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Dreams and Delusions

[In a dream, a delusion, or a work of art] a situation taken up into a metaphor loses its transitory, painful and unstable quality, and becomes full of significance and inner validity, the moment it passes wholly into an image.

Rainer Maria Rilke

I first discovered the field of psychology, during my 17th year, in the writings of Freud and Jung. Among the many intriguing things with which these gentlemen concerned themselves, I discovered, was the world of dreams and dream interpretation. Nothing has ever been more interesting to me. What follows is a collection of ideas and clinical stories about the dreaming process and the use of dream interpretation in psychotherapy. I also take up the relationship between dreams and delusions.

THE MAN WHOSE HEAD WAS CRUSHED BY WALT DISNEY

In a psychoanalytic seminar during the years of my training, the instructor presented the idea that one should always pay close attention to the very first dream a patient presents in psychotherapy. It was his opinion that this first dream will concern the deepest theme of the treatment that is to come, often forecasting
or otherwise symbolizing the content of a process extending over many years. I found this idea interesting, and it has largely been borne out in my own clinical experiences. I shall begin with an account of one such dream, the terrifying nightmare of a young man who came to me for analysis a long time ago. This patient, 35 years old, was a teacher at a small college, and was suffering with a serious depression. After our first meeting, he sent a note describing his dream, which became a centerpiece of our work together. These were his exact words:

I watched a teenage boy walking into a large room. He had suffered a permanently damaging cerebral injury, in an earlier fall from a swing. He approached a table behind which sat an array of older men, and in the center, kind of like the chairman of the board, was Walt Disney. On the table were various small objects: pens, coffee cups, keys. The boy concentrated on these things and, psychokinetically, made them begin to whirl, levitate, and move up and down the table. It was a dazzling demonstration of paranormal powers. Walt Disney reached over the table and gently cupped the boy’s head in both his hands. This affectionate holding continued for a few moments, but then Disney began to press inward. Very slowly the pressure increased, moment by moment, and finally, with an exertion of enormous strength, the boy’s head collapsed and was horrifyingly pulverized.

As I read the text, it became evident my patient was giving me his autobiography, a story in which severe trauma played a repeating role. Strangely, he had no understanding of this. He was someone who skated along the surface of his very painful experiences, unmindful of the extremity of the things he had faced.

Dreams are autobiographical microcosms, symbolizing the subjective life of the dreamer. They are representations, to ourselves, of all that we undergo and all that we feel. Here a life is pictured involving a fall and injury, the appearance of magical powers, the finding of a loving embrace from a person of authority, and then a deadly crushing by that figure. My patient did not regard the dream as anything more than an odd puzzle of impressions and symbols, and the only remark he made was that the Disney figure might have represented the pressure he sometimes put on himself.

I told him what I thought: that it was a metaphorical account of his emotional history, of injuries that had occurred, of the lastingly disabling blow of something symbolized by the fall from a swing, and later something else, represented by the violence of Walt Disney. I did not know the specific events of this man’s life, but I was sure I was seeing the effects of his history vividly portrayed. I asked him to tell me what had hurt him so deeply. He could not respond. Finally he told me that there was a strange pressure, like a soft elastic band or a cloth, drenched in warm water, somehow wrapped around his head, pressing gently and covering his eyes. It was the pressure of sorrow he carried in his heart, an indescribable sadness that was with him at all times. This man was one of the saddest people I have ever known, and it was interesting to me that he seemed not to be aware of it as such. His experience was just one of wet, warm pressure, as if he had been crying. What was the history in this case represented by the events of this man’s dream? There had been an early fall of a kind, a violent blow that made him feel changed forever. His mother, someone deeply beloved by him, had died very suddenly because of an undiagnosed brain tumor when he was 8 years old. After long discussions with me, he was able to recall what he had felt upon learning of her death: He had been as if impaled on a pole, which some terrible force was swinging violently back and forth in the sky and slamming him into the ground again and again.

The dream included an idea that there had been a fall from a swing and a brain injury—an allusion to the impact of the death, which as a boy he had pictured as extreme violence. So the first part of the dream seemed to condense the early trauma history. I was unable to specifically decode the idea of a fall from a swing, until he remembered being swung through the sky and slammed into the earth. The paranormal powers that appear are a kind of inverse of his trauma; they create an image in which debilitating effects are undone by supernatural capabilities. As I contemplated
this young man's impressive powers in the dream, a deep sadness came over me. He can move things around with his mind, but he cannot undo the injury that precedes it. He creates miraculous effects upon the small objects lying before him on the table, but he cannot bring his mother back from the dead. A binary crystallizes here: supernatural potency versus utter helplessness, the kind of thing one sees often enough with shattering trauma.

