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## Manifest Dream/Association Comparison: A Criterion to Monitor the Psychotherapeutic Field

### Introduction

The aim of this study<sup>1</sup> was to highlight the transformations of the psychotherapeutic field through the description of the relationship dynamics which occur within it. Such dynamics are described in a patient, with intense psychosomatic aspects, during his treatment to overcome difficulties of contact with his own emotional life and gain the ability to autonomously choose the modalities of his own existence.

For the observation of the relational dynamics, beside the specific psychoanalytic methodology, a new approach is used (Trombini, 2014). This is the result of a formation of both psychoanalytic theory and gestaltic theory. It shows that the phenomenological and relational formulation of Gestalt theory integrates itself with the psychoanalytic approach offering a criterion to monitor the progress of therapy. This criterion uses the comparison between manifest dream and associations present within the therapy session, that is gathering phenomenic data that appear in the analysis room.

Of note, Bollas proposed a psychoanalytic theory which has its origins in phenomenology (Albarella, 2004). He argued that in the clinical field it is necessary to begin from a phenomenic description, for example, from the state of relationships, and then to conclude with the analysis of the relational dynamics. The author stated that this way of proceeding is what makes psychoanalysis relevant.

Turillazzi & Manfredi (1982) argued that one aim of psychoanalysis is that of preserving itself as a science keeping a logical approach, but from a phenomenological point of view. That is because the phenomenic approach is the description that is

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<sup>1</sup> This work is dedicated with profound gratitude to the memory of our friend and teacher Giuseppe Galli. The clinical case presented in this article and the conceptual framework for its analysis are the work of the main author, Giancarlo Trombini; the evaluation of the symptom questionnaire (SQ) used in this case has been done by Anna Corazza; some remarks on the field concept in Gestalt psychology have been added by Gerhard Stemberger. The authors wish to express their gratitude to Dr. De Pascalis for the translation of the main part of the manuscript from Italian to English.

unfolded from within the events themselves, how they are perceived, experimented, experienced, organised and instituted by the participants of a certain event.

The phenomenological criterion which we suggest can be used to make objective observations (thus, also empirical research) in the therapeutic field. Such criterion offers an immediate configuration of how the relationship opens and develops. The object of the research is in fact the monitoring of the relationship dynamics present in the session. The emerging results are therefore a contribution to the reflexive pole of clinical psychoanalysis which is characterised by a continuous oscillation between the reflexive and the dreaming receptive poles. One has therefore a continuous cross-reference from the manifest content to the latent content.

Thus, the criterion can offer an ulterior understanding of what one usually keeps in mind while carrying out therapeutic work through floating attention, empathy, countertransference and the wider activity of elaborative connection.

We now focus on some considerations about the concept of field.

### **Some Remarks on the Field Concept in Gestalt Psychology**

The founders of Gestalt psychology have used the field concept in a broad variety of contexts, ranging from problems of understanding brain processes and their relationship to phenomenal processes (e.g. Wolfgang Köhler) to the investigation of human perception and behaviour (e.g. Kurt Lewin). It goes without saying that such different tasks and areas of investigation involve a varied terminology. To systematise this terminology, one can distinguish three meanings in which the field concept is addressed in Gestalt psychology: the phenomenal field, the psychic field and the psychophysical field (Tholey, 1998; Tholey & Stemberger, 2009).

They are defined as follows:

*The phenomenal field:* It includes the phenomenal body ego and its phenomenal environment. It is the everyday world of human experience, in which we perceive, think, remember, plan, act, communicate and interact, i.e. our everyday world, which, as a rule, one usually considers to be the only world really existing (at least in times when we do not deal with epistemology).

*The psychic field* (or – in Lewinian terms – psychological field): Compared with the concept of the phenomenal field, the concept of the psychic or psychological field is extended to include those forces which are phenomenologically not given in our experience, but show themselves only through their action or effects. Such forces include the quasi-phenomenal constructs of Gestalt psychology (such as Prägnanz tendency and frame of reference) and also depth psychology (such as the unconscious forces of defence, resistance, etc.) and other schools of psychological thought.

*The psychophysical field:* The concept of the psychophysical field is a further extension, going beyond the concept of the psychic field. The psychophysical field is the central nervous field, which is simultaneously psychic as well as physical. This field concept does justice to the fact that the phenomenal and functional psychodynamic dynamics ultimately reach into the area of central nervous processes.

