

A quantitative and qualitative exploration of the dream content of women exposed to addictions

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Summary. The aim of the study was to describe the dream reports of women who had been exposed to an addictive behaviour via at least one parent, and in their current romantic relationship. Thirteen women, aged between 18 and 25 completed a series of questionnaires that measured the effects of growing up in a family where an addictive behaviour was present. The women recorded their dreams for one month. In total 118 dream reports were analysed and compared to 100 dream reports from women who had not been exposed to addiction. Significant differences were found and qualitative analysis highlighted areas of dreams that were continuous with waking life. The findings show that the dream life of women exposed to addiction was affected by significant, addicted others. Research implications and future directions are discussed.

Keywords: Addiction, emotional concerns, continuity principle, dreams in Adult Children of Alcoholics, dreams and addiction, using addiction dreams in therapy

1. Introduction

1.1. Contextualizing the Study

In the United Kingdom it has been estimated that one in five children lives with the 'hazardous' drinking of a primary caregiver (National Association for Children of Alcoholics (NACoA: www.nacoa.org.uk/adults/information.html). As well as coping with active addiction, interactions within the family are often defined by the addiction and its consequences (NACoA, 2011). Research has shown that children raised in this type of family system grow into adults who are affected emotionally, mentally, and spiritually (Lewis-Harter, 2000). This means that there is a significant proportion of the adult population that live with the consequences of having been raised in a family where active addiction was present.

The emotional repercussions for those exposed to addiction are far reaching, with increased rates of depression (Fitzgerald, Sullivan, Ham, Zucker, Bruckel, Schneider & Noll, 1993), anxiety (Earls, Reich, Jung, & Cloniger, 1988), self-harming, and the inability to make healthy attachments (Carnes, 1991; Cleaver, Undell & Aldgate, 1999; Carnes, Murray & Charpentier, 2005). It has been estimated that up to 70% of Adult Children of Alcoholics develop patterns of compulsive behaviour themselves. Some of the areas where these behaviours can be seen include: their own use of alcohol and drugs, food, work, gambling, over spending and engaging in addictive relationships (Kumpher, 1999; Bratton, 1999; Dayton, 2007). People raised in a family where addiction was present were more likely to enter relationships with someone who had an addiction (Anda, Felitti, Whitfield,

Bremner, Perry, Dube, & Giles, 2006). This tendency was truer for women, than men (Melody, Wells-Miller & Miller, 2003)

Based upon these research findings it is possible to suggest that growing up in a family where addiction was present had serious consequences for adult emotional well-being, mental health, and the ability to form satisfactory relationships. In addition, there is the danger that 'adult children' would become addicted themselves. Research shows that the problems associated with a family history of addiction, follow those who are affected throughout their lives (Schoenborn, 1991; Sher, 1991; Lewis-Harter, 2000; Harwin, 2008). As a result when addiction is seen as a 'family-illness' (Sher, 1991) many services provide support for families members of addicted people, and many members of these families are referred to family therapists, relationship counsellors, or addiction facilities for support, or treatment.

The idea that individual members of a family where someone is addicted also need support, is a core assumption in the co-dependency and adult child literature. It is important to be able to identify the role each person has played within a family system, if they are to face to the consequences of this, and to break the cycle of their upbringing (Beattie, 2003; Carnes, 1991 & 1998). Addiction is sometimes discussed as a multi-generational disease that has intergenerational consequences (Weirs, Sargeant & Gunning, 2008). The issues addiction presents for therapists and counsellors can be addressed and help families to become psychologically, and behaviourally healthier (Adelson, 2009). Most therapies involve talking through problems and issues as they relate to waking life. Kane (1997) acknowledges this, but also discusses the advantages of working with dreams as a useful tool in family therapy.

Kane (1997) suggests that dream-work can lead to breaking down resistances to therapy, contribute towards understanding the family's dynamics, and be used to generate positive, alternative behaviours within the family system. Hence, it is possible to say that exploring dreams in family therapy can be used to initiate positive behaviours during waking. In addition, Kane (1997) shows that after taking

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systemic view of the family, can be beneficial. He asserts that dreams can be used as a vehicle to understand the role that each family member adopts within the system. In family systems theory all family members are seen as working towards the same goal, which is to ensure that balance and harmony are maintained within the system, at all costs. However, in families where active addiction is present, attention is focused upon the person who is addicted (Adelson, 2009). The remaining family members revolve around the addicted person and adapt to meet his, or her, needs. This often leads to their own needs becoming secondary, or even ignored (Kerr & Bowen, 1988). Therefore, any person within the system, rather than performing healthily, will adapt to maintain the status quo to prevent the drama of active addiction, or the Problem Drug User's (PDU) acting out at all costs.

During waking life, these defensive behaviours may include: lying to protect themselves and/or the addicted person, preventing consequences for the addicted person, not speaking outside the system about the difficulties they face every day, being the PDU's main caregiver (this includes children taking this role), and losing their own sense of needs, and desires. Most significantly the dishonesty within the family means that individuals' sense of reality is distorted and they have no sense of the truth, as they see it. Having someone in a family who is in active addiction may even be ignored, denied or unchallenged. This has been described as living with an 'elephant in the room' that no-one will admit to being there (Kroll, 2004; Zerubavel, 2007). As a result family members live with an addicted person who is often intoxicated, incoherent, and in denial. Over many years the survival behaviours described above become deeply entrenched. No-one attempts to make changes, or stop the addicted person using. Family members enable the Problem Drug User (PDU) to continue in active addiction so that the system as a whole, remains unchanged, and dysfunctional (Bradshaw, 1986; Beattie, 2003; York, 2010).

Therefore, understanding the dreams of people who have been exposed to addiction is of particular importance for the professionals who work with them, and for dream research that tries to understand the processes in dreams in addiction. It is possible to take Kane's (1997) ideas and use them by applying dream analysis methods that highlight the reported dreams of people who have been affected by someone else's addiction. For example, if dream characters and the social interactions between them, were explored, it may be possible to identify the dreamer's difficulties in waking life with regards to past, and current, relationships. Using the vast body of dream research, it may be possible to provide the theoretical foundations, and build practical models that could be used to work with the dreams of family members from addicted family systems (Buchholz, 2003; Parker & Alford, 2010).

This study focused on Women Exposed to Addiction (WEA) during childhood and, who were at the time of data collection, in a relationship with someone they perceived as having an addictive behaviour. These women had grown up being affected by their childhood experiences as previously described. Those experiences may be reflected in their dreams. The study compared the dreams of WEA to the dreams of Non-Exposed Women (NEW). The implications for understanding dreams in relation to chemical dependency are additionally of significant importance. The reason for this are explained in Section 1.2. below.

1.2. Researching Dreams in Addictive Behaviours

The relationship between addiction and dreams has focused upon dreams from PDU's and the extent to which they include chemical use (using or drinking dreams) and related objects, people or paraphernalia. This dream content has been linked to the PDU's waking, addictive disease. Most of the research exploring dreams in addiction has focused on addictions such as alcohol, opiates, or smoking (Moore, 1962; Hall, 1966a; Foulkes, 1969; Choi, 1973; Wolins & Mello, 1973; Cernovsky, 1985; Denzin, 1988; Hajeck & Belcher, 1991; Morrison, 1991; McEwing, 1991; Knox, 1995; Christo & Franey, 1996; Flowers & Zweben, 1996; Kibira, 1994; Peters, 1996; Flowers & Zweben, 1998; Johnson, 2001; Reid & Simeon, 2001; Colace, 2004; DeCicco & Higgins, 2009; Parker & Alford, 2009). These studies have explored the causes and functions of 'drinking', or 'using', dreams. Dreams used in these studies have usually been collected from dreamers who are in early recovery from an addiction, or who are about to enter a period of abstinence.

The literature on dreaming and addiction has influenced the way that using dreams have been understood. Firstly, drinking, or drug using, dreams have been seen as indicating impending relapse (Christo & Franey, 1996). This finding suggests a direct linear relationship between the 'using' dreams and waking life. Secondly, most of this research has focused on dreams in very early abstinence, and only in addicted people. This has also resulted in linking 'using' dreams with waking relapse. Thirdly, the motivational drive that produces 'using' dreams has been studied by Colace (2004) who conducted a study comparing two groups of people who used heroin: one group who were 'social' users and were not addicted with another group of people who were addicted to heroin. Colace (2004) suggested that 'using' dreams were only seen in addicted people who are abstinent. In essence, Colace (2004) suggests that in heroin addiction specifically, dreams of 'using' reflect a highly susceptible, motivational state. This motivational energy emerges during dreaming as using dreams. These dreams represent the dreamers' desire to use heroin. Therefore, in Colace's view dreams of 'using' are motivated by cravings experienced during waking.

Fourthly, Hajek and Belcher (1991) investigated dreams in people who were attempting to stop smoking. Like Colace, they also focused upon cravings in early abstinence. They concluded that dreams which showed the dreamer smoking were 'absent minded transgressions.' By this they meant that when waking thoughts and cravings were suppressing during waking, the loss of conscious control during dreaming allowed these thoughts and craving to surface. Consequently, the conscious effort of trying not to smoke, or even think of smoking, during waking was released during dreams and manifest in the dream as the dreamer smoking. But, unlike the conclusions of Christo & Franey (1996), or Colace (2004) who suggest 'using' dreams were indicators of relapse, Hajek & Belcher believed that the unpleasant emotion that which accompanied smoking dreams actually lead to continued abstinence during waking. These studies suggest that during dreaming, addictive impulses do indeed surface, and may be satisfied by expending motivational energy that had previously been suppressed during waking (Hajeck & Belcher, 1991). However, the function of using dreams remains an unanswered question.

There are very few studies which that have used samples with any long term abstinence, and acknowledge transformations that take place as 'sobriety' in waking life is firmly established. Parker & Alford (2009) collected dreams from women who were living 'sober.' In these cases the interpretation of paraphernalia by the dreamer's had more complex waking associations, and were often used to increase waking support. In two separate studies Kibira (1994), and Peters (1994), found that some 'using' dreams experienced by male, and female, alcoholics increased motivation to stay sober during waking. The participants reported increasing contact with recovery partners directly as a result of dreaming that they drank. Therefore, dreams from addicted, but dry, participants can contribute towards maintaining sobriety and forming closer attachments to sobriety partners during waking life. In line with Kane's thesis, the findings of these studies suggested that some dreams can initiate positive behaviours, and continued abstinence, if dreams are worked with during waking.

The work of Kibira (1994), Peters (1994) and Parker and Alford (2009) suggests that 'drinking', or 'using' dreams were 'neutral' in and of themselves. If this is true then dreams of using would not be restricted to PDUs but may occur in other samples. Furthermore, what determines the outcome of the dream is the dreamer's response to it during waking. For example, sharing the dream in support groups, or with a counsellor, may enlighten the dreamer rather than being seen as a vehicle for relapse, or other unhealthy behaviours (Kibira, 1994; Peters, 1996; Parker & Alford, 2009). This view presents the dream that is reported and its content as a way of increasing intrinsic motivation with regards to positive growth (Ryan & Deci, 2010). This assertion in relation to Kane's (1997) work suggests that dream exploration may also assist with making healthy waking choices, and creating deeper communication with professionals. But, in addition, family members may dream of chemical use because they witnessed intoxication regularly. This review moves now to literature that describes how WEA may be affected by the problematic use of chemicals by those closest to them. How this may appear as dream content that is continuous with waking life is outlined.

1.3. How Addiction Affects the People Closest to the Problem Drug User

One of the key assumptions in this study is that that addiction has implications for family members, not only the chemically dependent person. When chemical dependency is considered as a family disease, its effects are often understood in relation to family systems theory (Bradshaw, 1988; Kane 1997). Addiction is treated in some modes of therapy, as a 'family illness' and the PDU as having an addictive disease (Vanicelli, 1989; Beattie, 1990; Melody, Wells-Miller & Miller, 2003; Roy & Miller, 2010). Within this framework every person affected by the PDU, has a role within the system, and makes a contribution, towards maintaining the system's ability to function with as little disruption as possible (Kerr & Bowen, 1988). Helping the system to operate in this way includes both functional and dysfunctional means. Addictive systems have been described as 'closed' and therefore, not open to challenges from external sources, and are highly resistant to change. Healthy systems, on the other hand, are more open and flexible (Minuchin, 1979; Velleman, Templeton & Copello, 2005).