The psychokinesis also stands in relation to the third part of the dream, wherein Walt Disney's cradles, and then pulverizes, the young man's head. These images, I saw immediately, tell a further story of something that had happened, something crushing. I told him that I thought someone had hurt him really badly, and I asked who it was. He answered that he didn't know, and wondered again if this concerned terrible demands he put on himself. Again I posed my question: "Who is it that first of all showed a protective, supportive love, but then exerted some kind of brutalizing pressure on you?"

He finally answered differently, describing a recent letter from an admired older man, someone who had been his beloved mentor but who had turned on him and on his work and teaching at his college. Years earlier, my patient, a brand-new Ph.D., had met a senior faculty member in his department, a gentleman who was an internationally recognized scholar in my patient's field of study. An intellectual love affair had developed between them, in which the scholar mirrored and nurtured the emerging talents of my patient, and my patient devoted himself to supporting the creative work and thinking of his mentor. The first years of this relationship were idyllic, and the native capabilities of the young man began to unfold into important ideas and writings. It is possible that the dream picture of paranormal abilities alludes to these evolving capacities, which, to the young man, seemed like miracles brought into being by his inspiring mentor. Again and again he found that in the presence of the older man, in dialogues about various ideas and developments in their shared field, insights would come into his mind that he could never have achieved while working alone.

As he continued to develop under this nurturing guidance, he began to publish on a number of topics, and his field began to recognize a new voice that had appeared in its midst.

Here is where the problem arose: The older man could not tolerate the success of my patient, when he had sown the seeds of that success but was now receiving no public credit. My patient saw clearly his indebtedness to his mentor, and even tried to coauthor a number of essays and books with him. But the older man did not approve of all the directions in which the work was going, and a collaborative enterprise turned out not to be possible. In the meantime, the mentoring professor's own scholarship had become paralyzed, and he had published nothing over a period of many years. But now he was witnessing the development of ideas he had participated in inspiring, in the works of the young man he had nurtured. A paranoia began to crystallize, in which the older one visualized the younger one as a kind of vampire, feeding off of his thoughts and stealing all his most important concepts. Finally, in a rage, the mentor fired off a long letter filled with ugly accusations, telling my patient he had cannibalized a treasure house of original ideas in order to satisfy a pathological need for fame. He also communicated his suspicions to important figures in his field, and this began to come back over the grapevine to my patient. The accusation of intellectual robbery, spread across the country, was experienced as a crushing personal blow, and this is certainly what is symbolized in the horrible violence with which his bad dream comes to an end.

I worked with him closely, and he eventually did reasonably well. He found it possible to partially heal the breach, basically by flooding the older man with letters and phone calls of love and gratitude. After a number of years, things improved between them, and the mentor finally expressed forgiveness and regret for how he had reacted. This softened the blow of the trauma significantly. It also helped my patient to learn that other students of his mentor had experienced the same thing: an initial period of
nurturance followed by accusations of robbery and extreme hostility when the students sought to break away and find their own pathways.

Why was it that the person in the dream administering the crushing blow was Walt Disney? I don’t know. My patient disliked Walt Disney, and regarded his lifework as plastic and artificial—although he said he did have a fondness in his heart for Scrooge McDuck.

It occurred to me that Walt Disney fed the fantasies of the young, entertaining them with all manner of stories having magical and supernatural qualities. But he was also a man exploiting the sense of enchantment among children to achieve commercial success. In this respect he was rather like the Wizard of Oz, appearing magical, until one discovers his all-too-human failings. Similarly the mentor figure was idealized, until he too revealed his own personal limitations—by attacking my patient for stealing away fame and recognition. He continued to love his mentor for many years. He also continued to feel a certain amount of pain about the events that had transpired, being haunted in particular by the “forgiveness” that had been granted—implying he was still being seen as having committed a crime.

