

FEATURE

The washing machine of the mind

Rima Sidhpara talks to **Justin Havens** about the Dream Completion Technique, a safe and easy-to-teach stabilisation technique to stop traumatic nightmares

Rima: Firstly, Justin, reflecting on the conference, I thought it was such an interesting presentation that you gave, and there was a lot of positive feedback in the chat room. There will be many journal readers who haven't attended the conference, so can you tell us a bit more about what the Dream Completion Technique is, how you came to be doing this, and what kind of results you are finding?

Justin: The first thing really is to describe in a little bit more detail the problem. The problem isn't dreams, because we all dream for two hours every night. The problem is when those dreams morph into nightmares, which is essentially a very disturbing dream that wakes someone up and which has a massively detrimental effect on their quality of sleep, their moods and their emotional state. It's very prevalent in those who've experienced trauma; having traumatic nightmares following trauma can be the brain trying to process the trauma. But it

gets stuck. Then it's almost like a fuse blows, and it comes into their conscious awareness and wakes them up. That is really the problem I was trying to address. Freud talked about dreams as the 'royal road to the unconscious', but he didn't really address nightmares and the impact on sleep.

But I'm more interested in traumatic nightmares and the very detrimental effect they have. And for those with post-traumatic stress disorder (PTSD), the nightmare, or the unprocessed trauma, is central to the PTSD. So, the Dream Completion Technique really came about through wanting to address that problem, and looking at what was already out there in some CBT-type interventions, called image rehearsal therapy treatment, for example; and building on the work of Dr Beverly Dexter, an American military psychologist, who had come up with some enhancements and improvements to make it easier, more flexible and safer to use, and basically more effective.

The main concept behind the Dream Completion Technique is, firstly, understanding why we dream and why we have nightmares, and understanding that, while it feels as though we don't have control over our dreams, actually we do; and although we can't change the traumatic event and what happened many years ago, we can change what's going on in our dream. So, the nuts and bolts of the Dream Completion Technique are that we ask ourselves what was going on in the dream at the point of waking. The person doesn't need

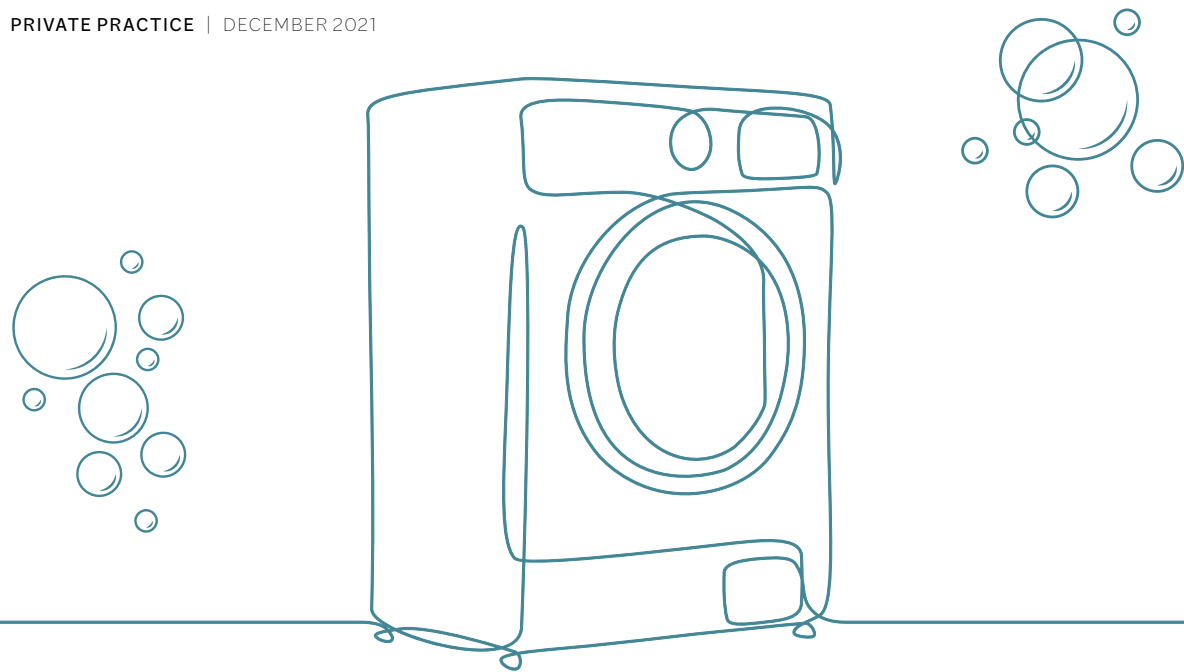
to tell the therapist, which is important, because it may be extremely traumatic, even shameful. And at the point of what is going on when they wake up, they ask themselves what they want to happen that feels good. It's not about creating a consistent narrative, because the dreamworld doesn't really have a narrative, it's about creating a powerful idea before they go to sleep that they want to happen in their dream. And then, as the dreaming process unfolds, that idea finds its way into the dream. They may not be aware of it, but the interesting thing is that, just as night follows day, if it's a powerful enough idea, they won't get woken up, and the dream process will complete. And when the dream process completes, the PTSD and trauma symptoms reduce. That's the by-product, which is great.

