Chapter 5

Consciousness

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Interactive Presentation Slides for Introductory Psychology: 4.2 Altered States of Consciousness

Worth Video Series:

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HANDOUTS

HANDOUT 5.1: Dream Diary

HANDOUT 5.2: Dream Survey

HANDOUT 5.3: Drug Slang

Chapter Objectives

After studying this chapter, students should be able to:

1. Define *consciousness* and *phenomenology*, noting how the study of consciousness poses unique challenges to science.

2. Explain the *problem of other minds*, noting the dilemma we face when trying to perceive the consciousness of others.

3. Explain the *mind–body problem*, examining various views of how the mind and brain are linked.

4. Describe the four basic properties of consciousness: *intentionality, unity, selectivity,* and *transience*.

5. Contrast *minimal consciousness, full consciousness,* and *self-consciousness,* discussing the evidence for each state of awareness.
6. Describe the experience sampling technique of studying consciousness; summarize recent findings on the contents of consciousness and daydreaming.

7. Discuss the research evidence on thought suppression, with particular attention to the rebound effect and the ironic processes of mental control.

8. Contrast Freud’s idea of the dynamic unconscious with the more modern idea of the cognitive unconscious, and discuss the work on subliminal perception in regard to the general concept of consciousness below the surface.

9. Describe the stages of sleep over the course of a typical night, and discuss how sleep and wakefulness are part of the cycle of circadian rhythm.

10. List some of the benefits of a good night’s sleep and some of the consequences of sleep deprivation.

11. Describe insomnia, sleep apnea, somnambulism, narcolepsy, sleep paralysis, and night terrors.

12. Describe the five major characteristics of dream consciousness that distinguish it from the typical waking state.

13. Compare the psychoanalytic theory of dreams with the activation-synthesis model.

14. Summarize which brain regions are activated, and which are deactivated, when we dream.

15. Explain how drug tolerance, physical dependence, and psychological dependence occur in the ingestion of psychoactive drugs; describe how animal drug self-administration studies have contributed to our understanding of these processes.

16. Compare the categories of psychoactive substances, noting how depressants, stimulants, narcotics, hallucinogens, and marijuana differ in their potentials for overdose, physical dependence, and psychological dependence.

17. Describe two theories that have been offered to account for the varied effects of alcohol on behavior: expectancy theory and alcohol myopia.

18. Explain why hypnosis qualifies as an altered state of consciousness and discuss differences in susceptibility to hypnosis.

19. Describe the research findings on the effects of hypnosis, with particular attention to the recovery of lost memories, posthypnotic amnesia, and hypnotic analgesia.
I. Conscious and Unconscious: The Mind’s Eye, Open and Closed

(Chapter Objectives 1–8)

Consciousness is a mystery of psychology because other people’s minds cannot be perceived directly and also because the relationship between mind and body is perplexing. Nonetheless, people’s reports of their consciousness can be studied, and these reveal basic properties such as intentionality, unity, selectivity, and transience. Consciousness can also be understood in terms of levels—minimal consciousness, full consciousness, and self-consciousness—and can be investigated for content such as current concerns, daydreams, and unwanted thoughts. Unconscious processes are sometimes understood as expressions of the Freudian dynamic unconscious but are more commonly viewed as processes of the cognitive unconscious that create and influence our conscious thoughts and behaviors. The cognitive unconscious is at work when subliminal perception influences a person’s thought or behavior (without the person’s awareness).

Lecture Suggestion 5.1

S’Right? Sorites

An old joke goes something like this:

Rube: “Feller, this here ax was used by George Washington to chop down a cherry tree. It’s been in my family for generations.”

City Slicker: “Really? It looks pretty new to me.”

Rube: “Well, we did change the handle four times, and replaced the blade three times.”

The joke raises a good point: When does a thing become not-a-thing? This was a problem noted long, long ago . . . so long ago, in fact, that Eubulides of Miletus in the 4th century BCE is often credited as its first developer. The problem is usually presented as a paradox or puzzle, typically called a sorites [soar-eyeteez] paradox. The Greek word soros means “heap,” and the original form of the paradox was a bit different: Would a single grain of sand be described as a “heap?” How about two? Three? At some point a heap must result . . . so what is that point? When does one thing become another thing?

