The Relation Between the CBT and Characters in the Dream Content of the Depressed People

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Abstract:
The study on “The Relation between the CBT and Characters in the Dream Content of the Depressed People” investigates the influence of Cognitive Behaviour Therapy (CBT) on the characters present in the dream content of individuals diagnosed with depression, examining variations across gender and educational levels. Employing a mixed-methods approach, this research integrates both quantitative and qualitative analyses. Purposive and random sampling techniques were utilized, involving 120 participants diagnosed with depression. Participants were divided equally into experimental (n=60) and control (n=60) groups, with both male and female representation. The findings indicate a significant relationship between CBT and a reduction in the presence of unrecognizable persons and images in the dreams of participants. Furthermore, the study revealed no significant differences in the impact of CBT on dream characters based on gender or educational level within the experimental group. Post-CBT, participants experienced a decrease in the number of dream characters, with enhanced clarity in recognizing individuals and images. Additionally, there was a notable reduction in dreams involving themes of death, alongside an absence of suicidal thoughts.

Keywords: Cognitive Behaviour Therapy, Dream Content, Depression, Gender Differences, Educational Levels, Mixed Methods, Psychological Intervention, Dream Analysis.

INTRODUCTION:
The Hall and Van de Castle system consists of several general categories and character in dreams is one among them. The characters category consists of people, mythical figures, and animals. These three general types of characters can appear as individuals or groups and they generally symbolize the underlying forces of our lives, especially our inner life emotions, feelings, and perceptions. However, they can also represent subjects, concepts, ideas, or structures of the psyche and mind. The character's outward appearance is like a mask covering something deeper. These three general types of characters appear as male/female/indefinite/both genders and also as individuals or groups. The dreamers see immediate family members/relatives/friends/acquaintances/strangers/spiritual Guru. They also dream of fictional/dramatic/imaginary/supernatural characters such as cartoon characters/mythical figures/TV serial actors and characters which could not be identified.

Classes of Characters:
a) Number: refers to whether a single individual or a group of characters is involved.
b) Gender: refers to male, female, joint gender group, indefinite.
c) **Identity:** refers to i) immediate family members of the dreamer, ii) relative of the dreamer, iii) known character, iv) prominent persons, v) occupational identification, vi) ethnic, nationality, and regional identifications, vii) strangers, viii) uncertain identity.

d) **Age:** refers to adult, teenager, child and baby.

**Implications of dreams:** Dreaming about a family member is connected to our identity, as family represents our attitudes, values, and emotional responses. Dreaming about our mother and father can convey our maternal and authoritative instincts. However, it also depends on our dream circumstances. Dreaming about the siblings signals a change in our behaviour. It signifies that one needs to improve the relations with the siblings, or it might lead to worse after-effects. These descriptions indicate that faulty relations with siblings imply losses and sorrows in life. We can share great joys and failures to construct a happy bond between ourselves. These dreams suggest making timely changes in our behaviour to experience happiness.

**EXPERIMENTAL GROUP**

**Table 1: Results of paired samples t-test for the difference between the pre and post-intervention with regard to the characters in the dream content**

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Pre-test</th>
<th>Post-test</th>
<th>N</th>
<th>95% CI of difference</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
<td>SD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CBT</td>
<td>12.77</td>
<td>11.01</td>
<td>8.05</td>
<td>7.35</td>
<td>60</td>
<td>3.03 to 6.39</td>
</tr>
</tbody>
</table>

*M=mean; SD=Standard deviation; N=Number of participants; t=ratio of the difference between the means of two sample sets; P=Significance value; Significant at 0.05 level*

A paired sample t-test was used to understand the influence of CBT intervention on the dream-distorted characters in depressed participants. Results indicated a significant reduction in unrecognizable persons/images in the dreams among the participants from the pre-test (M = 12.77, SD = 11.01) to the post-test (M = 8.05, SD = 7.35), t (59) = 5.62, p<.000. The mean decrease in the ambiguous characters of the dream scores was 4.72, with a 95% confidence interval ranging from 3.03 to 6.39. As indicated in the above table, the reduction in inaccurate dream character scores may be attributed to the CBT intervention, suggesting a relationship between CBT and the reduction in unrecognizable persons/images in the dreams among the participants.
Hypothesis: “There will be a significant effect on the characters in the dreams of the experimental group after the therapy”. This hypothesis is confirmed as there was a positive relation between the CBT and characters in the dream content. When depressed, these participants saw more characters - some of whom they could recognise and some they could not identify. They also saw the family members in their dreams and dreamt of depressive themes such as loss, illness and death, and had suicidal thoughts in their dreams. However with a reduction in depression after CBT, the participants saw fewer characters, and they could recognize the persons/images more clearly and they had fewer dreams of death and no more suicidal thoughts.

EXPERIMENTAL GROUP and CONTROL GROUP

Table 2: A two-way Repeated measures ANOVA results for the difference between the experimental group and the control group concerning the characters in the dreams

<table>
<thead>
<tr>
<th>Characters in dreams</th>
<th>CBT (n=60)</th>
<th>Control (n=60)</th>
<th>ANOVA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
</tr>
<tr>
<td>Time 1</td>
<td>12.76</td>
<td>11.01</td>
<td>8.68</td>
</tr>
<tr>
<td>Time 2</td>
<td>8.05</td>
<td>7.35</td>
<td>8.41</td>
</tr>
<tr>
<td></td>
<td>G × T</td>
<td>27.78***</td>
<td>1, 59</td>
</tr>
</tbody>
</table>

CBT = cognitive behavior therapy; Control = control group; ANOVA = analysis of variance; G = group; T = time. *p < .05, **p < .01, ***p < .001.

A two-way repeated measures analysis of variance depicts that there was a statistically significant two-way interaction between treatment and time concerning the dreams of character, F (1, 59) = 31.50, p < .0005. There was a reduction of the unfamiliar dream characters from pre-intervention (M = 12.76) to post-intervention (M = 8.05), a statistically significant mean reduction of 4.717, 95% CI [3.035, 6.398], p < .000. The results show that after the CBT, the participants of the experimental group could see more characters and they could recognize the persons/images more clearly and they had fewer death dreams and no more suicidal thoughts.
But then, there was no statistically significant effect of time on scores of the characters in the dreams in the control trial, \( F (1, 59) = 1.55, p = .217 \). There was no decrease in the unfamiliar dream characters from pre \( (M=8.68) \) to four weeks after the pre-test, without the intervention \( (M = 8.41) \), and reveals that the participants of the control group saw fewer characters (in pre and four weeks later without intervention) - some of whom they could recognize and some they could not identify and they also saw the family members in their dreams and dreamt of depressive themes such as loss, illness and death, and also had suicidal thoughts in their dreams.

![Figure 2: The difference between the experimental group and the control group with regard to the appearances of characters in the dreams](image)

**Hypothesis:** There will be a significant difference between the experimental group and the control group concerning the characters in the dreams, is affirmed as the participants of the experimental group could see more characters and could recognize the persons/images more clearly after CBT but not the participants of the control group.

In this study, the depressed participants saw fewer characters- some of whom they could recognise & others were strangers. They also saw a few family members in their dreams and dreamt of depressive themes such as loss, illness, and death, and had suicidal thoughts in their dreams before the intervention. A few depressed participants dreamt of fewer male and female characters, some were familiar to some extent and they could not identify some of these characters (strangers). This finding of fewer characters overall and fewer strangers in the depressed group's dreams is consistent with previous studies (Langs, 1966; Barrett & Loeffler, 1992), and also in agreement with the study of Niranjan et al., (2015) who indicated that adults could recognise 48% of characters seen in dreams with names, 35% of characters were recognized by their social role, and 16% were unidentified. Among named characters, characters were identified by appearance (32%), behaviour (21%), face (45%), and just knowing (44%).
Some of the depressed participants saw their deceased parents and even grandparents (ancestors) in their dreams and experienced their blessings and love through their dreams. They shared their problems with them, and in return, also got a few solutions. The depressed people were on a quest for love and care and they could see their departed family members appearing in their dreams and showing love and care to them. Depressed people usually think about the past and do not live in the present. The above dreams are similar to the findings in the earlier studies, for example, depressive people saw more family members in their dreams when compared with non-depressed people (Langs, 1966, Van de Castle & Holloway, 1971). Their dream patterns showed more family members (Kramer & Roth, 1973, Langs, 1966).

A few depressed people saw in their dreams that they were seriously ill or losing someone very dear to them. This is in accord with a study by Fonzi & Bersani (2007), wherein they indicated that Dream content is characterized by the predominance of elements of the dreamer's past and family characters, and by the heightened incidence of depressive themes, such as loss, illness and death, which are significantly more frequent in the depressed compared to non-depressed patients. A couple of dreamers in the study have seen depressive themes such as their own dead bodies or murdering someone in their dreams. Yalom (1980) stated that if one dreamt about their own death, then it may indicate that he will have a longer life. Yalom wrote that many people experienced the fear of death in their dreams; he also stated that twenty-nine per cent of adults experienced murdering someone in their dreams.

A few participants saw a dead person, who was their friend, calling them constantly in their dreams, telling them to leave everything and come. These dreams made them more frightened and they had suicidal thoughts. Tanskanen et al. (2001) found that the frequency of nightmares was directly related to the risk of suicide. Among subjects having occasional nightmares, the adjusted relative risk of suicide was 57% higher. According to Miró & Martínez (2005), having nightmares every week was strongly associated with a depressed mood. Agargun et al., (2007) stated that melancholia (an earlier term for extreme sadness) may be associated with an increased risk of suicide attempts due to repetitive and frightening dreams. Simor et al., (2013) suggested that increased reference to death in the dreams of depressed patients could reveal the presence of suicidal thoughts, and is thus a potent cue for clinicians—especially since nightmares themselves are associated with a greater risk for suicide. As per the study of Marinova et al. (2014), depression appeared to be a stronger risk factor for suicidal behaviour when accompanied by nightmares. Lamis et al. (2018) expressed that depressive symptoms significantly mediated the relation between hopelessness and suicide risk in patients who reported monthly to weekly nightmares. Lemyre et al., (2019) indicated that the presence of nightmares in individuals with a mental disorder is often associated with poorer mental health, poorer sleep, and a greater risk for suicide.

Gender differences in the experimental group: The research suggested that concerning the characters in dreams there were no gender differences in the experimental group before and after CBT.

Educational differences in the experimental group: Before and after CBT, there were no educational differences among the participants of experimental group with regard to characters in dreams.

DREAMS BEFORE and AFTER THE INTERVENTION AND THE INTERPRETATION

Dream before the intervention: One participant explained his dream in the following manner, “I was on the Tank Bund Bridge, which many people have known as a public place for jumping off to commit suicide. My sister and my brother were also there along with me. I was without hope and also feeling paralyzed”.

Gender differences in the experimental group: The research suggested that concerning the characters in dreams there were no gender differences in the experimental group before and after CBT.

Educational differences in the experimental group: Before and after CBT, there were no educational differences among the participants of experimental group with regard to characters in dreams.
Interpretation of the dream: The dreamer had been severely depressed for quite some time. He mentioned that he had felt very depressed and often considered committing suicide. Whenever he dreamt about committing suicide, he saw his sister and brother, which made him think that he should not commit suicide. Dreams involving suicide might symbolize a desire for change or a need to let go of certain aspects of one’s life. It could indicate a desire to escape from overwhelming emotions, situations, or responsibilities. It may also represent the end of a particular phase or aspect of one’s life, such as a relationship, job, or belief system. Sometimes, dreams about suicide can reflect underlying emotional distress or feelings of helplessness. They may serve as a reflection of one’s subconscious thoughts and emotions, highlighting the need for support and self-care.

Dream after the intervention: One participant explained her dream after the intervention in the following way: “I was travelling in a car with my husband. I see a lot of birds and farms and the place is full of greenery. So I am thinking that this year we will have good rains. I reached one place which is known to me, to go to the washroom. My husband is telling me that we will go and have breakfast. After that, we went shopping, where I bought what I liked and later we had a long, pleasant trip and on the way I saw my school and college and reached back home”.

Interpretation of the dream: Dream characters generally symbolize the dynamics of one’s life, especially the inner life emotions, feelings, and perceptions, though they can represent subjects, concepts, ideas, or structures of the psyche and mind. Spending more time with one’s husband/partner in a dream can symbolize a desire for increased intimacy, connection, and quality time in the dreamer’s waking life relationship. It may be an indication that she values and appreciates her husband’s presence and wishes to strengthen her bond with him. This dream can also suggest a need for better communication, understanding, and emotional support within her relationship. Here the dreamer sees greenery which indicates that she will meet a lot of success and good luck. Seeing school and college may mean that she is not taking the practice of the learning already acquired previously and is subconsciously giving a warning to the dreamer.

Conclusion:
The present study showed that the participants of the experimental group could see more characters and could recognize the persons/images more clearly after CBT but not the participants of the control group. And also, there were no gender differences and educational differences among the participants of the experimental group before and after CBT.

REFERENCES:


