Kächele H (2006) Review: Hill, Clara (Ed) (2004). Dream work in therapy: Facilitating exploration, insight, and action. Washington DC: American Psychological Association. *Psychotherapy Research* 16:140 - 141

Review Hill C (Hrsg) (2004) Dream work in therapy. American Psychological Association, Washington DC

Once upon a time more than hundred years ago a Viennese physician named Dr. S. Freud published a book that - preceded by the author's conscious wishes - was to become one of the most frequent cited texts in the century to come. It truely became a centenntial book. It became *the* introductory text on psychoanalysis for intellectuals that were always aware that the "dream of reason can produce monsters". Literature and dream have been bedfellows long before Freud's masterpiece appeared and will be so long after (Alt 2002). Psychoanalysts have given credit to this work over and over again calling the dream the royal road to the unconscious, but with the broadening scope of psychoanalysis into the wide bed of psychodynamics working with dreams in increasingly shorter therapies became less pronounced. For a while the discovery of REM-sleep cycles seemed to finish off the royal position; the products of nightly mentation were pushed aside into a waste paper basket as mere by-products of brain stem activity (Hobson & McCarley 1977). Recently neuroscience rediscovers the unconsious; and the journal neuro-psychoanalysis –a happy marriage of neuroscience and psychoanalysis – is worth reading for heated debates on dreaming and its cortical and subcortical correlates. These debates are led by the psychoanalysts M. Solms and his neuropsychologist collegue and wife K. Kaplan-Solms. So then the clinical world should be well advised not only to accept that all our patients are dreaming, and want to talk about them, but also that dreams should be a respectable topic for clinical work.

Clara Hill and her team, for a number of years have put their fingers on a really important issue: given the widely accepted notion of dreaming as an internal housekeeping procedure (Strauch & Meier 2004) is reporting about dreams therapeutically helpful and if so, how should it be done. Her work is based on assumptions she is careful to spell out at the outset: Dreams are a continuation of waking thinking without input from the external world; in NREM and REM sleep phases we work on personal relevant issues. Standard dictionary types interpretation

therefore are not helpful (referring especially to rather outdated Freudian sexual symbolism and Jungian archetypes). And working with dreams should be a "collaborative process between therapist and client" (p.4) for which any therapist should have expertise in using basic helping skills and therapeutic techniques before they do dream work (p.5). This last point surprises a psychoanalytic oriented reviewer, but it could denote a state of poor training situation that makes it necessary to underline this aspect too. Hill's general theoretical orientation is "heavenly" influenced by her client-centered training, but her dream interpretation model reaches as far back to A. Adler's interpretation of dreams (1936) and covers a wide range of humanistic-experiential authors like Carthright, Ullman, Greenberg. Her main point is that any model should have a theoretically consistent structure and therefore her mode involves (a) exploration, 8b) insight), and (c) action. The first part of the book and its most important one is an explication, a detailed demonstration how the three steps of the dream interpretation model have to be implemented. In fact it is a "manual of how to do cognitive-experiential dreamwork". This part is truely rich and convincing given the detailed example of how to coach the client (not the patient) to her or his understanding of a dream. Her insisting on exploring potential action following exploration and insight is sympathic to me; therapists are but consultants, facilitators to client change.

Part II of the book reports about applications of Hill's model to diverse groups of clients (in individual and groups therapy, with bereaved clients, with male clients (!) and clients with nightmare dreams). The diversity of potential confounders for successful dream work does not seem to be small, the advantage being that a clearful defined intervention is at hand which allows for many more studies for Hill's students. Of special interest to me was the section of the application of the dreamwork model in the context of self-help (chap. 6 by J. Zack). Given the huge amount of people with signicant pathology that never reach our for professional help, any workable tool, as the Dream Box Tool, should have fair test. The finding of Zack & Hill (1998), examing the relationship between type of dream and outcome of single session dream interpretation session, that the best outcome came from dreams that were extremely pleasant, whereas the worst outcome came from dreams that weere extremely unpleasant, however, points to a risk of promoting dream self-help methods to disturbed people.

Part III of the book reports on training experiences and and research findings with the Hill model of working with dreams. Hill & Goates review 19 studies that were conducted by Hill's team. The summary of their extensive research findings collected over a number of years remains succinct: clients rated dream sessions high on depth, working alliance, and insight; "clients made consistent gains in understanding their dreams, with more modest changes in symptomatology and interpersonal functioning" (p.273). So if one teaches people in a systematic fashion, they will better understand what dream may tell them. Given the unendless opaqueness of dream materials suitable to make personal convincing sense to the nightly experience constitutes a gain. The authors rightly point out that their approach would benefit the often lacking investigation of other expressive creative techniques (p.282). It well could be that there will be kernel of shared substance that the pictorial world of human experience benefits from re-representing it in a language; an idea W.Bucci (1997) might underscore. Most important is the substantial discussion of imbedded methodological issues provided at the end. Using primarly as clients and therapists undergraduate students certainly is a understandable for the feasability aspects of the research enterprise; the real tolerance test of such experimental treatment research will be real life, be it with clients or patients.

An open issue remains that is not touched upon by this exercise of how to help people making sense out of dreams: what the is the epistemological status of dreams as the product of unconscious mentation. U. Moser, professor of clinical psychology in Zurich, and his wife I von Zeppelin, both are psychoanalysts and members of SPR, have spent their academic life in re-working Freud´s model on the generation of dreams using the most advanced cognitive and affective theories (Moser & Zeppelin 1991, 1999). Maybe they would insist that dreams have their epistemological status of their own and the task of understanding them – what misleadingly Freud had hoped for to arrive by interpretation - , is more a matter of translation. But this is another story.

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