TOPIC B

Dreaming

DREAM THEORY: KEY WORDS

- How many of the following words can you use to explain Freud's dream theory?

Freud	manifest content
latent content	Displacement
secondary elaboration	condensation
unconscious mind	dreamwork
repressed	conscious mind
wishes	Desires
dreams	Dream analysis
Symbols in dreams	Undesirable thoughts

DREAM THEORY: LEARNING THE KEY TERMS

Sigmund Freud (came up with dream theory)

- He thought that problems were repressed and put into the unconscious mind so that we didn't have to deal with it (unconscious = unaware).

- Dreams give clues to these repressed feelings.

- Manifest content – story the dreamer tells about what they have dreamt.

- Latent content – underlying meaning of the dream – what the dream really means by analysing the symbols in the dream.

DREAMWORK:

- Freud said dreamwork was what the mind is doing to keep the unconscious feelings, thoughts and desires hidden – to protect the individual from undesirable thoughts.
- It does this in 3 ways when we dream:
  - Condensation – many ideas appearing as one symbol in a dream.
  - Displacement – something unimportant that seems to be important, to shift attention away from what is really important.
  - Secondary elaboration – adding bits to a dream to make it make sense of it. This makes it hard to analyse.

DREAM THEORY: KEY WORDS

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PSYCHOANALYSIS

- The talking cure – a psychoanalyst is trained to help people with mental illnesses.

- One way is to analyse the symbols in dreams to reveal the unconscious thoughts and desires so they can be dealt with.

- This is called Dream analysis – uncovering unconscious thoughts by interpreting symbols in our dreams.
  - Latent content found by analysing the symbols in the manifest content. BUT … you need to be trained to do this.

OTHER WAYS A PSYCHOANALYST CAN DISCOVER REPRESSED WISHES AND DESIRES.

- <u>Slips of the tongue</u> – someone uses the wrong word for something. These words come straight from the unconscious

- <u>Free association</u> – someone is asked to say their thoughts out loud. What they say can be analysed by the psychoanalyst

EVALUATING FREUD'S DREAM THEORY
(LEARN TWO OF EACH)

- Provides a way of gathering lots of in depth (qualitative) data about individuals (talking and recording what they say).
- Allows the psychoanalyst to really know their patients which helps with treatment such as helping someone overcome a phobia.
- Analysing dreams is a unique way of investigating mental health.

- His research might not be generalisable as his research was done over a hundred years ago mainly on well-off people. His findings might not apply to all people.
- His theory cannot be measured scientifically.
- Interpreting dreams is subjective. How do we know Freud's interpretations were correct (as there is no way of measuring dreams objectively)?

| Strengths of theory | Weaknesses of his theory |

HOW THE BRAIN SENDS SIGNALS: KEY WORDS

- Match the correct term with the correct meaning:

neuron	The gap between the dendrites of one neuron and the next
Synaptic gap	The electrical signal that goes from the cell body to the terminal buttons and releases a neurotransmitter.
Neurotransmitter	The 'cable' that goes from the cell body to the terminal buttons (which hold the neurotransmitter)
'lock' and 'key'	When a neurotransmitter crosses the synaptic gap and is taken up by the dendrites of another neuron – so the message continues.
Impulse	A specialist cell that sends information by electrical and chemical means.
Synaptic transmission	Receptors at a dendrite are of a certain shape (lock)so they can only work when the right neurotransmitter (Key) crosses the synaptic gap.
Axon	A chemical at the terminal button of a neuron. When released it goes across the synaptic gap.