When we talk about the application of the Gestalt psychological or Lewinian field concept in psychoanalysis and psychotherapy, we usually mean the psychic or psychological field, taking into account not only the phenomenal experience of therapist and patient but also the forces acting upon this experience (which can be conscious in their effects or unconscious).

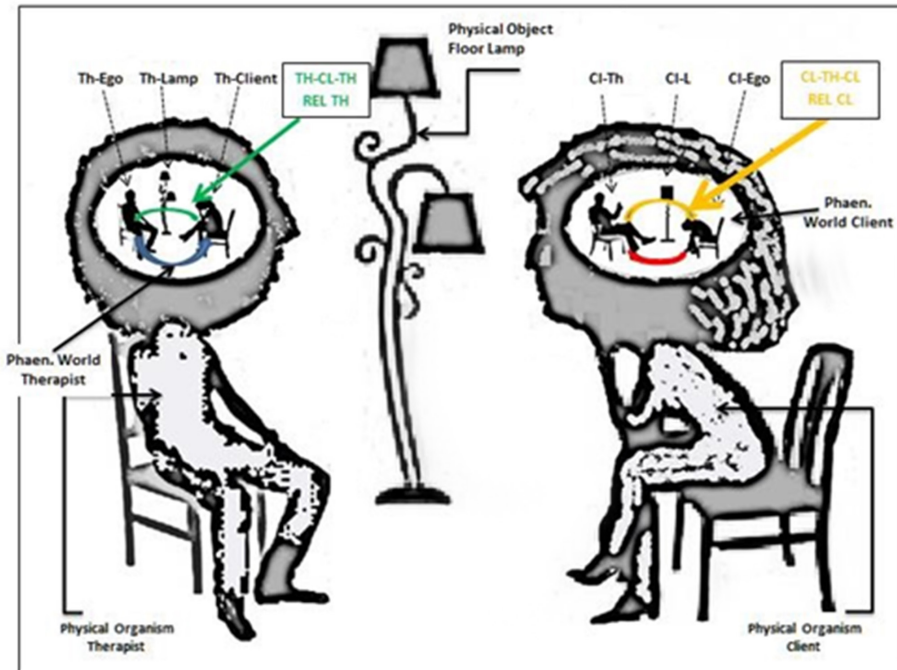
From what has been said so far follows: When Gestalt psychology speaks of fields, then of field relations in the psychic and psychophysical (including cerebral) realm, but not in the whole of the organism, nor in the physical space between different organisms. This is an important distinction to many applications of the field concept in the psychotherapeutic field: Lewin emphasised that when talking about psychic field forces, “one must always keep in mind that these are forces in the psychic field and *not in the physical environment*” (Lewin, 1926, p. 24; transl. GSt). In addition, Metzger emphasised that a field-like interaction between the phenomenal ego and its phenomenal environment (and the interaction of the respective cerebral processes) “is necessary for a meaningful and biologically beneficial interaction between the person and his environment”, but such an interaction “is unmistakably lacking in the space between the physiological organism and its physical objects” (Metzger, 1972).

This means that interpersonal fields do not form between the physical organisms of individuals, but within the phenomenal world of each individual person. In order for these interpersonal fields to be able to form with sufficient structural similarity in the phenomenal worlds of several persons, various transmission processes of cybernetic, optical, acoustic and other kinds are required. An illustration for this concept, applied to the psychotherapeutic situation, is shown in Fig. 1.

The field concept of Gestalt psychology points out why it is so important to realise that there is not just *one single* therapeutic field, but *two* – that in the phenomenal world of the therapist and that in the phenomenal world of the client. In his field definition, Kurt Lewin referred to Einstein:

“A totality of coexisting facts which are conceived of as mutually interdependent is called a *field* (Einstein 1933). ... The concept of the psychological field as a determinant of behavior implies that everything that affects behavior at a given time should be represented in the field existing at that time, and that only those facts can affect behavior which are part of the present field.” (Lewin, 1946/1997, p. 338-339)

## The Therapeutic Fields (in Terms of Gestalt Psychology)



**Fig. 1** There is not just *one* single psychotherapeutic field, shared by therapist and client, but in each of the two phenomenal worlds a separate and very individual therapeutic field with its own distinctions. There are field relationships within each of the phenomenal worlds, but not between the organisms. A certain (more or less limited) structural “synchronization” of the two phenomenal worlds and therapeutic fields comes about through various transmission processes of cybernetic, optical, acoustic and other kinds.