Familiar variations on this paradox include the Ship of Theseus riddle and the famous pronouncements of Heraclitus. Imagine that Theseus, the king of Athens, returns home after a long sea voyage. His ship contains several rotten planks of wood, so the seafarers decide to replace them. Over time, as more of the boards rot, more of the boards are replaced, until eventually there is no original wood left. Is the Ship of Theseus still the Ship of Theseus? Similarly, as Heraclitus noted, can you step in the same river twice? It’s the same location, to be sure, but the swirling, eddying waters make it different even one split second to another.
There are many other examples of the sorites paradox, and many “solutions” have been proposed over the centuries. As a way to begin discussing consciousness, you might pose a similar question to your students: What makes you “you?” That is, where is the seat of your identity? If you were to unfortunately lose an arm, let’s say, and had it replaced by a prosthetic device, would you still be “you”? Most students would reason that, yes, the person in question would still be the person in question, although now perhaps more accurately described as “the person in question minus one arm that’s been replaced by a mechanical device.” So now imagine that both arms went missing, and both legs as well, all replaced by mechanical devices. Let’s add that the person underwent liposuction, a facelift, a nose job, and got a startling new haircut. In a flight of fancy, imagine that a head transplant were possible, followed by a brain transplant. At what point would the person stop being the person; or more accurately, at what point would one feel compelled to stop saying “it’s still the same person with modifications A, B, and C” and start saying “this is a new person”?

As students puzzle their way through this paradox, issues related to consciousness usually arise. Despite the replacement of limbs or the addition of plastic surgery, most students would argue that there’s something “inside” the individual that makes her or him who she or he is. Perhaps that thing is consciousness, the person’s subjective experience of the world and mind. Perhaps that’s also the seat of identity—why it feels as it does to be “you” and not to be someone else—and the origin of dilemmas such as the problem of other minds. It wouldn’t be surprising to find that students hold different standards for when they stop being themselves versus when a stranger stops being who the stranger is. For example, students might think that the loss of some limbs and a tummy tuck would be sufficient to turn someone else into someone-other-else but that it would take a lot more for themselves to turn into someone different.

There’s plainly no right answer to this brain teaser, other than to get some conversation going about what conscious experience is like, what self-consciousness is like, and the difficulties scientists face when grappling with such issues.

Sources:


Lecture Suggestion 5.2

Rat Introspection

There are plenty of attributes that humans have more of or use in better ways than other species. Standing erect, for example, or having a highly developed frontal lobe, come immediately to mind. But even those qualities can be challenged. Apes are pretty smart, and on a good day they can stand fairly tall when they want to. In fact, the laundry list of what sets humans apart gets shorter and shorter with new discoveries. We share about 98% of genes in common with chimpanzees, and certainly other animals have bigger brains than we do. So perhaps it’s not what you’ve got, but how you use it. The one attribute that’s long been reserved for humans is the ability to introspect, to know that we know things, to engage in self-reflection. However, recent research brings even this last bastion of consciousness under siege.

Jonathan Crystal and Allison Foote, of the University of Georgia, have gathered evidence to suggest that rats engage in introspection. The rats were trained to push one lever when they heard a short burst of static, and a different lever when they heard a long burst of static. Making the correct choice resulted in six food pellets, whereas making the wrong choice resulted in nothing. However, refusing to respond earned the rats three food pellets. Given this set-up, the smart choice would be to respond when certain of the answer, but refrain when not.

The rats did quite well when they had to identify two-second or eight-second bursts of static, but when they were presented with indeterminate lengths of noise (e.g., five seconds) they were more likely to refrain from answering and take the consolation prize. This suggests that the rats knew what they didn’t know. When the “don’t know” option was removed and the rats had to choose “short” or “long” for the intermediate bursts, they were no better than chance, getting about half of the discriminations correct. This can be taken as evidence that the rats previously opted out based on a reasonable judgment—“Do I know this one or not?”—rather than because of lucky guessing.