Rima: That's really useful. Could you give readers an idea of how effective it is? It's a brilliantly simple technique, but you do need a bit of creativity in terms of helping the client in how they might change their dream, don't you?

Justin: In creating the new dream idea, we're not rescripting the whole dream, we're just creating an idea to end the dream in a new direction. And so, yes, there is creativity there. It is a structured technique, and it does, in a way, fall within CBT-type practice, but it can be used very creatively by therapists of any modality. The results

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really came from my PhD work, which was developing and evaluating this with military veterans. So, I was teaching it in groups, and we were evaluating impact on sleep, nightmares and PTSD symptoms. Obviously, there was a continuum, from those who really got it, implemented it, and for whom it worked after a couple of nights, through to those who got some benefit, and those who weren’t able to put it into practice, for whatever reason. But that was almost using it as a learner technique and as self-help. Generally, if therapists are using this, the ability of the therapist to coach the client to come up with their dream idea and support them through it, is what really makes the difference. But even so, the effect sizes were large. In terms of the impact on PTSD symptoms, they were reduced by an average of 50% across the cohort, which is significant because this is not an invasive, long-term or resource-intensive treatment. So, the results are encouraging. We have more research coming up in an IAPT service in Manchester, where we’re going to be doing this at the beginning of PTSD treatment, either CBT or EMDR trauma-focused CBT. We’ll be looking at the impact not just on the nightmares, but also on the outcomes and duration of therapy, which is also interesting because we all know long waiting lists and a lack of resources are issues in NHS services. So, if we can make therapy more effective, then that’s a great thing.

Rima: That sounds like valuable research. I really like that it is universal for any therapist. What sort of training would you recommend

therapists go through, and where would they go? Is it something that you offer?

Justin: Yes; I developed a five-minute video animation, which is freely available on YouTube. If you search on Dream Completion Technique or Justin Havens, you’ll see it, in English and in about eight different languages. And that’s freely available. I also offer a two to three-hour webinar for therapists to learn how to use the technique with clients, which is really about immersing them fully in it. I’ve run those periodically over the last couple of years. There have probably been a few thousand therapists who have gone through that. So, it’s quite exciting and there has been a lot of interest from different parts of the world and from different organisations. I’ve done trainings for organisations like Rape Crisis as well as NHS services and some military veteran charities.

I haven’t developed a brand-new concept. I’ve taken all the best things that exist out there and tried to create a way of communicating those ideas. That’s where the video animation comes in, to help people grasp the simplicity of the idea. But also, as I said, although it is a structured concept, it requires creativity to come up with the new dream idea. To give an example: people don’t always have dreams and nightmares about stuff that’s happened; it could be an existential fear of being chased, and then waking up breathless and sweating; that is not uncommon. The new dream idea would not be something that would probably happen in real life, like hiding behind a wheelie bin. It would probably be something much more like face and conquer – you turn

around and now you’re 10 feet tall, you blow slightly and whoever is chasing you gets obliterated – something like that. And of course, it’s dreamworld, so anything can happen. And that’s a core part of what the video is trying to convey: that it’s your dream, it’s your world and you can do anything you want. There are no constraints and there are no laws of physics, morality, or anything. So, if you are a soldier and you’re having dreams about the battlefield, and then it goes badly wrong, you can have all your friends, all your best mates there. You could look to your left and right and see soldiers, your comrades there with you. You can draw on memories and imagery; a lot of people draw on films, because they’re incredibly powerful, or on things they’ve done, or sporting events. So if you’re being tormented by someone in your dream, your new dream idea might be a golf ball with their face on it, and you hit a clean ball into the sea. It sounds silly...