*Phenomenal World of the THERAPIST:* Th-Ego: Phenomenal Ego of Therapist; Th-Lamp: Phenomenal Floor Lamp of Therapist; Th-Client: Phenomenal Client of Therapist; Th-Cl-Th Rel Th: field relationship therapist/client in the phenomenal world of the therapist.

*Phenomenal World of the CLIENT:* Cl-Th: Phenomenal Therapist of Client; Cl-Lamp: Phenomenal Floor Lamp of Client; Cl-Ego: Phenomenal Ego of Client; Cl-Th-Cl Rel Cl: field relationship client/therapist in the phenomenal world of the client.

*Physical (Transphenomenal) World of Therapist and Client:* Physical Organism „therapist“; physical organism „client“; physical object „floor lamp“.

So what happens in the therapeutic field of the therapist’s phenomenal world is by no means identical with what happens in the therapeutic field of the client’s phenomenal world. It has first to become a fact in the world of the other to become a field part there, and it will then function as a part of this other field, possibly differing considerably from how it functions as part of the therapist’s field.

One last point is:

Under certain conditions, the total field of the phenomenal world segregates into two total fields. In these cases, not only *one* phenomenal ego with its phenomenal environment is present in our experience (primary total field) but also a *second* ego evolves with a corresponding second environment (secondary total field). There are even cases where this segregation process continues and a third total field emerges. These are not pathological phenomena in the sense of a “split or multiple personality” or the like, but everyday phenomena in the “normal range” of perception and experience of every human being. The phenomenon can occur while attentively viewing a painting, but also while watching a movie or a play in theatre, reading, listening to a lively narrative, “daydreaming” or being immersed in intense, vivid recollection of a dream, of a conversation or an event from the past, etc. Gestalt psychology has identified the Prägnanz principle as the cause of this phenomenon: If facts occur in a whole that are phenomenally incompatible with this whole, then this experience of non-Prägnanz causes the segregation of another whole (Rausch, 1982, p. 300f). The two wholes (primary total field and secondary total field) stand in field relation to each other.

This phenomenon plays an important role also in psychotherapy. It occurs frequently in the psychotherapeutic situation – whether noticed or unnoticed, whether deliberately induced or spontaneous – on the side of the psychotherapist as well as on the side of the client. If the phenomenon is well understood in its conditions and effects, this may contribute to a better practical and theoretical understanding of the psychotherapeutic situation and the psychotherapeutic process and may also be used deliberately to improve the procedure in diagnosis and therapy (multiple field approach, Stemberger, 2009a, 2009b, 2018).

### **The Concept of Field in Psychoanalysis**

In the early 1950s, some aspects of the Gestalt psychological concept of field have been introduced into psychoanalytic theory by the German psychoanalyst Wolfgang Hochheimer.<sup>2</sup> Hochheimer (1953, 1954 in 1986) proposed an application of Lewin’s field concept for the understanding of the psychotherapeutic relationship and situation in psychoanalysis. Perhaps due to the language barrier, this found no resonance internationally, and also in the German-speaking countries this initiative had no lasting impact. In the following years, other models of field theory emerged in the psychoanalytic community

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<sup>2</sup> In the 1920s, Hochheimer studied with Max Wertheimer, Adhémar Gelb and Kurt Goldstein and was then an assistant of Max Wertheimer in Frankfurt for a short period.

of other countries (Katz, 2017, p. 16f),<sup>3</sup> the most influential of these being the work of Madeleine and Willy Baranger in Latin America. Mainly thanks to their pioneer contribution (1961-62 in 2008, 2018), Lewin's field concept is presently shared between Gestalt psychology and psychoanalysis in many countries. The Barangers in 30 years have developed with notable originality a point of view which considers the analytic situation as a dynamic field structured by a bipersonal relationship in which the experiences and the relational dynamics of a person are considered as field events. Consequently, as Galli (1997, 2017) showed, two basic principles, indicated by Lewin as necessary for psychology: a) passing from a monopersonal model to a relational one, b) abandoning the essentialist explanations in favour of the dynamic functional ones, have found concrete application in the psychoanalysis. Galli focused particularly on the therapeutic couple intended as a whole where the two people are inevitably united and complementary and where each cannot be known without the other. The roles of the two partners are constructed in the "here and now" through the contributions of both of them.