Similar results have been found by other scientists studying rhesus monkeys and dolphins; they decline to take a test when they don’t know the answer. Are these isolated examples, or a hint that some elements of consciousness that seem distinctly human might be up for grabs?

Sources:


Classroom Exercise 5.1

Cocktails, Anyone?

Selective attention is a mainstay of cognitive psychology and the study of consciousness. Most psychologists take for granted that attention is a limited resource that can be selectively allocated to one set of inputs versus another. We also recognize that some inputs—a person calling our name, for example, or the shout of “fire” in a crowded cocktail party—can redirect attention swiftly and surely.

To demonstrate some of these phenomena to your students, consider an example suggested by Michael Clump of Marymount University.

- Start by dividing your students into groups of three (with a typical class of 30 or so students, this produces 10 groups; for larger classes, you might consider asking for a sizable number of volunteers).
- Within each group, one person plays the role of Listener while the two others play the roles of Speaker 1 and Speaker 2. The Listener’s job is to always shadow Speaker 1, who tells an interesting (but different) story across three experimental conditions.
- Speaker 2, meanwhile, also speaks across conditions, but tells a story different from that of Speaker 1. As you’ve no doubt realized, this is a live on-stage demonstration of a dichotic listening task.
- The Listener in each group leaves the room as the Speakers in each group get further information and develop their stories.
- Speaker 1 is instructed to continuously tell a story about any generic subject: how to drive from campus to a local bar, perhaps, or the outcome of a recent sporting event, or perhaps an upcoming campus activity. Speaker 1 will need to develop three such stories for each of three conditions.
- Speaker 2 is instructed to give different information across each of the three conditions. In Condition A, Speaker 2 simply says random words and numbers at a rate of 1 word per second. In Condition B, Speaker 2 again says random words and numbers at a rate of 1 word per second, but occasionally includes the name of the Listener. In Condition C, Speaker 2 tells an interesting story that includes the Listener’s name, as well as information about the class, the major, the professor, or other details relevant to the Listener’s life. In short, Speaker 1 provides information consistently, whereas Speaker 2 provides information that varies in the degree of self-relevance of the Listener.
- When the Listeners return to the classroom after a few minutes, instruct them to sit between their respective Speakers.
- Both Speakers face the Listener, and on cue begin to talk in a slow and steady manner for 1 minute.
The Listener’s task is to shadow Speaker 1; that is, the Listener immediately repeats what Speaker 1 says, ignoring anything that Speaker 2 says.

After 1 minute has elapsed, the Listener writes down exactly what she or he recalls from both ears (i.e., the input from both Speakers) for 1 minute, while the Speakers prepare their next round of narration.

This process is repeated for the two remaining conditions.

Summary:

You, your Listeners, and your audience should find that the Listeners’ recall is excellent for Conditions A and B, but impoverished for Condition C. It’s not simply that there was distraction at work; after all, in all three conditions there were two streams of information supplied simultaneously. Rather, the self-relevant information provided in Condition C produced a particularly disruptive effect. What’s more, when you poll the Listeners’ recall of the non-shadowed information, you should find that it increases from Condition A to B to C as the self-relevance also increased.

Sources:


**Classroom Exercise 5.2**

Monkey in the Middle

Daniel Simons, of the University of Illinois Visual Cognition Lab, markets a 2-DVD set called *Surprising Studies in Visual Awareness* through a company called VisCog (http://www.viscog.com/). Both DVDs feature many examples of selective attention, divided attention, and other properties relevant to the nature of consciousness. If you want to illustrate some of the principles discussed in the textbook, this is a handy way to do so.

A preview video is available at http://viscog.beckman.uiuc.edu/grafs/demos/15.html to learn more about the product before purchasing it.

**Classroom Exercise 5.3**

Are You Experienced?

