

Relation Disorders, narcissism and dreams

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Abstract

The author writes that the group therapy is the space where you can both understand that pathology is not only an individual matter and also treat it by addressing all involved. In any individual or group analytic therapy the re-enactment of earlier patterns of relationships is part of the curative process.

Keywords: Relation disorders, Dysfunctional patterns, Narcissism, Dreams, Dreamtelling.

Riassunto. *Disturbi della relazione, narcisismo e sogni*

In questo scritto l'autore prende in esame la terapia di gruppo come spazio in cui si può capire che la patologia non è solo una questione individuale e quindi scrive della necessità di trattarla rivolgendosi a tutte le persone coinvolte. Parte dal presupposto che in qualsiasi terapia analitica, individuale o di gruppo, la rievocazione dei precedenti modelli di relazione fa parte del processo curativo stesso.

Parole chiave: Disturbi della relazione, Modelli disfunzionali, Narcisismo, Sogni, Dreamtelling.

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The “collective pathology” and today’s Relation Disorders

Anzieu writes:

«As far as the family is concerned, American work based on systems theory and the theory of normal and pathological communication (Bateson and Watzlawick and the Palo Alto researchers) has shown that the family is a whole tends to close in on itself, concentrating the collective pathology on one of its members, *who is made physically or mentally ill through the repeated production of disqualifying or paradoxical messages* (Italics by Robi Friedman). Hence the development of a systemic family therapy that treats the family as a whole» (p. 23, ed. it.).

Today it becomes increasingly clear that group therapy is the space where you can both understand that pathology is not only an individual matter and also treat it by addressing all involved. They «send disqualifying or paradoxical messages» and others are «made mentally ill» (*ibid.*, p. 23). Dysfunctional patterns of relating tend to subject to repetition compulsion. But their re-enactment is still dependent on the specific interaction. Thus, in different relations there never is the same exhibition of pathology. In any individual or group analytic therapy the re-enactment of earlier patterns of relationships is part of the curative process. I have defined special patterns of relating “Relation Disorders”, most of them are displayed in a group environment, for example the tendency of scapegoating in some groups, which I called the “Rejection Relation Disorder”.

Freud’s term of “transference neurosis” (Freud, 1905), a systemic formation which can be considered a re-enactment of early dysfunctional relational pattern, can be called a “Relation Disorder”. It is shaped by one (or two) of the dyadic therapeutic partners who sends “disqualifying or paradoxical messages”. For example, in an activated “transference neurosis” one side will be disobedient and the other angry but forgiving. In group analysis such a “Relation Disorders” is treated by the sequence of «location, translation, interpretation» (Schlapobersky, 2015, p. 226).

The concept of “location”, developed by Foulkes’ (1948), is a further help to treat relation disorders in groups. Foulkes suggested that pathology is usually not to be found in the individual alone, but is “located” between interacting members. One should look at relationships. This innovative understanding of group analytic work suggests also a shift from the therapist’s alternating between the individual or the group-as-a-whole, into an additional alternating between the reciprocal relations in the group process.

We would further say today that especially “resonance” and “mirroring” are elements which can change the co-created “collective pathology”. The

use of these interpersonal communicative tools provides us with the more familiar “insight”, together with “outsight” (de Mare, 2012), which means learning how others cope with a difficulty. The third element of change in group analysis is the internal and real “practice” of an alternative behavior, which is often a unique possibility in the more secure space of group therapy.

Thus, in today’s group therapy, a scapegoating process will not be treated through the scapegoat’s pathology alone (possibly his dependency or neediness) and not only by addressing aspects in the group-as-a-whole (e.g. the displaced aggression). These aspects cannot be treated without addressing the disordered relations between the leadership and the group, between the scapegoater and subgroups and especially between the bystanders and all the other participants in the process.

The same rationale applies to the treatment of a “Deficient Relation Disorder”. In this configuration of relations one member is chronically weak, needy and deficient while the rest of the group members try to be helpful. Today it would be important to first locate the disturbance in the “between” of their relationships, then “translating” the unconscious group processes with those individuals needs and sometimes even interpreting are the therapist’s tasks.

Anzieu example of looking at “narcissism” as a Relation Disorder and the modern needs of groups

Anzieu writes:

«A third illusion, typical of large social organizations as well as of small informal groups, was described by Freud in 1921 in *Psychology of the Masses and the Analysis of the Ego*: the leader (the father, the leader, the therapist, the teacher) would love all the members of the community with an identical love. If this were the case, the main obstacle to communication, understanding, harmony between human beings – namely narcissism – could be completely and definitively overcome. By helping participants to recognize what the group cannot, the group can ultimately be an excellent school for disillusionment» (p. 26 ed. it.).