If we consider the configuration of the roles of the analytic couple working to transform the psychic pain, that is the person's various crises (the relational suffering) in an evolutive crisis, some useful concepts by Metzger (1982) can be adopted relating to group structures. The analytic couple can in fact be described first as a staircase structure then as a ring structure. In the staircase structure, there is a hierarchical order, where the roles are, for example, those of expert and of oblivious, of authority and of dependent. In the ring structure, the roles instead tend to be equal and cooperative. It has been highlighted that both structures can be functional to the therapy according to the moment of their appearance (Trombini, 1995; 1998).

In the final phase of a successful analysis, when the couples work side by side, the presence of an *us* becomes evident, organised according to the cooperative ring structure which, as known, is characterised by an orientation towards a central common aim where each individual does what is useful and necessary time after time, with an effort towards reciprocal help. But the assumptions for the building of such a structure could already be present from the beginning of analysis. The initial internal arrangement of the therapist can in fact favour beside the vicissitudes of the transference-countertransference an egalitarian atmosphere in which

<sup>3</sup> Katz, who was not aware of Hochheimer's contribution, distinguished three models of psychoanalytic field theory: first, the model developed by Madeleine and Willy Baranger in South America, called the *mythopoeic* model by Katz; second, the field theories that began to evolve in the mid-twentieth century in North America (interpersonal, intersubjective, relational psychoanalysis and motivational system theories; Katz, 2017, pp. 18ff). Third came the post-Bionian field theory, developed by Antonino Ferro in Italy, later joined by Giuseppe Civitese (called the *oneiric model* by Katz, 2017, p. 19 and later in his text; cf. Bion 1963, Ferro 2003).

a series of dialogues will bring the patients, through the exchange of perspectives, towards slowly approaching recognising themselves in their various components. It will then be possible to replace impulsive action with an awareness that enables greater freedom in decision-making. The need for one or the other structure can therefore take turns between sessions or even within the same session. The ring structure, with its facilitating a cooperative relationship, should not therefore be favoured a priori.

Identifying whether the active structure is the ring one contributes to highlighting the existence of the therapeutic alliance, which is symmetric. If the staircase one is instead active, it then indicates the asymmetry that can emerge in the competitive and conflictual transference relationship or in managing the anxiety of the patient who needs to perceive the therapist in an authority role. This is also consistent with Metzger's differentiation of the main modalities of working with living beings and processes – nurturing, leading and fighting – which are shaping also the specific relationship between the care-giving person (the therapist in our case) and the person cared for (the client in our case) depending on the specific situation (Metzger, 1962, pp. 38ff; Kästl, 2011).

The transference is a phenomenon determined by the bipersonal field and is therefore also modelled on the personality of the therapist. The concept of transference, starting with Freud, is characterised by an oscillation between a *repetitive* and stereotyped connotation (of past relationship experiences) and a transformative one (towards new relationship experiences). The field characterised by a transformative transference is an “open” field, always expanding, which tends towards a growing complexity (Trombini, 2014). In this case, we are in the flexible and modifiable “secondary” field indicated by Stemberger (2009a, 2009b).

In one's own personal experience, multiple correlated global fields can form. Other than the primary field (people are defined in the therapeutic setting by their corporeal sensations), there is a secondary field that is activated during the therapy in correspondence with the patient's narrations, in which the psychotherapist dives with the *devotion*, a “social virtue” in the sense of Galli (2005), which in psychotherapy becomes “virtue of the profession” according to Stemberger (2009b).

The analytic field described by the Barangers is organised in three levels: 1) the *setting*; 2) the dynamic aspects of the *phenomenic content*; 3) the *insight* related to the unconscious bipersonal fantasy, which is the specific object of psychoanalysis.