The Experience Sampling Method (ESM) has been used in a variety of settings over the last 20 years to measure emotion, social interaction, conscious experience, and other dimensions requiring a broad range of sampling. ESM typically involves a beeper that is
programmed to go off at random times throughout the day. When paged, the respondent wearing the beeper is instructed to complete a (typically) short survey of her or his experience. So, for example, studies examining the time course of mood throughout a day might use ESM to page a wearer at random points over a 12-hour period. With each “beep” the respondent records her or his mood on appropriate rating scales. Similarly, a study of social interaction might ask respondents to record who they’re with or what they’re doing with each beep, again over an extended period of time.

You might be able to use the ESM approach to gather some data from your students regarding the contents of consciousness. Depending on your resources this could be an activity for many students in the class or for one or two volunteers who rotate on a weekly basis. For example:

- If your university or department has the wherewithal to buy lots of pagers for use with lots of students, you might consider distributing them to members of your class (appropriately set to go off at random times during waking hours).

- Ask them to complete a “consciousness contents” survey with every beep.

- You can either develop the survey yourself or make it part of a class project (i.e., assign small groups of students to develop items). Some examples include “What are you thinking about right now?” or “What is the focus of your attention?” or “How alert are you right now?” or “What are your current concerns?”

- As an alternative, you might invest in three or four pagers that circulate for a few days among students in your course, providing interested parties with the opportunity to take part in the data collection.

Regardless of the logistics of your particular circumstances, work with your students to compile the results of this experience sampling. What’s on students’ minds at any given moment? Are there limitations to ESM that your students, having had direct experience with the method, can suggest? What elements of consciousness might not be measured with such a technique? With a little experience, your students should come to appreciate the methodology of studying consciousness.

Source:


**Classroom Exercise 5.4**

**Divided Attention**

While students and some professors tend to believe that they can multitask, especially when it involves using their cell phones, research supports the old adage, “to do two things at once is to do neither task well.” This demonstration will clearly show how dividing your attention leads to slower reaction times. Have eight volunteers come to the
front of the class with their cell phones. Line them up and have each individual take hold of the shoulder of the person in front of them with their nondominant hand, while they hold their cell phones in their dominant hands. Tell them that they are to squeeze the shoulder of the person in front of them when they feel their own shoulder being squeezed, and then measure how long it takes for a squeeze to travel down the line of students. Now repeat the procedure, but this time have the students make a call on their phones, or alternatively ask them all to start sending text messages, before starting to send the squeeze down the line. It will take considerably longer for a squeeze to travel the length of the line, provided that your participants are not so distracted that they miss the signal entirely.

Multimedia Suggestions

**Feature Film: The Science of Sleep (2006, 105 min, rated R)** Stéphane Miroux (played by Gael García Bernal) is a shy young man who moves to Paris and finds work in a calendar-making factory. In short order he also finds himself falling in love with his next-door neighbor, Stéphanie (played by Charlotte Gainsbourg). The problem is that Stéphane retreats to a bizarre fantasy world from time to time, where he is the star of his own dreams come to life. This film is not quite as interesting as it sounds, but some scenes may be useful for illustrating aspects of consciousness.

**Feature Film: Waking Life (2001, 99 min, rated R)** Austin filmmaker Richard Linklater (Slacker, Dazed and Confused, School of Rock, Fast Food Nation) directed this film that is unusual in many aspects. First, it uses a technique that animates live actors in a novel way. Second, there’s really not much of a plot, other than a young man (played by Wiley Wiggins) who encounters a range of people who talk about waking, dreaming, the meaning of life, consciousness, perception, awareness, and many other topics. Third, there are many well-known actors in the film who aren’t immediately recognizable, such as Ethan Hawke, Julia Delpy, Adam Goldberg, Steven Soderburgh, and Linklater himself. Also look for appearances by Glover Gill and Guy Forsyth (Austin musicians), Eamonn Healy (chemistry professor, St. Edward’s University), and Louis Black (co-founder and editor of the Austin Chronicle, and co-founder of the South by Southwest Music Festival).