Anzieu suggests that part of the cure of the modern human being is to leave the illusion of equality and the false promise that the group can “do everything”, thus to attain the depressive position. As if the grim message of the story of Kain and Abel is not ingrained enough in our collective unconscious. Further I understand Anzieu as suggesting that narcissism is not a personal pathology, but the pathology induced by a father. I can’t agree more. Joseph the dreamer in the Bible is pushed into narcissism by his fa-

ther giving him the striped coat, the symbol of favoritism. On step further, in my understanding, Joseph's "narcissistic dreams" were a request to his brothers to help contain his father's pathology, which was transferred to him trans- generationally.

Today I think that some evolution occurred since WW2 times, which influenced Foulkes, Anzieu and Kaës, when the inclusion in groups was of existential significance and the illusion of a glorious group and nation needed cure. Many coming to the group cannot find their connection to society. Disillusionment of groups seems often normative. The group-analytic group

«functions as the place of elaboration by "containing" sensations, affects and fantasies, and re-establishing the links of thought, and a function of establishing a certain interpretative game» (Anzieu, p. 23 ed. it.).

Only now I think rather that resonance, mirroring and working on the relations with a reciprocal dialogical communication helps us more than "a certain interpretative game".

The use of dreams in group analysis

Ruffiot recognizes

«the family as a system (...) a system of inter-familiarization, transmitted from one generation to another; The rule of free associations is supplemented by the invitation extended to family members to talk about their nocturnal dreams, an expression of their deep psychic life. The appearance of dreams is in fact an important moment in family therapy (...). The fact that the dreams of the different members respond to each other allows the family to find unity again, no longer in a psychotic fusion, but in a phantasmatic circulation that respects the difference of the persons, while ensuring the link between them» (in Anzieu, pp. 23-24 ed. it.).

I think that Kaës', more than Anzieu and any other of his French colleagues' understanding of the dynamic of dreams and dreaming was before his time. Kaës (2002) did not consider dreams in the family as individual creations. They are a "response to each other" and not only express the personal intrapsychic structure of the dreamer. Thus, the "invitation to family members to share their nocturnal dreams" (2002) is an invitation to share the relations in the family. Dreams for Kaës are not only "representing" a relational issue, be it a conflict or an excessive dependence, but they are also "transforming" the family (2007). Dreams can unite and dissolve the family unity, dreams can provoke psychotic fusion and can also have the transformative

function of living with differences, which in families often is the difference between living in Heaven or Hell. This richness described by Kaës in a few sentences is a unique and special present he made for us all.

Small groups, including therapy groups, are the heir of family life. We feel in them the same dynamics and we are able to take what they teach us about our inner and outer life. We learn from family therapy, that dreams told in groups are often collective creations and should not be considered only to be individual. Dreams are the result of a common beginning, ignited by an interpersonal and intersubjective “preoccupation”. For example, the dreamer can be exposed to a family or group member who have difficulties to “digest” excessively strong anxiety or intimate excitements. Such a “pre-occupation” will be picked up by dreamers connected with this situation, in order to try to contain and further digest the excessive emotions. Thus, a dreamer may dream for himself and “for the other”. This approach to dreaming, which as Kaës stated, both responds to others on the one hand and also tries to change the atmosphere and the relations on the other hand, makes the work with dreams in the group fascinating. The group’s task is to give the richness of reciprocal resonance and the “hall of mirrors” a place in the group’s process. For these aims a communicative “partnership” is needed, which pushes the process further. Dreamtelling comprises 4 steps of digestion: the already 2 described stages of digestion mentioned: the preoccupation and dreaming phases and also 2 subsequent phases. The third phase is the remembering the dream and reflecting on it. This Self-dialogue with the dream is also influenced by the relation with others who have supported dream memory. It is later continued by a fourth step of sharing dreams if potential partners in elaboration are available. This step brings Dreamtelling to the transpersonal and interpersonal dimension by using the partners’ “dreaming-abilities”, creating a situation where further “dreamers will dream the dream” (Friedman, 2019).

Group participants learn to respond to the dreams with their inner emotional echo (resonance) and letting the unconscious material touch them “as if it was their own dream”. Their visceral responses and very personal associations function as the deepest of the interpretations and provide for “moments of meeting” deepening their relations.

Anzieu and Kaës’ early suggestions seem to have a modern application in group analysis.

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