The unconscious bipersonal fantasy combines the Kleinian concepts (the crossing of the projective identifications of the two members of the analytic couple) with that of the field. Such unconscious fantasy is the specific object of the analysis, the purpose of which is to mobilise the field, the paralysis of which brings about



suffering. But as Neri (2007) noted this strict reference to Kleinian theory is the most dated aspect of the contribution of the Barangers, because it defines in a specific and binding way the processes of formation and development of the field.

### **The Interest of Italian Psychoanalysis for the Concept of Field**

It is traditional, in Italian psychoanalysis, to pay attention and monitor moment by moment what happens within the session. A constant research of emotional contact with the patient has always been observed. The “minute exchange” (Neri, 2007) between the patient and the analyst (silences, gestures, posture movements), which sustains and clarifies the therapeutic relationship, has always been duly followed. What is perceived is annotated in the mind of the therapist as a useful observation to follow the development of the session. But rather than annotated, it can be transformed in images, fantasies and *narrations* potentially shareable at the right moment. All this can be placed side by side with interpretation without replacing it. Consequently, the receptivity of the therapist, the attention towards context and the tolerance for doubt are associated with the development of the capacity for “interpretive modulation” (Ferro, 2005) expressed through narrative interventions.

Parallel to this, an interest has grown in Italy for the idea of field, which has brought to an original elaboration of this concept which still 10 years ago had not received sufficient international acknowledgement (while it now has), as underlined by Neri (2007).

The evolution of the concept of field sees the convergence of several authors on a model of the *oneiric field*, in which *narration* takes on a relevant role.

The analytic session is continually imagined as immersed in an oneiric atmosphere, a dream of the minds. The object of therapy is the development of the dreaming capacities of the field which will lead to new narratives and to the introjection of psychic functions (Mazzacane, 2013). Narrations that are the result of processes of alphabetisation of the proto-emotions of the couple are therefore favoured. What emerges from this is a model of a psychotherapeutic field that is enriched compared with its general formulation where the narrations have a transformative meaning.

In the theoretical and technical approach of “dissolving emotions in narration” (Ferro, 2002), the idea of transformation becomes central and largely absorbs that of interpretation (Neri, 2007). In turn, narration, becoming expression of emotions, has the ability of bringing out other emotions lost until that moment.

The field is therefore a dynamic system which identifies itself with the analytic couple and weaves narrations which instant by instant tell of its own functioning (Ferro & Civitarese, 2015).



The aim of the therapy is recovering and building what could not develop during previous relationships (Robutti, 1992). The characters in the dialogue during the session, the people who are awoken, within the patient or the analyst are dynamic events of the emotional field of analysis.

One can then argue that the therapist and the patient are the sources of the activity that is manifested in analysis, the relationship is the context in which such activity comes to life and the field is a basic dimension of the relationship (Neri, 2007). The variations that are developed in the characteristics of the field, which dreams and the associations are expressions of, give a representation of the patients' journeys, both during the sessions and in the entire analyses, in the exploration of their world of relationships.

### **The “Manifest Dream/Association Comparison” Phenomenological Criterion**

Sharpe (1937) in her historic excellent work on dreams had already directed her attention on the phenomenological aspect of oneiric narration to document the progress of the analytic treatment. She noted that one could have an idea of the occurred psychic changes through comparing the manifest contents of dreams shared during a certain period of therapy.

Recently, Blum (2011) underlined that the manifest content is no longer simply considered the *envelope* of the latent contents. Similar to reverie, the manifest oneiric content is an aspect of the conscious experience that is intimately connected to the unconscious one (Ogden, 2009). Therefore, in the narration of dreams, one perceives the phenomenic representation in which the internal world structures identify themselves. The understanding of the meaning of the dream comes with a look that moves from the surface to the depth. The relational structures which appear in the envelope are significant for understanding the dreamer.

The dream expresses questions and looks for answers. It implicitly asked to be continued during the session, by the therapist and patient together to develop what the patient alone is not able to do (Bolognini, 2008, 2016). The associations of patient and analyst therefore appear. They express the quality of the development of the relationship between therapist and patient. The associations are therefore defined in a precise role.