One conceptual model that has attempted to describe the effects of growing up in a family where addiction is present is the 'Co-dependency' model (Bradshaw, 1988; Beattie, 1998; Martsolf, Hughes-Hammer, Estok & Zeller, 1999; Melody, Wells-Miller & Miller, 2003; Wampler, Downs & Fischer, 2009). Being 'Co-dependent' is a term that is frequently used to describe the syndrome of characteristics that some people develop after being raised in an addicted family system. Co-dependency is believed to be caused by being raised in a family where one or both parents have an addictive behaviour (Martsolf, Hughes-Hammer, Estok & Zeller, 1999; Wampler, Downs & Fischer, 2009).

Co-dependency has been defined by six core psychological characteristics (Melody, Wells-Miller & Miller, 2003). These are: a) difficulty experiencing appropriate levels of self-esteem, b) difficulty setting functional boundaries in relationships, c) difficulty owning one's own reality, d) difficulty acknowledging and meeting one's own needs and wants, e) difficulty being independent from others, and f) difficulty experiencing and expressing reality moderately (Melody, et al 2003).

Specifically, the first characteristic in this model was that co-dependents often perceive themselves as the victim of the PDU's behaviour and this tendency is often extrapolated to other relationships. Family members were often too afraid to say "No" to any request made of them (Beattie, 1990; Bradshaw, 1989; Crestor & Lombardo, 1999; Melody, Wells-Miller & Miller, 2003; 2008; Schneider & Schneider, 1990). With relation to dream content, this can be measured by focusing on aggressive interactions with other dream characters. Another core trait of co-dependency was 'obsessive thinking' towards the significant other with the same frequency and intensity as the obsessional thinking experienced by a PDU (Melody, 1989; Beattie, 1990). So, as the PDU dreams of drink or drugs, the family member will dream of the PDU, who they were as obsessively focused upon. Furthermore, the co-dependent shows an inability to express appropriate anger (or other so called 'negative' feelings) at the inappropriate behaviour of the addicted significant other. This is known as 'people pleasing' and has been described as an indicator of passive aggression (Vanicelli, 1989; Gorski, 1993).

It is important to note that the concept of 'Co-dependency' has been heavily criticised as labelling natural, caring behaviours (Hands & Dear, 1994; Harkness & Cotrell, 1997; Stafford, 2001), and of pathologizing altruistic, helping behaviours which have been termed as enabling the PDU to continue to use drugs addictively. Furthermore, women have been the focus of the literature, so Co-dependency has become a women's 'dis-ease' as it has been viewed as affecting women more than men (Steadman-Rice, 1998). Steadman-Rice argues that what defines co-dependent traits are the behaviours that are associated with women's roles in society. This includes women's tendency to protect, care for, and nurture family members. He also notes that this has resulted in research that explores women in relation to co-dependency more so than men (Steadman-Rice, 1998). Furthermore, there is considerable discrepancy between the core components that demark 'Co-dependency' making the operational definitions required for valid research difficult (Steadman-Rice, 1998; Stafford, 2001).

This study explored the dreams of women that have been affected by someone else's addiction. Some of the literature presented here is not gender specific and may have includ-

ed conclusions about both men and women. Women were the main focus in this study. This reflects the researcher's interest in women's dream-life thus narrowing the research questions, and analysis, to women only. An additional reason for researching women only was that other dream researchers have commented that it is more common for women to volunteer to take part in dream studies (King, 1996; Parker, 2008). So, the decision to recruit woman only was for both personal, and pragmatic reasons.

1.4. A Model for Exploring the Dreams of Women Exposed to Addiction: When 'Continuity' Really Counts

To give this study a theoretical framework when trying to describe dreams in WEA, the continuity principle was deemed the most appropriate way of trying to understand the relationship between waking and dreaming life (Hall, 1953; Domhoff, 1996 & 2003). The continuity principle refers to the association between waking life and dream content (Schredl, 2012). In its simplest form, continuity is suggested to have occurred when dream content reflects the waking pre-conceptions and concerns of the dreamer (Hall, 1953; Domhoff, 1996 & 2003). Researchers often observe waking behaviours to ascertain the level of continuity, but both Domhoff (1996) and Hall (1953) clearly describe continuity as a psychological concept. This means that what a person thinks, desires, worries about, and ponders upon, is more likely to be made manifest in dream report content.

Dream studies have tested for continuity by exploring dream report content that is based upon a highly reliable, content coding system. Hall and Van de Castle's content analysis system (HVCAS: 1966) has been used in literally hundreds of published dream studies (see Domhoff, 1996 & 2003). Some of these studies have developed comparative statistics by describing 'Normative' dream content (Hall & Van de Castle, 1966). The concept of a 'normal' dream is somewhat problematic (Parker, 2008) but, the content analysis system provided a pragmatic and well-structured way of comparing different groups of dream reports and statistically describing the differences between them.

Hall and Van de Castle's (1966) content analysis system had other advantages. For example, it was possible to compare predefined content categories within a large number of dream reports. The number of times content categories occur were counted and used to describe the most frequently occurring aspects of dream content. Hall and Van de Castle (1966) carefully defined the types of characters, social interactions, emotions, misfortunes, and activities that are present in dream reports (Hall & Van de Castle, 1966; Domhoff, 1966). After coding, group percentage rates, and ratios, were calculated and then compared where statistically significant differences were identified (Hall & Van de Castle, 1966; Domhoff, 1996).

Content analysis studies have been undertaken using predominantly student samples, aged between 18 and 25 (see Domhoff, 1996 & 2003). Statistical comparisons have been as conventional as comparing dream reports by age (i.e. by being older than 25, or younger than 18), by the sex of participants (Male vs. Female), or the country of origin (USA vs. the UK). Another alternative has been to compare dream reports from clinical samples with non-clinical samples. This has led to research exploring different types of mental distress, and psychopathology. Some examples that

appear in the literature include: comparing people with depression or schizophrenia, (Hall, 1966), women with eating disorders (Guralnik, 1996), and alcoholism (Hall, 1966; Kibira, 1994; Peters, 1996; Parker & Alford, 2009). The conclusions reached in these publications were that dreaming was continuous with the waking life and, the content of dream reports highlighted the specific elements of dream content that reflected the specific components of mental distress. Essentially, the results of these studies were used to explore whether waking psychological predispositions were reflected in dream content.

Hall and Van de Castle's (1966) content analysis system was underpinned by the theoretical concept that dreams reflect waking life. Hall (1953) developed this idea and wrote about it in some detail in his book 'The Meaning of Dreams'. Hall outlined an overlooked protocol that can be used to specifically identify the continuity between waking life and dream content. Because the majority of dream research is undertaken using quantitative methods of analysis, qualitative methods have been largely ignored in dream research so far (Parker, 2008). Yet, Hall (1953 & 1961) described in detail, a systematic template for research studies that test the continuity principle.

Hall focused on five aspects of the dream report that assessed continuity. Firstly, he stated that dream reports may reflect how the dreamer viewed themselves. Secondly, the dream report could illuminate how the dreamer viewed people they knew in waking life. Thirdly, there could be content present in the dream report that showed how the dreamer viewed the World. Fourthly, the dreamer's unsocial impulses, and punishment styles, applied to themselves, or others, would also be in evidence. Finally, dream reports may show areas of the dreamer's life that they were preoccupied with, or concerned about. These concerns were often evident across long dream series where the same content categories occur with relative frequency (Hall & Norby, 1972; Domhoff, 1996) as well as between groups of dreamers. These five aspects of the dream report suggested that the identification of continuity with waking life may not only be answered using quantitative methods of analysis, but, as Hall (1953) implicitly described, some questions regarding continuity could be answered using qualitative research methods.

Other commentators have contributed to the continuity debate. Schredl (2003), states that any positive, non-zero correlation indicates continuity and that in some cases the nature of the relationship can be predicted. For example, someone with high levels of trauma could be predicted to have nightmares that reflected the traumatic event (Maher, Rego & Asnis, 2006). However, Schredl acknowledges precise predictions regarding dream content and the way they link to waking life, is complex and may be unpredictable. Schredl also calls for stability in the way researchers research the question of continuity to make findings comparable (Schredl, 2012). Parker (2008) argued that continuity may be more apparent at some points in time than others, based upon the dreamer's fluctuating emotional attachment to what is significant in their current waking life. To conclude, as yet, there have been no published studies that a) focus on the significant others of people with an addictive behaviour, or b) used a mixed-methodology that utilises both quantitative and qualitative analysis is theoretically justified to explore continuity between waking and dream life, qualitatively. The quantitative method that is used here is

Hall and Van de Castle's content analysis system. The qualitative method is thematic analysis as described by Braun and Clarke (2006) where themes were identified using Hall's five point model.

1.5. Relationships and Dream Content

Because the nature of the relationships of WEA were of particular focus in this study, it was important to identify how relationship dreams have been described in other studies. Approximately 90% of dream reports contain at least one other character in addition to the dreamer (Hall & Van de Castle, 1966). Content analysis research has shown that over half of all dream characters are known to the dreamer and, of those 'known human characters,' 15% are family members (Hall & Van de Castle, 1966; Domhoff, 1996). Subsumed in the family percentage are husbands, wives, aunts, uncles and other relatives. Using a student sample, Schredl (2001) found that 21% of dream reports contained a reference to a romantic partner. Schredl and Hoffman (2003) found that romantic partners were present in 27% of dream reports. More recently, Schredl (2011) has shown using a case study approach, that being in a relationship is a modulator of dream content. The findings of this study showed that the presence in dreams of a partner was positively related to the waking nature of the relationship. In periods of separation the partner was less likely to appear, but during re-engagement the partner was more likely to be referred to in dream content. Furthermore, Franc & Schredl (2012) found a difference in the percentage of male characters between partnered and single women. Women who were single, and who spent less time with men when they were awake, dreamt less about male characters. Alternatively, women who were heterosexual and partnered tended to report more male characters (Schredl, 2001).

Clarke, De Cicco and Navara (2010) discuss the impact of relationship insecurity when they studied dream content and romantic jealousy. They found that partners who cheated in waking life were more likely to cheat in dreams. Furthermore, Selterman and Drigotas (2009) studied dream content in relation to waking attachment styles and found that participants who were anxiously attached, or avoidant-attached, were more likely to have dreams that included anxiety and jealousy. This literature clearly identifies links to attachment styles in the dreams of people who were concerned with their relationships.

To summarize, this literature suggests that the recalled dream is a communication about the social lives, and attachments of the dreamer. It is common to read about issues relating to family and romantic, significant others in dream reports. This makes sense if these relationships are the waking concerns of the dreamer. However, most of the research focusing on the content of dreams and romantic relationships has used samples that are assumed to be non-clinical. One exception is the work of Selterman and Drigotas (2009) who studied dreams and attachment styles and found that more references were made to anxiety, and jealousy, in the dreams by people who reported these characteristics during waking life. This suggests that dream content is likely to indicate the nature of waking relationships, and that people who may have difficulty with functional relationships during waking relationships may reflect this in their dream report content. Therefore, WEA may reflect their concerns about relationships in their dreams.

1.6. Aims of the Study

This study focused on the dreams of women who had been raised by one, or both, parents who were PDUs and whose current partner also had an addictive behaviour. The aim of the study was to explore whether women exposed to addiction experience 'using' dreams that showed their waking preoccupations and concerns with another person's drug use? These concerns may include issues directly related to the addicted person and the dreamer's feelings about their drug use. These aims try to answer Colace (2004, p. 10) who asked: "Is it necessary to be addicted in order to have drug related dreams?" Or is experience of other people's chemical use sufficient to make 'using' dreams part of their own dream life? The literature pertaining to dreams and addiction has focused on the dreams of people with an addictive behaviour, but the dreams of those with an addictive partner, or parents have not been studied.