HOW THE BRAIN SENDS SIGNALS
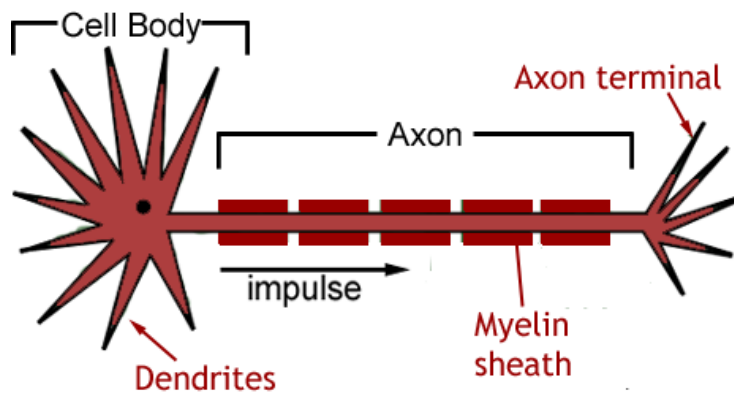
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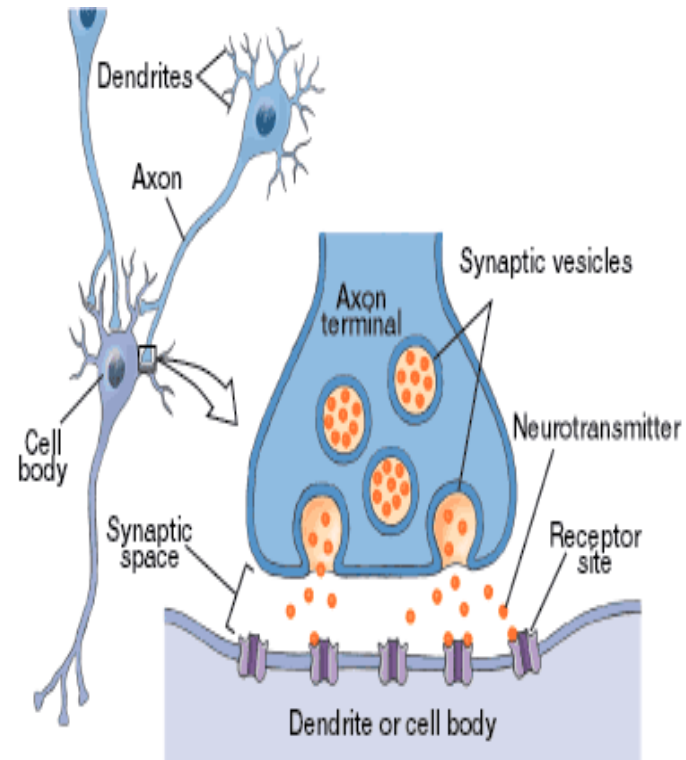
Synaptic transmission

A BIOLOGICAL THEORY OF DREAMING - HOBSON AND McCARLEY (1977)

Known as the Activation-synthesis model

- How it works:

1. There are several stages to sleep – measured objectively by an EEG machine (measures brain activity).

2. Dreaming takes place in REM (rapid eye movement) sleep – about 5 times each night.

3. During REM sleep there is a Sensory blockade – no incoming info from our senses.

4. During REM sleep we have Movement inhibition – our body is paralysed and we can't move.

5. During REM sleep our Neurons are activated because of random impulses which trigger random thoughts and experiences from our memory. (activation)

6. Our brain tries to make sense of the random activation of neurons by putting them together to make a story which we call the dream. (synthesis)

EVALUATING THE ACTIVATION-SYNTHESIS THEORY OF DREAMING (LEARN TWO OF EACH)

- REM can be observed by researchers in sleep labs and people report dreaming when woken up in REM sleep.
- REM brain waves can be **measured objectively** by an EEG machine.
- If the area to do with balance is randomly activated during REM sleep the sleeper often reports dreaming of falling.

- Dreams may have meaning but this theory says they are just randomly activated thoughts. Many people say they dream about events from the previous day – which suggest dreaming is NOT that random.
- Studies have shown that many dreams make logical sense but this theory says they are just random and shouldn't make logical sense.
- Some people say they can control the content of their dreams – Lucid Dreaming. This suggests they are not random.
- Young children have few dreams but the normal amount of REM sleep. This suggests dreams are not simply linked to REM sleep.

| Strengths of theory | Weaknesses of his theory |

COMPARING DREAM THEORIES
YOU CAN COMPARE THEM IN DIFFERENT WAYS

Methods used to collect data

Freud – theory based on:	Hobson and McCarley – theory based on:
Uses case studies – e.g. Little Hans	EEG tests on many patients in sleep labs (detecting electrical activity in the brain).
Dream analysis – based on dreams reported by the dreamer.	Animal experiments to see which parts of the brain are active in REM sleep (studies on cats)
Free association	
Slips of the tongue	
Very Subjective – requires the researcher to interpret the information.	Objective – requires very little interpretation of the results by the researcher

COMPARING DREAM THEORIES
YOU CAN COMPARE THEM IN DIFFERENT WAYS

The nature – nurture debate

Nature	Nurture
Dreaming is to do with our biology	Dreaming is to do with our environment.
Genes, hormones and brain structure	Upbringing and influence might affect how we dream and what we dream about.
Hobson and McCarley's theory is about nature – to do with our neurones and REM sleep	Hobson and McCarley's theory is part nurture because the random thoughts come from what we have experienced and stored in our memories.
Freud's theory is to do with nature – the unconscious and conscious parts of the mind.	Freud's theory is also about nurture because our unconscious desires come from our experiences.
So both theories are both nature and nurture. When answering a question on this make sure you use the key terms – highlighted above and refer to both theories.	

COMPARING DREAM THEORIES
YOU CAN COMPARE THEM IN DIFFERENT WAYS

Overall comparison

Issue	Freud's theory	Hobson and McCarley's theory
Objectivity	None at all! The dreams need interpreting by the researcher.	Very. Uses scientific equipment to measure REM sleep and controlled experiments in sleep labs.
Credibility (how believable is it?)	Hard to believe because it can't be shown through scientific methods.	Easy to believe because there is scientific evidence to back it up.
Research methods	Case studies and dream analysis	Scanning equipment and experiments
Dreams are meaningful	Are meaningful and gives us clues to our unconscious desires.	Have no meaning as they are randomly triggered during REM sleep.
Nature – nurture	Both nature and nurture – unconscious mind is nature and its contents is nurture.	Nature – dreaming is a natural part of the way the brain and body work.

Remember, when asked to compare you must comment on both. Use comparing connectives such as 'but', 'whereas', 'on the other hand' ….

RESEARCH METHOD - CASE STUDIES

Case Study = Detailed, in depth study on one person /small group.

Often uses many research methods (questionnaires, observations, interviews, experiments etc…) to gather as much in depth information about that person or small group as possible.

- Case Studies have an aim– what the study is about. (NO Hypothesis)

- Case Studies can collect both qualitative and quantitative data.
  - Qualitative data: data involving what the person thinks or feels such as stories or attitudes.
  - Quantitative data: data involving numbers and statistics such as percentages and test scores.

DESIGNING CASE STUDIES

- **Aim** – what do you want to find out? E.g the aim of this case study is to look at the content of one person's dreams over a one month period.
- Decide who you will study.
  - They must give **informed consent** (know what the aim of the study is).
  - You must keep the participants name secret because you must keep all data **confidential**. You could give them a false name.
  - You must explain that the participant does not have to tell you everything they have dreamt about because they have the right to **privacy**.
  - You must tell the participant that they can **withdraw** from the case study at any time.
- Decide on how you will collect the data. Such as:
  - Get the participant to keep a **dream diary**
  - A **questionnaire** for the participants family (if necessary)
  - **Interviews** on a weekly basis …
    - Etc… and other methods which seem relevant.

EVALUATING CASE STUDIES
(LEARN TWO OF EACH)

- It collects valid (real-life) data.

- Collects a great amount of quantitative and qualitative detail about one particular person or small group.

- Good for treating individuals because the researcher finds out so much about them.

- Not generalisable (can't apply the findings to other people).

- Not reliable (everybody is different) so can't really be repeated.

- Subjective (much of the data requires the researcher to interpret it.

- Researcher bias. The researcher might get too involved in what they are studying and only interpret the information in a way which confirms their aim.

Strengths of case studies	Weaknesses of case studies

FREUD'S CASE STUDY OF LITTLE HANS – 1909

- Little Hans's (LH) parents supported Freud's ideas and sent him regular letters describing their son's development. Freud only met L H twice!

- LH had a phobia of horses – afraid to go out of the house. Freud analysed what LH said and his dreams to find out LH's wishes and desires. Freud wanted to cure LH of his phobia.

  - E.g. of an early dream – LH woke up crying as he thought his mother had gone and he had no mummy.

