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Cultivating Feelings through Working with Dreams

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C. G. Jung and Marie-Louise von Franz emphasized the importance of rehabilitating the feeling function (von Franz 2008). Because dreamwork is an important part of the Jungian legacy, it plays a special role in the cultivating of feeling in Jungian therapy. This paper investigates whether dreamwork can be further developed with a modern understanding of emotions in dreams and their relation to the brain and the body.

Beginning with an overview of naturalistic scientific data on dreams and emotions, the paper discusses Jung's approach to emotion and feeling in dreams and suggests a clinical method for integrating a depth psychological understanding of dreams with contemporary naturalistic research. Finally, I will turn to the modern research on emotion and feeling as discussed in relation to Jung's theory of archetypes and to von Franz's call for differentiated feelings in our civilization.

Laboratory Research on the Nature of Dreaming

The 1953 discovery of Rapid Eye Movement sleep (REM-sleep) initiated extensive laboratory research on dreams. Findings show that REM-sleep is present 80 percent of the time that humans dream. We dream for approximately two hours per night, during four to five periods in which the brain's activity is like the waking state but movement is inhibited. Experiments with animals and humans indicate that REM-sleep is of vital importance for memory and learning (Smith 1993), as well as for coping with stress (Germaine and Buysse 2003). REM-sleep enhances creativity (Lewin and Glaubmann 1975) and is "hyperassociative," which improves pattern recognition and helps us discover meaningful connections (Stickgold et al. 1999). When a person is awakened from REM-sleep, cognitive flexibility is enhanced within the first fifteen minutes (as compared with a normal waking state) (Walker, Liston, et al. 2002). Conversely, sleep deprivation creates

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emotional unbalance, behavioral problems, and disturbs creative thinking and problem solving (Hartmann 1973, 68; Greenberg and Pearlman 1993, 366ff).

Comprehensive studies by Milton Kramer et al. have shown that the emotional intensity of the dream experience is significantly increased during any single REM-period. The experienced intensity is synchronized with autonomic increases in heart rate, blood pressure, respiration, and other bodily signs that normally accompany strong emotions. Kramer also found that subjects in a sleep study felt happier and friendlier on awakening after a night spent dreaming for a normal duration of time, as compared with those who did not dream for a normal length of time. The difference was statistically significant. This overnight mood change correlated with a shift in dream content toward emotional problem solving (Kramer 1993). This tendency toward progressive problem solving corroborated findings from earlier research carried out by, among others, Rosalind Cartwright (1977). On these grounds, Kramer hypothesized that dreams have a mood regulatory function. Exceptions from this general rule were found in persons with severe depression or PTSD (Kramer 1993).

Mapping the Dreaming Brain

In the last ten to fifteen years, clinical anatomical studies of brain disturbances, neuroimagining (or brainscanning), and advanced neurochemical studies have provided us with a reliable picture of the brain's regions that are particularly active during dreaming. An area in the posterior part of the cortex generates visuospatial imagery and, to a certain degree, is involved in dream thinking[1] (Solms and Turnbull 2002, 203). The area in the cortex above the eyes[2] relates to self control and the capacity for planning (193, 197–198). This region is also important for "empathy and processing of feelings" (Eriksson 2003) and for the visual narratives of dreams (McNamara 2000, 243). The whole of the so-called emotional brain shows intense activity during dreaming, a phenomenon that I shall return to in a moment (LeDoux 1998).

Decreased activity during REM-sleep is found in parts of the prefrontal and parietal cortex, areas that process and coordinate incoming information as well as execute relevant action in the outer world. Thus, external stimulation is not reacted upon realistically, but rather incorporated into the flow of the dream narrative. Hypoactivity in these areas also explains why the dreamer is not critical of the dream's unrealistic events (Dang Vu et al. 2007, 104).