I did not focus on this young man’s associations in determining what the dream imagery might concern. Is this not a cardinal principle of psychoanalytic dream interpretation? Here is what I think, after half a century of studying dreams and their meanings. Interpreting a dream is a matter of locating the context of experience to which it belongs. Sometimes a dreamer’s associations can assist in this, but often the associations are misleading. My patient’s thoughts went in the direction of the harsh judgments he placed on himself. This was not entirely unrelated to the dream, but strayed from the heart of the matter: He had been terribly hurt by what had happened to him. An ongoing issue for him was that he seemed to move along the edge of his own painful feelings. The dream, in contrast, presents two images involving great violence: first a fall, leading to irreversible brain damage; and second, the crushing of a person’s head. So we could say the dream stands up for the extremity of his historical experiences, correcting or compensating for his conscious attitude of unmindfulness.

THE ELECTROCUTION OF A BABY GIRL

I will now tell a story about a second patient’s initial dream in a long psychotherapy process that occurred. The account concerns a 31-year-old woman who sought help because of paralyzing feelings of being a frightened child, lost in a world of high-powered grownups. These disruptive states stood in contrast to her external situation, one of having achieved great financial success and of having earned the respect of numbers of people who followed her leadership. She was an impressive adult by every objective criterion, but her feelings were of being a terrified little girl. Here is the dream as she presented it, which occurred the night following our first meeting:

I am walking down a long corridor toward a brightly illuminated room. As I approach the doorway, I see a baby girl, not more than a year old. She is sitting on a blanket in the middle of the floor, and there is a strange metal contraption on her head. It seems to be a helmet of some sort, with coiled wires coming out of the top and connecting into a wall. A horrible realization: The baby is about to be electrocuted, and the helmet and wires are part of the apparatus that will kill her. Doomed.

The dream was one of terror. I understood it as her picture of her situation in entering into a psychotherapy relationship. She felt she was submitting herself to something that would end her life. What this awful expectation came from only became clear when she added a detail regarding the dream, some weeks later. The infant on the blanket had been naked, facing the door, with her little legs spread apart. This baby was wide open to some kind of sexual attack.

She had undergone a terrible sexual exploitation, perpetrated against her by an earlier psychotherapist. The story was this: She had known, loved, and trusted a man, who had helped her during
her late teen years with deeply buried feelings arising out of extreme neglect and abuse in her family of origin. But then, having earned her devotion over a 3-year period, he changed the terms of their tie: It now became her responsibility to keep him sexually satisfied. He presented the new arrangement with an explanation that their sexual interaction would help her crystallize her emerging identity as a mature woman. She had absolute faith in this gentleman, who she believed had saved her life, and therefore complied. For more than a year she provided oral gratification on a regular basis, and even paid for the opportunity, because of its ostensible purpose of solidifying her flowering womanhood. Finally, when she began to express doubt and confusion, he became angry and denounced her for being too childish to appreciate the incomparable gift she was receiving. She then fled the relationship, vowing never again to depend on anyone.

She reburied the child within her, along with the deep hurt to her soul. Although she knew she could never return to him, she maintained an idealized picture of their relationship that encapsulated all the good things he had given to her before the sexual interaction commenced. In the ensuing years, she completed her education and rose within her profession to a very high level of competence and responsibility. It was at this point that the injured child began to resurface, in the form of feeling like a little girl surrounded by scary grownups. She needed help in the worst way, but to seek help from a psychotherapist was to reenter the danger zone that had already nearly killed her. She was afraid that by entering into a new psychotherapy she was signing her own death warrant.

As in the case of the young man I described earlier, I told the patient what I thought the dream meant. I explained that I found the terror in her heart was understandable, in view of what had happened in the other psychotherapy. I also suggested that she might have begun to trust me already, and that this was what was causing the surge of fear. Look at what trusting an analyst before had brought into her life. She was telling me that if the same thing happened this time, it would be the end.

Working with such patients is always difficult, because trust needs to become established; but trust has become a deadly enemy. So one goes back and forth, often for a long time; eventually though things tend to work out if there is a shared understanding of the storms of fear that arise.

Why did she have this dream? Why not just say how afraid she was? The dream was her way of telling me of her fear. The original experience of having been injured by her therapist had actually never fully developed. It was dissociated after her departure from the relationship, and in the early months of our work she still idealized this man. A positive picture of his meaning in her life was indispensable to her continuing survival and progress. The fullness of his damage to her life became real to her only very slowly. But the dream registered that damage vividly right at the beginning. There is an old idea in our field that the disaster one fears in the future is actually a memory of a catastrophe that occurred long ago. This would seem to apply here, in the frightening picture of the impending murder of a baby girl.