The question that naturally comes to mind then is whether one can perceive changes in the relational dynamics that develops during treatment only by observing and comparing dreams of a particular period, as Sharpe did. It is what has been suggested (Trombini, 2014) comparing, during a single session, the manifest content of the dream in which the structures of the internal world appear with what is expressed in the associations, that is the narrated facts, the memories, the emotions and anything else said during the session. The sessions

in fact offer a sample of the emotional–oneiric climate of the moment (Bezoari & Ferro, 1992). The relational dynamics can then be monitored, as will later be shown, using specific coordinates (positivity/negativity; degree of complexity). The manifest dream/association comparison (MDAC) phenomenological criterion observes transformations of the psychotherapeutic field during the session describing the relationships between the manifest characters and perceiving turning points within the narrative plot that include the introduction of new characters.

More precisely, the MDAC phenomenological criterion confronts the relational structures of the characters present in the manifest content of the oneiric narration with those of the characters who appear in associations. This material is correlated to the mental functioning of the couple, to the elaboration of the associations of both, fruit of the relational attitudes of each and to the need of the therapist and of the patient to communicate at that moment. This dialectical exchange can enable the examination of the relationship trend with its possible transformative movements within the overall session. Patients, for their own enacted story, ask for a transformation. In the transformation, the narrative quality of the manifest relational plot, expressed at an oneiric and associative level, can be concluded gaining a positive quality. A simple example is the narration of a dream presenting a negative dyadic relationship (e.g. a child who is with somebody with whom he/she feels unhappy), while the associations, produced within the analytic couple, evolve towards a dyadic relationship which has become positive (e.g. that of a child who has met a person with whom he/she can feel happy).

The narration developed by the dream and the associations, in the comparison of the respective relational structures, is evaluated in its progress and its conclusion. The emotions present in the relationship can be available for the bond and can be there in the union, that is they can possess a cohesive function tied to the values of life and sociality: being therefore constructive (positive). The positive ones can express themselves, for example, in behaviours Galli (2005) called “social virtues” such as trust, hope, dedication and gratitude. The negative ones can express themselves for example in behaviours such as indifference, scorn, arrogance, intrusiveness, desperation and envy, the psychological opposites to the social virtues. Alternatively, they can be clearly destructive (negative) emotions.

The tone of the therapeutic process is given by the evolution of the relational dynamics. The coordinated suggestion thus becomes that of the positivity/negativity of the conclusion. It is the *basic category*.

One can thus observe therefore if there is a modification of the relational structures passing from the dream ones with a negative (aggressive) quality to the association ones with positive (affectionate–libidic) qualities. In this case, the relational dynamics in their positivity appear constructive. A progressive movement then

occurs indicating a satisfactory present evolution happening in that session. This indication of progress, objective phenomenic contribution of immediate interpretation, thanks to the psychoanalytic tools of the fundamental work with the preconscious area, can be consolidated in its positive quality, as it will be the result of a global evaluation.

The conclusion could also be negative with the relational dynamics showing signs of suffering during that session. This could lead to the consideration that there is a moment of crisis in the patient, for example, the emergence of a painful psychic conflict ritualised in a repetitive transference.

One might ask, however, if what appears critical on the manifest plane (the painful moment) should be considered progressive in the unconscious dynamics, as for example a useful starting point necessary for the beginning of a maturational psychic development (overcoming the conflict). If the psychotherapeutic reality evaluated is this one, the fact remains that during the session being considered what is present is the pain felt by the patient, as indicated by the phenomenic criterion. The possible psychic well-being brought about by overcoming the conflict will only be felt afterwards. It is however important to keep in mind this phenomenic evidence of present suffering, as an ideal purpose of the session is always that of promoting, in its conclusive moment, a psychic relief.

Beside the *basic category* of positive evolution, another coordinate is also considered, which contributes to indicating the progressive meaning of the relational dynamics. This second category takes into consideration the *degree of complexity* of the kind of relational structural.

The *category of complexity* is inseparable from that of positivity. In fact, it is only when the session has a positive outcome that one can consider relational dynamics that go towards complexity, like the passage from a dyadic to a triadic relationship, as being maturational.

We know that at the beginning of life infants have the perception of a mother who is separated and quickly develop their own modalities of relationship with her. Between the infant and the object of love, however, there is no well-defined distinction. Infants can feel fused or separated, that is they move along two routes and each prevails at different times (Grotstein, 1983).