Rima: I love it though; it makes sense and it’s very empowering to notice it moving from fear to control and power.

Justin: It is a paradigm shift, and the tricky part is getting people to accept that it is possible. Some people have what I call ‘composite dreams’ – dreams of multiple, traumatic events, which can sometimes be worse than the events themselves, which can be absolutely horrendous. The person who is having the dream is experiencing that, and though it is all in the head, it is a real experience. Once they realise, they can go from utter powerlessness to ‘I can do what

the hell I want’, it is very empowering. It’s also a skill for life. Once they’ve done it and it’s been successful – it may work on the first night, it may take two weeks – and once they know that if it doesn’t work, they just create a new idea, no nightmare is too scary for them. Dreaming is normal. Nightmares are to be put back in the box, or, as we call it in the video, in the washing machine of the mind.

Rima: I really like the washing machine metaphor. The animation video is great – I recommend that readers watch it. Regarding client groups: does the technique work with children and other client groups? And is there anyone it wouldn’t work with?

Justin: Yes, it could work for anyone. There’s a great book, for which I wrote the foreword, called *The Dream Director*, by Krysten Taprell, which is really putting these ideas into illustrated children’s stories. So, yes, it does work with children, and for any adult.

It’s not therapy, it’s a therapeutic intervention. And the person doesn’t need to disclose what is going on in their nightmare. Also, the new dream ideas can be violent. A lot of people think that wouldn’t be acceptable, but if you think about Tom and Jerry, that is extremely violent, but we don’t get traumatised by it. And the dreaming mind doesn’t traumatise us if we have a violent dream intervention. It just puts it back in the washing machine and says, ‘thank you very much’.

Rima: A final question: what do you do if someone doesn’t remember their dream when they wake up?

Justin: That is an important group of people, because technically they wouldn’t be diagnosed with having nightmares, because they can’t remember the dream. But the dreams are still extremely disturbing; the person might be sweating, screaming, shouting – particularly those who’ve experienced violent trauma. There could be up to 20% of the population who experience disturbed sleep in this category. There is not much research on it, but the good news is that this approach does work with them. We obviously can’t work with any dream content, but what we do work with is the sensation or emotion on waking. For example, people waking up drenched in sweat can imagine themselves standing in a wind tunnel or driving a convertible down the Pacific highway. It still works. And in my research, it seems to work better or more reliably with these people.

It’s not about the therapist telling the person what they’ve got to do, it’s about co-creating an idea that feels good at a gut level – that’s the really important bit with this intervention. That’s what separates it from some of the previous techniques. The final metaphor I can use, is that earlier techniques are a bit like throwing a dart at the dartboard: if you get it in the bullseye, great. This technique is about walking up to the dartboard and putting the dart into the bullseye. You have much greater certainty about what you’re doing. And, of course, it may not work every time on the first night – that’s unrealistic. But, if the person is coached through and is determined, they will get the idea that it really works and rings

true reasonably quickly, and that’s what makes all the difference.

Rima: Thank you for speaking to me, Justin, and for coming to the conference. It was a fantastic presentation. I think all therapists will find this technique helpful for their clients. ●

WORDS



Justin Havens is a psychological therapist accredited by BACP and EMDR Europe. He has worked within the NHS, the charitable sector and in private practice. He completed his PhD in 2019, which was about developing and evaluating the Dream Completion Technique at the Veterans and Families Institute (Anglia Ruskin University). He has a passion for bringing safe and effective tools to the field of trauma therapy.



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FIND OUT MORE

Justin’s website is justinhavens.com. Justin’s YouTube link is: <http://tiny.cc/stopnightmares>.