

# Montague Ullman

## SOCIETAL FACTORS IN DREAMING

In this article I would like to consider whether a study of dream consciousness can contribute to our understanding of the reciprocal relationship between society and the individual - in effect to raise the question: Can there be a sociology of dreaming?

Roger Bastide (1966), a French sociologist, critical of the psychoanalyst failure to come to grips with the dream in its social setting, does in fact raise this question. He is concerned with the institutionalization of the dream, the legitimation of its passage into the waking world and, conversely, the intrusion of social structure into the dream world. As he points out, dreams inevitably and of necessity have social referents. As therapists our concern has been mainly with their idiosyncratic and highly personal meaning. Will it add any to our understanding to take into account their social meaning as a **reflection of a reality common to both patient and therapist?** The aim of this presentation will be to further explore this question, more in its general relevance to dreaming than in its specific reference to therapy, and to attempt to identify some of the conceptual tools that might be useful in building a sociology of dreaming.

In postulating a sociology of dreaming, we have to move beyond the usual conscious-unconscious, manifest-latent dichotomies. These categories apply when our concern is limited to the personal meaning of the dream elements for the individual who has the dream. This is what the dream seems to be saying when looked at subjectively, i.e., from the point of view of the dreamer. Is there another way of looking at the dream and the elements that comprise it? Does it make sense to read into the dream a social commentary as well as a personal statement? **Can the dream be viewed objectively from the perspective of an outside agency endowed with social consciousness?**

In a sense, patient and therapist form this objective outside agency when they search out the meaning of the patient's dream. Together they bring to bear on the problem a more broadly social form of consciousness than was available to the dreamers themselves. The process of dream interpretation pools information known to the patient and

unknown to both but capable of becoming known through the process of free association and the exchange of interpretive hypotheses. However, there is still another possible dimension concerning information relevant to the dream, but not capable of being known to either the patient or the therapist, stemming from shared distortions or simply from shared ignorance. It is conceivable that such information could be known to an outside source, in which case one might speak of a still higher form of social consciousness. It is this latter possibility that is of interest to us in connection with a sociology of dreaming since it would be capable of providing an insight into how the dreamer - and the therapist too for that matter - articulate the latent as well as the manifest aspects of the social structure.

There is a certain range of potential information embedded in the dream that cannot be tapped if it happens to be within a joint or shared social unconsciousness of therapist and patient. We are now talking of an interference or obstacle based on a social rather than a psychological dynamism. A psychological dynamism is potentially knowable when resistances are worked through at a psychological level. A social dynamism is rooted in latent aspects of a social structure and is also potentially knowable, but only through work done against social resistance. The latter as in the case of resistance at an individual level, is made necessary by the tendency of an existing state of affairs to perpetuate itself.

Ideas concerning an extended or social frame of reference in psychiatry are not new. Trigant Burrow, in his time a leading psychoanalyst, published a book in 1927 entitled *The Social Basis of Consciousness*. This work came into being following a dramatic confrontation with a patient during which the patient insisted on putting into practice for a limited period of time, a role reversal. This resulted in something akin to a religious conversion in Burrow himself, since it seemed to force upon him a sudden and overwhelming awareness of the extent to which the therapist, the patient, and, in fact, all people subject to our cultural indoctrination operated in the basis of a consciousness that was, in his words, separatist, individualistic, self-centred, and absolutist in character. Burrow suggested that, in becoming orientated to himself and others in this way, the therapist loses their connection with an organismic social consciousness that is at the same time supra-individual, but the only true source of genuine and creative individuality. He postulated a social consciousness and social unconsciousness. His belief was that the real neurosis is the warped and limited personality structure in both therapist and patient that results when social unconsciousness is fostered as a consequence of the dominance of separatist trends. He attempted to introduce into psycho-

analytic thought what genuinely religious people among others knew intuitively. Our thoughts and feelings have a supra-personal dimension. There is a social consciousness which they influence and to which they are accountable. Health is an acceptance of this supra-individual or organismic state of affairs. Illness, in this sense, is its neglect in the interests of individualistic ends. Burrow described Freudian analysis as fostering the illusion of separatist, self contained, individualistic forms of consciousness.