When the newborn experiences a state of “quiet fusionality”, moments of “initiative” emerge (Vallino & Maccio, 2004). This initiative is expressed, in the second year of life, in “the motivation towards doing things by oneself” (Trombini G., 1970; Trombini E. & Trombini G., 2006) and subsequently, during the individual’s developmental arc, in more mature modalities of autonomy, like the need to be separate for the purpose of being creative (*positive monadic state*, Trombini, 1994). Thanks to the process of separation, one can develop the

capability of being with the other, according to relational modalities of different degrees of complexity, that is of dyadic, or triadic type, or of a larger group.

The relational dynamics tending towards complexity are indicated both by the psychoanalytic therapeutic model according to the evolutive perspective (Falci, 2005) and by Gestalt psychology, when it deals with the principle of *Prägnanz* (Rausch, 1966).

In the MDAC, one can then see whether there is a progressive movement that also brings about a movement towards complexity, supported by the positive evolution of the relational dynamics that is realised in the transformative transference. For example, one passes from a negative monadic state (of isolation, loneliness, discomfort) to a positive dyadic relationship or from a negative dyadic relationship to a positive triadic one or still further from a positive dyadic relationship to a triadic one just as positive.

The therapy is therefore characterised by the presence of structures with different qualities and various degrees of relational complexity.

Comparing the relational modalities present in the narrated dream and those in the associations, the following should be examined: 1) the positive or negative aspect of every relationship (characterised by positive or negative feelings); 2) the kind of relational state (monadic, dyadic, triadic or of a larger group).

It is thus possible to see, according to these coordinates, the progressive tendency present in a particular moment of the therapeutic relationship, that is during the session in progress.

The objective monitoring of the relational dynamics offers positive psychic signs usable for building critical trust in the psychotherapeutic field. These signs are defined as “indications of progression”, indicative of a satisfactory evolution happening at that moment of the treatment.

A methodical observation of several sessions can offer indications of progression also in a particular phase of the treatment.

But the opposite can also happen, when negative psychic signs appear: the emergence of such “indications of a critical state” can be very useful for the psychotherapist in monitoring the tendency present during the session. All this is part of treatment evaluation.

In essence, lingering in this (manifest) area of the field, which falls within the dialectic of the therapeutic process oscillating between reflexive and receptive dreaming pole, can offer clarity to the treatment dynamics. Providing an immediate configuration of how the relationship starts and develops, the MDAC criterion contributes to the outlining of the kind of relationship experienced in that moment by the therapeutic couple.

When transformative progressive relational movements occur, these comfort the therapist's confidence to push ahead and beyond. But, in sessions characterised by emotional turbulence that risk confusing the therapist, the criterion can help him/her to restore clarity about the quality of the present relationship. This is evidenced by the following example taken from an analysis (with *four* weekly sessions) of a particularly difficult patient (Trombini, 2015). In the dream of a session, she asks the fruit seller analyst for cherries to make a cake for a friend, her stand-in incapable of accepting other people's help. Because the cherries are not fresh, the fruit seller offers a fig cut in *four*, which she refuses. Within the associations, in different declinations, an insistent repetition appears, almost "hammering" of a couple breaking up. Initially, the therapist remains emotionally occupied in this feeling of refusal (a refusal long present in therapy). The therapist's mind then, in the light of the MDAC criterion, goes back to the relational dynamics that occurred and feels the "hammering" as a knocking on his mind. The therapist thinks it necessary for the patient to be recognised in her need for sweetness (the cherries). He phantasied that the patient could accept the cherries, even though old, to mix them in a cake, giving up exhibiting the beautiful cherries on the cake. It is an offer of sweetness that the patient never had, and she therefore attacks others, refusing them and tending to slide into a narcissistic closure. The criterion helped the therapist getting out of the confusion that kept him mentally trapped.

(The second part of this article appears in *Gestalt Theory* 41,2.)

### **Summary**

The present work focuses on the transformations of the psychotherapeutic field through the relationship dynamics which occur within it.

The first part of this article starts with a brief outline of the Gestalt psychological understanding of the field concept, also in its application to the psychotherapeutic situation, followed by a brief review of the introduction of the field concept into the psychoanalytic theory formation.