If my patient had been in touch with how deeply hurt she was, I think there would not have been a need for a dream. Dreams capture something that is incomplete in one's conscious life. Impressions, feelings, memories, thoughts all in a swirl, not worked out, insufficiently articulated, incompletely thought through: This is the stuff of dreaming.

Freud (1900/2004) gave us the formulation that every dream fulfills a wish, or attempts to do so. How would my own formulation about the general features of dreams relate to his? Freud was hypnotized by the image of the unfulfilled wish. One could reinterpret his proposal as a special case of the more general principle that dreams are attempts to resolve subjective tensions. They express a need to come to terms with issues that are problematic in the waking life of the dreamer. There are obviously many
situations that are laden with tension other than the one involving an unfulfilled wish.

**DREAMS AND DELUSIONS**

In my youth, enamored of Freud and Jung, I had the idea that the study of dreams and their meanings might disclose profound truths about human existence. Here are my thoughts on this matter, after dwelling on the issue for a very long time.

It is human nature to dream, which means to create systems of symbols representing our ongoing subjective life. Our consciousness itself, in consequence, becomes immensely more complex than would be the case if we lived only in unsymbolized immediacy. In our evolution, humanity came to itself when dreaming began. It is a foundational manifestation of the symbolic capacity, and it is this that distinctively defines human nature. One may ask if dreams can somehow teach us the secret of human nature. The fact that dreams exist is human nature showing itself.

What is my understanding of the relationship between dreams and language? Many have thought that it is language that defines the uniqueness of human beings. Dreams and language appeared together. They are coequal manifestations of the symbolic function. I place the capacity for creative symbolization at the center of human existence, and dreams are a cardinal expression of this capacity.

Returning to the dreams discussed earlier, the first about the young man whose head was crushed, and the second about the infant’s electrocution, can it be said that these images are matters of creative symbolization? The creativity involved in those two instances is breathtaking, transforming emotional injuries into dramatic events. In one case someone’s devastation at the hands of his beloved mentor is represented as the sadistic crushing of a boy’s skull. In the other, the searing transformation of a therapist into an exploitive monster is visualized as the impending murder by electrocution of a baby girl. Dreams are quintessentially creative, which is one of the reasons I think they are central sources of culture itself. Also, dreams are not just a matter of the play of images in discrete intervals during our hours of sleeping; we are continuously dreaming, daydreaming, fantasizing, and playing, and symbolizations of subjective life are always crystallizing, interlacing, and interacting with one another.

But let us turn to a different question: What is the relationship between dreams and delusions? Are they the same thing? Is a delusion a dream from which one cannot awaken?

Engaging with these questions requires first of all a definition of the term delusion. The conventional definition is that it is a false belief someone clings to in spite of all contrary rational argument and evidence. Drawing on the principles of phenomenological contextualism, I would say a delusion is a belief, any belief, about the validity of which there can be no discussion. The evaluation that the belief is false requires a comparison between what is real to the person and what is real according to some objective, external standard—a dilemma one can avoid by staying with the idea that there can be no discussion of the validity of the so-called delusional belief.

So what then can we conclude from a comparison of dreams and delusions? A delusion is similar to a dream in that it is an enveloping experience with little or no reflective awareness. One can compare and contrast the two with regard to the contexts involved. The context of dreaming, whether in sleep or in reverie, is one in which attention becomes unfocused; thought frees itself from the constraints of logic and reason; experiences are cast into concrete perceptual images; and everything becomes more or less interchangeable with everything else. Freud offered an idea about this in his theory of the so-called primary process. I prefer not to use his terminology, but he was right to emphasize there are differences in the organization of our thoughts and experiences in different states of mind.

So-called delusions share certain features with dreams: They partake of the concretizations dreams show; their organization follows no logical or rational schema; and things become
interchangeable with each other in all kinds of complex ways. A delusion, though, is a generally stable structure, and in this respect is like a dream from which one does not awaken. Another resemblance has to do with memory: Delusions, when they recede, tend to be forgotten, almost as if they had never been there, like a dream that lingers for a while but then fades into oblivion.

Delusions form, generally speaking, in a context of very severe threats against a person's sense of existing: They belong to the psychology of annihilation states. By casting the danger to a person's sense of being in highly concrete, particular images, the delusion expresses an effort to resuscitate oneself and be protected from the possibility of obliteration. Someone in the midst of these struggles may have a dream that essentially does the same thing, and that dream may carry over into a relatively permanent structure, which we would then call a delusion. So a delusion could be understood as a long-lasting dream, elaborated in the context of personal annihilation.

The story of Anna returns to mind, whose experiences I touched upon in chapter 1. She was the young woman who had a terrible dream of being shot by her mother as she, Anna, stood before a large mirror. The result of the shooting was that the glass of the mirror disintegrated into a swirling cloud of fragments, and the patient became nothing more than a fleeting, vanishing shadow. This dream, vividly symbolizing an experience of personal annihilation, was helpful in decoding the subjective truths inhering in the patient's persecutory delusions about penetrating, killing rays attacking her from the eyes of her enemies. These rays, it will be recalled, began at a certain point of the therapy to emanate from my own eyes, producing all manner of difficult reactions from Anna and threatening the work in which she and I were engaged.

The dream and the delusion displayed an isomorphic relation to one another: In both instances, an invasive, penetrating action from without was followed by a sense of being killed and erased from being. There actually was an array of other similarly structured images Anna became afflicted by in this early period of her therapy. For example, she repeatedly became convinced that tiny insects, perhaps ticks, had somehow crawled into the canals of her ears and were voraciously eating their ways deep into her brain. Medical examinations revealed no problems in her ears or in her brain. Her drawings at that time also seemed to reflect experiences of being intruded upon and invaded. She produced dozens of images showing a person with his face pressed up against hers, in such a way that the other's long, pointed nose was piercing her face and head, intruding into the inner structure of her brain. The drawings were horrifying to look at: They seemed to depict a bizarre, brutalizing rape of my patient's head. All of these representations—in her dream, her delusion, her fearful fantasy of the invading insects, and her artwork—gave concrete form to a feeling of being usurped and annihilated by the intrusive, invalidating perceptions and attributions of others. Perhaps the worst of these experiences occurred in a psychiatric context, wherein she was relentlessly viewed as a deeply disturbed schizophrenic.

The ultimate extreme of the destruction materialized in her psychotherapy with me, when my uncomprehending reactions to her delusional preoccupations made her feel herself turning into an incomprehensible psychiatric object, a dead thing composed of neural solidities produced by the rays flowing out of my eyes. With the help of her dream, as well as of her other images, I finally saw the impact of my invalidations on her capacity to feel an ongoing sense of being. This in turn made possible a new response to her devastation and, finally, our relationship became something that began to sustain rather than destroy her.

The dream of the obliterating gunshot and the delusion of the petrifying rays from others' eyes thus were equivalents of each other, concretely depicting her failing struggle to maintain a sense of being alive in the midst of forces that, from her point of view, made such survival impossible.

In this story, a dream and its context helped to decode the metaphor present in a delusion. I shall now tell another one in which the relationship between a dream and a delusion can again
be illuminated. Is there a general principle that can be stated connecting the one to the other? Let us consider the dream and principal delusion of the famous patient, Renee, the author of *Autobiography of a Schizophrenic Girl* (Secheyaye, 1951). I will quote the young woman’s words describing her dream:

A barn, brilliantly illuminated by electricity. The walls painted white, smooth—smooth and shining. In the immensity, a needle—fine, pointed, hard, glittering in the light. The needle in the emptiness filled me with excruciating terror. Then a haystack fills up the emptiness and engulfs the needle. The haystack, small at first, swells and swells and in the center, the needle, endowed with tremendous electrical force, communicates its charge to the hay. The electrical current, the invasion by the hay, and the blinding light combine to augment the fear to a paroxysm of terror and I wake up screaming. (p. 21)

It seems to me that Renee was identified with the needle, and the engulfing hay that fills the brightly illuminated barn was a symbol of the annihilation experience she was undergoing. The surrounding passages in her book describe a progressively deepening derealization experience, in which everything around her began to appear mechanical, separated into isolated single elements. It was a breakdown of the coherence of her world and a loss of the sense that anything was real. The swelling, engulfing hay expressed a feeling of being consumed by unreality.