Erich Fromm (1963) whose writings span the last four decades, attempted to develop the concept of the social unconscious, based on a Marxist analysis of capitalist society and the dehumanisation resulting from economic exploitation and the overgrowth of bureaucracy. According to Fromm, the social system creates the kind of people needed to perpetuate the system. Like Burrow, he calls attention to the enormous crippling effect this has had generally, aside from the question of neurosis, in simply cutting off and stunting man's capacity for self-fulfilment. He treats the environment in more explicit terms than Burrow and, in doing so, identifies some of the reasons why latent social structure remains latent. Fromm sees the hidden constraining influences in our society, including language, as the matrix of a social unconscious shared by all the individuals of the society. Like Burrows, he becomes more concerned with the general deficit state shared by therapist and patient than with the individual neurosis or character disorder. These represent particular manifestations of the struggle against constraint and, at the same time, the way in which the individual attempts to make their peace with the constraint. Fromm's whole thesis is that the present social order has become too costly in human terms.

What are the implications of the foregoing for a sociology of dreaming? Up to now our major concern with dreams has been a subjective one. Regardless of the influence and importance of society contribution to the creation of the dream elements, what mattered was only their personal meaning for the dreamer and the way they were used by them. Based on the work of Burrow, Fromm and others, I am suggesting that this is a somewhat simplified view of the matter, and further, that an objective or social stance can be taken in connection with the dream and each element explored for the meaning given it by society. Just as each element, viewed subjectively, has manifest and latent references, so does each element, viewed objectively, relate to manifest or latent aspects of the social structure.

What of the objective or social side, complementary to the subjective or personal side? We are continuously in a struggle that has a dual aspect. We are trying to understand ourselves while, at the same time, trying to understand the world about us. In therapy we separate out of the dream the personal truth and discard the rest. I suggest that there may be powerful social truths in the discard. In fact there may be dreams in which the exposure of social truth is the only relevant personal truth conveyed by the dream. The following dream is offered as an example. The dream is mine. \*

Before describing the dream, I would like to mention three antecedent events that appeared to me as relevant waking residues. The first occurred on Thursday, November 21, 1963, in connection with a talk given by a Polish psychiatrist who was a survivor of the Warsaw ghetto and one of the leaders of the heroic resistance that took place at the time. He was speaking about the attitudes not only of the SS but of all segments of the German people as they witnessed the humiliation, degradation, and ultimate slaughter of the Jews. He described the following scene in one of the twelve concentration camps in which he was incarcerated. There were a number of small children in the camp, ranging in age from three to five. All but one had learned how to be quiet. That one, a boy of five, cried out and touched the commandant of the camp. The response was immediate. The commandant drew his pistol and killed the child with one shot. The entire scene took place in full view of a group of German mothers escorting their children to school. Later that day, as the same mothers and children were again passing the camp, the commandant was observed outside the camp talking with them, playing with the children and, at one point, picking up one of the children, embracing, and kissing him with the obvious approbation of the adults in the group.

The second and third day residues occurred 24 and 72 hours, respectively, following this talk although, in point of time, they occurred 20 years after the events I have described. I refer to the assassination of President Kennedy and the murder of Lee Harvey Oswald.

Following these three events, I had a dream in which I became aware of a certain kind of blindness affecting myself as well as others. I say a "kind of blindness" because peripheral vision was intact enough to create, at times, the doubt that the blindness existed. There was a certain distressful wavering between doubt and certainty. I became aware in the dream that the blindness could be compensated for by a very simple expedient. It involved shifting the angle at which a

*\*Although a personal dream is offered, the personal psychodynamic context and interpretation is omitted so as to focus exclusively on the references to the social scene.*

series of steps were arranged so that they could be mounted vertically rather than at the usual incline, thus enabling the person ascending them to guide himself by what he could feel with his hands rather than by what he could see with his eyes. In this way, so it seemed in the dream, the illusion of normality was maintained.

The dream took place in the context of exposure to these three forms of social violence. The first i.e. the concentration camp experiences, was orderly, socially structured, purposive, sanctioned, and obligatory in relation to prevailing codes of duty and obedience. It was acceptable not only to the crude psychopath but to the representatives of German citizenry. The second was the wanton, ruthless, insane act of a single individual. The third, the murder of the assassin, was somewhere in between. In its appearance, it was the act of a single individual. In its essence it was the outcome of a drama occurring in a social milieu in which the cult of violence had been tolerated just short of open acceptance.