After this, the first author first presents the theoretical concept underlying a new approach he has developed for observing the relationship dynamics in psychotherapy. Mirroring a formation of both psychoanalytic and Gestalt theory of the main author, this new approach is based on the combination of psychoanalytic and Gestalt psychological concepts. According to the clinical experience and insights of the author, the phenomenological and relational approach of Gestalt theory fits well with the psychoanalytic approach; on this basis, a criterion for recording the progress of therapy can be developed. This criterion is the phenomenology of the development of the qualities of the relationships of the client, as they become visible in his dream narrations and the subsequent associations in the analysis room and continue to develop during the session and the further course of therapy. The relationship dynamics in the dream narration is thus compared with those which develop in the course of the subsequent associations.

This is demonstrated and further elaborated in the second part of this article on the basis of a clinical case. The clinical example shows how the relationship dynamics develop in this sense in the individual therapy sessions and over a longer course of therapy. The associated transformations of the therapeutic field give a good indication of the progress of therapy. The main author gained such insights into the transformations of the therapeutic field and the progression of therapy, which are visible in the course of therapy, from the careful application of the criterion "MDAC of relational dynamics". In the specific case, there was also a high degree of correspondence between the results of the application of this phenomenological criterion and the empirical evidence of the symptom questionnaire, a self-report measure requested by the patient himself during the course of the therapy.

**Keywords:** Psychotherapeutic field, psychoanalysis, Gestalt psychology, relational dynamics, dream, free association, therapy progress.

## **Der Vergleich zwischen manifestem Traum und Assoziation: Ein Kriterium zur Erfassung der Entwicklung des psychotherapeutischen Feldes**

### **Zusammenfassung**

Die vorliegende Arbeit beschäftigt sich mit den Transformationen des psychotherapeutischen Feldes durch die Beziehungsdynamiken, die in ihm auftreten.

Eingangswort wird das gestaltpsychologische Verständnis des Feldkonzepts dargelegt, auch in seiner Anwendung auf die psychotherapeutische Situation, gefolgt von einem kurzen Rückblick auf die Einführung des Feldkonzepts in die psychoanalytische Theoriebildung. Im Hauptteil des Artikels stellt der Erstverfasser zuerst das theoretische Konzept vor, das einen von ihm für die Beobachtung der Beziehungsdynamik in der Psychotherapie entwickelten neuen Ansatz zugrunde liegt. Dieser Ansatz beruht - dem Werdegang des Autors entsprechend - auf der Verbindung psychoanalytischer und gestaltpsychologischer Konzepte. Der phänomenologische und relationale Ansatz der Gestalttheorie lässt sich gut mit dem psychoanalytischen Ansatz integrieren; auf dieser Grundlage lässt sich ein Kriterium für die Erfassung des Therapiefortschritts entwickeln. Dieses Kriterium ist die Phänomenologie der Entwicklung der Beziehungsqualitäten des Klienten, wie sie in dessen Traumberichten und den nachfolgenden Assoziationen dazu in der Therapie sichtbar werden und sich weiter entfalten. Die Beziehungsdynamik in der Traumerzählung wird also mit jener verglichen, die sich im Zuge der anschließenden Assoziationen entwickelt. Dies wird dann im zweiten Teil dieses Beitrags anhand eines klinischen Falls demonstriert und näher ausgeführt. Das klinische Beispiel zeigt, wie sich die Beziehungsdynamik in diesem Sinn in den einzelnen Therapiestunden und über einen längeren Therapieverlauf entwickelt. Die damit verbundenen Transformationen des therapeutischen Feldes geben einen guten Hinweis auf den Therapiefortschritt.

Solche Aufschlüsse über die im Therapieverlauf sichtbar auftretenden Transformationen des therapeutischen Feldes und über den Therapiefortschritt gewann der Hauptautor aus der sorgfältigen Anwendung des Kriteriums „Vergleich der Beziehungsdynamiken im Traumbericht und den anschließenden Assoziationen“. Im konkreten Fall zeigte sich auch eine hohe Übereinstimmung zwischen den Ergebnissen, die die Anwendung dieses phänomenologischen Kriteriums erbrachte, mit der empirischen Evidenz des Symptom-Fragebogens, dessen Einsatz begleitend zur Therapie der Klient selbst gewünscht hatte.

**Schlüsselwörter:** Psychotherapeutisches Feld, Psychoanalyse, Gestaltpsychologie, Beziehungsdynamik, Traum, freie Assoziation, Therapiefortschritt.

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