expert in afflictions of the nose, has revealed connection between turbinal bones (really in nose, not throat) to female sexual organs; he himself suffers from rhinitis
- rash injections: reproach of Otto, who took sides against Freud that afternoon; Freud's daughter again
- syringe not clean: another reproach of Otto; 82-year-old lady to whom Freud administers twice-daily injections of morphia. never with infection; conscientiousness
- phlebitis: Freud's wife suffered from thrombosis during previous pregnancy; three women in each other's places—wife, daughter, Irma

Freud's published account of the Irma Dream leaves out associations to sexual material and to childhood memories, themes he developed throughout later dream analyses and with which his picture of the unconscious came to be identified. The Irma Dream, according to Freud, avenges him on Rie (Otto), who has distressed him with the bad news about Frau Emma and on Breuer (Dr. M.), who is made an ignoramus from whom the dreamer turns to his distant friend, Fliess. It acquits him of responsibility for Irma's condition, blaming in turn Irma, an organic cause, Otto, and perhaps all women who lack docility, as the disobedient Irma is exchanged for a more tractible patient. In these and other elements, the Irma Dream represents a state of affairs that Freud might have wished to exist:

If the method of dream-interpretation here indicated is followed, it will be found that dreams do really possess a meaning, and are by no means the expression of a disintegrated, cerebral activity, as the writers on the subject would have us believe. When the work of interpretation has been completed, the dream can be recognized as a wish-fulfillment.

Thus the dream he entitled 'Irma's Injection,' the first dream ever subjected to an exhaustive psychoanalytic interpretation, had revealed its secret.

With excitement and with dread Freud soon recognized his work as explaining events 'out of the core of nature.' And remembering that night five years later. Freud would write to Fliess, 'Do you actually suppose that some day this house will have a marble plaque with the inscription, "Here, on July 24, 1895, the mystery of dreams revealed itself to Dr. Sigm. Freud."' Dream interpretation became the chief instrument of Freud's own self-analysis, through which he was able to reconstitute his own infantile experience and thereby discover both anality and the oedipus complex -- the erotic and hostile relations of parent and child. His self-analysis led at last to the alleviation of his own most intense neurotic suffering and to the writing of the monumental Interpretation of Dreams, his fundamental work and the one he was most content to leave after him. As he wrote many years later in the forward to the third English edition:

This book...contains, even according to my present-day judgment, the most valuable of all the discoveries it has been my good fortune to make. Insight such as this falls to one's lot but once in a life-time.

Such was the burden of the Irma Dream.

Other psychoanalysts have tried their hand at interpreting the Irma Dream, revealing both meanings that Freud chose not to disclose or had not yet developed concepts to

express and also the directions dream interpretation has taken since Freud. Max Schur uses the Freud-Fliess correspondance to elucidate the transference relationship between them as revealed in the dream. He demonstrates that irrational elements had entered their relationship by 1894, that indeed what Freud was later to call a transference had formed as he began to feel toward Fliess that particular mixture of overestimation and mistrust and the corresponding infantile tendencies toward dependency and rage that he was later to trace to repetition in adult life of an early father-image. But Freud needed to create and preserve an idealized image of Fliess for the sake of his own security and equilibrium and later to confide his self-The solution reflected in the Irma Dream is for the dreamer to split his mixed feelings, feeling only affection for and confidence in the image of a distant friend while displacing his negative feelings on to Dr. M. and Otto. But the references in the dream to the turbinal bones of the nose and to Fliess' rhinitis in the associations constitute a masked reproach of Fliess, who had a few months before bungled his treatment of Frau Emma's heavy nose-bleed by leaving a gauze in her nose. The dreamer's hostility toward Irma is explained in part, then, by Emma's unwitting role in shaking Freud's faith in his friend. Freud's discovery of the secret of dreams enabled him eventually to break his dependence on Fliess because it aided in the resolution in the course of his self-analysis of his contradictory feelings toward his own father.

Erik Erikson's intricate and beautiful analysis (to which I cannot do justice in this fleeting discussion) of the Irma Dream carries the notion of transference a step further with the idea of 'self-transference.' Emma's failure to respond fully to Freud's treatment bespoke a failure in his theory of neurosis; his examination of her in the dream is a search for the solution to the mystery of hysteria and of the dream itself. But it is also a sexual examination, and the dream becomes a woman to be unveiled, to be 'known' in the Biblical sense. At the same time the examination anticipates Freud's self-inspection, 'the unspeakable isolation of the first self-analysis in history' in which the dreamer needed to learn

to identify himself with himself in the double roles of observer and observed. That this...constituted an unfathomable division within the observer's self, a division of vague 'feminine yielding' and persistent masculine precision: this, I feel, is one of the central meanings of the Irma Dream.

The 'mouth which opens wide'...is not only a symbol of a woman's procreative inside, which arouses horror and envy because it can produce new 'formations'... it may well represent at the same time, the dreamer's

unconscious, soon to offer insights never faced before to an idealized friend.... That a man may incorporate another man's spirit, that a man may conceive from another man, and that a man may be reborn from another, these ideas are the content of many fantasies and rituals which mark significant moments of male initiation. conversion. and inspiration.