It is important to note that WEA will have grown up with parents who were at times 'intoxicated'. Furthermore, at the time of collecting dreams they were also close to their partner's active addiction, and their drug altered states. The close proximity to people that are addicted suggests that people using drugs, or showing other addictive behaviours, were part of these women's everyday lives. These questions were explored using Hall's Continuity Principle (Hall, 1953; Domhoff, 1996) and by applying Hall and Van de Castle's (1966) content analysis system as the method of analysing dream reports, quantitatively.

Pairing the continuity principle with exposure to addiction during childhood, and in the dreamer's current relationship made it possible to make the following predictions regarding dream content. These predictions were related to the WEAs' pre-occupations and concerns. Firstly, in terms of dream characters WEA would report significantly more boyfriends. They would also report more family members, specifically parents compared to NEW. Secondly, social interactions would differ significantly between the WEA compared to NEW, particularly in the frequency, and nature, of aggressive interactions. WEA would report more references that represent passive aggression, such as thinking negatively about someone, refusing or ignoring them, or destroying their property. This represent WEA's difficulty expressing anger (Beattie, 1990; Mellody, Wells-Miller & Miller, 2003).

Thirdly, and in line with waking behaviour, participants would try to befriend dream characters, more than non-exposed controls. This would reflect their tendency to support other people and avoid conflict (Bradshaw, 1986; Kasl, 1989; Mellody, Wells-Miller & Miller, 2003). Fourthly, sexual interactions in dream reports would include more sexual activity related to trust issues such as the addicted partner's sexual infidelity (Kasl, 1989; Carnes, 1998). This hypothesis reflects WEA's issues with trusting someone they are intimate with, a pattern that is commonly established during childhood (Carnes, 1998; Kasl, 1989; Norwood, 2008). Fifthly, WEA will report lower levels of self-esteem than NEW which reflected their difficulties with their own self-concept (Bradsahw, 1988; Mellody-Wells-Miller, Miller, 2003; Hughes-Hammer, Martsof, & Zeller, 1998a). This was measured using the Co-Dependency Assessment tool; a waking measure of the psychological characteristics of growing up in a family where an addicted parent was present. Furthermore, this trend would also be apparent in dream content through reporting more self-negativity, and lower levels of self-esteem. Sixth, WEA would report more emotionally intense

dreams, and more nightmares. This hypothesis reflects the stressful nature of waking life (Hughes-Hammer, Martsof, & Zeller, 1998a). Finally, WEA would refer to drugs, or alcohol use more frequently than NEW. These 'using dreams' would include references to their partners, or parents, or both (Hall, 1953; Schredl, 2012).

Whilst the hypotheses thus far are suited to descriptive statistics and inferential testing, it is important to acknowledge that the dreams were submitted as a narrative. Because of this, each dream report was seen as part of a social communication between the researcher and the researched (Graneheim & Lundman, 2004). The dream narratives were suitable for qualitative analysis, adding depth to the interpretations made here. To honour this aspect of the data, the dream reports were explored using thematic analysis (Byzatis, 2006; Braun & Clarke, 2006). Theme construction was guided by Hall's (1953) model of continuity, by specifically focusing on aspects of dreams that Hall stated may reflect continuity between waking and dreaming. Therefore, the dreams were explored for content that reflected a) how the dreamers viewed themselves, b) their relationships with parents and partners (current and past) c) content describing how they perceived the World in general, d) evidence of their unsocial impulses and punishment styles and, e) the areas of their life that they were preoccupied with, or concerned about.

2. Method

2.1. Participants

Thirteen women aged between 19 and 25 (mean = 20.31, St.Dev = 2.29) volunteered to take part in the study. They were all White, Heterosexual and from the United Kingdom. This self-selected, opportunity sample met the inclusion criteria of having at least one parent who had experienced chemical dependency (100%) and were at the time in an intimate relationship which they perceived as dysfunctional and affected by their partner's chemical use (100%). The average age of the 100 women whose dreams were used for comparative purposes was 19.68 years (St.Dev = 1.63). All the participants (WEA & NEW) came from the same University, were aged between 18 and 25, and volunteered to take part in dreams studies.

Inclusion criteria included for WEA included having no diagnosis of mental distress such as depression or trauma; both of which are common in adult children of chemically dependent parents (Benisek, Kirby & Leggett Dugosh, 2011; Carnes, 1998; Lewis-Harter, 2000). Using a student sample of WEA meant that the reports were highly comparable to other studies where student, non-clinical samples have been used (Hall & Van de Castle, 1966; Domhoff, 1996; Parker, 2008; Parker & Alford, 2009). All of the WEA complied with the study's protocol and submitted a full month's dreams. There were no drop outs and no incomplete data sets. Participants submitted between five and eighteen dreams each. On average each participant submitted 9 dreams each (St.Dev = 5.16) The 100 dreams that were used for comparative purposes were collected from women of the same age, at the same location, and who were assumed to have not been exposed to addiction in a parent or partner.

At the time of data collection, all of the WEA were in a relationship. The average length of these relationships was

approximately 2 years (range 2 months to 5 years; St.Dev = 2.2 years). Thirty one per cent expressed that they were 'very happy' in their current relationship, 15% were unhappy, 8% were happy and 46% were very unhappy. They said that the drugs used by their partners included alcohol, nicotine, cannabis, cocaine, crack-cocaine, legal highs and heroin. The WEA were asked if they felt they had a problem with drugs, alcohol or any other addictive behaviour: 11 participants responded No, and 2 said "Yes": one stated the drug used was nicotine. The second participant disclosed she was a PDU who had been in recovery and abstinent for 9 years. She used a 12 step program for support.

2.2. Materials

Participants completed a battery of tests associated with growing up in an addicted family system. The measures that were used were: The Co-dependency Assessment Tool (CODAT: Hughes-Hammer, Martsof, & Zeller, 1998a). This is a reliable measure of levels of co-dependency. It had high internal reliability and contains a five factor structure that identified the degree of focus on others, self-neglect, self-worth, levels of hiding feelings and putting on fronts, issues with general health, and the level of unhappiness still felt from the family of origin. The five factor structure of CODAT provided an overall total score. Hughes-Hammer et al (1998b) state that total scores should be interpreted as follows: scores of 25 - 50 showed minimum co-dependency; scores of 51- 75 mild co-dependency; 76 to 100 moderate co-dependency and scores over 101 as severe co-dependency.

The Child Roles Inventory (CRI20: Wampler, Downs & Fischer, 2009) is a 20 item measure of four roles often adopted by family members as coping strategies. The CRI includes a list of adjectives that are related to characteristics associated with each role: the Lost Child, the Family Mascot, the Scapegoat or the Family Hero. Evidence of being a Lost Child included giving affirmative answers to attributes such as being: quiet, shy, lonely, solemn and passive. Being the family Mascot was evident if participants agreed with being outgoing, entertaining, excitable, cheerful and playful. The Scapegoat was described by being irritating, defiant, deceitful, hostile and disobedient. Finally, the Hero was given high scores if they reported being trustworthy, dutiful, mature, helpful and organised. For the purpose of using the CRI20 the assignment of affiliating with a role was dependent upon the summed score for each role being equal to, or greater than at least one other role. For example, a participant was classified as 'the scapegoat' if their scapegoat score was higher, or equal to the summed scores for the other three sales. (For full details see: Wampler, Downs & Fischer, 2009).

A Structured Dream Diary was used to collect dream data that had been used in previous studies (SDD; Parker, 2008). The SDD contained questions assessing general sleep and dream demographics (sleep quality, recall rate and vividness of recall after waking). The second section instructed participants to report their dream using Hall and Van de Castle's instructions, verbatim. The third section included psychometric scales that measured subjective aspects of the dream. Three scales are presented here: a measure of dream self-esteem, whether the dream was perceived a nightmare, and the intensity of emotion felt after waking.

2.3. Procedure

2.3.1 Study Protocol & Quantitative Analysis

Participants were interviewed and told in a general way the aims of the study. However, participants were not told the exact nature of the hypotheses or comparisons to prevent response biases. During the interview, participants were asked to give informed written consent based upon the general information given to them. They were asked to record their dreams for one month. They gave themselves a made-up name that was used for data storage, and analysis. They were given the questionnaires listed in the 'Materials' section and were asked to return the completed questionnaires with their SDD. Upon completion, each participant met with the researcher and they were de-briefed. They were told how their dreams had been analysed and asked if they wanted to withdraw their data based upon the additional information. None of the participants used their right to withdraw.

The dream reports were analysed using the following categories of Hall and Van de Castle's content analysis system: characters, social interactions including aggression, friendliness and sexual activity. None of the participants were married so for the purpose of this study 'partners' were defined as boyfriends, fiancés, and ex-boyfriends. Domhoff (1996) states that boyfriends should be coded as a 'known male'. The reports were coded using Hall and Van de Castle's (1966) content analysis system, verbatim. Dreams of WEA were compared to 100 women's dream reports reported in a previous study (Parker, 2008; Parker & Alford, 2009).

Hall and Van de Castle's (1966) content analysis system made two types of analysis possible. Firstly, it was possible to describe the frequency of social interactions. Secondly, the nature of aggressive interactions were identified by breaking the broader categories such as 'Aggressive Interactions' into the 7 sub-categories defined by Hall and Van de Castle. These subcategories included aggressive acts such as murder, physical attacks, chasing or capturing dream characters, the destruction of property, serious verbal threats of harm, attempts to reject or ignore a dream character, any expressive interaction that was negative, including sneering, put-downs, or arguing, and covert aggression such as thinking negatively about another dream character. Both the frequency and nature of social interactions were used to understand the frequency and nature of aggressive, friendly and sexual behaviours. The nature of social interactions were linked to predictions made regarding the dream content of WEA.

2.3.2 Qualitative Thematic Analysis Procedure

As a researcher reading a dream report and its content can be an intensely, personal experience between the researcher and the participants. Each report has a structure, themes, outcomes and sometimes, endings. Therefore, each dream report could be treated as a narrative that was suitable for qualitative analysis. The qualitative method chosen to identify, interpret and report themes within the data was thematic analysis structured by Braun and Clarke (2006). In qualitative analysis the role of the researcher is very different from quantitative methods like Hall and Van de Castle's content analysis system. In qualitative, thematic analysis the researcher is open about their influence and engagement in the research process, and how they were ac-

tive in theme construction. Using Braun and Clarke's (2006) philosophy, themes do not simply 'emerge from the data', but rather from within the researcher. Furthermore, the way themes were communicated was a representation of how the researcher understood each theme and, how they gave it meaning. Whilst, the aim of quantitative, content analysis is to ensure reliability and future replications of findings. Alternatively the aims of qualitative thematic analysis was to interpret the data with as much 'realness' (or validity) as possible, and accept that themes provided a 'snapshot' of the way that dream were used as a social communication that reflected the personal nature of the dream-lives of WEA (Boyzatis, 1996). Clearly, because the theory underpinning the analysis was the continuity principle, the qualitative analysis assumed that dream narratives were communications to the researcher that were linked to waking lives of WEA.

With these differences in mind, themes were defined as: "capturing something important about the data in relation to the research question" (Braun & Clarke, 2006, p. 10). This analysis was guided theoretically by Hall's (1953) ideas about the continuity between dreaming and waking life and, which aspects of dreams may be relevant to this aim. The level of enquiry in thematic analysis can range from simple 'semantic' analysis to complex, 'latent' meanings when themes are developed. The analysis here tried to describe the underlying pre-occupations and concerns of the dreamers as they were expressed in their dream reports. This included how WEA perceived themselves, how they described their relationships, how they viewed the world, how they expressed their unsocial impulses and punishment styles and, what their preoccupations and concerns were.

The process of theme identification followed the protocol outlined by Braun and Clarke (2006). They outlined six steps that were highly structured with regards to theme identification. These were: Phase 1 – becoming familiar with the data; Phase 2 – Generating initial codes, or what counted as codeable; Phase 3 – searching for themes that included codes and which represented the data; Phase 4 – reviewing themes and how well they addressed the research question; Phase 5 – defining and naming themes; and Phase 6 – producing the report and writing about themes in a way that expressed what the dreamers were relating to the researcher in their dream reports. Clearly, this brief description, shows conducting qualitative thematic analysis as 'heavy' in terms of the work involved, is as highly structured, and requires as much careful planning and implementation as quantitative analysis (Boyzatis, 1998; Braun & Clarke, 2006).

2.3.3 Ethical Considerations

The study was given ethical permission by the Ethics Committee at the University of the West of England. All participants were given informed consent, right to withdraw, and told that no individual analysis, or conclusions, were drawn from any individual's data. Participants agreed to excerpts of their dream reports being used to highlight points in any publications (see BPS, 2009). In the United Kingdom, addiction, whilst common in Westernised populations, is a stigmatised condition (Corrigan, Kuwabara, & O'Shaughnessy, 2009). In the United States most research describes addiction as an illness. This approach to addiction has not entered the public domain in the UK to any great extent. With this in mind, the results of this study had the potential to be socially sensitive (Sieber & Stanley, 1988). This was because

of the comparison of WEA dream content to NEW's dreams. This may be seen as NEW's data being 'normal' and that WEA's dreams differed in some way from this from this norm. This issue was linked to Hall & Van de Castle's (1966) use of the concept of 'normal' dream content. To avoid this, and maintain equitability, and fairness in the representation of this potentially stigmatised population, the following ethical protocol was followed.

Participants were educated about addiction and supported throughout. Participants they were given detailed information about self-help groups that support family members affected by addiction. These groups included Co-dependents Anonymous, Families Anonymous, and Al-Anon. Furthermore, participants were introduced to the International Study of Dreams to gain access to other UK dream workers, and therapists. Information for partners (should they have requested it) included UK numbers of Alcoholics Anonymous, Narcotics Anonymous and Cocaine Anonymous.

Another ethical issue was the consequence of labelling someone from an addicted family as 'Co-dependent' (York, 2010). Many of the terms used within addiction research are themselves deemed to be derogatory by the United Kingdom Drug Policy Commission (UKDPC, York 2010). The use of languages and how it stigmatizes addicted people and those associated with them, is outlined by the UKDPC. They suggest that terms like 'addict', 'junkie', 'alcoholic' and 'enabler' should be avoided to prevent discrimination against people who fall into any of these groupings. These examples make it clear that the language of addiction is what makes research about addiction, socially sensitive. Therefore, labelling someone as 'Co-dependent' could be viewed as them having a mental illness, or in some other derogatory way and add a stigmatizing label to an already difficult set of life circumstances (Steadman-Rice, 1998; York, 2010). For these reasons this paper focuses on the 'psychological characteristics,' and other empirically verified consequences that have been identified in adult child samples. This is more respectful, and therefore more desirable, than taking a globalised view and declaring the sample as 'Co-dependent'.

The utmost care has been taken to represent the comparisons made here fairly, and equitably (BPS, 2009). The term Non-Exposed Women (NEW), to group the dream content of women's dream content that was used for comparison, and Women Exposed to Addiction (WEA) was used when

referring to the women who took part in this study. The term 'Problem Drug Use/User' (PDU) was used to ensure a non-judgemental language style. All ethical measures that were put in place ensured that each participant left the study in a more informed way than when they entered it. These ethical concerns determined the descriptors used to label the WEA. Therefore, although measures of waking characteristics associated with growing up in an addicted family were used, avoiding labelling the participants as 'Co-dependent' was upheld. Instead the focus was on the specific psychological consequences that were measured using questionnaires. This provided an opportunity to describe the sample, and associate waking traits, with their dream content. No individual analysis was undertaken.

2.4. Data Handling

All the dreams were handwritten and submitted using the SDD. Each dream was transcribed verbatim into a Word document. The researcher transcribed each dream to become immersed in the data (Braun & Clarke, 2006, Phase 1 described in Section 2.3.2). The dream reports were scored and analysed using DreamSAT (Downloaded at: <http://www.ucsc.edu/dreams/DreamSAT/>). Any other statistical analysis was undertaken using the Statistical Package for the Social Sciences (SPSS; Version 19).

3. Results

3.1. Reliability Coefficients for Questionnaires Assessing Waking Response Patterns

Cronbach's Alpha for total scores on Codependency Assessment Tool was .88. Alpha for each factor was as follows: Focus on others = .73; Self-esteem = .93; Hiding feelings = .97; general health = .85; family of origin = .71. The reliability for each measure was sufficient to conclude the tests were reliably measuring each construct, despite the small sample size.

Section 1: Quantitative Analysis

3.2. Waking Measures

A summary of the findings of measures taken relating to waking response patterns appears below in Table 1 and 2.

The means scores for each factor on the CODAT were higher for WEA than those published by Martzoff, Hughes-

Table 1. Descriptive Scores for the Co-Dependency Assessment Tool (CODAT)

Scores	Mean	Standard Deviation
Focus on Other	11.00 (7.96)	2.89
Self-Worth	10.69 (6.61)	5.28
Hiding Self	12.23 (9.24)	5.57
Health	8.23 (6.24)	3.32
Communication in Family of Origin	12.54 (4.90)	4.10
Average Total Score	54.69	13.34

Note: The scores for non-clinical females appear in parentheses. Taken from: Martzoff, Hughes-Hammer, Estok & Zeller, 1999. Results refer to Women Exposed to Addiction

Table 2. Descriptive Scores for the Child Roles Inventory (CRI)

Scores	Mean	Standard Deviation
Lost Child	7.38 (13.5)	2.50
Mascot	13.31 (19.5)	3.06
Hero	10.92 (19.4)	3.01
Scapegoat	14.46 (10.5)	4.16

Note: Test means appear in parentheses. Taken from: Wampler, Downs & Fischer, 2009 Results refer to Women Exposed to Addiction.

Hammer, Estok & Zeller (1999). Table 1 shows that women taking part in this study focused more on others than themselves, had low self-esteem, displayed fronts rather than show their true selves, had more medical problems and reported higher levels of dissatisfaction with the poor communication levels in their addicted family system. Total scores indicated that the WEA were mildly co-dependency (see Section 2.2 for interpreting levels of co-dependency using CODAT).

The Child Roles Inventory (CRI20) identifies the roles adopted within an addicted family system that follow children into adulthood. Compared to the published means presented by Wampler, Downs & Fischer, (2009) the participants in this study scored lower in terms of the published test scores for a sample of 603 female students. However, test scoring rules ensure that roles within any sample are identifiable. The average scores calculated for each role adopted within

the family of origin show that WEA identified as acting as the family 'Mascot' and being the family 'Scapegoat.' (See section 2.2 for scoring details)

3.3. Information Regarding Sleep Quality, Dream Recall and Perceptions of the Quality of the Reported Dream

Sleep quality did not differ between the two groups ($t = 1.478$, $df = 216$, $p = >0.05$), with both WEA and NEW average score indicating they slept well. WEA reported more dreams per week than NEW ($t = 3.172$, $df = 216$, $p = <0.05$: means WEA - 3.71 vs. NEW - 3.00). WEA also reported more dreams as vividly recalled after waking compared to NEW ($t = 2.988$, $df = 216$, $p = <0.05$: means WEA - 5.85 vs. NEW - 5.30).

Table 3: Women Exposed to Addiction vs. Non-Exposed Women Using Hall & Van De Castle's Content Categories

	WEA	NEW	H statistic	P value	N WEA	N NEW
Characters						
Male/female %	50%	52%	-.05	.603	252	220
Familiarity %	51%	60%	-.18	*.019	357	348
Friends %	36%	36%	+.01	.909	357	348
Family %	13%	22%	-.25	** .001	357	348
Dead & Imaginary %	3%	3%	-.01	.873	392	376
Animal %	6%	6%	+.02	.828	392	376
Social Interactions						
Aggression/Friendliness %	39%	42%	-.07	.384	423	237
Befriender %	93%	50%	+1.04	** .001	258	121
Aggressor %	55%	47%	+.17	.190	148	103
Physical Aggression %	32%	32%	-.00	.993	169	117
Social Interactions Ratios						
A/C Index	.43	.31	+.29		392	376
F/C Index	.44	.39	+.11		392	376
S/C Index	.08	.06	+.06		392	376
Self-Concept %						
Self-Negativity %	85%	56%	+.67	** .001	124	203
Bodily Misfortunes %	44%	27%	+.35	.058	55	63
Negative emotions %	81%	80%	+.04	.746	172	164
Dreams with at least One:						
Aggression	61%	58%	+.05	.694	118	100
Friendliness	65%	64%	+.03	.835	118	100
Sexuality	17%	12%	+.13	.339	118	100
Misfortune	32%	43%	-.22	.103	118	100

Note: * $p = 0.05$, ** $p = 0.001$. NEW = Non Exposed Women; WEA = Women Exposed to Addiction

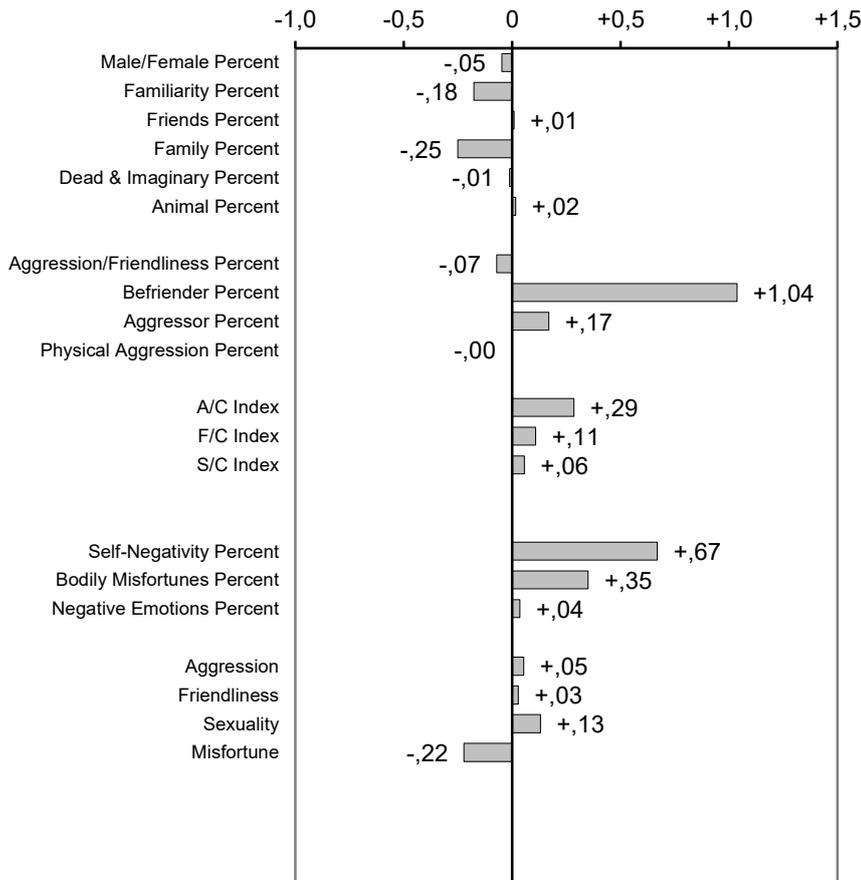


Figure 1. H Profile-How WEA's Proportional Scores Differ from NEW for the Main Categories of Hall and Van de Castle's Content Analysis System

3.4. Content Analysis Results

The findings of the content analysis comparing 'WEA' vs. 'NEW' appears in Table 3 and Figure 1. Table 3 shows percentage findings for the categories that were coded, the h statistic and the level of probability associated with the proportional differences of the h statistic. Figure 1 contains the h profile which shows the differences between NEW vs. WEA.

The h profile in Figure 1 identifies difference in the 'h' statistic for WEA compared to NEW. The 'h' profile for NEW is expressed along the central, vertical line that runs through the length of the chart. WEA 'h' values show in how they deviate from this central line by being more or less frequent to NEW's findings. Tables 2 and 3 show there were four statistically significant differences from the seventeen comparisons. With reference to the nature of characters mentioned in dream reports, WEA reported fewer familiar characters ($p = <0.019$), and made fewer references to family members ($p = <0.001$). The proportion of male and female characters were comparable NEW as were references to friends, animals and dead characters.

Analysis of the frequency of social interactions showed there were no significant differences for the aggression/friendliness per cent, the dreamer as the aggressor, the dreamer being the initiator of aggressive interactions, or the frequency of physical aggression. However, WEA referred to befriending characters significantly more frequently than

NEW ($P = <0.001$).

The self-concept scales showed that WEA reported more self-negativity ($p = <0.001$). There were no differences in the frequency of references to body misfortunes or negative emotion. There were no differences for the number of dream reports containing at least one aggression, friendliness, sexuality or misfortune. This findings shows that the dream reports from each group were comparable in terms of scoring both sets of dream reports.

3.5. Frequency of Reporting Boyfriends and 'Exes'

The number of references made to boyfriends, ex-boyfriends or sexual characters were counted as separate frequencies. Table 5 shows the percentage results for WEA compared to NEW.

Boyfriends and exes were reported more frequently by WEA. Both NEWs and WEAs dreamt of 'others' with similar frequency. These differences in frequency were tested using the 'h' statistic. The size of 'h' is used to make statements regarding statistical significance. H is based on the number of reports in each group and the proportional difference between frequency counts. In this study an N of 108 was calculated and for comparisons between samples. The calculated size of 'h' must be equal to, or greater than, .27 (see Domhoff, 1996 for instructions on calculating h). The critical value of $h = .27$ was used in all probability testing presented in Tables 5, 6, 7, 8, and 9.

Significantly more references were made to current boy-

Table 4. References to Boyfriends, Ex-Boyfriends and Other Romantic Males

Category	NEW	WEA
Boyfriends	12%	21%
Ex-boyfriends	6%	14%
Sexual interactions with others/strangers	4%	5%

Note: * p = 0.05. Note NEW = Non-Exposed Women WEA = Women Exposed to Addiction

friends (h = .273, p = <0.05), and ex-boyfriends (h = .304, p = <0.05) by WEA. Both WEA and NEW reported comparable romantic encounters with other dream characters (unfamiliar characters and known males).

3.6. Analysing the Nature of Aggressive, Friendly & Sexual Social Interactions

The results describing the nature of this aggressive interactions analysis appears in Tables 6, 7, and 8.

The nature of aggression differed significantly in three key respects. WEA reported more acts of destruction (h = .45, p = <0.01), more acts of verbal aggression (h = .65, p = <0.001), and significantly fewer acts of covert aggression (h = .27, p = <0.05). WEAs reported similar frequencies of murder, serious attack, chasing or confining, and serious threats.

A 2x2 contingency table in Table 6 shows a proportional statistic for the sex of each character involved in aggressive and friendly interactions. The two tables for WEA and NEW have been combined below in Table 6. The A/F Table shows the aggression as a proportion of both aggressive and friendly interactions by sex of the dream character. The proportional value in each cell reflects the number of aggressions initiated by male characters/ the total number of male characters. For example, in NEW's dream reports aggressive interactions were present in .36 dreams.

There were some clear differences in aggressive interactions with male and female dream characters when NEW and WEA were compared. WEA reported more aggressive interactions with both male (.36. vs. .56 respectively) and female (.25 vs. .39), dream characters. WEA reported less friendliness with male characters but more friendliness with female characters. On average, there were 1.86 references to friendliness with other female dream characters in each dream report. In contrast, WEA reported more aggression,

Table 6. Aggression and Friendliness by Sex of the Dream Character

Category	NEW		WEA	
	Males	Females	Males	Females
Aggression	.36	.25	.56	.39
Friendliness	.46	.49	.14	1.83

NEW = Non-Exposed Women; WEA = Women Exposed to Addiction. These proportional differences are used for descriptive purposes only.

Table 5. Aggressive Interactions by Sub-Category

Category	NEW	WEA
Murder	4%	3%
Attack	9%	11%
Chasing-confining	14%	7%
Destruction *	5%	19%
Serious Threat	1%	2%
Rejection	21%	27%
Verbal *	26%	39%
Covert *	21%	11%

Note: * p = 0.05. Note NEW = Non-Exposed Women WEA = Women Exposed to Addiction

per character, towards females in their dreams. The percentage of dreams where the dreamer was the victim of aggression was calculated. The dreamer was the victim of aggression in 38% of NEW's dream reports compared to 41% of WEA's dream reports. This difference was not statistically significant. The nature of friendly interactions appear below in Table 7.

When the nature of friendly interaction were compared, WEA reported significantly fewer references to physical acts of friendliness such as hugging or kissing (h = .27, p = <0.05), but made significantly, more references to helping, and/or protecting other dream characters (h = .28, p = <0.05). There were no other differences in the nature of friendly interactions.

WEA reported significantly fewer references to petting (h = .451, p = <0.001) during sexual interactions, and more references to kissing (h = .293, p = <0.05).

Hall and Van de Castle's content analysis system scores the frequency of references to emotion in dream reports. These are compared below in Table 9.

WEA reported significantly more references to feeling angry than NEW controls (h = .38, p = <0.05). References to apprehension, confusion, sadness and happiness were comparable with no statistically significant differences.

3.7. Findings of the Structured Dream Diary

The Structured Dream Diary utilises scales that measured

Table 7. The Percentage of Friendly Interactions by Sub Category

Category	NEW	WEA
Marriage	3%	4%
Physical *	14%	6%
Dating or Inviting	18%	10%
Helping or Protecting *	29%	38%
Gift or loan	3%	4%
Verbal	24%	33%
Covert	9%	5%

Note: * p = 0.05. Note NEW = Non-Exposed Women WEA = Women Exposed to Addiction

subjective aspects of dreams. The findings presented below show differences in dream experience between WEA compared to NEW for self-esteem, emotional intensity, perceiving the dream as a nightmare, and any distress felt after waking from the dream.

3.8. Self-Esteem

Perceived self-esteem during the dream was measured using a 7 point scale. The mean score for feelings of self-esteem during dreams was 4.04 for WEA compared to a mean score of 4.41 for NEW. WEA reported significant less self-esteem compared to NEW (t = -2.064, df, 216, p = <0.05).

3.9. Dream Emotional Intensity & Nightmare Frequency

There was no significant difference in dream emotional intensity between WEA compared to NEW (t = -.322, df, 216, p = >0.05). Participants were asked if the dream they were reporting was a nightmare. WEA reported fewer nightmares than NEW (t = -2.021, df 216, p = <0.05).

3.10. Distress after Waking

There were no significant differences in the level of distress felt by dreamers in either group after waking from their dreams (t = 1.037, df 216, p + >0.05).

3.11. References to Mood Altering Substances and/or Behaviours

Percentages were calculated for the number of references to alcohol, drug, or behavioural addictive (i.e. gambling, resisting food, overeating, smoking nicotine or drugs). Overall, 17% of WEA's dream reports contained references to substances compared to 7% of NEW's dream reports. Of this overall percentage, 12% of the dreams involved the dreamer themselves ingesting chemicals, and 5% of 'current partners' were reported as 'being under the influence'. There were no references to parents using mood altering substances. Three examples of the dreamer being 'under-the-influence' were taken verbatim from the dream reports:

P004 "I think I was drinking and looked back to see a girl on my BF's lap. Clearly drunk now and panicking, I asked people "where is my partner?"

P005 – "I went to visit my ex-boyfriend. There was lots of

drugs and subterfuge involved in the story-line"

P008 – "I had been on a night out and when I woke up, I smelt strongly of mephadrome (a legal high). The smell was everywhere and everyone started calling me a 'druggie'"

When another character used drugs it often occurred in parallel to another negativistic behaviour. For example:

P001 - "She (sister) stole money off me so she could go to the pub"

P008 – "I got a drunk text off my boyfriend saying her had slept with some girl"

These examples suggest that when the dreamer, or a significant other appeared in a dream, and the dream included drug use, the outcome was often detrimental to the dreamer's relationship with self, and/or a significant other.

Section 2: Qualitative Analysis

3.12. Themes Identified Using Hall's Five Point Model of Continuity

The following qualitative themes were identified from reading the dream reports. These themes have been structured according to Hall's (1953) theoretical work pertaining to the 'Continuity Principle'.

1) How the Dreamer Viewed Their Role in Relationships

There were three salient themes identified from the analysis regarding how WEA's reported aspects of themselves in dream reports. Firstly, how they perceived their role in their current relationship is outlined. Participant 0006 said: "I was a character in a game called 'Final Fantasy'. My boyfriend was controlling the character I was playing. I was asking him to let me play properly; he refused to let me." This description describes an almost puppet like level of control that the dreamer feels by her boyfriend during the dream. Another excerpt shows the need for 'make-up' in order to not feel exposed in a new situation, regarding the boyfriend's family. Participant 0005 states: "I dreamt I was meeting my boyfriend's family for the first time. We were at his grandparent's house and for some reason, I didn't have any make-up on, so I felt uncomfortable". This example expresses the need to wear a social mask rather than be their true 'naked'

Table 8. Percentage of Sexual Interactions by Sub-Category

Category	NEW	WEA
Sexual Intercourse	33%	24%
Petting *	5%	0%
Kissing *	43%	55%
Sexual Overtures	0%	12%
Sexual fantasies	19%	9%

Note: * p = 0.05. Note NEW = Non-Exposed Women WEA = Women Exposed to Addiction

Table 9. Percentage Results for Hall & Van de Castle's Emotions Category

Category	NEW	WEA
Apprehensive	32%	27%
Angry *	16%	32%
Sad	19%	16%
Confused	13%	8%
Happy	20%	17%

Note: * p = 0.05. Note NEW = Non-Exposed Women WEA = Women Exposed to Addiction

self when meeting their partner's family. There seems to be a sense of the importance about this meeting and possible consequences if it doesn't go well.

There were two dreams that contained very similar content, but with very different outcomes. Firstly, *"I dreamt that all my friends had plucked their eyebrows into narrow lines. It looked awful, but I decided to do the same, just to fit in"* (Participant 0007). In juxtaposition, and with evidence of unorthodoxy, Participant 0001 says: *"A new trend was catching on. There were lots of other women in the dream (strangers to me). They all had their hair cut and dyed. It was something you did to belong to this group. I wanted no part of it and felt I did not belong"* The analysis shows how the participants expressed their views of themselves as: controlled, bare and naked without social-sanctioned feminine paraphernalia, like make-up. Some participants were unwilling to go along with the crowd, choosing not to follow everyone else and be an individual in their own right. Whilst others, found this missing shield overwhelming or frightening.

A second theme constructed from several dream reports described body image and weight issues, attractiveness and feminine acceptable ways to solicit male attention. P006 gives a very poignant view of herself: *"I am invisible – no one notices me."* Participant 0008 said *"I was too fat and ugly for the Debutante's Ball."* And, Participants 0007 stated: *"My boobs started to grow and were most unattractive. I had these horrible stretch marks but I didn't know what to do to make it stop."* Participant 0013 found herself agreeing with her boyfriend who says: *"You are a slag, in it (slang)?"* These aspects of the dream reports show how self-concept is tied to stereotypical views of women, as they remark on fear of being 'fat' or 'ugly.' The parts of their bodies that they describe as ugly were not caused by themselves, or anyone else in the dream, so the physical changes they described would be classified quantitatively as 'body misfortunes'.

These misfortunes may reflect the pressure young women felt they were under to be physically attractive. However, the term 'slag' describes a woman who is promiscuous. For a young woman to be called a 'slag' is perhaps one of the most insulting things they can be called. This is because if the social stigma attached to women who sleep with many sexual partners. Yet, the narratives suggest that WEA see themselves as unworthy, they agreed with the insults directed at them and tried to change what other dream characters saw as wrong to make themselves acceptable to their partners. Women with self-respect and who liked themselves would in all likelihood: a) choose a partner who treated them with respect, or b) realise they have made a bad choice and end the relationship (Kasl, 1989).

Thirdly, the dream reports often illustrated feelings of self-doubt and confusion. Some dreamers, acted in direct contradiction to the events unfolding in the dream. Participant 0005, stated: *"I was with my boyfriend who was lying again! I was trying to find out the truth but realised he was right and I was wrong."* Participant 0004 says: *"We are in water swimming and I see a shark straight away. I push my daughter up on the bank and turn around to kick the shark. I suddenly realise it has my boyfriend's face. Then it suddenly changed and I think I must have been mistaken."* Beattie, Wells-Miller and Miller (2003) talk about one of the core issues that women exposed to addiction in childhood must face. They discuss 'difficulty owning one's own reality' where people affected by addiction have difficulty believing their own perceptions. In dreams this is related to being ignored, at-

tacked or abandoned as children within the family of origin for truthful saying what they see. These young women may expose dysfunction within the family system. Adult children learn to mistrust their instincts, perceptions and may even deny what is happening right in front of them (Bradshaw, 1986). This inability to maintain one's own sense of reality is perhaps one of the most damaging consequences of being raised in a family where addiction is present. These dreams show that outside of waking awareness their dreams show that intuitive experiences are ignored and the trust levels with others were, at best, low. The co-dependent trait of experiencing difficulty in owning one's own reality is clearly evident in the dream content of WEA.

2) How Women Exposed to Addiction Perceived Other Dream Characters

The majority of references to the dreamer's current relationships involved arguments, disagreements, boyfriend infidelity and a lack of confidence in their partner's ability to either help, or support, them. Three examples for each theme were chosen as indicators of the latent content embedded within in WEA's dream reports.

Arguments with boyfriends were present in several dream reports. Participant 0001 states: *"My boyfriend storms out and takes my car.... I find my car crushed at my house."* Participant 0002 states: *"I went upstairs to take a bath with my boyfriend. I notice he is leaning on me very hard. I tell him so, but he pushes harder. He tries to drown me."* Participant 0007 says: *"My boyfriend was trying to break in. I was holding the door closed with both hands. I remember saying 'NO' many times"*. These excerpts from the dream reports showed how boyfriends execute aggressive actions towards the dreamer by harming their possessions or person.

There were references to their current partner's infidelity. Participant 006 reported: *"I dreamt my boyfriend had cheated on me. I stormed out of the house and walked into a graveyard..."* Participant 0001 reports *"I saw my fiancé holding hands with someone else. I run off before he sees me."* Participant 0005 says: *"We stop and he tells me that he has been accused of doing things with other girls, by my friends. I knew they wouldn't lie."* There were also times when the dreamer was unfaithful: *"I am having sex with a strange guy I do not know. My boyfriend is watching me."* Another participant reported: *"A very strange dream: I was with a woman. I kept trying to hug and kiss her. I knew I would have to tell my partner"*. Finally, *"I am with D, a friend, he reaches over the gate to kiss me. I wonder if my boyfriend can see us."* WEA had sex or kissed another man in four dream reports. On these occasions, in three out of the four dreams, the sexual interactions were with a current male friend in waking life. In the fourth dream the boyfriend watches whilst the dreamer has sex with a strange man.

3) How Women Exposed to Addiction View the World

As the researcher, this was perhaps the most difficult theme to identify because I shared the same cultural world as the participants. By 'bracketing off' my own experience (McLeod, 2003), it was possible to identify the following themes.

The first theme in this section was the commonplace, everyday nature of daily life, and the irregular actions of another dream character within it. For example, P003 says:

"I am at work when my boyfriend comes in and we start to argue..." Or, "I was in Pulse, a nightclub at home. I was with my friends.... when suddenly my ex-boyfriend turned up, insisting he must pick us all up, but he is driving my car!" (P001). P004 reported: "I was at my Uni halls but suddenly ran out of food. I decided to go down to 'Cost Cutters', the local shop. There was a man in there pretending to be a student, trying to use a student discount card. I ended up vouching for him, even though he clearly wasn't a student" Finally, "I was with my mum and two brothers. We were hiding in a hedge to get away from my mum's ex-husband".

Part of how WEA view the world seemed to be marked by the absence of some key dream content. There were fewer references to relationships with mothers, fathers and siblings; usually frequent dream characters. When mothers were present, the dreamer's descriptions of 'motherhood' were very insightful. WEA described interactions with their mothers as argumentative, and unsupportive. The dreamer often reported a lack of support from their mother: "I told my mother that I was pregnant and she immediately started trying to get me a pill to get rid of it".

Furthermore, there is evidence of sibling rivalry and vying for the mothers' attention: "I went to find my mum to moan about my sister, but I found her with my (alcoholic) sister and siding with her!" The dreamer says: "I saw my mum's name on the credit card he was using and realised her identity had been stolen by this man." This theft of identity could have reflected the dreamer's waking perception of their mother putting men before her relationship with her daughter. Although there were significantly fewer references to family members in WEA's dreams, when mothers were referred to it was usually with regard to their partners or exes, or how the dreamer expressed the emotional nature of their relationship with their mother. In summary, dreams in WEA show family difficulties with mothers and siblings. References to fathers were infrequent. In some cases mothers were not present in the dream, or when they were they were presented as unsupportive or favoured another sibling. The dreams collected from WEA often portrayed men as deceitful which may describe experiences during waking.

4) The Dreamers' Unsocial Impulses and Punishment Styles: Applied to Self or Others

Themes that included 'unsocial' impulses involved illegal drug use, sexual encounters with strangers, the damage or destruction of another dream character's personal property, or the demonstration of unsupportive actions from female dream characters. "My grandma took the thing that belonged to me so I could swim. I almost drown because she had taken it away." This dream seemed to suggest the need for female support and the lack of ability to 'swim' when it is removed. The dreamers were also very explicit about their own anger/punishment styles. P0001 reports: "We tipped rotten food and stuff all over the girl's car. Then we threw her clothes out of the window and laughed!" In addition, P6 says: "I locked my BF out of my halls because he had cheated on me." Finally, this dreamer tells how she is punished when she is late for a class after spending time with her boyfriend: "My lecturer told me it wasn't worth my showing up because I was late, and he refused to let me in." (P2). The punishments styles of the dreamer and some other dream characters showed: a) a lack of support in times of need, and b) the dreamers' willingness to damage other

people's property in order to get even.

5) How Women Exposed to Addiction Expressed Their Pre-Occupations and Concerns.

WEA's current concerns that were expressed included: dreams of getting married, a fear of unwanted pregnancy, educational aspirations, and their relationships with ex-boyfriends. Marriage dreams included "I got flowers at work and then went home to a house that we (boyfriend) lived in. I walk in and see wine and a home cooked meal. After desert he got down on one knee and proposed. I said "Yes" (P0002). In another dream the dreamer watches whilst her partner marries someone else. She says: "I was horrified. I saw my partner at a type of alter with another woman. I realised he was marrying her instead of me. I was hysterical." (P0006)

Four dreams, each one from different participants centred on being pregnant. For example, Participant 0004, who titled this dream 'Pregnancy Nightmare' states: "I was with my Mum and two sisters on the way to a theme park. My mum said I had put on weight. I told her I was pregnant. My mum took me immediately to get some pills that would stop me having a baby. They didn't work, so I was banned by my Mum from going on any rides at the theme park". On other occasions the dreamer's current partner was directly involved in pregnancy dreams. Participant 0005 "I told my boyfriend I was pregnant. He started panicking and looking around for ways to get rid of it" and Participant 0003 states: "I realised I was pregnant and told my boyfriend. He said he wasn't ready and that I couldn't keep the baby."

An example of concerns about educational achievement linked to shame is taken from participant 0006 who dreamt: "I got a really bad grade in a report, so I hired a tutor to help do better. I didn't tell anyone about my bad mark." In another dream the dreamer's waking romantic relationship overtakes her education. Participant 0002 stated: "I was in my flat thinking about my boyfriend and I realised I had missed my exam. I ran to get to the exam room but the lecturer wouldn't let me in."

These themes show that WEA's dreams refer to their pre-occupations with relationships, including their hopes, and fears, for the future. They also dream about current issues including their education and fears of successfully completing their degree.

4. Discussion

4.1. Summary of Quantitative Findings

4.1.1 Waking Measures of Co-Dependent Traits

The results from the questionnaires that were used to measure traits associated with co-dependency, specifically the CODAT, showed that women exposed to addiction reported feeling unhappy about the current level of communication in their family of origin. They reported a tendency towards hiding their real self, and presenting a front to others, and focusing more on what other people needed, and less about their own needs. This predisposition has been associated with neglecting self (Hughes-Hammer, Martsof, & Zeller, 1998a). The results of the CODAT indicated that WEA did relate, at the time of completing the questionnaire, to traits and behaviours associated with being co-dependent in waking life, although it should be noted that none of them

presented as a self-declared, co-dependents.

The Child Roles Inventory made it possible to identify the responses that WEA adopted within their family of origin. These roles have been understood as survival techniques that children use to adapt within a family where addiction is present (Bradsahw, 1989; Wampler et al, 2009). The roles that WEA associated were the 'Scapegoat' and the family 'Mascot'. The Scapegoat is perhaps one of the most painful ways of dealing with being raised by an addicted parent. The Scapegoat 'acts out' so that attention is drawn away from the parent and is put upon them. By doing so, they become the family 'problem'. These findings are consistent with characteristics attributed to adult children raised in a family where PDU was present (Wampler et al, 2009). The role of Scapegoat has been linked to negative behaviours from the child (or adult child) that deflect attention away from the addicted parent (Wampler et al, 2009). On the other hand, the Mascot is the child in the family that tries to keep everyone happy. They use humour and their charismatic personality and charm to hide the problems within their family. But, they can be highly anxious and have difficulty expressing their painful feelings. The Mascot often presents as busy, highly social and striving to achieve in whatever they do. This 'front' hides the way they really feel. However, whilst externally they appear unaffected by their experiences in childhood, internally they still carry the scars of having an addicted parent. Because they appear so successful they find it very difficult to acknowledge their pain and ask for help.

Finding scores associated with the 'Mascot' and the 'Scapegoat' roles in the same sample is unusual, as these two roles are usually situated in opposition to each other (Wampler et al, 2009). However, this finding can be understood when the nature of the sample is considered. People who enter University show a desire to achieve, so participants may have been in the process of transforming their identity as 'Scapegoat' by leaving home and achieving at University. This interpretation has positive implications for adult children. The roles they adopt in their family of origin may not be fixed or permanent. Instead, adult children may be able to adopt a much more positive position within their relationships and succeed during adulthood. This is typical of the family Mascot. The behaviours linked to these roles were explored in dream content, and are considered later in the discussion.

4.1.2 General Sleep and Dream Information

In terms of general sleep and dream information, there was no difference in sleep quality between NEW and WEA. However, WEA reported having more dreams and reported recalling dreams more vividly after waking. Issues such as sleep quality, dream recall rates and the vividness of recalling dreams could affect the quality of dream reports used in the analysis. Because of this, it is important to pay attention to these details so that they do not confound any differences that were identified. One way the impact of vividness of recall can be checked is by paying attention to the number of dreams containing at least one aggression, friendliness, sexual interaction, and misfortune. None of these comparisons were significant, suggesting the dream sets were comparable.

4.1.3 The Findings from Hall & Van de Castle's Content Analysis System

Using HVCAS (Hall & Van de Castle, 1966) statistically significant differences were found in the dream content of WEA compared to NEW. Three of these related to the dream characters category. Firstly, WEA reported fewer family members than NEW. Secondly, WEA reported fewer known dream characters. Thirdly, there were more references to boyfriends and ex-boyfriends compared to NEW. Therefore, the hypothesis that WEA would more frequently report more boyfriends was supported, but the prediction they would report more family members was refuted. There were more strangers, but fewer familiar characters, and family members in the dreams reported by WEA. These two findings suggest that one of the dominant concerns of WEA were their romantic relationships; both past and present. This may be an issue that could be addressed in waking therapy under the heading of 'unfinished business' (Schredl, 2012).

Fourthly, WEA made fewer references to familiar characters compared to NEW. Interpreting this finding, it may be that the lack of familiar characters in dream reports reflects the dreamer's waking sense of feeling unknown to others. This behaviour would also apply to the Mascot role where what is presented externally does not reflect internal feelings (Wampler et al, 2009). This sense of feeling unknown may be projected onto other unknown dream characters. This finding is related to Hughes-Hammer, Martsof and Zellers (1998b) paper where hiding self from others is a trait in adult children from addicted families. WEA reported higher scores for 'hiding-self' and presenting a front than those reported in the paper that validated the CODAT (Hughes-Hammer, Martsof, & Zeller, 1998b). Another interpretation was that unknown dream characters may replace dreams containing family members. A high percentage of dreams focused on boyfriends and ex-boyfriends so other unfamiliar dream characters may have been peripheral to the themes unfolding in these dreams.

Schredl (2003) reported that the amount of time women spend with their romantic partner in dreams is related to the amount of time they spend with them during waking. Women in relationships spend 50% more time with their partners in dreams, while people who are single in waking life dream less of romantic encounters in dreams. Further research could focus on women exposed to addiction who are currently in a relationship vs. those who are single. This may help out tease out the effects of being raised in a family where addiction is present compared to being in a relationship with someone who is addicted.

The numerous references to relationship-type dreams reported by WEA, may also be linked to significantly fewer references being made to family members, such as parents, sisters, brothers and extended family such as grandparents, aunts and uncles. This finding was in direct contrast to the hypothesis that WEA would report more family members. This hypothesis was refuted because of this finding. Based upon the literature it was assumed that WEA would dream more of parents than NEWs. The hypotheses was justified by the referenced amount of chaos and unpredictability that can be found in a family when an addicted parent is present (Bradshaw, 1988; Vellemans, Templeton & Copello, 2005). This unpredictability has been described as addictive in its own right (Carnes, et al, 2005) and may be associated to the choice of partner that adult children choose in adulthood, being in a relationship with a PDU, and the associated drama

that comes with this, replicates their childhood experiences (Vanicelli, 1989; Vellemans, Templeton & Copello, 2005). This explanation, and the findings of this study suggested that any concerns for the addicted parent may have been replaced in the dreamer's waking preoccupations and concerns by the issues related to their current romantic relationship. Because WEA dreamt so frequently of romantic relationships this provided support for the idea that partners of PDU, think of about their romantic relationship as obsessively as the PDU thinks about using drugs (Melody, 1989; Beattie, 1990).

The lack of references to parents suggested that the focus of attention had shifted from parents in the family of origin, onto the participant's current "significant other". Therefore, WEA replace their concerns for parents and place them on the boyfriends. The hypotheses that the number of boyfriends in dreams of WEA would be significantly more frequent than NEW was strongly supported. The prediction that WEA would report more references to ex-boyfriends was also supported. The finding that there were a significant number of references to ex-boyfriends in WEA's dreams may show that they process both current concerns, and unfinished business, with regard to both present and past relationships..

Predictions were made regarding aggression in WEA's dream reports. The frequency and nature of aggression was explored to find out if there were differences in aggression styles between NEW and WEA. WEA did not report significantly more instances of being the victim of aggression, so this hypothesis was not supported. The frequency of types of passive aggression were also identified as an area of particular interest. Bradshaw (1986), Beattie (1990) and Melody (2003) state that WEA show difficulties with being angry and expressing anger assertively. There were significantly more references to feeling angry in dream reports. Therefore, observing anger in dream content may provide a direct link to how WEA feel in waking life about the people they interact with every day.

Passivity as an aggression style was defined by content categories that counted thinking negatively about other dream characters, destroying their property or possessions, rejecting, ignoring or refusing another dream character. Specifically, WEA reported more destruction of other dream characters property. However, WEA reported significantly less covert aggression as measured by thinking negatively about other dream characters. There were no significant differences in rejecting, refusing or ignoring and other dream characters. But, WEA engaged in more arguments than NEW. This was classified as Type 2 aggression and included sneering, making criticisms of other dream characters, yelling or swearing at another dream characters (Hall & Van De Castle, 1966; Domhoff, 1996). WEA also made significantly more references to feeling angry in their dreams compared to NEW. These findings show that aggressive activity in the dreams of WEA requires more investigation. Interpreting this increase in type 2 aggression could mean that WEA have less difficulty addressing their frustrations in waking life, or that aggression, and anger, per se is a type of 'absent minded transgression' or the motivational energy that is expressed during dreaming because it is safe to do so (Hajek & Belcher, 1991; Colace, 2004). The latter explanation seems more likely, but this too needs further exploration. It is fair to conclude that the dreams of WEA were associated with their anger during waking life. The hypothesis that

WEA's aggression would differ from NEW was accepted. These findings may help in future operational definitions of passive aggression in WEA's dream content.

Furthermore, the hypothesis stating that there would be a differences in friendly interactions was also supported. More specifically WEA reported significantly more befriending of other females. The nature of these behaviours were more helping and protective acts of friendliness. However, there were fewer physical acts of friendliness, like hugging or kissing. These findings are in keeping with the waking literature which presents WEA as carers and peacemakers for PDUs (Steadman-Rice, 1996; Melody, Wells-Miller, & Miller, 2003). Dream friendliness shows that the caring nature of WEA is extended into their dream content.

However, with regards to sexual interactions it was predicted that WEA would report more sexual interactions, particularly in terms of partner infidelity (Carnes, 1998; Kasl, 1989; Norwood, 2008). There was no evidence to support this hypothesis, quantitatively. Qualitatively, there were references to both partner and dreamer infidelity. The sexual interactions in the dreams of WEA requires more exploration before any conclusions can be drawn. However, in terms of the nature of sexual interactions, WEA reported less petting and sexual intercourse but more kissing than NEW.

In terms of the dreamers' relationships with themselves, WEA reported more self-negativity than NEW. They also reported lower levels of self-esteem than NEW. There were no significant differences in terms of negative emotion or body misfortunes, although the latter did tend towards significance. The hypothesis that WEA express difficulties with their own self-concept was supported.

Dream self-negativity was calculated by dividing the total number of negative events (misfortunes, failures and negative emotion) by the sum of both negative and positive counts for these categories. The frequency of body misfortunes, such as being ill or hurting one's self accidentally did tend towards significance ($p = 0.58$). This is relevant when interpreting how women describe themselves in dream reports. Specific examples of misfortunes were reporting such as having stretch marks, or breasts that grew enormously, or finding out, sometimes suddenly, that they were pregnant. These misfortunes were not caused by any other characters within the dream and as were coded as misfortunes. Further aspects of dream content that supported the continuity principle, were the number of references to self-esteem and self-negativity. Both were indicators of waking psychological difficulties measured using CODAT, and the CRI. These findings show that WEA's most important relationship; the relationship they had with themselves was expressed in dream content. This finding could be used to improve their self-esteem in therapy during waking life.

4.1.4 *Drinking and Using Dreams*

Perhaps the most outstanding finding of this study was that WEA reported experiencing 'drinking' and 'using' dreams. This finding has considerable implications for theories relating to dreams and addiction. The statistically significant finding that WEA dream more frequently of drinking than people in early recovery from an addictive behaviour (Parker & Alford, 2009), shows the degree of pre-occupation that WEA have with drug or alcohol use. It is possible that the participants in the WEA group were all chemically dependent themselves. They were asked if they had an addictive behaviour during the intake interview. 85% of these women

reported that they did not have an addictive behaviour. It is impossible to report these findings without acknowledging that they may have been chemically dependent themselves; statistically though this is highly unlikely.

The majority of 'using' dreams were negatively toned and often contained deceitful behaviour, or the absence of a key dream character like a parent, or current partner. The qualitative difference between these 'using' dreams and those reported by chemically dependent people is that there were no associated rituals involved with being intoxicated. For example, there was no drug related paraphernalia, no evidence of thinking about getting intoxicated, no drug dealers or alcohol retailers; instead, the dreamer just finds themselves 'under-the-influence' (Parker & Alford, 2009).

These findings propose a challenge to the research relating to dreams and addictive behaviours, as it currently stands. The assertion that it is only addicted people who dream of 'using' or 'drinking' is refuted and clearly challenged by the findings of this study (Christo and Franey, 1996; Colace, 2004). Previously, using dreams have been understood as showing a motivated wish for chemical use, or as absent minded transgressions that emerge during dreaming after being suppressed all day (Hajec & Belcher, 1991). Therefore, dreams of drinking or using drugs have been understood to show cravings which have been suppressed during waking, but which find satisfaction during dreams. Without question, this study shows that that what causes drinking or using dreams needs much more consideration both theoretically and empirically. Future studies must which include the context where the dream is collected and who is reporting the dream before the meaning of drinking or using are implied.

Furthermore, these findings suggest that the causes of drinking/chemical dreams are much more complex than has previous been realised. The findings of this study show that WEA made significantly more references to 'being-under-the-influence' than NEW. However, both groups reported dreams containing references to alcohol or drug use. This suggests that WEA and who reported being non-addicted, and NEW that have not been exposed to a loved-one's problematic drug use also report 'using' dreams, the latter to a much lesser extent

Another interpretation for WEA being under-the-influence in their dreams is the psychological defence mechanism of 'introjection'. This involves a person attributing to themselves, someone else's distressing behaviour or characteristics. This defence functions by making the behaviour of 'others' less painful and gives the dreamer more of a sense of mastery if they see themselves as 'the problem.' This is very indicative of the role the family 'Scapegoat' adopts (Wampler, Downs & Fischer, 2009). 'Introjection' in the dreams of WEA who identify with the Scapegoat role may include the dreamer being 'under-the-influence'. This may have allowed the dreamer to feel more in control, even omnipotent during their dreams in comparison to the difficult attachments that surround them during waking life (Winnicott, 1986).

Schredl's (2003) formula regarding which waking content is included in dream content has also been helpful when interpreting these findings. Schredl asserted that there were five factors that influence which waking content was included in dreams. These were: emotional involvement, type of waking-life experience, personality traits, time intervals between the stimulus and the dream, and the time of

night the dream occurs. As the data here was collected on a prospective, on a day-to-day basis, the concerns of the dreamer were more easily connected to waking life. With some certainty, it has been possible to conclude that emotional attachment to the issue that was dreamt about was of considerable, if not paramount importance when determining dream content. Time since the events does not seem to be an issue when it comes to events that are deeply ingrained into the dreamer's psyche, rather dreaming allowed these unresolved issues to be played out and firmly acknowledged. But also the nature of day-to-day events such as arguments, stressful deadlines and clashes with priorities also influence what finds itself included in dream content. The weight of a dream researcher's knowledge can be used alongside family therapists work to help dreams become an intrinsic part of therapy for adult children (Kane, 1997). A tentative conclusion concerns additional factors that mediate the appearance of drinking, or drug using dreams is the dreamer's the close proximity to addiction in waking life. This is in addition too the dreamers' emotional attachments to the people, settings, interactions, objects, emotions or issues surrounding the addictive behaviour.

Waking measures of the psychological characteristics of co-dependents also factor into the interpretation of dream reports. These are some of the benefits of collecting dreams over a period of time. Collecting dreams for one month made it easier to identify the deeply entrenched concerns that were embedded in the dream reports. For example, concerns about fidelity, the trustworthiness of partners and the dreamer's difficulties with their self-esteem. These concerns seem to be played out regularly in WEA's dream reports. The interpretation of this finding was that dreams showed that WEA felt insecure, rather than comfortably attached with respect to romantic relationships.

4.1.5 Qualitative Analysis

The use of thematic analysis to bring Hall's (1953) five factor model of continuity alive was extremely useful, and at times deeply moving. To summarise what thematic analysis brought to the interpretation of the dreams reports is now discussed. With regards to how the dreamer viewed themselves (Point 1), they reported feeling passive in relationships and like they didn't fit in to the World generally. Some reports showed that WEA had difficulty trusting their own preceptions and often capitulated their sense of reality or truth to the contrary information presented in the dream by their boyfriend. Some participants showed a desire to be like other women. They expressed their low self-esteem in harsh terms and compared themselves to other women with very little self-compassion. Other participants expressed a need for their own individual identity, not wanting to fit in with other groups of women, WEA's view of romantic relationships whilst mentioned in Point 1 as feeling passive, was outlined in much more depth in Point 2 which showed how the dreamer viewed other dream characters. This analysis focused upon WEA's relationships with boyfriends and family members. There were many descriptions of arguing, feeling rejected, or unsupported. In terms of trusting significant others, there were incidences of infidelity by boyfriends, but the participants also engaged in sexual activity with people who were not their boyfriends. Mostly they were intimate with ex-boyfriends or their waking, male friends. These intimate moments were often embedded in regrets or the hint that relationships may be better with other men. But

the concern of whether their boyfriend would find out about their infidelity was ever present.