**Feature Film: The Diving Bell and the Butterfly (2007, 112 min, rated PG-13)** Julian Schnabel directed this critically acclaimed film based on the writings of Jean-Dominique Bauby, the former editor of Elle magazine. The 45-year-old Bauby led a fast-paced life filled with glamour and travel until December 8, 1995, when a massive stroke left him in a locked-in coma, able to move only his left eye. Working with nurses and doctors, Bauby was able to communicate through a series of blinks to signal “yes” and “no” responses to choices in an alphabet. Astonishingly, Bauby went on to “dictate,” one letter at a time, Le Scaphandre et le Papillon (The Bubble and the Butterfly), a 137-page account of his locked-in state.

**Feature Film: Awake (2007, 84 min, rated R)** This psychological suspense story focuses on a man undergoing heart surgery while experiencing “anesthetic awareness.” In short, he’s awake but paralyzed throughout the operation. As various obstacles arise during the
procedure, his wife must make life-altering decisions while confronting her own troubled life. Things get weird. Things get ugly. Could there even be . . . murder? Jessica Alba stars.

See the Preface for product information on the following items:

**Interactive Presentation Slides for Introductory Psychology** 4.1 States of Consciousness

**PsychInvestigator** Limits of Consciousness

**Worth Video Series**

Video Anthology for Introductory Psychology: Consciousness – Automatic Skills: Disrupting a Pilot’s Performance

**Scientific American Introductory Psychology Videos**: Attention

**II. Sleep and Dreaming: Good Night, Mind**

(Chapter Objectives 9–14)

The sleep cycle involves a regular pattern of sleep and dreaming that creates altered states of consciousness. EEG and EOG measures have revealed that during a night’s sleep, the brain passes through a five-stage sleep cycle, moving in and out of lighter sleep stages, from slow-wave sleep stages to the REM sleep stage, in which most dreaming occurs. Sleep needs decrease over the life span, but deprivation from sleep and dreams has psychological and physical costs. Sleep can be disrupted through disorders that include insomnia, sleep apnea, somnambulism, narcolepsy, sleep paralysis, and night terrors. Dreaming is an altered state of consciousness in which the dreamer uncritically accepts changes in emotion, thought, and sensation, but poorly remembers the dream on awakening. The contents of dreams are related to waking life and can be understood by examining the areas of the brain that are activated when people dream. Theories of dreaming include Freud’s psychoanalytic theory, which focuses on symbolism and the unconscious, and more current views such as the activation–synthesis model.

**Lecture Suggestion 5.3**

Fatal Familial Insomnia

The textbook discusses the effects of short-term sleep deprivation, but students are often curious about the effects of total sleep deprivation. We know that when rats are deprived of sleep for 2–3 weeks their health precipitously declines. Their immune systems become impaired. The animals are unable to maintain a constant body temperature and they become sick and die. While such research is not possible or ethical in humans, a genetic abnormality provides us with an insight into what happens in humans.

In 1765, Venetian doctors were stumped by the death of a man who had suffered from insomnia for more than a year and spent his final months paralyzed by exhaustion. Over the next two centuries, many of his descendants would develop similarly fatal symptoms, with a range of misdiagnoses, from encephalitis to alcohol withdrawal.
The above passage is from Max’s book *The Family that Couldn’t Sleep*. The book tells the story of a rare genetic disease that has been found in just a handful of family lines: fatal familial insomnia. Individuals with this disease lose the ability to fall asleep, and eventually die from this condition. Fatal familial insomnia strikes afflicted individuals sometime between the ages of 30 and 60. Because the disease emerges in middle age, the genetic mutation has continued to be passed down along the generations. Onset of the disease does not appear to be related to any apparent trigger. Patients have been known to survive for up to three years, but most succumb within a year of onset.

Sources:


**Lecture Suggestion 5.4**

Lucid in the Sky with Diamonds

How do you know what you know? More to the point, *do* you know what you know? Substantial amounts of research on metacognition, action identification, self-assessment, and social awareness suggest that, in many domains, people do indeed know that they know things. But have you ever dreamed that you’re dreaming? Or, for that matter, have you ever dreamed that you’re awake? How do you know that you’re dreaming when you’re dreaming, or *do* you know that you’re dreaming when you’re dreaming?

