

Dreaming revision notes

	DREAMING
THEORIES	<p>FREUD – unconscious and conscious mind – unconscious more powerful. (90% of our thinking). Through dream analysis, unconscious thoughts could be discovered. Repressed desires are pushed in to the unconscious mind.</p> <p>Manifest – what dreamer says; latent – underlying meaning; condensation – many thoughts/symbols are represented as one; displacement – something seems unimportant is important; secondary elaboration – dreamer builds a story by adding info in.</p> <p>Symbols – can mean different to people – all have their own underlying meaning.</p> <p>Analysing dreams – psychoanalysis = slip of the tongue (use the wrong word for something); free association (express a free flow of consciousness) ; dream analysis (analyse dreams and symbols).</p> <p>Evaluating Freud’s theory – strengths = uses unique methods; gathers in depth qualitative data about real life; supports both nature and nurture debate.</p> <p>Weaknesses = subjective sample (bias) not generalisable; concepts unmeasurable; interpretation is bias; alternative theory (biological) ; lacks credibility.</p> <p>BIOLOGICAL - HOW THE BRAIN SENDS SIGNALS – neuron (cell in nervous system that sends information in the body). Brain and the spinal column make up the central nervous system. A neuron has 4 features: cell body; axon; terminal buttons; dendrites.</p> <p>Step 1 – electrical impulse triggered from cell in neuron and travels down the axon. Step 2 – at the end of the axon releases a chemical (neurotransmitter which is found in terminal buttons). Step 3 – neurotransmitter has to cross a gap, synaptic gap, to get to the dendrites of the next neuron to continue. Step 4 – neurotransmitter released goes into the gap. Step 5 – if the receptors are suitable to receive the neurotransmitter that is in the gap, then the chemical gets picked up. Step 6 – neurotransmitter sets off an electrical signal and then drops it back into the synaptic gap. Step 7 – the change in chemical balance triggers an electrical impulse from the cell body which travels down to the end of the axon = synaptic transmission.</p> <p>McCARLEY AND HOBSON – ACTIVATION SYNTHESIS – dreams are random messages and are being interpreted to make a story. Active part of the brain – REM sleep (rapid eye movement). Sleep goes through 5 cycles of 4 stages – after each cycle there is REM sleep. This is measured through an EEG (electroencephalograph). During REM sleep incoming info is blocked – sensory blockade. Physical movements are also blocked which is known as movement inhibition. During REM sleep the neurons in the brain are activated – random activation. The brain tries to make sense of the ‘nonsense’ so it synthesises to make in to a story.</p> <p>Evaluating activation-synthesis – strengths = sleep clinics have shown REM and active brain patterns; still being developed now; brain activity likely to be genetic and evolved; studies were carried out on cats to test areas of the brain; objective; credible; uses scientific equipment; supports nature side of debate. Weaknesses – dreams do have meaning; lucid dreaming occurs when people know they are dreaming; young children have few dreams yet have normal amount of REM sleep.</p>
CASE STUDIES	<p>Case study – in depth study that gathers lots of qualitative information about one person. (questionnaires; experiments; case histories; interviews...) A case study will have an aim. Case studies can have both qualitative and quantitative data.</p> <p>Weakness of case studies – lacks generalizability; is more subjective (lacks objective); lacks reliability.</p> <p>Designing case studies – aim; time period; how could it be made generalizable? More reliable? Avoid subjectivity?</p> <p>Deal with privacy (name must not be recorded) and confidentiality (information gained must not be shared with others without permission).</p>

<p>FREUD'S CASE STUDY OF LITTLE HANS</p>	<p>Background – Hans' parents were supporters of Freud's ideas. They logged their son's development through letters (Hans was only 3 yrs old). Freud only met him once/twice.</p> <p>Horse phobia – main problem was his phobia of horses (he was afraid to go out of the house). Freud analysed his dreams.</p> <p>One dream = Hans woke up crying and thought that his mother had left him. Freud said this was an anxiety dream and links in with his theory of the Oedipus Complex (conflicting emotions and showing desires for his mother). Freud thought Hans was in the phallic stage (3ys-5yrs) sexual interest is transferred on to the mother.</p> <p>Giraffe dream = big giraffe (dad) little crumpled giraffe (mother) and Hans took the crumpled one away. Freud said the big giraffe was a symbol for a penis. The small crumpled giraffe was his mother. Freud interpreted it as Hans wanting to take his mother away from his father –this was again evidence for the Oedipus complex.</p> <p>Evaluating dream analysis – strengths = can access hard to reach information; usually accepted by the client; comes from the client directly. Weaknesses = ethical issues (distressing –false memory –e.g client could remember childhood incest although it didn't; actually occur), interpretation (subjective)</p>
<p>JOB OF A PSYCHOANALYST</p>	<p>Works with mental health issues – obsessive compulsive disorders (phobias/anxiety); uses cognitive behavioural therapy (CBT), counselling and hypnotherapy to treat.</p> <p>What do they do? – listens and observes; work with client; gather information; make the unconscious conscious</p> <p>Each session for the client lasts an hr – 4 times a week. During dream analysis, client describes and talks about their dream –may use free association; uses manifest content to draw out symbols. Will use transference = client will transfer feelings/emotions on to the analyst. Countertransference = analyst in turn will transfer their own feelings back onto the client.</p> <p>Survey in 1995 showed the use of dream analysis within private practices of 228 analysts found that 17% never use dream analysis, 57% use it sometimes and 17% moderately often.</p>
<p>BECOMING A PSYCHOANALYST</p>	<p>Skills required: good listener; able to work with emotional problems; have patience; able to be non-judgemental.</p> <p>A degree is needed or equivalent.</p> <p>Training lasts 4 years; must undergo psychoanalysis themselves for 4/5 50 minute sessions a week; attend seminars; final part is psychoanalysis of 2 patients whilst being supervised by a qualified psychoanalyst; must have continuing professional development (CPD).</p>
<p>SLEEP DISORDERS</p>	<p>Types of sleep disorders - insomnia (can't get to sleep or stay asleep. Can be treated with prescribed drugs or CBT); hypersomnia (feel sleepy at all times of the day); circadian rhythm disorders (body clock disturbed –affects those who have shift patterns for a job); parasomnias (nightmares, sleep-walking, sleep terrors).</p>
<p>SLEEP CLINICS</p>	<p>Treatments at a sleep disorder clinic – snoring the most common type of disorder dealt with at a clinic.</p> <p>Blood testing can help diagnose the problem. Many sleep clinics are run privately and offer a variety of services and take a holistic approach (deal with people of all ages and take the person's lifestyle into account - look at the whole person).</p> <p>Treatments include: medication (prescribed drugs to help regulate sleep patterns); CBT (aims to change negative thoughts to positive); acupuncture (form of Chinese medicine that involves inserting needles at certain related points on the body – this can be used to help the body clock to readjust when the sleep cycle is out of step); hypnotherapy (involves getting the client to relax through a therapist so that they can help uncover any problems the client has).</p>