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Personality and Individual Differences 41 (2006) 733–744

PERSONALITY AND  
INDIVIDUAL DIFFERENCES

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# Personality, psychopathology and nightmares in young people

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Received 17 October 2005; received in revised form 11 March 2006; accepted 22 March 2006

Available online 18 May 2006

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## Abstract

The current study investigated the relationship between nightmare experience, psychopathology and personality in a sample of 148 Australian school students aged between 12 and 18 years. In this sample, adolescents who experienced high levels of nightmare sleeping distress also tended to experience high levels of nightmare waking distress. Adolescents who experienced higher frequency of nightmares also tended to experience higher levels of nightmare waking distress. Frequency of nightmares was not associated with nightmare sleeping distress. No significant difference for gender was found on any of the nightmare measures. All psychopathology scores intercorrelated strongly and psychopathology was associated with all three nightmare measures. Anxiety was the most commonly reported correlate of all three nightmare measures. The hypothesis that nightmare sleeping distress was predicted by personality and psychopathology was partially supported. Nightmare sleeping distress was more likely to be associated with high levels of neuroticism and with lower levels of psychoticism, but not with extraversion. However, other hypotheses predicting a mediational model for personality and psychopathology with nightmare frequency and nightmare waking distress were not supported.

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*Keywords:* Nightmares; Adolescence; Personality; Psychopathology

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<sup>1</sup> This paper is part of a thesis presented for degree of Master of Behavioural Health Science at University of Sydney.

## 1. Introduction

Nightmares are typically frightening and lengthy dream sequences which depict physical or other threats to the dreamer (DSM-IV: American Psychological Association (APA), 1994, p. 580). While it is not always possible to determine the cause of nightmares in individuals (Belicki & Cuddy, 1991), prior research has suggested that nightmares appear to be caused by the experience of some form of traumatic life event (Anders & Eiben, 1997; Hearne, 1991), genetic predisposition (Erman, 1987; Murray, 1990) or personality factors (Claridge, Davis, Bellhouse, & Kaptein, 1998). Whatever their cause, their frightening content usually provokes high levels of anxiety and disturbs the sleep of the dreamer (DSM-IV: APA, 1994, p. 580).

The observed pattern for nightmares is of a higher incidence among young children which decreases as they become more autonomous. Nightmares increase again over time with the stressors of adolescence associated with puberty, school, relationships and taking on greater adult responsibility (Kashani, Rosenberg, & Reid, 1989). With increasing age through adulthood, it appears fewer dreams are reported (Giambra, Jung, & Grodsky, 1996). There are inconsistent findings as to whether females recall more nightmares than males (Chivers & Blagrove, 1999; Schredl, 2000; Zadra & Donderi, 2000).

### 1.1. Nightmares and distress

In previous literature on distress associated with nightmares, most often the focus has been on nightmare waking distress (reactions and concerns of the dreamer during waking hours relative to experiencing nightmares) and nightmare frequency, rather than nightmare sleeping distress (emotions experienced by the dreamer during the dream itself). Studies comparing nightmare waking distress and nightmare frequency have generally shown only a slight relationship between the two variables (Belicki, 1992a; Levin & Fireman, 2002; Wood & Bootzin, 1990). Where nightmare sleeping distress has been studied, it has tended to be in the context of past traumatic events, such as sexual abuse or combat, and in that context a connection has been found between nightmare sleeping distress and nightmare frequency (Belicki, 1999; Belicki & Cuddy, 1996; Van der Kolk, Blitz, Burr, Sherry, & Hartmann, 1984).

### 1.2. Psychopathology

Previous research has commonly found psychopathology to be associated with nightmare experience. Frequent nightmares have been shown to be associated with higher levels of waking anxiety and related distress (Cuddy & Belicki, 1991; Levin & Fireman, 2002; Zadra & Donderi, 2000). Additionally, frequent nightmares are also likely to be associated with depression (Bilici, Yazici, Oezer, & Kavakci, 2002; Kashani et al., 1989; Levin & Fireman, 2002; Zadra & Donderi, 2000), and with a combination of depression and anxiety (Agargun et al., 1998; Levin & Fireman, 2002).

### 1.3. Personality

Studies into the relationship between nightmare experience and the personality factors of neuroticism, psychoticism and extraversion have yielded varying results. While some studies have

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