A lucid dream is one in which the dreamer becomes consciously aware that she or he is dreaming. As the Hot Science box in the textbook points out, research on lucid dreaming is still somewhat controversial, given that the main marker of when a lucid dream is occurring is simply a subject’s self-report. “Feeling like I know that I’m dreaming” and “I know that I’m dreaming” may be very different things. Nonetheless, Stephen LaBerge and his colleagues have devised ways of signaling a sleeper when brain wave patterns indicate the person is entering REM sleep. By cueing the sleeper during that period, the sleeper would be able to communicate to the researcher when she or he was dreaming. Usually this signal involves moving one’s eyes repeatedly from left to right for a set number of times, and with training, this would serve as a signal that the dreamer was consciously aware of her or his dreaming.

One goal of lucid dreaming research is that dreamers might be able to control the course and content of their dreams. Facing a monster or running for your life during a dream can be altered if one knows that one is dreaming; why not consciously control your ability to fly away from the monster or vanquish whatever’s chasing you? In the world of psychoanalytic dream interpretation, the ability to control dreams may hold benefits for waking consciousness as well. There are promising avenues to explore with
research on lucid dreaming. The increasing sophistication of brain scanning techniques and neuronal measurement may assist those developments.

Sources:


**Lecture Suggestion 5.5**

A Dreamy Melody

There are probably more songs written about love and sex than dreams or sleep. But somewhere in the Top 10 are songs about dreams and sleeping, too.

Why not share some of these songs with your students? You can use them as a soundtrack at the beginning of class when you lecture on this subject, or you can simply use them to punctuate your comments throughout your presentation. Alternatively, you might share some of these titles with your students, and ask them to comment on the correctness of their content with regard to actual research on sleep and dreaming. What, exactly, are The Romantics singing about when they croon about “talkin’ in your sleep”? What do we know about sleeptalking—when it occurs, why it occurs, and who’s likely to do it?

Have a little fun with dream songs. They might even help your students stay awake in class!