Emotion, Feeling, and the Body

Our current understanding of the emotional brain's function has been developed by Joseph LeDoux and Antonio Damasio and has been further explicated in relation to dreams by Mark Solms. Damasio distinguishes among background emotions, primary

emotions, and secondary or social emotions (2000, 51–53). Background emotions are the most fundamental. They refer to internal global states exemplified by words such as "calm," "tense," "edgy," discouraged," "enthusiastic," "down," "cheerful," and so on (51–53).These global states are induced by a network of nuclei in the brainstem that further activates all other emotional systems. This network contains "maps" of our visceral functions and body image and represents changes in the body's internal situation and sense of the body self (Solms and Turnbull 2002, 90, 106). The so-called primary emotions, such as happiness, sadness, fear, anger, surprise, disgust, and so forth, relate to more specific systems in the emotional brain. As Damasio explains, "The induction and experience of sadness, anger, fear and happiness lead to activation of several sites (in the brain) . . . but the pattern for each emotion is distinctive" (2000, 61).

According to Damasio, *experiencing* an emotion, *knowing* you feel an emotion, and *reflecting* on an emotion represent three different levels in the mind and the brain. Emotion presupposes first order neural maps representing changes in the body state.[3] Feeling an emotion is mediated by second-order structures, a *protoself* (a primitive ego) that senses the changes in the body.[4] "Reflection on feeling is yet another step up" from having a feeling (Damasio 2000, 284). Feedback loops connect the different levels, but common to the three phenomena is their body relatedness (280–284).

Comparing how different researchers use the words *emotion* and *feeling* is not easy. With many authors, feeling seems to indicate implicitly a more differentiated product than emotion or affect. Feeling is also synonymous with "sensing" or being aware of, for example, an emotion.

Later, I shall compare Damasio's insights with Jung's conceptions of emotion, affect, and feeling. This comparison, however, presents some problems with terminology, because the two authors come from traditions with different professional languages. Therefore, I will attempt to translate my understanding of Damasio into the language of analytical psychology and then compare his ideas with Jung's. Damasio's phrase "having an emotion" refers, as I understand it, to being controlled or regulated by emotion in an unconscious way. "Feeling an emotion" implies a nonverbal but conscious awareness of the emotion—in Jungian terms, perceiving the emotion with the (rational) feeling function. Knowing you are experiencing an emotion indicates some (everyday) psychologial understanding of how the felt emotion can be integrated within the context of a developed ego. The ability to perceive and act on this third level coincides with Jung's concept of differentiated feeling. The three levels in Damasio's model form a continuum from unconsciousness to consciousness (having, feeling, and knowing an emotion) and can be related to background emotions as well as to primary or secondary emotions. Damasio's notion that no matter how unconscious or conscious emotions are they are related to the body is key.

Some Statistics on Dream Cognition

A prevailing feature of dream cognition is an ability to create a storyline that surpasses the capacity of ordinary waking cognition spontaneously (Foulkes 1978, 9). Jung discovered that many dreams are structured like classical dramas in four parts: (1) "locale"—time, place, and people involved are introduced; (2) exposition—the problem of the dream is presented; (3) peripetie—a transformation, positive or negative, might take place; and (4) Lysis—the result and meaningful end of the dream occurs (1938–1939, 31). Various other narrative dream structures have been described by Bert States (1993) in his book *Dreaming and Storytelling;* for instance, the narrative structure can continuously create ramifications of tension or pleasure and draw the dreaming person into problems rather than into solutions. Also complex narrative techniques such as flashbacks, forecasting of future situations, and reflecting on the action in the dream itself have been seen (Vedfelt 2004).

One field of dream research has utilized statistical evaluation using questionnaires and laboratory reports in studies of the varieties of experiential modalities in dreams. The earliest of these studies suggested that emotions reported during dreams were infrequent and rather vague. Frederich Snyder (1970) found emotions in less than 35 percent of dreams, and McCarley and Hobson (1979) found only 12.5 percent of dreams contained emotions.

In a more recent laboratory study, Strauch and Meier found that 26 percent of dreams contained no emotions; 24 percent were accompanied by a generalized mood state; and 50 percent of dreams contained specific emotions (1996, 92). When evaluating the relative frequency of experiential modalities, emotions still had a low rating. Sensory perception accounted for 49 percent of the dream experience, thinking for 42 percent, and emotions for approximately 9 percent (79). Most of the sensory perceptions were visual images (56 percent), auditory impressions (24 percent), and bodily sensations—that is, touch, pain, and so on (20 percent).