How the dreamer viewed the world (Point 3) reflected the everyday nature of the their immediate settings where arguments and chaotic behaviour happened in public. The everyday nature of arguments and the theft or destruction of their property happened in the workplace, in University halls of residence, or at the family home. Qualitative analysis showed there was little support from other family members in situations where the dreamers needed them. Boyfriends argued with them in public. In all cases when the dreamer attempted to access support, they failed. One participant talked about the sibling rivalry in her family where she had to compete for her mother's affection with a sister who was an active PDU, and her brother. The dreamer's unsocial impulses and punishments styles (Point 4) included destroying another dream character's property or, by ridiculing and putting down another dream character. The dreamer's self-talk was also harsh and shaming. The dreamer was often very unkind in how they viewed themselves, or more specifically, how they viewed their body image, and would often relay this to other dream characters. The waking preoccupations and concerns of WEA were their romantic relationships, becoming pregnant, how they looked physically, the desire to get married, their fear of failure in education, working life, or relationships (Point 5).

One overall conclusion regarding Hall's 5 Point model was that WEA dream about past, present but also the future possibilities for their lives. This suggests that dreams are not only related to past events or current issues but also to future possibilities (Knudson & Minier, 1999). The thematic analysis provided a clear basis that could represent WEA's dream life and the continuity with waking life. How the dreamer viewed themselves, the world, other dream characters, how they express unsocial impulses and their own self-concept worked really well as a way of making explicit aspects of dream reports that were not suitable for content analysis. Qualitative thematic analysis (Braun & Clarke, 2006) allowed meaning to be inferred from the dream narrative and what the dreamers were communicating about their lives. Therefore, Hall's (1953) model for assessing continuity is very useful for theoretically guided, thematic analysis. The model adds considerably to the interpretation of dream reports and helps to add meaning to them when dreams are treated as a narrative. However, to be clear, thematic analysis was not an adjunct to quantitative content analysis. Thematic analysis is a suitable method for analysing dream reports in its own right, and as equally useful as quantitative analysis. Teddlie and Tashakorri (2009) would describe the design of this study as QUANTITATIVE = QUALITATIVE. The use of capital letters giving a weighting to each part of the study's design. The qualitative analysis used in this study was highly structured, required skilful interpretation and add a 'realness' (or validity) to the dreams of WEA that could not have been achieved in any other way.

4.2. Advantages and Disadvantages of the Study

Like any research this study has strengths and weaknesses. One weakness was that NEW's dreams reports were re-analysed after being collected separately, and used in a previous study (Parker, 2008). It would advantageous to have a control group that completed all waking measures, and who recorded their dreams for one month alongside the WEA. This approach would have had the advantage of identifying

concerns in the NEW's lives that presented themselves on a day-to-day basis. However, with this in mind, there were only four significant differences found between the two groups of women and these differences were pertinent to the effects of growing up in family where addiction was present.

An advantage of this study was that studies using Hall and Van de Castle's (1966) content analysis system report the frequency of content categories. In this study the nature of the social interactions categories including aggression, friendliness and sexual activity were analysed using the sub-categories defined by Hall and Van de Castle (1966), were also reported (i.e. aggression). This allowed the nature of dream behaviour in relation to aggression, friendliness and sexuality to be described in more depth. Studies focusing on social interactions may find this additional analysis useful.

The themes identified in the qualitative analysis were theoretically driven using the work of Hall (1953). Staying focused on Hall's concept of continuity, didn't allow for any other, discontinuous themes to be identified (e.g. bizarreness). Using the same data set the exploration of discontinuity may provide additional insights. Furthermore, Braun and Clarke's (2006) thematic analysis provided a highly structured, process of interpretation and proved as informative as the quantitative analysis. The benefits of designing a study that includes both quantitative and qualitative methods can be clearly identified in this paper. Taking this approach it became possible to answer 'how' and 'why' questions, as well as 'what' the data contained (Teddlie & Tashakorri, 2009; Todd, Nerlich, McKeown & Clarke, 2004).

Quantitatively, the dream content of NEW vs. WEA was in many ways more similar than dissimilar. However, the statistically significant differences and themes that were identified were directly linked to the literature that has outlined the psychological consequences of being raised in a family where addiction is present. Dreams also appear to reflect the nature of waking relationships with current partners and ex-partners, and by omission the nature of relationships with their parents. These findings add considerably to the validity of measurements included in the study and to the qualitative exploration of dream themes. Finally, the triangulation of waking questionnaires with the content analysis of dream reports and, the qualitative analysis of each dream as a narrative, added considerable to the analysis, as well as ensuring as much validity as possible. Dream research generally would benefit from using mixed-methodological designs to study dream content. The triangulation of multiple research methods allows deep understanding of dream report content (Teddlie & Tashakorri, 2009).

4.3. Personal Reflection

In qualitative research a reflection, in the first person tense, of the influence of the researcher is expected (Braun & Clarke, 2006). I have 35 years' experience of working with, and knowing both PDUs and members of their family. I have worked therapeutically with many women who have been deeply affected by their experiences in childhood with their addicted parent(s) and/or partners. Addiction was present within my own family as well. Therefore, I could not have analysed these dreams without these factors affecting my expectations, predictions and conclusions. I have used the technique of 'bracketing off' my own experiences as much as possible (McLeod, 2003). This involved putting my own opinions, feelings and reactions to one side so that

the dreams of WEA could be outlined with as little influence from my own experiences as possible. These factors are both advantages and disadvantages of the final reporting of this study.

4.4. Further Research

There is an need for further research in this area. The most obvious addition to the literature would be to study men who have been exposed to addiction childhood, and who were in a relationship with a PDUer. Referring to this study, it may be that WEA who enter university education differ in some way from those who do not. In addition, one of the key attributes that can counter the affects of being raised in a dysfunctional family is the individual's ability to be resilient (Connor & Davidson, 2003). This means that children, and adults, have the inner resource of being able to 'bounce back' from childhood trauma or neglect and, turn adversity into success. Evidence of resilience may be apparent in the participants in this study, but this was not measured. To explore resilience with regards to dream content, in more depth it would be advantageous to include a waking measure of resilience such as the Connor Davidson-Risk (Connor & Davidson, 2003), or the Brief Resilience Scale (Smith, Dalen, Wiggins, Tooley, Christopher, & Bernard, 2008). Both of these measures have been shown to be reliable and valid assessments of the 'resilience' construct (Windle, Bennet & Noyles, 2011). Including a measure of resilience and then highlighting positive elements of dream reports would also provide a more balanced view of WEAs' dreams. Dream research tends to focus upon problematic issues in dream-life (excluding lucidity research). Using this approach it may be possible to highlight WEA's strengths, as well as any difficulties they have, and link dream content to positive, waking attributes.

Despite the differences that were identified in this study, 39% of this sample indicated they were 'happy' in their current relationship. Exploring the dream content of those who were content in their relationships with those who were not may have highlighted differences between them based upon relationship satisfaction. In addition, comparing the dreams of WEA who are currently in a relationship with a PDU should be compared to WEA who are in a relationship with someone without problematic drug use should also be explored and compared. The data set will be re-examined by investigating the content of dreams containing strangers vs. known characters, focusing specifically upon social interactions. This may help unpick the function of unknown dream characters in WEA's dreams. Secondly, the dreams will be explored by identifying those participants who identified as 'Scapegoats' and be compared to those who identify as the family 'Mascot'.

One of the most important findings of this study was the increased frequency of references to drinking, or drug using dreams reported by WEA. As the majority of 'using' dreams involved the dreamer being under-the-influence, a future study should compare women who have been exposed to problem drug/alcohol use in childhood and who, as adults, are self-acknowledged problematic drug users with the dreams of women exposed to addiction but who do not use drink or use drugs problematically. The possibilities for studies in this area are many and varied. As a researcher, I welcome other researchers alone, or in collaboration with me, to work with this particular population.

4.5. Implications for Professionals

For professionals working with this client group, it would be of significant benefit to ask their clients how they understand the interactions within their dreams, and what these say about their client's preoccupations and concerns. Most insightful is the use of non-directive therapy methods that utilise reflective statements to encourage deep explorations of dream content, allowing the dreamer to make sense of their previous, and present, waking experiences (Khan, 1997; Mearns & Thorne, 2007). An example of this is taken from P006 (p.22) who stated in her dream "I am invisible; no-one notices me" (P006, p.22). This statement is indicative of another child role not included in the CRI20 (Wampler, Downs & Fischer, 2009), called the 'loast child', who would have used withdrawing from the family as a means of coping (Bradshaw, 1986). An obvious series of reflections would be to ask the client when she feels this way, what it means to be invisible, when did she first have this feeling and, how does being invisible affects her relationships with significant others in the 'here-and-now' (Mearns & Thorne, 2007).

This study used Hall's five aspects of the reported dream that may outline the waking pre-occupations and concerns of WEA. The findings of this study support Kane's (1997) ideas for using dreams to explore issues in the therapeutic arenas related to family functioning. Specifically, to show how dreams inform not only the client, but also the therapist, regarding what remains unaddressed, or unknown, in waking life. It is important to note, and make manifest, the absent parenting that these dreams depict and, to place a strong focus on this in therapy (Beattie, 2003; Bradshaw, 1986; Vanicelli, 1989). This would allow dreams to be used as vehicles for increased self-perception, knowledge regarding current concerns and anxieties regarding their current romantic, relationship. Furthermore, observing changes in dream content as therapy progresses may indicate when issues have been resolved and when other issues are surfacing (Parker, 2008). This short summary is by no means complete, as many other questions may arise when exploring dream content within the therapeutic space.

By focusing on those who live with a PDU, and seeing them as affected by the family as a system, dreams seem suitable for highlighting difficulties and possibly to identify the positive changes that could be implemented within waking relationships. Hopefully, dreams can be used to help family members to move toward a more 'open' way of functioning (Vellems, Templeton & Copello, 2005) and prevent the inter-generational consequences of addiction by addressing the consequences of being raised in a family system where addiction is present, dealing with them and moving on.

4.6. Conclusions

In conclusion, from this exploratory study it has been possible to provide considerable evidence that WEA's dreams do differ significantly from NEW's dreams. Using both quantitative and qualitative methods of analysis, the symbiotic relationship between waking and dreaming seems easier to unravel. However, the relationship between waking life and dream content is by no means simple. The very nature of dreams makes identifying dominant concerns in the dreamers' lives, in some cases, very difficult. However, Hall's work on the continuity principle (1953) provides an excellent template for exploring the key elements in dream reports

that are linked to waking life. The pairing of quantitative and qualitative research methods used in this study provided a clear way to systematically explore dream reports with regards to content that is continuous with waking life.

Clearly, any research, or theory, that suggests that only addicted people experience using dreams is clearly challenged by these findings (e.g. Colace, 2004), as are assertions that dreams in addiction can be used for prognostic purposes (Choi, 1973; Christo & Franey, 1996). Understanding the context and proximity of PDUers to the dreamer is perhaps the next step for studies focusing on dreams and addiction.

Concerning the dream life of WEA by a parent's problematic drug use, and who continue to be exposed in their current relationship, there is still so much work to be undertaken by dream researchers. The suggestions made here for using dream content in counselling, should be explained to WEA to help them to take charge, and empower them to understand their own dreams. Clearly, women exposed to addiction, dream of drink, drugs and other associated behaviours regularly, as part of their own dream life. Through dreams they also express their difficulties in parental and romantic relationships. Unexpectedly, it is more likely to be a WEA who dreams of using drugs in dreams rather than their PDU partner or parent. One thing is certain, the problematic use of chemicals, be it via a parent, or a romantic partner, impacts upon the dream lives of the women who are in close proximity to them. I hope that this paper initiates debate, and further research in the dreams and addiction arena. This new and exciting area for dream research is open to much more research. Finally, I have to acknowledge the participants, who I actually think of as co-researchers. I wish these courageous women every success in their aspirations for a better life.

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