Why did Renee use the image of the needle? The thought that comes to mind is that the needle must have been phallic, masculine, and probably symbolized what remained of her sense of agentic selfhood. A female’s representation of herself as male also suggests an active disidentification with the feminine, a distancing from the figure of the mother, and therefore alludes implicitly to maternal disasters in her family of origin.

The electrical current inside the needle is almost certainly the sensation of pure terror in the face of the annihilation that was occurring. That is what terror feels like: an intensifying electrical current passing through one’s body, and its communication to the hay shows that her universe was becoming completely pervaded by it. This was an experience of a fall into the abyss of madness.

One could ask what would be the circumstances in a child’s life that could produce the annihilation state from which Renee was suffering. If someone feels his or her world and selfhood are being destroyed, then something has happened to produce that. Such feelings do not emerge from nothing; they come about in a human context involving an absolute catastrophe. One would need to look at her early years, at the qualities of her relationships to caregivers—although I don’t think anyone gave her much care based on looking at this dream and its probable meanings. I would expect to find a story of neglect, of rejection, of abuse, of invalidation, perhaps of exploitation. Such a state could only come about because of some truly awful things having happened.

Consider now Renee’s delusion and let us see if some further formulation of the relation between dreams and delusions emerges in our discussion. I will give a description, again in her words. It concerns a machine that became a relentless persecutor:

I constructed an electric machine to blow up the earth and everyone with it. But what was even worse, with the machine I would rob all men of their brains, thus creating robots obedient to my will alone. This was my greatest, most terrible revenge. (p. 35)

There was an all-engulfing feeling of guilt, without definition and focus. A crime had been committed, but one had no idea what it was, and the punishment for this crime was a feeling of everlasting culpability. Although the electrical device began as a weapon against others, it quickly transformed into a malign entity that attacked Renee. She described the source of her guilt, which was somehow equivalent to the machine, as the “System”: the supreme persecutor of her world. All humanity was the victim of this persecution, and those who became aware of this she referred to as “Enlightened.”

The System also began to exact punishment by ordering her to burn her hand. To obey such orders, according to her account,
would not bring an end to the persecution, however; it would only increase its power and intensify the agony of her guilt. So what about this so-called System? What exactly is it, and how can we understand the relationship between its persecutory action and her dream of the needle and the hay?

Renee’s delusion of the System is a counterpart to the engulfing hay in the dream. The hay threatened to swallow up and obliterate the electrified needle, which is a symbol of the annihilation of all sense of personal identity by the onrush of unreality that was afflicting her. The System also surrounded Renee and threatened to disrupt and erase her personal individuality, by usurping her will and inducing actions of extreme self-destructiveness. The System reminds me of Kafka’s *The Trial* (1925/1998), which is also about a strange, all-consuming guilt.

I would say Renee’s crime, like Kafka’s, was that she tried to exist as a person in her own right. There were experiences in her background that undermined her chance to develop a sense of her own selfhood and of her own world as real. Perhaps, in addition to whatever abuse she suffered, there were pressures to make her serve the needs of caregivers. Then we could understand the System as a concretization of the actual family context, including Renee’s compliant surrender to the agendas that were imposed. Within such a system, to claim a life of one’s own is indeed a crime. Often, though, this sort of thing takes place silently, unnoticed, and even the developing child whose soul is being taken does not see the violence that is occurring, that is, until suddenly there is a hostile persecutor engaging in unspeakable acts. The violence against the child thereby breaks into consciousness, in the form of strange paranoid visions like Renee’s—or in great works of art, such as Kafka’s famous novel. The delusion therefore carries the subjective truth of a young woman’s life history, and it expresses her fight to prevent that history from destroying her.

This shows again, as in my other example, how the annihilation experience in a psychotic state appears in dreams and obviously also in a patient’s so-called delusions. Sometimes they are closely similar to each other; in other instances the imagery is very different. I would not want to make too much of a distinction between these classes of experiences. For all I know, Renee’s electric machine that turns into her persecutor may have originated as a dream to start with. Dreams depict the subjective life of the dreamer, and so do delusions.

Given the nature of Renee’s struggle, what sort of psychotherapy approach can we envision? The book tells the story of the treatment, which was completely successful, and I could not improve on the process that is described. Renee’s analyst, Margarite Secheyay, made a profound commitment to her patient and worked closely and lovingly with her over a period of many years. That is what is needed in such cases.