In the four years following the Irma Dream, Freud was to analyze over 1000 dreams of his own and his neurotic patients and to develop a systematic approach to the translation of the story of a dream into the primordial thoughts of the unconscious. Freud gives credit for the discovery of the unconscious mind to the poets, and in scientific writing prior to the 1890's we encounter considerable conjecture that the higher centers of the brain, the mind, can operate without conscious notice. But it awaited Freud to devise organized propositions about the geography of this dark region, its shape and its features, its boundary relations with consciousness, and ways it might be explored. As Freud tells us, science in 1895 viewed the dream as degraded mental activity. a loosening of associations whose content was of no particular interest -- the province exclusively of poets, prophets, and oneiromancers. Freud mentions and rejects two such models for understanding the content of dreams: divination, as in the Biblical Joseph's interpreting Pharoah's dream of the seven lean kine devouring the seven fat kine; and fixed symbolism. as in the invariable codes of the oriental and classical dream books still in use in his time. Always a prolific dreamer, Freud had recorded his dreams since early life and referred to them often in letters. It was not until 1894 in a long footnote in Studies in Hysteria, however, that he formally wrote about dreams, offering an incomplete and tentative theory that the motive of a dream is the working out of ideas interrupted during the day, that its form derives from a compulsion to link ideas, and that a dream itself is the equivalent of a neurotic symptom -- the product of unconscious conflict. But he lacked a technique for analyzing dreams and a central focus for organizing his analysis. He found both in the Irma Dream and its wish-fulfilling fantasy.

The terminology Freud used to describe the formation and interpretation of dreams is familiar today, but since it reveals so clearly the metaphysics of interpretation itself, it might be worthwhile to review it quickly.

The current concerns of the dreamer, the <u>day-residue</u> of the dream, revive the appetite for gratification of an unconscious repressed erotic or destructive wish, and thereby

Compare the Brihadaranyaka Upanishad, c.700 B.C.: 'so the sleeper, gathering up the impressions of sense, compounds them into dreams according to his desires.'

revive a long-standing conflict in the dreamer. Thus, like a neurotic symptom, a dream is a compromise formation between an infantile wish seeking expression and the efforts of the ego [this term was not used with its present meaning until many years after the Irma Dream] and its defenses to keep it repressed. The distortion of a dream is due, for the most part, to the ego's attempts, weakened by sleep but not entirely disarmed. to censor the wish-fulfilling fantasy and make it acceptable. This Freud called the dream work, and its principal operations are displacement (substitution of one person, place or idea for another, a thing for its opposite, a part for the whole). condensation (a fusion of two or more images), and symbolism. Further distortion occurs in the course of representing in visual, plastic images what may be simply ideas in the uncon-The ego's last-ditch efforts to make the dream accepscious. table by clearing up additional regressive or inconsistent aspects is known as secondary revision. In these ways what began as latent dream thoughts (the instinctually-based wish. the day-residue, and other unconscious images long forgotten, ignored, or never properly evaluated) are translated by the dream work into the manifest dream -- the story of the dream as told by the dreamer. The task of dream interpretation is the retranslation of the manifest dream back into its latent content by analyzing the free associations of the dreamer to each element of the manifest dream.

While the dream is today still considered the single most important means of access to unconscious repressed instinctual life, the emphasis in psychoanalysis has shifted from discovery of hidden sexual wishes to understanding conflict between instinctual and anti-instinctual forces in the personality, and between urges toward self-punishment and defenses against these urges. Freud was by 1919 to begin a substantial revision of his theory of the unconscious, especially regarding the ego. Where once he viewed the ego as coextensive with consciousness, he came to see that 'there is something in the ego which is also unconscious, which behaves exactly like the repressed -- that is, which produces powerful effects without being itself conscious and which requires special work before it is made conscious.' While these anti-instinctual forces, 'higher' faculties of moral judgment and self-criticism may appear as a conscious sense of conscience and ideals, they may as regularly constitute unconscious masochistic trends and hidden resistances to acknowledging wishes. This unconscious aspect of the ego is thus 'continued without sharp limitation' into the id. Resistances, defences, and transferences are no longer viewed as inconvenient obstacles barring the exposure of unconscious material but as the chief object for analytic understanding. In dream interpretation. analysis of defense and resistance now takes precedence over analysis of instinctual content.

We caught a glimpse of these changes in the interpretation of the Irma Dream by Schur and Erikson. There, as elsewhere, Erikson endeavors to place the Freudian insights about instinctual life within the framework of culture, drawing a parallel between dream images and ritual of initiation. Both Schur and Erikson share in the project of post-Freudian psychoanalysis to bring interpretation to bear not only on intrapsychic conflict, but also on the conflicts and possibilities inherent in the adaptation of the individual to his surroundings. The study of transference and of defensive mechanisms is, in part, the study of the representatives of the external world within the psyche, the psychic surrogates of society.

Is this view of the unconscious more amenable to law than the hidden wishes of <u>Interpretation of Dreams?</u>
This question will be put aside for now, until we have explored the idea of interpretation itself. As we shall soon see, interpretation is a very special way of treating a dream. It is a decision to replace the visible. And this choice has consequences both for how we view our dreams and for how we treat the hidden meanings of the unconscious.

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