In my own life, the dream occurred in the context of making preparations to give a talk entitled "Dreaming and the Social Scene". In the talk I dealt with what I believed to be the limiting nature of the Freudian concept of the unconscious in relation to dream interpretation. This concept, it seemed to me, made for a reductionist approach to dream symbols and closed out any social insights to be derived from dreams concerning the imprint of irrationality and violence that mark us as citizens of our age. The concept of the unconscious expressed a static view of society in the sense that it substituted an analysis of instinct for a social analysis of the reflection in the individual of the unknown influences he/she is subject to in the course of social living. Freud maintained his own social blindness and, in doing so, transcended the issue altogether by focussing on the more global issue of the civilizing process per se rather than on the inequities of an existing social system. This was a master's masterful defense against his own fantastic visual powers.

I suppose the events leading up to the dream sharpened my concern with the possible contribution we make as intellectuals and professionals, through the theories we postulate, to the general camouflaging of the destructive fall-out from our own social structure. How do we, as students of behaviour, unwittingly, by virtue of the theories we develop and the explanations we offer, allow for the continued generation of further social blindness? In short, how do we add to the problem?

In my dream I was concerned with this question of functional blindness. How do we not-see? How do we realign external reality with our

own distortions so that, as in the dream, we settle for an illusion? In the dream it is associated metaphorically with inappropriate but immediate contact through what we can touch with our hands, rather than contact mediated through our potential for psychological vision, maturity and wisdom. Why do we persist in the illusion that we are walking upright on the flight of stairs when, from the point of view on an objective observer, we are doing no more than crawling on our hands and feet? How do we sustain a social existence so close to violence on a potentially cosmic scale while going about our daily affairs as if this could never become a reality?

I seem to be saying to myself in the dream that two things are necessary to maintain the illusion of not being blind. One that external reality, the stairs, has to be manipulated. Secondly, I have to effect a change within myself, shifting from one source of information about the external world to another. Subjectively, I am saying something about myself and what I have to do to maintain my own emotional distance or blindness from certain unpleasant truths. Objectively, I am saying something about the world and the way it seems to come out of the dream, namely, the very process one relies on to cover up the blindness presumably also enables one to climb the ladder of success.

I have thus far been concerned with only one of the two directions in the waking life-dream dichotomy, namely, the appearance of social artifacts in the dream. I have suggested that this in itself has a dual aspect insofar as social truths as well as personal truths gain access to the dream.

There is, of course, a second direction from the dream back to society. As Bastide points out, Occidental societies have not institutionalized the dream. Such institutionalization is a fact of life in most primitive societies. The nearest we come to it is either in the form of residual superstitious interest or, at a more sophisticated level, the sanction the dream receives within the confines of the consulting room. It seems to me rather remarkable that, in an age where so many technical skills become incorporated into daily life, the technology of dream interpretation has remained in the hands of a few. There are many explanations offered in defense of this monopolistic stance, but I have never been convinced either of the danger (there is, I think, a danger in a reductionist misinterpretation of dreams) or the degree of professional skill needed. People in many primitive societies exhibit a high level of skill and sophistication in reading their own dreams. Not all psychiatrists, some psychologists, and only the rarest of social workers, have the temerity to work with the dreams of patients.

The technical skills needed to deal with dreams meaningfully can be readily taught. One need only identify, refine, and help conceptualize certain intuitive faculties. At a time when expanded self-awareness seems to be the order of the day, one wonders why the natural route of dream interpretation is not more popular. I would suggest that the socially reinforced privacy of the dream is not fortuitous, and that our analysis of the objective and subjective sides of the dream may have some relevance here. As long as nothing of importance is allowed to find its way back to society **from the dream**, the individual is left to their own devices and has no choice but to absorb its mysteries within their own personal consciousness or unconsciousness. No room is left for any challenge to the social order. There is only room for personal demons and the transformation of social demons into personal ones. Dream consciousness may indeed pose a danger to any bureaucratic or technologically supercharged society.

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Shelagh Andrews

## TEENAGE GIRLS' DREAM GROUP

Faifley is a post war housing scheme on the outskirts of Glasgow and part of Clydebank. Like many industrialised areas it has suffered the consequences of large scale closures, notably Singer, the sewing machine factory.

Strathclyde Region has designated Faifley as an "Area of Priority Treatment", one of seventy-five in the region. This in effect means that extra resources are channelled into these areas of deprivation.