**Title** | **Artist**
---|---
#9 Dream | John Lennon
After The Gold Rush | Neil Young
All I Have to Do Is Dream | Everly Brothers
All That You Dream | Little Feat
<table>
<thead>
<tr>
<th>Song</th>
<th>Artist</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behind the Wall of Sleep</td>
<td>The Smithereens</td>
</tr>
<tr>
<td>Blues Is Just a Bad Dream</td>
<td>James Taylor</td>
</tr>
<tr>
<td>California Dreamin’</td>
<td>José Feliciano</td>
</tr>
<tr>
<td>California Dreamin’</td>
<td>The Mamas and the Papas</td>
</tr>
<tr>
<td>Darn That Dream</td>
<td>Billie Holliday</td>
</tr>
<tr>
<td>Daydream Believer</td>
<td>The Monkees</td>
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<tr>
<td>Daydream Believer</td>
<td>Anne Murray</td>
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<tr>
<td>Daydream B-Liver</td>
<td>The Residents</td>
</tr>
<tr>
<td>Deep in a Dream</td>
<td>Artie Shaw Orchestra with Helen Forrest</td>
</tr>
<tr>
<td>Deep in a Dream</td>
<td>Frank Sinatra</td>
</tr>
<tr>
<td>Double Agent</td>
<td>Rush</td>
</tr>
<tr>
<td>Dream</td>
<td>Bob Dylan</td>
</tr>
<tr>
<td>Dream</td>
<td>Frank Sinatra</td>
</tr>
<tr>
<td>Dream a Little Dream of Me</td>
<td>Cass Elliot</td>
</tr>
<tr>
<td>Dream Flight</td>
<td>Lisa Thiel</td>
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<tr>
<td>Dream Girl</td>
<td>The Dave Matthews Band</td>
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<tr>
<td>Dream Lover</td>
<td>Mariah Carey</td>
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<tr>
<td>Dream of Life</td>
<td>Billie Holliday</td>
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<tr>
<td>Dream On</td>
<td>Aerosmith</td>
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<td>Dream Weaver</td>
<td>Gary Wright</td>
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<td>Dreamer</td>
<td>Moon Martin</td>
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<td>Dreamin’ (of You)</td>
<td>Selena</td>
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<td>Dreaming</td>
<td>Blondie</td>
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<td>Dreaming</td>
<td>Deep Purple</td>
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<tr>
<td>Dreaming My Dreams with You</td>
<td>Cowboy Junkies</td>
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Dreams Fleetwood Mac
Echoes Pink Floyd
Elusive Dreams Nancy Sinatra & Lee Hazelwood
Enter Sandman Metallica
How Can We Hang On to a Dream Tim Hardin
I Don’t Sleep, I Dream REM
I Dream of Jeanie with the Light Brown Hair Ringtones
I Go to Sleep The Pretenders
I Had the Craziest Dream Last Night Nat King Cole
I Had Too Much to Dream (Last Night) The Electric Prunes
I Like Dreaming Kenny Nolan
I’ll See You in My Dreams Giant
I’ll See You in My Dreams Louis Armstrong
I’ll Sleep When I’m Dead Warren Zevon
I’ll Take You Dreaming Danny Kaye
In Dreams Roy Orbison
In My Dream Patti Austin
Last Night I Had the Strangest Dream Ed McCurdy
Mr. Dream Merchant Jerry Butler
Mr. Moon Jamiroquai
Mr. Sandman The Chordettes
My Dream John Lee Hooker
Never Had a Dream Come True Stevie Wonder
One Dream Dream Academy
Send Me the Pillow That You Dream On Dwight Yoakam
Silent Lucidity Queensryche
Some Must Dream Nils Lofgren
Stardust Willie Nelson
Street of Dreams Frank Sinatra
Sweet Dream Baby Roy Orbison
Sweet Dreams Patsy Cline
Sweet Dreams Marilyn Manson
Sweet Dreams (Are Made of This) Eurythmics
Talkin’ in Your Sleep The Romantics
The Dark Eternal Night Dream Theater
The Dream Song Joan Baez
The Night (Excerpt) The Moody Blues
These Dreams Heart
These Dreams of You Van Morrison
This Time the Dream’s on Me June Christy
Under the Table and Dreaming Dave Matthews Band
What a Dream Patty Page
Wrap Your Troubles in Dreams Frank Sinatra

**Lecture Suggestion 5.6**

Cognitive Explanations of Dreaming

Although the textbook discusses Freud’s theory of dreaming and the activation synthesis model of dreaming, cognitive psychologists have a different explanation as to why we dream. Cognitive models of dreaming or problem-solving theory suggest that dreams are a chance for our minds to think creatively and solve problems without the distractions of the everyday world. You can remind your students of the story of Otto Loewi and his dream about chemical communication between nerve cells, if you used that story in Chapter 3. More empirical evidence comes from the work of Smith & Lapp (1991). They found that college students spend more time in REM sleep during midterms than during
vacations, and these findings are consistent with animal work showing that when rats are learning new mazes they have an increase in the amount of time spent in REM sleep.

Source:


**Classroom Exercise 5.5**

Dream Diary

Sleep and dreams can seem quite ethereal. After all, most of the time you don’t know you’re engaged in either one when you’re engaged in either one! Yet we know that most people sleep on a nightly basis, and we also know that most people enter REM sleep on a nightly basis.

Encourage your students to keep track of their sleep habits and dream content with this activity.

- For at least a week before you lecture on sleep and dreaming, ask your students to complete a nightly dream diary, such as the one shown in *Handout 5.1* (based on Dement & Vaughan, 1999). (It’s preferable to collect more data, perhaps over a 2-week period, but you can decide the logistics of data collection based on characteristics of your students and the amount of time you’d like to devote to this topic.)