Similar to earlier researchers, Strauch and Meier concluded that "emotions are not a consistent feature of the dream experience" (1996, 92). The thinking function, however, appears to be a prominent dream feature. *Within* the dream scenario, thoughts are generally logical and similar to those during waking cognition, whereas thinking *about* the scenario is unrealistic (Kahn and Hobson 2005). Experimental research has shown that dreams play an important role in regulating moods. During REM-sleep, which corresponds with dreaming, the emotional brain and regions devoted to perception of bodily states are intensely active. However, cognitive studies indicate that dreams, when remembered, are primarily visual narratives permeated by thinking, and that emotions do not enter the dreamer's awareness easily. These outcomes usually astonish psychotherapists who wonder if the lack of reported feelings in the

laboratory studies may be an artifact because most participants in naturalistic dream studies have little experience working with dreams. But as analysts, we sometimes tend to forget that therapy is an artificial situation—an *opus contra naturam,* as Jung put it (CW 16, ¶469). Not paying attention to emotions is the normal state.

Unconscious Intelligence and Dreams

The psychologist John Kihlstrom (1987) coined the term "cognitive unconscious" for the many meaningful processes that take place beyond consciousness and that, in recent years, have been explored intensively by cognitive science. In my book *Unconscious Intelligence* (2002), in the spirit of Jung, I integrated the positive notion of the cognitive unconscious with an understanding of a dynamic unconscious—as being goal directed and self-regulating.

According to Damasio, our whole system of emotions is a self-regulating device that mostly functions outside of our awareness. In the waking state, we automatically detect background emotions through subtle details such as body posture, speed, and contour of movements, and minimal changes in the amount and speed of eye movements. We are affected by these details and react to them, often without knowing (Damasio 2000, 52–54).

Analyses of video recordings show that we imitate other people's body language, automatically giving feedback to our feelings, so that, to a certain extent, we assume the feelings of the other. The American psychologist S. Frey and his co-authors showed that if a physician talks with a depressive patient, the physician's body language often becomes more depressed than the patient's (1980). In an overview of current research, Bargh and Chartrand (1999) estimated that 95 percent of incoming information is processed subliminally.

The phenomenon of subliminal perception was first discovered in relation to dreams. Otto Pötzl (1960/1917) demonstrated that pictures that were not consciously perceived in daytime could appear in dreams, whereas consciously perceived images appeared less frequently. Pötzl thus verified Freud's observation that significant day-residues might be hidden in dream images. Later investigations showed that subliminal impressions are best recalled in altered or relaxed states of consciousness, including creative expression, free association, visualizing, and so on (Fisher 1956, 38–40).

From this, we may hypothesize that the inability to act out emotions in the outer world during dreaming makes the dreaming state a safe place to regulate emotions. When the emotions and bodily impulses are processed in a dream, they are by and large transformed into coherent audio-visual narratives. Expressing emotions in images and storytelling can have a therapeutic effect on the mind. Even in the usually unremembered dream, this expression may be sufficient to create some of the emotional homeostasis

necessary to start a new day in a more positive emotional state than would happen when not dreaming. In my experience, however, visualizations and verbal expressions, although they may calm the mind and create meaning, may also be constructed by the ego to avoid deeper emotions. If this is the case, searching for the deeper emotions in bodily experiences related to the dream image is a way to contact those emotions. This reverses the dream process that normally goes from body to emotion to image. Training and therapeutic competence are needed in order to know when, and when not, to release this body-related emotional power and how to channel it into creative energy.

Furthermore, analysts might find it helpful to assist dreamers in acquiring a differentiated language for emotions. To achieve this, Nielsen (1991) gave dreamers a "lexicon" of twenty-two emotion words (for example, admiration, anger, fear, and joy) to rate the incidence of emotions in dreams resulting in two emotions per dream scene. Nielsen's investigation corroborates that the recall of emotions in dreams is a learned skill for the ordinary person. My primary focus will be on the relationship between emotion and bodily perceptions, however.

Jung's Approach to Emotion and Feelings

I will now compare Jung's approach to feeling and emotion with contemporary research. As Solms and Turnbull state, "Emotion . . . provides information that is intrinsically evaluative . . . by making things feel good or bad (or somewhere in between)" (2002, 91, 105). Pleasurable and unpleasurable sensations are generated in the brain stem's deep structures called the *periaqueductal gray (PAG).* In these locations, "the degrees of pleasure and unpleasure calibrate the basic qualitative range within the 'sense' of emotions," which is equivalent to an inner sensing of "the body's homeostatic physiology" (108–109). Jung defined his theoretical understanding of feeling in *Psychological Types:*

> Feeling is primarily a process . . . that imparts to the content a definite *value* in the sense of acceptance or rejection ("like" or "dislike") . . . even a mood . . . implies a valuation, not of one definite, individual content, but of the whole conscious situation. (CW 6, ¶724)

So far Jung is in agreement with what contemporary research has shown.

Then Jung continues, "When the intensity of feeling increases, it turns into an affect, i.e., a feeling-state accompanied by marked physical innervations. Feeling is distinguished from affect by the fact that it produces no perceptible physical innervations" (CW 6, ¶725). Here is a marked difference between Jung's ideas and contemporary ideas. Although modern research shows strong connections between feeling and body, Jung separates the two. (The word *emotion* is not included in Jung's "Definitions" in *Psychological Types,* but from reading "The Tavistock Lectures," it is evident that Jung equates emotion with affect (CW 18, ¶¶44–46).

In his work, Jung consistently uses the term *image* as a metaphor for primordial experience. In his autobiographical account, "Confrontation with the Unconscious,"

he states, "To the extent that I managed to translate the emotions into images—that is to say, find the images which were concealed in the emotions—I was reassured and calmed" (1983/1961, 177). Jung wrote this in relation to his work with active imagination and mandalas. What he did obviously helped him during a severe personal crisis and led to the invention of a new therapeutic theory and method. Given the circumstances of Jung's life, this achievement is impressive, but for the purpose of investigating the mysteries of the soul, we can take the process a step further. From Jung's own confessions, we know he was overwhelmed by an incessant stream of fantasies. He feared a psychotic breakdown and was left alone without psychotherapeutic help (Jung 1983/1961, 194ff). In this situation, he had an understandable need to control and calm the emotions, and he also had a certain Faust-like interest in exploiting the experiences for professional purposes. With a secure therapeutic relationship and an increased awareness of the relation between image, body, and emotion, I believe that rather than *confront* the unconscious, as Jung referred to it, we can *surrender* to layers in the psyche where self-regulating emotions are not calmed or controlled but are allowed to emerge from the body to act on consciousness and reveal their own wisdom. This idea is not meant as criticism of Jung's active imagination but rather as an expansion of it.

Jung was, as we know, an intuitive thinking type with an inferior feeling function. His tendencies may have influenced his theories as well as his practical approach to emotion and feeling. Throughout the *Collected Works,* the seminars, and his memoirs, we mostly find intellectual, cognitive interpretations of dreams with little reference to personal feelings.

One example that I have analyzed in depth in my book, *The Dimensions of Dreams* (2002, 112–114) is of a young woman whom Jung described in his famous *Visions Seminars* (1976).[5] This woman consulted him about an acute matter of the heart. She was married but had fallen in love with another man. Jung interprets the case material brilliantly in relation to his theories of archetypal images. My analysis of the dreams and visions, however, also points to the patient's dissatisfaction with Jung's interpretations of her material, which she to some extent seems to find unworldly and intellectualizing. The third year into the lectures, a courageous auditor called Jung's attention to the initial erotic problem presented by the woman, but Jung maintained that the erotic problem was a minor detail and went on to talk about her archetypal visions. In one of her dreams, she *can't find a doctor who lives by a sea.* Jung refused to interpret this dream in terms of transference (1976, 7). In a vision, the woman asks an old man, "*Why don't you free those slaves of their chains? (. . .) why do you have to read such a musty old volume,*" and the old man responds, "*The world has refused us*" (271). Later she criticizes an old man for having no life, and when she comes to a market place, the market is deserted and she is alone (421). We know that Jung was a doctor who lived by a sea. We also know that he was an elderly man who loved to study old volumes and

who could feel the world had refused him. From Henry Murray's afterword to my edition of the work, Jung seems to have had some countertransference issues in relation to this patient. Some confusing emotions in the therapeutic relationship must have never been sorted out.

My own personal guess is that if Jung had let the woman associate to the dreams in the way I suggest in the following paragraph she would have longed for Jung to take the more personal emotional aspect of her visions into consideration. Because admitting feelings toward a therapist may be difficult for a patient, Jung could have encouraged her with a transference interpretation, assuring her that having feelings of abandonment in the therapeutic relationship would be okay. Jung could have also scrutinized his own backyard in search of the emotions he communicated to her unconsciously through his body language, thus blurring the relationship, for example, (I am guessing) coldness as a defense to erotic feelings. All of this could have initiated a flow of associations focused on fundamental emotional issues in the patient's life. Because of any dream's multilayered structure, such an approach would not have taken away the collective meanings that Jung found in the dream, but rather enriched them. Also in Jung's favor, I should add that the woman—whose real name was Christina Drummond Morgan—later became a successful psychologist at the Harvard psychological clinic.

Supramodal Associations and Feeling

Freud's method of free association was developed to bring the waking consciousness closer to the unconscious dynamics of a dream. Jung, however, felt that long association chains could "lure one away from . . . the special meaning of this particular dream." Instead, he evolved a method of "circumambulation, whose center would be the dream picture" (Jung 1964/1972, 29).

Both methods have their merits and pitfalls. Free association may bring the dreamer in contact with important unconscious issues, but, on the other hand, the associations are often steered by the dreamer's habitual verbal thinking. Jung's method functions at best as a hermeneutic circle negotiating between the part and the whole. The pitfall of the circumambulation method is that premature interpretation may close the doors to the dream's emotional content.

In psychoanalysis, the patient's lack of depth in associations is defined as resistance, but if we accept that the emotional system is self-regulating, the problem might as well be the analyst's inability to understand the language of emotion. A more open attitude to the ways and experiental modalitites in which associations flow may help redefine the concept of resistance.

Based on clinical experience, I have developed a method that gives equal attention to the various experiential modalities: imagery, thinking, feeling, body sensing, and

kinesthetics. When habitual thinking begins to control the flow of associations, I don't assume that unconscious content is being repressed. Rather, the emotional intensity expresses itself in an experiential modality that is not controlled by consciousness, e.g., a movement or a facial expression. Attention to this other modality may reveal new emotions. If these emotions are explored, the intensity may move to an inner sensation, a visual image, a memory, a transference experience, and so forth. By paying attention to the "supramodal" flow, you are not lured away; you are engaging in a creative process that circumscribes the dream's whole experiential spectrum.[6]

When this method is used in conjunction with analytic understanding, emotions are consciously regulated, instead of being separated from consciousness through cathartic reactions or acting out. This method is one of "cultivating," in the sense that the patient is implicitly trained to be aware of emotions and feelings and then sense them in the body. The therapist's understanding of the bodily expression of emotions and his or her awareness of any resonating background emotion, coupled with an ability to respond empathically and nonintrusively, facilitates this process. Therapeutic work may also include drawing, role play, or other experiential methods.

Example 1: An Important Emotional Day Residue

For the purpose of brevity, I have selected two dreams with simple storylines and associations.

Anders, a thirty-year-old physician, dreams that *he is talking with his boss. While they are speaking together, a menacing biker-type comes into the room. Anders hastens to leave.* The day before having this dream, Anders met with his boss in what he describes as a meeting "completely without problems." Simultaneously, however, he shakes his head as he reports this to me. I suggest Anders visualize the conversation with the boss, while at the same time shaking his head and concentrating on his inner experience. Doing this, he remembers becoming irritated in the meeting because he felt his boss had meddled in his work. After the meeting, however, the boss was friendly and offered Anders a new task. Anders was very grateful for this, but he also remembers thinking, "He will probably meddle in that assignment, too." Anders feels his abdomen tense when he thinks of this experience and becomes angry at his boss's disregard.

Anders and I now do a role play with Anders, the boss, and the biker. Playing the biker, Anders accesses aggressive emotions and an urge to self-assertion. Then, playing the evasive Anders, he feels afraid of the aggressive biker. Playing the boss he recognizes that Anders himself has a manipulative side, often hidden behind his nice guy persona. Further dreamwork was aimed at helping Anders to integrate his self-assertive side in a balanced way and at finding a polite way to express his needs.

The point in this example is that important emotions from the day before were hidden in the dream image. Using awareness of the body as a vehicle, these emotions were eventually transformed, using Damasio's distinctions, from having a primary but socially modified emotion (such as anger) to feeling the emotion to knowing he had the emotion. In Jungian terms, the sequence is as follows: having an unconscious emotion, being aware of the emotion through the feeling function, integrating the known emotion in the context of the ego as part of a larger-scale individuation process, and finally owning the emotion as a differentiated feeling in Jung's sense of the word.

Example 2: Cultivating Feelings in Relationships

According to Solms and Turnbull, "The core of the emotion generating systems of the brain is identical to those that generate the background state of consciousness" (2002, 107). In my understanding, tuning into this background state and awakening hidden emotions in a process of supramodal association is possible. The focus in this second example is on shared background emotions and acknowledgement of feelings in relationships.

In a group sharing on the second day of a two-and-a-half-day course in personal development, Paul recounts the night's dream: *A woman gives him a thermos jug. When looking into the jug, he sees that it is broken inside.* Paul has no immediate idea of what the dream tells him, and he mentions no particular feelings or emotions. When asked about details, he says that in waking life the dream woman is actually married to a good friend of his. The jug is red and has a global shape—like the ones we use for tea at the course. I recall that the foregoing evening, I had mentioned that a figure he had drawn from another dream seemed to have a motherly function. Immediately after having made the comment, I had a slightly uneasy feeling that I could not specify. Soon my attention was drawn to other group members and the uneasiness disappeared, but was evoked again when I heard Paul's dream about the jug.

Because Paul is new to the group, I also wonder aloud if the dream might reflect some feelings about being in the course. He answers that he *did* feel uneasy about my comment the day before. He is gay and is tired of stereotyped psychoanalytic explanations about homosexual men being dominated by controlling mothers. I say this was not what I had in mind. I was actually thinking of the feminine's nurturing and caring aspect. He loosens up and, in a following one-to-one work with me, draws the red jug with oil pastel on a big sheet of paper. He visualizes the woman giving him the jug and describes a global feeling of pleasure. Expressed in a drawing, the feeling becomes a present in gift-wrapping paper. When contemplating the drawing, he affectionately remembers Christmases spent in waking life with the woman, her husband, and their children. For years, they have been a kind of "new family" for him. In acknowledging this, he senses an expansion in the chest and a feeling of quiet joy.

A separate drawing of the broken inside of the jug evokes background emotions of disappointment. These emotions are not related to his "new family," but conjure up emotion-laden memories from the age of eight. His primary family was broken apart, and he was sent to a boarding school. Before that time, he recalls feelings of joy, contentment, and closeness in his family. Reflecting on this, he recognizes that since then, a hidden fear of loss or rejection has made him apprehensive about really owning his feelings of togetherness related to the new family. He finds it uplifting and joyful to allow the feelings of love and friendship to be present.

Archetypal Qualities of Emotions

According to Damasio, "Most, if not all, emotional responses are results of a long history of evolutionary fine-tuning" (2000, 52–54). In his book, *The Psychology of Emotions* (1991), Carroll Izard renders evidence that the primary emotions in different cultures are experienced in similar ways. These emotions can be recognized in the body language of others and are instigators of specific types of intensions and actions (Izard 1991). They are archetypal in a Jungian sense.

In von Franz's paper, "C. G. Jung's Rehabilitation of the Feeling Function," she emphasizes Jung's call for ethical values in our society and paraphrases, "ethics can not exist *without* differentiated feeling . . ." (2008, 13). Jung often wrote about the obsessional powers of the archetypes. Modern brain research gives us a new perspective on this. The brain, when it receives a stimulus, often bypasses the cerebral cortex using a rapid processing pathway to the emotional brain. (LeDoux calls this the quick and dirty route because it may instigate unwanted and uncultivated behavior, as, for example, when couples quarrel.) This gives "crude, almost archetypal" information to the emotional brain, making it possible to react quickly and instinctively to the surrounding world's impacts (LeDoux 1998a, 163–166). LeDoux suggests that thinking fights an uneven battle when it tries to control emotions, because the pathways from the emotional systems to the cortex are much stronger than the other way around (1998b, 98). In order to differentiate feeling, we must learn to negotiate in the language of emotion and 'befriend' those emotions on their own premises.

The Present Cultural Context

Another key point in von Franz's paper is that Jung broke with the traditional treatment of the patient as an "impersonal object" and made therapy a "personal encounter" (von Franz 2008, 10). In this endeavour, the processing of emotion in the client, the therapist, and in the space between them is imperative.

Today, as never before, the individual is under tremendous, and even global, pressure to achieve, perform, and compete. There is no doubt that this pressure creates

culturally conditioned "diseases" such as stress, eating disorders, depression, compulsive thinking and behavior, anxiety, and heart disease. The negative side of the post-modern mentality also pushes the therapeutic community toward producing effective short-term treatments directed against ailments that seem to fit with specific diagnostic criteria. The claim to effectiveness within rationally defined frames, however, prompts a tendency to invent techniques that manipulate the unconscious and its emotional basis.

My aim with this paper is the opposite: to present a method of dialogue with the natural self-regulating dynamics of dreams in order to cultivate feelings. Jung's understanding of the self-regulating dynamics of the unconscious has been expanded through research on emotion in contemporary neuroscience. I have also shown that using body-consciousness as a tool in dreamwork can facilitate the process of developing emotions into differentiated feelings.

ENDNOTES

1. This region is in anatomical terms called the *occipito-temporo-parietal* junction.
2. This area is known as the *ventromedial prefrontal cortex.*
3. The hypothalamus, brainstem, basal forebrain, amygdala, and ventromedial prefrontal cortices
4. For example, the thalamus and cingulate cortices
5. A more complete edition of the Vision Seminars is now available from Clarie Douglas, *Visions: Notes of the Seminar Given in 1930–1934,* and published by Princeton University Press in 1997.
6. A more comprehensive background detailing this method can be found in my book *Bewusstsein* (2000a) and in some papers I've written in English (1999; 2000a; 2000b; 2004).

NOTE

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ABSTRACT

Laboratory research indicates that dreams play an important role in regulating emotions and moods. The emotional brain is heavily involved in the dream process, and contemporary neuroscience, with special reference to Joseph LeDoux and Antonio Damasio, shows a strong relationship among emotions, feelings, and the body. In contrast to this, naturalistic studies of dream cognition show that emotions and feelings play a relatively small part in dreams as reported by the ordinary dreamer. An explanation for this difference may be that during waking important emotional and often body-related impressions are perceived subliminally and processed by the emotional brain; in dreams, these impressions appear as narrative imagery permeated by thought. These findings are discussed in relation to C. G. Jung's approach

to dreams and feelings. In defining feeling, Jung explicitly separated feelings from the body, and in his practical work, he transformed emotions into imagery and thoughts, rather than the other way around. In this paper, the author suggests and exemplifies a *supramodal method* for dreamwork, which explores the links among bodily perceptions, imagery, and thought in order to make conscious the emotions and feelings hidden within the dream. Jung's theory of archetypes and a self-regulating unconscious are compatible with Damasio's theory of a self-regulating emotional brain. Finally, the author suggests that Marie-Louise von Franz's call for rehabilitation of the feeling function is acutely relevant in the postmodern world.

KEY WORDS

analytical psychology, association, body, brain, cognition, consciousness, dreams, dreamwork, emotion, feeling, C. G. Jung, self-regulation, supramodal, Marie-Louise von Franz, unconscious