    - Freud – an anxiety dream and said it was linked to the Oedipus complex (which boys around 5 go through)– attracted to mother, jealous of father, guilty for feeling that way and so begins to relate more with father. All these emotions are in the unconscious – LH was not aware of them but Freud interpreted the dream to show that LH desired his mother and was anxious that she might have gone.

- Giraffe dream: big giraffe and a crumpled giraffe in a room

  - The big giraffe shouted out because LH took the crumpled one away from it.

    - Freud thought the big giraffe was LH's father and the crumpled giraffe his mother.

    - Freud thought the dream showed that LH wanted to take his mother away from his father. This was part of LH going through the Oedipus Complex.

- Freud thought Hans's phobia of horses was really because he feared his father.

EVALUATING DREAM ANALYSIS
(LEARN TWO OF EACH)

- Good for accessing hard to reach information in the unconscious – helps to reveal unconscious desires and wishes and fears.

- Accepted by the client. People often agree with the interpretation and this helps them to be cured.

- The dreams are described by the client themselves and then interpreted by the analyst. This means the client offers information which they think is important. This might help with any cure because they are focusing on the problem.

- Ethical problems
  - False memories might be created because of a wrong interpretation.
  - might create stress and anxiety in the client if traumatic events are remembered.

- Interpretation
  - Interpreting dreams is highly subjective and one analyst might interpret a dream differently to another analyst.

Strengths of dream analysis

Weaknesses of dream analysis

THE JOB OF A PSYCHOANALYST

- **Work with people with mental health issues**:
    - Obsessive compulsive disorder, phobias, anxiety …
- **Listens and observes the client to try and help them with their problems**. Helps the client to understand their emotions and therefore deal with them.
- **Trained to use different types of psychotherapy**:
    - Cognitive behaviour therapy, counselling, hypnotherapy …
- **Meets with the client up to 4 times per week**. Very time consuming (1 hr per session) and expensive (about £50 per session)
- **Dream analysis just one way of getting information from the client's unconscious** – in a survey of 79 psychoanalysts dream analysis only used 28% of the time.

BECOMING A PSYCHOANALYST

- Usually work for themselves – about 300 in the UK.

- Need skills such as empathy, good listening skills, non-judgemental and patience.

- Undertake training approved by the International Psychoanalytical Association.

- 4 year course, part time, and must undergo psychoanalysis themselves.

PSYCHOLOGICAL SLEEP DISORDERS

Four categories of sleep disorder:

- Insomnia – trouble sleeping or staying asleep.

- Hypersomnia – feel sleepy all the time.

- Circadian rhythm disorder – problems with body clock (circadian '24 hr' rhythm), or sleep-wake cycle.

- Parasomnia – Disorders whilst asleep, such as nightmares, sleep walking and night terrors.

The importance of REM sleep:
- Without REM sleep for a long period (two weeks +) people start to get memory loss, disoriented, lose coordination, have illusions and suffer paranoia. Rats deprived of sleep have died! REM sleep seems to be vital for our well being.

SLEEP DISORDER CLINICS

Purpose:

- To help diagnose a sleep disorder – observation (spending a night at the clinic), EEG tests, interviews about lifestyle etc…
- To help people get over a sleep disorder.

Treatments:

- 4 methods (can use more than one of these at a time)
  - Medication: to help someone get to sleep or to help regulate sleeping patters (e.g. narcoleptics). Doesn't cure the problem only treats the symptoms.
  - Cognitive behavioural therapy – problems often related to anxiety, and CBT addresses unhelpful thinking. Makes people think more positively which reduces anxiety so they can sleep.
  - Acupuncture – form of Chinese medicine which involves tiny needles. Can regulate body clock.
  - Hypnotherapy – involves relaxing completely to uncover problems. People listen to advice more when they are relaxed. This can help people get over insomnia or night terrors.

ETHICS

- The ethical guidelines are advice put forward by the British Psychological Society to protect participants.

- <u>Informed consent</u> – Participants need to know what they have to do. They can then decide properly whether they want to be part of the experiment.

- <u>Right to withdraw</u> – Participants should not feel they have to carry on if they do not want to.

- <u>Privacy</u> – Making sure the identity of the individual is kept secret.

- <u>Confidentiality</u> – Information gained about people must not be shared with others without permission.

- <u>Competence</u> – Psychologists must be properly qualified and capable of carrying out the research.