- Students should calculate a mean for each of the eight items listed across the entire 7-or 14-night period, and students should also come to class at that point armed with some hypotheses they’d like to test. For example, students will no doubt be curious about the association between hours of sleep and time spent dreaming; a quick correlation between Items 1 and 2 on the questionnaire would address that issue. Similarly, students might guess, quite correctly, that hours of sleep and quality of sleep are related.

You can decide how sophisticated you want the analyses to be (i.e., a show of hands versus a calculation on a spreadsheet) and how detailed you want participation to be (i.e., an in-class discussion topic versus a short paper). By providing data from their own lives, students should enjoy learning more about the elusive state of consciousness they enter each night.

Source:

Classroom Exercise 5.6

Dream Survey

When people are asked about their dreams, their responses generally fall into two types. There is the “one day I hope to have a little bungalow with a white picket fence” category of hopes and aspirations. Then there’s the “I dreamed I was naked at an ice hockey game . . . again!” type. As a way of introducing the topic of dreams and dreaming, poll your students about the second type—what happens to them each night, rather than what they hope to accomplish in the next several years.

Handout 5.2 contains a brief dream survey that you can either read aloud in class (and ask for a show of hands in response) or photocopy and distribute to your students. Most students are willing to talk about their dreams, although you should recognize that some might feel embarrassed or simply uncomfortable talking about such private events; use your good judgment to direct the conversation appropriately. Of course, some students are more than willing to describe their “naked at the hockey game” dreams, along with the “naked in class,” “naked in the sorority house,” “naked in the downtown Hilton,” and “naked in the henhouse with three chickens and a one-eyed goose” dreams. Again, let your judgment be your guide!

As the discussion develops, your students should find that some common themes emerge. For example, many people report having recurring dreams over the span of several nights, and almost everyone has had the experience of falling during a dream. Most people at one time or another have dreamt of being chased, flying, being naked in public, or showing up unprepared for an exam. Still others have dreamt of returning to a childhood home or interacting with a deceased loved one. Use these and the other examples that arise as a means of introducing psychoanalytic and activation–synthesis interpretations of dreams and their meaning.

Multimedia Suggestions

Feature Film: Inception (2010, 148 min, rated PG-13) Christopher Nolan, who was the visionary force behind Memento and Identity, writes and directs this psychological futuristic thriller about a thief, Dom Cobb (Leonardo DiCaprio), who enters the dreams of others in order to steal ideas—the ultimate in corporate espionage. In a plot twist that echoes research done by Daniel Wegner on the “white bear phenomenon,” successfully making people think specific thoughts through the suggestion of the opposite idea, Cobb and his team take on a seemingly impossible mission: to plant an idea rather than steal one. The job is complicated by the presence of an opponent who seems to be anticipating every step in Cobb’s plan.

Feature Film: Taxi Driver (1976, 114 min, rated R) Travis Bickle is a man who needs a good night’s sleep. As he tells his employer when applying for a job as a cabbie, he wants to work long hours, driving anywhere, doing anything to keep himself and his mind occupied. Most people with insomnia don’t degenerate into madness and go on a killing
spree. But Travis’s restless uneasiness might make a good starting point for classroom
discussion.

**Feature Film: A Nightmare on Elm Street (1984, 91 min, rated R)** In the fashion of
maniaca killers in summer camps and creepy slashers in abandoned houses, Freddy
Krueger terrorizes a batch of teenagers in a most unlikely place: their dreams. The first of
several movies in this series, *A Nightmare on Elm Street* offers many possibilities for
illustrating aspects of sleep, dreaming, and fear.

See the Preface for product information on the following items:

**Interactive Presentation Slides for Introductory Psychology** 4.2 Altered States of
Consciousness

**PsychSim 5 Tutorials** EEG and Sleep Stages

**Worth Video Series**

  - Video Anthology for Introductory Psychology: Consciousness – Sleep and
    Sleeplessness: The Current Scene
  - Video Anthology for Introductory Psychology: Consciousness – The Effects of Sleep
    Deprivation: Three Brave Souls
  - Video Anthology for Introductory Psychology: Consciousness – Sleep Terror Disorder
  - