Discomforting and Disquieting: Dreaming to Enhance Reflexivity

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Abstract
The paper describes the use of dreams as part of reflexivity in a qualitative study employing psychosocial research methods. The author explores a process which illuminates the “hidden from view” dynamics that were generated within the research. Through extending the use of reflexivity in the process, the study includes “unconscious experiences” (i.e. dreams) as part of the data generated and analyzed. The study aims to examine the social defense mechanisms used by occupational therapists in their work with clients in an acute care hospital department. It is a psychoanalytically informed ethnographic study that draws on the notion of a “defended subject” and includes the researcher’s “unknowing” as an object of inquiry. The paper looks specifically at how a dream, including the associations and the reflections related to it, was used to explore different meanings buried within the ethnographic data. The dreams, although disquieting and discomforting, provided a window into the research that allowed for a deeper reflexive gaze into the data collected from observations, interviews, and inquiry groups. The use of dreams can enhance research methodologies that acknowledge the unconscious dynamics that occur in the research process: for example, between the researcher and the researched. The use of real and raw (authentic) reflexivity can be enhanced by including the researcher’s unbidden thoughts and disturbing dreams as part of the exploration of the research project’s personal, social, and political context.

Introduction
In teaching students qualitative research methods, I often use the symbols of a mirror and a dusty window to describe to them what I think the difference is between reflection and reflexivity. I suggest that when a person “reflects” on their experiences, they tend to see themselves “reflected” back, as in a mirror, even if the mirror carries the strange distortions of a fairground attraction (where the imperfect mirrors show the person as tall and thin or short and fat, etc.). The difference with reflexivity, I explain, is that it requires you (the
Discomforting and Disquieting: Dreaming to Enhance Reflexivity

researcher) to catch a glimpse of yourself (as you do when looking through a dusty window) as you look at the landscape outside.

I am not always sure that my analogy is sufficient to make students confident in using reflexivity in research, but it does suggest to them that the purpose of a reflexive account is to extend the depth of thinking about the research topic and/or participants within the social, political, and personal contexts of their lives; hence the symbol of a window through which one looks to the landscape beyond.

This paper looks at the use of dreams, by the researcher, in an ethnographic study of care work. I suggest that these dreams allowed for hidden and uncomfortable experiences to emerge, extending the reflexive gaze into both the participants and the project. Dreams can be disturbing to recall or feel shameful to record—but if used in the service of research, they can offer new ways of thinking about the research relationships or the culture of an organization (see Lawrence, 2003). This use of dreams to extend reflexivity is neither solipsistic nor confessional (Pillow, 2003), but offers what Back (2007), quoted in Elliott, Ryan & Hollway (2012), said:

This focus can be uncomfortable as it exposes the petty, the unprofessional and the self-interested aspects of research practice, which are usually edited out of findings … However, the researcher’s feelings, biography and task impact on what and how s/he hears, whether this is acknowledged or not. Indeed, it is cultivating an awareness of these aspects of research that enables us “to hold accounts of social life in place without folding the person one is listening to back into oneself” (p. 435).

Reflexivity in research

Finlay (2002a, 2002b, 1998; Finlay & Gough, 2003), a well-recognized author on the use of reflexivity in research, stated: “In terms of current practice, it could be argued that reflexivity, in its myriad forms, is now the defining feature of qualitative research” (Finlay, 2002b: 211). This use of reflexivity is an attempt by the researcher to “come out” in terms of their “intersubjective elements … in an effort to enhance the trustworthiness, transparency and accountability of their research” (pp. 211–212). Finlay has cautioned the researcher that an overuse of self-narratives, self-analysis, and/or social deconstructions can lose the focus on
the research participants and thereby initial aims of the project. Pillow (2003) has similar concerns, stating that “some scholars see the proliferation of reflexivity talk as at best self-indulgent, narcissistic, and tiresome and at worst, undermining the conditions necessary for emancipatory research” (p. 176). But what constitutes the “reflexive gaze” is murky water; indeed, not only is the use to which reflexivity is put under scrutiny (for example, whether it is being used in the service of understanding the participants or social culture, or as an enactment of the researcher’s narcissism), but also the form it takes can be labeled variously from “introspection” (Finlay 2002b: 212) to “autoethnography” as a way of “creating method and text” (Humphreys, 2005: 841).

This paper does not aim to critique the different suggested typologies of reflexivity (as Finlay 2002b has so eloquently done), or to offer a summary of the discussions that have occurred on what reflexivity is and isn’t. Its aim is to raise the problem of edited or self-serving accounts by researchers, which may lack the more complex “shadow side” of what it means to be human, and the difficulty of knowing what you don’t know (i.e. what is unconscious). In reading reflexive accounts embedded within research texts, I am struck by the fact that the researcher’s narratives often position them as “good”: that is, kind, empathic, well meaning, and (frequently) politically left-leaning. What seems to be edited out are the conflicted, messy accounts that may reveal the researcher’s less generous nature, that they may have felt envious of the participant’s youth or beauty, may hold racist views on who the “deserving poor” are, and so on. At the same time, as Hollway and Jefferson (2000, 2012) have identified, as a researcher you cannot know your own unconscious motives and, like the participant, you may use “defenses” against painful truths. How, then, can you give an authentic account of yourself if it remains hidden from you?

Fabian (2001) has offered some useful insights into identifying uncomfortable material and I would like to extend his thinking into Palmer’s (1979) work, which suggests that we can take responsibility for our accounts by acknowledging that we have an unconscious part to our actions, thoughts, and ways of viewing the world. Fabian (2001), an anthropologist, wrote that when studying a group or interacting with individual participants in ethnographic work, there is a difference between “misunderstanding and not understanding” (p. 35). The former is far less toxic for a situation if you are able to acknowledge to yourself and the other that you have been clumsy or might have got something wrong. It is a chance to repair and
Lindsey Nicholls Discomforting and Disquieting: Dreaming to Enhance Reflexivity

reconcile your understanding of a person, event, or thing because you realize something is not quite right—there has been a “misunderstanding.” When there are moments of “not understanding,” you do not even realize that there is something you may have missed or mistaken. By extending this work to Palmer’s notion of a “III level of learning” (1979: 182), one that goes beyond trial and error to the possibility of learning about the unknown within (i.e. the unconscious), the researcher, academic, or citizen is able to become more sensitive to moments of misunderstanding, even anticipate them, and explore what they may mean.

As Clarke (2002) concludes, from his use of unconscious data in a study of racism in UK universities:

We can only learn from experience if we acknowledge that we may mis-interpret and make mistakes; we are not impartial and objective observers, but part of the actual research environment. If we are to formulate solutions to issues of racism and exclusion then we need to look beyond traditional sociological method and explanation which tends to point at what we already know and start thinking in terms of “how” and “why” these phenomena occur. A psycho-social research method adds another layer of interpretation addressing unconscious communication and motivation. (p. 191)

Elliott, Ryan, and Hollway (2012), in giving examples of a researcher’s unedited subjective responses to encounters with participants, have identified a way of working with this potentially shameful material through the non-judgmental psychodynamic supervision of the researcher’s accounts of their work with participants. This supportive way of anticipating and considering what may be beneath the surface¹ of data-gathering methods (interviews, groups, or supervision) reinforces the notion that “the unconscious aspects of emotional communication are as much part of the emotional work of research as the more conscious ones” (p. 436). This work goes beyond descriptions by left-leaning, well-meaning, and sincere researchers, and exposes the text to the scrutiny of professional peers. They state; Such exposure puts great demands on the researcher’s capacity for non-defensiveness in the public gaze, side lining as it does all the more “successful” work. (p. 435)

¹There is a useful book, edited by Clarke and Hoggett (2009), which describes different methodologies for “researching beneath the surface.”
As the researchers and supervisors stated, in a project that looked at the experience of first-time mothers, it was acknowledging the disjunctures between participants and researchers and how these unsettled the researcher “that helped to open out our understanding of situatedness in becoming mothers … Recording the frustrations, anxieties and pettiness which occur in fieldwork in this way, although exposing, enables us to approach Butler’s ethical position, by accepting the ‘failures’ of this encounter without needing to attach blame to the self or the other” (Elliott, Ryan, & Hollway, 2012: 438).

Countertransference in reflexivity

Since publication of the ground-breaking book *Doing Qualitative Research Differently* (Hollway & Jefferson, 2000), researchers have included the Free Associative Narrative Interview (FANI) method of examining hidden or unconscious moments that are part of the interview in social science studies (e.g. Holmes, 2013; Gemignani, 2011; Clarke, 2002). These studies were founded on “the need for a methodology that takes account of unconscious as well as conscious aspects of the subject” (Holmes, 2013: 160) and recognize that psychoanalysis can offer not only concepts but methods in qualitative research. As Holmes (2013) wrote of his study into the lived experiences of migration, which incorporated his countertransference responses to the participants as a form of reflexivity:

… a psychoanalytically informed research method can successfully access unconscious processes and is a useful addition to the repertoire of the qualitative researcher. The inner world of the subject is brought to life by this approach. There are methodological limitations, but these can, with care and honesty, be overcome. Psychology and sociology researchers have traditionally drawn on psychoanalytic concepts to deepen their understanding. The main message of this article is that psychoanalytic methods also have much to offer. (p. 170)

“Transference” and “Countertransference” are terms that come from psychoanalysis and put simply it means recognizing that between two people (researcher and participant) there are

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2 The project looked at the experience of first-time mothers in an ethnically diverse and impoverished area of London, see Hollway ‘Knowing Mothers’, 2015. The project has spawned many publications about new mothers’ identities, novel research methods used (see Urwin, 2007), and authentic ways of recording findings (see Hollway, 2009).

3 What countertransference is and how it serves to further work with the patient in analysis is currently under debate between the relational (predominantly US) and Kleinian (predominantly UK) psychoanalysts (see Bernstein, 1999).
“unconscious subjective dynamics,” and therefore it may be important for the researcher (as it is for the psychotherapist) to use their “subjectivity as an instrument of knowing” (Hollway & Jefferson, 2012: 159). Transference is the unconscious projection of past patterns of relationships (e.g. parents, teachers etc.) onto another person. Countertransference refers to the feeling state evoked on that person on ‘receiving’ those projections. In considering the role of the psychotherapist and/or the researcher, it becomes necessary for that person to try and make sense of, even put into words, this unconscious projected material. Ogden (1979), whose work I shall draw on in describing intersubjectivity and the use of reverie (including dreams), described the link between projective identification (what the patient did) and countertransference (what the therapist experienced in response). Ogden suggested that patients may have located their feelings in the analyst: (a) as a way of communicating with them, (b) as a way of protecting themselves from more punitive (self-critical) inner voices, and (c) as a “pathway for psychological change” (Ogden, 1979: 363). It is this communication into the analyst or researcher that can create countertransference feelings within the latter. If these feelings can be captured in thought—in other words, if they can be thought about (often in images, metaphors, or dreams, as Ogden (1997) describes)—the researcher can gain a deeper insight into the world of the participant. In many ways the acknowledgement of being emotionally affected by the participant was as radical in research and qualitative studies (see Hunt, 1989) as it had been in psychoanalysis. As Bernstein (1999) suggested:

The shift toward using countertransference as a central source of information about the patient’s unconscious phantasies has had the most profound implications for the analyst’s position—shifting his stance from the archaeologist-alias-sleuth to the coauthor-alias-coparticipant. The site has also changed from the mysterious analytic cabinet in which one mind operates on the other to the intersubjective space within which two subjectivities meet, creating a new intersubjective third between themselves. (p. 276)

Segal (1986) points out that, whereas the “major part of the transference” was seen as unconscious communication, countertransference refers “only to the analyst’s conscious feelings” (p. 86). This is an important distinction, as she goes on to explain: “Of course the major part of the countertransference, like the transference, is always unconscious. What we do become aware of are conscious derivatives” (p. 86). These consciously “felt” derivatives
can be bodily sensations, as described in Jervis’s (2009) need to swallow hard when interviewing army wives, or dream-like states (or reverie) such as that described by Ogden (2003), who met a patient for the first time and recalled a terrifying incident from his boyhood, when Ogden was frightened and had to act beyond his age and maturity. These accounts, from Jervis’s research and Ogden’s work as an analyst, are used to connect with and understand the experience of the other (participant or patient). I am suggesting that it is this use of countertransference as a form of reflexivity which “gives rise to a phenomenon called empathy or psychoanalytic intuition or feeling in touch. It is a guide to understanding” (Segal, 1986: 86).

**Dreaming as reflexive encounters**

Hollway and Jefferson (2012) refer to the “unconscious embrace” (p. 65) of the participants, which may include the researchers finding they have “dreams and waking fantasies” (p. 64) about the participants. Hunt (1989) described a dream she had while undertaking research into the medical setting of a psychiatric emergency clinic. The dream seemed to be prompted by an unexpected panic-like state that she experienced when observing in the field. Hunt stated that “analysis … [of the dream] greatly reduced my anxiety” (p. 64).

Having, at the age of 25 years, been introduced to the analysis of dreams by a Jungian psychoanalyst, I have been accustomed to recalling and recording my dreams. When starting my ethnographic research into the culture of care amongst occupational therapists in acute inpatient wards, it seemed a logical progression to invite participants to discuss their dreams, and to record any that I had which were related to my research study. This commitment to capturing dream events became the most difficult and potentially transformative reflexive part of the study. Although wanting to be “honest” (that is, transparent and reflexive), I found the consciousness (and self-consciousness) of being a researcher hard to overcome.

The problem for me was to find a way of exploring my experience that didn’t repeat what I already knew and avoided the temptation I frequently felt to describe my internal world in a way that might be palatable to the readers of the study. I found I would censure feelings or thoughts that may depict my intensions as unkind, selfish or—the worst for me because of my
past, a racist—and this self-censure would often take place during the periods of observation or interview as I knew I would be recording them at a later date. (Nicholls, 2009: 186)

Dreams are rich in metaphor and meaning and bring material from “beneath” one’s awareness to the surface. As I worked with them they would be

the least comfortable ways I used to approach a description and analysis of the study. They were … about the methodology … my supervisors … the participants (therapists) and … the clients I had observed, often in intimate treatment situations. Having decided to use them as part of my reflexive account I could not ignore them and they would often disturb my equanimity, but they did draw my attention to something I may have ignored or overlooked in doing the work of the data collection or in trying to give an account of the project. (Nicholls, 2009: 186)

Ogden (1997, 2004) describes his use of reverie (a waking dream-like state) to allow his unconscious to connect with the unconscious of the patient. He uses Bion’s notion of dreaming, as a phenomenon that occurs when asleep and awake: “Dream-thought is an unconscious thought generated in response to lived emotional experience and constitutes the impetus for the work of dreaming, that is, the impetus for doing unconscious psychological work with unconscious thought derived from lived emotional experience” (Ogden, 2004: 1355). Extending this idea of what a dream is, and what it may represent, Lawrence (2003) stated that it was a form of thinking and occurred within a social-cultural context that could illuminate dynamics beyond the dyad (of participant and researcher). It is this social-cultural aspect of the dream work in my research that I wish to discuss in the next section of this paper.

**Occupational therapy on the couch**

My doctoral research (Nicholls, 2010) was inspired by the seminal work of Menzies Lyth (1988) and aimed to understand the social defenses that occupational therapists employed in their inpatient hospital-based work. These unconscious mechanisms may have protected occupational therapists from the anxiety of working with vulnerable clients, but could have thwarted therapists’ fulfillment of reparative desires. I had wondered if I would be able to identify professional routines that were similar to the ones Menzies Lyth had described (which she termed social defenses); for example, the use of medical terminology that reduced
clients to conditions, the focus on time and tasks and not on the emotions of the patients for
whom the task may have been necessary, the shift system which moved nurses to different
wards at short notice etc. Menzies Lyth had suggested that these social defenses were an
ongoing interruption of a potentially deep relationship between a nurse and patient and did
not allow for the nurse to see and feel the effect of his/her care and thereby have sense of a
sense fulfillment and (in part) meet the nurse’s unconscious reparative needs.

My research followed a similar methodology to the Menzies Lyth (1988) nursing study of
observation, interview and discussion groups, and was undertaken in two clinical departments
of different countries (UK and South Africa, SA) using three linked data-gathering methods:
participant observation, free association narrative interviews (FANI, based on the work of
Hollway and Jefferson, 2000), and inquiry groups. The UK study of occupational therapists
in an acute care general hospital occurred first and was followed by a similarly matched
clinical area in South Africa.

Twenty-one occupational therapists took part in the overall study, eleven from the UK and
ten from SA; all were women, had a range of professional grades (based on clinical
expertise), and came from diverse cultural backgrounds. The happenstance4 of using two
different countries as fieldwork sites highlighted how both the personal (i.e. the therapist’s
biography) and the contextual (i.e. social-political) history affected the OT work undertaken.
The initial PhD project title went through several revisions during my research, and although
the final published title was considerably longer,5 the “strapline” for my work became “OT
on the couch.”

The doctoral study revealed that occupational therapists, although busy “doing” tasks with
clients, were emotionally sensitive to communication and able to reflect on the reciprocal
exchange (or ‘recognition’ as Benjamin, 2004, suggests) that occurred when working in
intimate care situations. The emphasis of the relational work undertaken by occupational
therapists shifted from the “psycho” to the “social”: that is, the UK data emphasized how
occupational therapists’ early family histories may have influenced their need to care for

4In truth, the happenstance was related to my moving back to work in South Africa after an eight-year period of
living and working in the UK.
5The full title is: “Putting it into words”: A psychoanalytically orientated ethnographic study of hospital based
clinical occupational therapy departments in the UK and South Africa (Nicholls, 2010).
Lindsey Nicholls Discomforting and Disquieting: Dreaming to Enhance Reflexivity

others and/or express their less conscious reparative desires. The SA part of the study highlighted the importance of understanding the social political context of occupational therapists’ and clients’ lives and how this influenced their work, consciously and unconsciously.

In reflecting on my findings, which emphasized the personal histories of therapists from the UK and the social-political histories of the SA therapists, I realized that I had been blind to the gendered, educational, and class histories of the UK therapists. My assumptions that they were the same as each other, and similar to me, were part of what Fabian (2001) would have described as my “not-understanding.” In other words, as Fabian would have described, I didn’t know that I didn’t know. This omission in my process was highlighted when I returned to South Africa to undertake a methodologically matched study there. It was on my return to a country where I had spent most of my early working life that I encountered the legacy and painfulness of the apartheid past. In many ways it was unexpected; I had naively assumed that in the time I had been away racial discrimination would have been eradicated and there would be joyful mixing of all groups from the previously divided society. But the racism I encountered and the deepening division between rich (the majority of whom were white people) and poor (the majority of whom were black people), echoed in my own day-to-day life, were such that I could no longer avoid or deny my part in the past.

I also tried to locate myself in a new workplace and amongst old friends and routines, some of whom (and which) I no longer had much in common with or enjoyed. In 2007, I was invited to speak at a Jungian international conference held in Cape Town, with my English (i.e. UK) friend (and Jungian analyst) Susanna Wright. We titled our joint presentation, “Surprise and recognition: Experiences of being a stranger in familiar places, of being at home in a strange place” and I wrote the following:

My return to South Africa (in 2005) after eight years away has been harsh. I have been confronted in my new workplace with certain junior colleagues who have viewed my thoughts and suggestions as an attempt to criticise or undermine their scholastic achievements (or worse still patronise and humiliate them), and by friends whose houses were bigger and whose gates and fences were higher, and my own sense of guilt at having more resources than many of the people whom I saw at street corners or who lived in informal settlements. At the same time I had a heightened
sense of fear (bordering on hyper-vigilance) regarding my own personal safety, something I had not been aware of prior to my departure for the UK in 1998. (Nicholls & Wright, 2009: 813)

In considering my experience of undertaking the study in SA, I felt conscious of my race, which was quite different to the situation in the UK, where I was more aware of my age in relation to the participants and patients. Although I reflected on this concern with race (as can be seen in the extract below), it remained within my conscious self-reflection journaling.

I found that I was very conscious of my race (i.e. whiteness) while doing the [SA] study. I found that in all my reports and reflections I mentioned race. I shrank from anything that implicated white people in the legacy of the past and I also felt burdened and guilty for the assumptions I had made about people’s experiences that were located in my colonial personal past. I didn’t want to consider that I could carry racist notions about the “other” and yet I found evidence of them in many of the transcriptions and observations. (Nicholls, 2010: 157)

My self-consciousness over my race and my pervading sense of (white) guilt seemed to become a block to looking further at what this meant for the overall aims of the study. In what way could my personal dynamics assist in deepening the understanding of the work undertaken by SA therapists with their clients? It seemed I had become stuck with the very concerns that Pillow (2003) had expressed and the critique that Finlay (2002b) had given:

Researchers have to negotiate the “swamp” of interminable self analysis and self disclosure. On their journey, they can all too easily fall into the mire of the infinite regress of excessive self analysis and deconstructions at the expense of focusing on the research participants and developing understanding. (Finlay, 2002b: 212)

Was I indulging in a form of narcissistic navel gazing, gaining some perverse pleasure at my ever-deepening guilt, but not connecting the research with its wider cultural and social (or professional) context? Even writing these words I feel I am again returning to the place of “self-analysis” and self-castigation, except that the methodology that I had proposed at the start of my PhD, included collecting dream events (my own and those of the participants) and my emotionally responsive supervisors, had allowed for the deeper political social resonances to emerge.
Dreams as transgressive data

Gemignani (2011), in discussing the use of countertransference in qualitative research, described the importance of “transgressive data”:

Whereas reflexivity is crucial to understanding the ways in which the researcher constructs the researched, much less has been written on the other direction of the research rapport … in the here and now of an interview or a data analysis, other information is likely to be present but less immediate or available. Transgressive data tend to appear as emotions, dreams, sensual provocations (St. Pierre, 1997) or as other forms of unusual and surprising behaviors, like boredom, demotivation, avoidance, procrastination, that transgress language to embrace “a charged engagement with alterity in the response relation” (St. Pierre, 1997: 186). Emotional reactions, CT [countertransference] digressions, and transgressive data are likely to be meaningful for the researcher both at an individual and research level. (Gemignani, 2011: 705)

The dream, ‘burying the past’ which is outlined below, became pivotal to understanding the importance of the social context and the role of the social unconscious. It occurred while I was undertaking the data analysis of the SA study when I was listening to the interviews, transcribing the words and making sense of the inquiry groups.

Every dream, as Lawrence (2003) points out, arises within a temporal and cultural context, and this dream arose when I realized I had enacted an avoidance of a painful memory by one of the participants. As part of the free associative narrative interviews (FANI) (Hollway & Jefferson, 2000), I interviewed each participant twice. These interviews were mostly one week apart and would take up to an hour each, the second one often deepening topics that had been mentioned in the first interview. These audio-recorded interviews were transcribed into their verbatim content and I read and listened to them several times while undertaking the data analysis. Having done the interviews, and believing they had gone well, I was not expecting to find such a glaring mistake, a profound lack of empathic attunement, and a blatant disregard for what was being said.

It was in reading the second interview with Nassrin, a senior therapist who was a Muslim woman of mixed race, that I realized I had cut across something she was saying,
unexpectedly changing the topic, as if to avoid the painfulness of what she was describing. Nassrin, who had attended a “white” university to undertake her occupational therapy training, had spoken about feeling marginalized in the class of predominantly white students, who seemed to know more about the creative activities, undertaken in the class, than she did and who seemed unaware of their privilege. She felt she did not have anything they would want to learn from or about. In looking through the transcripts, I was shocked to see that after this heartfelt revelation, I seemed to have changed the subject abruptly by mentioning the men in the class, who might also have felt “left out.”

The passage of dialogue below followed my asking Nassrin about her experience of being “black” in a predominantly white university class:

**Nassrin:** … if I reflect on it … there were still … subtle divisions or rifts that were very much what we had brought with us … and our experiences coming to university and where we started from were very different journeys … we were in the new democracy, and there is a level of tolerance which I did experience … I didn’t feel as if I was on the outside … but I did feel I had a lot of catching up to do … It is not so much the… that my experiences weren’t acknowledged … I saw lots of people in my class as having more opportunities than me and I think that that exposes you … and learning so much about myself and discovering hobbies and things I never knew … for lots of class mates those were things they engaged in already … I’m not saying it took away from my experience and my childhood and that not being rich but … I don’t think that was really engaged with … because I don’t think others were aware that they had missed it … and so they didn’t engage … it didn’t feel like I knew something that they were learning from⁶ … I don’t know if I am making sense and I didn’t know what I had learnt so I didn’t share it unless I was asked.

**Lindsey:** I think what you are saying is that the dominant culture in the class was one that … although not consciously … perhaps in some ways unconsciously … excluded your experiences …

**Nassrin:** [pause] Yes …

**Lindsey:** [no pause] … the other thing I remember from the class is it had a tremendous number of men …

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⁶ *my italic emphasis*
Nassrin: … I think there were four … but I think they were still very much in the minority … [laughs]

Why didn’t I keep quiet or pause after what seems to have been a sensitive understanding of the dynamics in the university class? Why did I immediately mention another group of “minority” students? What was I avoiding (or afraid she might say) that made me want to turn away from that moment? Was it because, during the time she was speaking about, I had been a lecturer on the course and I had never realized how she had felt? Perhaps it was my guilt and shame at my ignorance of her experience at this time that made me want to avoid any further knowledge.

Straker (2004) described the difficulty that liberal South African whites had in moving beyond their guilt to a real (reciprocal) engagement with the “other.” She suggested that their guilt became a form of narcissist self-punishment, which prevented any action or movement beyond this emotional perversion; it was stuck in a form of “melancholia” (p. 407). This seemed to echo my experience of guilt in the interview with Nassrin: it was I who turned away from what she said, broke the connection, and enacted the same dynamic that I had just identified.

Following my discovery of the hard evidence of the rupture in the interview with Nassrin, I had the following dream.

**Dream: Burying the past**

_I am in my house in Zimbabwe (it is not a house I have thought of for many years), where my partner and I are packing all our things to take to somewhere else. I realize that there are two black men in my neighbor’s garden who are hiding and planning to attack us and steal our things. I tell my partner I will climb over the garden wall and “deal with them.” I climb over a brick wall into the neighbor’s garden, come up behind the two men and kill both of them by hitting them on the head with a metal pipe. I put their bodies in a large green trunk and lock it up. My partner is worried_

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7 Very few male students studied occupational therapy in SA; it was unusual to have more than two men in a year group of 50 students.

8 I was born in Zimbabwe (at the time it was known as Southern Rhodesia) and grew up in a colonial context, attending white-only schools while being cared for at home by black women “nannies.”
and I say that they won't be found until after we leave and so not to worry. But I find that I feel awful. It is a Friday night and I can't forget what I have done, I keep worrying about being found out—and then I think of the work of the TRC [Truth and Reconciliation Commission, South Africa] and how the mothers wanted to know what had happened to their children and so I decide go to the police and let them know.

On the Monday I go to the police station and I ask to speak to someone about a crime. The person at the desk asks if I would like to speak to a duty sergeant or the inspector. I say the inspector. I am left to wait for a long time. The inspector is a middle-aged woman (smart and bright) with red hair. I tell her what I have done and she asks if the bodies have started to decompose. I say not—and that I couldn't bear to keep the bodies hidden, even though I knew I was leaving, as I wanted the men’s mothers to know where they were and what had happened to them.

Milan Kundera, in describing the dreams a protagonist (Tereza) had in his novel *The Unbearable Lightness of Being* (1985), wrote: “The dreams left nothing to be deciphered. The accusation they levelled at Tomas [her philandering husband] was so clear that his only reaction was to hang his head and stroke her hand without a word” (p. 59). My dream spoke clearly: it seemed to say that you can run (get away from the country or the research) but you cannot hide because what lies beneath, gets buried, will emerge. How could I acknowledge—that is, use my knowledge of—my racism, my part in the oppressive practices of the past (continued into the present), and apply this understanding to the whole research project?

My point is that, without the dream, I would not have been able to progress beyond my “mistake” with Nassrin to understand what it meant for the “whole”—for the research project and the participants. I knew I felt guilty, I knew I had withdrawn from (negated) an important disclosure on her part, but what was I so afraid of that I had turned away? I would have remained stuck with that feeling, frightened of what I had avoided, if I had not had the dream. The dream provoked me to explore the dynamics of my shame related to my white privilege from a colonial past (Zimbabwe) and an early adult life in apartheid South Africa. This painful acknowledgement led me to work by Swartz (2007) and Straker (2004), both white authors, from Zimbabwe and South Africa respectively, who have reflected on racism, whiteness, and how Straker (2004) states “one may unconsciously enact racism in a relational
context, even while consciously rejecting it…” (p407). Straker explores how an insertion into racist regimes creates negative affects that, as we attempt to escape them, “may provoke us to manifest the very racism we are attempting to avoid” (Straker, 2004: 407).

By the nature of where we were born, the counties we grew up in, and the cultural legacy of the colonial (and postcolonial) societies, we were all affected by our pasts. We are no blank screen to absorb the narratives of an “other,” but a complex layering of transference and countertransference, where the “resonance of alikeness” (Swartz, 2007: 180) is absent and in its place lies a brutal history of mistrust and hatred. Sally Swartz writes about being a white psychotherapist working in South Africa with black patients:

As a white South African, as my body enters into the analytic space, my skin immediately, and irredeemably, marks my privilege [of education, residential home and political “safety”]: … Insofar as I have benefited from my whiteness, I am a perpetrator. I have also been scarred by living in a violent system: I learnt as a child to make myself blind to misery … to dismiss as irrelevant to my everyday life-world, poverty and illness and starvation. This blindness disconnected me from half the world.

No amount of dissociation however, prevents messages arriving from the unconscious. What is banished sometimes returns; the ejected, projected, comes back from time to time to attack in fearful dreams, deep unease and, most of all, in a lack of a sense of internal safety. (p. 180)

In thinking about my dream, what I had tried to hide from myself was my racism, located at the very core of who I was, and what I feared from Nassrin was that she would accuse me of the crimes I felt I had committed: silence, ignorance, and (as Swartz says above) benefiting from my whiteness at the expense of others. Beneath this fear of retaliation (a defense in itself) was a profound mourning for what had been lost, the melancholia that Straker alludes to as a “grief without end” (2004: 408). The losses that all citizens of a country like South Africa face are those of not having had authentic relationships with each other, based on respect and care—but relationships that have been contaminated by fear and loathing.

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9 E.g. politically motivated attempts to ‘help’.

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Sally Swartz wrote of encountering her shame when working with someone who had not had the access to the “privilege” that whiteness brought:

My shame stops me from asking my patient to teach me. Gently she teaches me anyway—about township life, the ancestors, a spirituality powerful in her life, a real force against knifings, violence and never having had enough. She tells me “in my culture, we say ilah’el’nothuthu, she is a hot coal this one, but covered with ash, she looks quiet but she has a temper”. I try to hold onto my own shreds of knowledge, but I am in awe of all she is, has survived, endures. I am appeasing, acquiescent. Every time she says “in my culture” my breath stops. (Swartz, 2007: 182)

**The personal is professional**

It is beyond the scope of this paper to present all the findings and subsequent analysis of what was a prolonged doctoral study (2002-2010), but what emerged from the reflexive analysis of the dream described above was linking the personal (i.e. early psychological histories) of the participants and myself as researcher with their social-political past. Psychoanalytic theorists (e.g. Polden, 2005; Fabricius, 1991; Menzies Lyth, 1988) have suggested that people become care workers because of unmet needs in their early family histories. They are often unaware of these internal dynamics but may have always felt they wanted to work in healthcare. Polden (2005) stated: “The desire to make reparation appears to be a central preoccupation in the lives of many patients, as well as their psychotherapists” (p. 559). It was in undertaking the study in South Africa, the second fieldwork site, that I recognized that occupational therapists’ unconscious reparative drives (to care for others) came from a personal-family and *social-political* unconscious.

The socially fractured and violent nature of South African society seemed to permeate the work undertaken by the occupational therapists in SA. This placed different types of demand on their emotional response to the clients, including an ethical reflexivity (about the historical, social, and political circumstances of the client) and a need to guard themselves from being overwhelmed by this work.

Nassrin had said she didn’t realize that her family’s political protests in the past had influenced how she thought about and did her work today. She said that it wasn’t until the
interviews (FANI) that she had made the connection between her past and present. Like her, it was through the process of the research that I began to realize how my social-political past had affected what I was able to understand and do in the work I had undertaken in this project. I had been eager to include the work of South Africans in a study of the unconscious defenses used by occupational therapists, but I was unaware of how my own colonial racial past would affect those explorations. I had neglected to consider how the social unconscious, which we all have and carry, influences the choices we make, the assumptions we use, and the relationships we form.

The fieldwork drew my attention to how the multiple conscious and unconscious layers of the past affect our needs and aspirations. The South African study broadened out to include therapists’ “cultural” background: for example, their racial group, religion, home language, gender, and class. Nassrin explained how her early political education (by her family) made her aware of the wider social issues (particularly access to education) that affected people’s health. Joanne, a white Afrikaans woman, felt a strong commitment to working with impoverished (black) patients, although she had seemingly never considered that this need might have been in response to a deeply felt cultural guilt and shame at the past.

These “hidden” motives were mostly unspoken, and seemed to be part of the social unconscious (Brown, 2001; Dalal, 2001) of the occupational therapists working in SA. Uncovering (and thinking about) the layers of conscious and unconscious “social” material was necessary to understand the complex relational field of care work, where patients and therapists came from very different backgrounds. As Hopper (2001) said, in discussing the dual focus required in group and individual psychoanalysis:

An analyst who is unaware of the effects of social facts and social forces cannot be sensitive to the unconscious re-creation of them within the therapeutic situation. He will not be able to provide a space for patients to imagine how their identities have been formed at particular historical and political junctures, and how this continues to affect them throughout their lives. (pp. 9–10)

It was in considering these complex layered relationships, containing conscious motivations and unconscious social defenses, that care work within both contexts could be thought about and, in some measure, understood.
Reflexivity revisited

This paper began by sketching the terrain of reflexivity in research and exploring the difficulties and rewards encountered when incorporating unconscious elements (e.g. dreams and countertransference responses) as sources of information for interrogation and analysis. As Finlay (2002a) stated, “Carrying out reflexive analysis is always problematic, as such understanding is difficult to unfold—our experience is invariably complex, ambiguous, ambivalent” (p. 541). By discussing a dream which became a crucial turning point in the reflexive analysis within the study, I hope to support the acknowledgment and collection of glimpses into the unconscious as legitimate sources of evidence (data) in research. Gemignani (2011) encourages qualitative researchers to “embrace their vulnerability,” arguing that “to use their emotional reactions as sources of knowledge about the other, the self, and the rapport between them renders the inquiry process more transparent, communicable, sophisticated, and enjoyable” (p.705).

I am not sure that the reader will, or that I have, “enjoyed” this process. Research can change the researcher because of what they come to know about the subject and themselves. I wish I had not turned away from Nassrin; I wonder what she would have said if I had kept quiet for long enough to hear her. This paper has been an attempt to repair that tear in the fabric of our relationship and to place some of this learning in a wider public domain.

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**Lindsey Nicholls** Discomforting and Disquieting: Dreaming to Enhance Reflexivity

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**References**


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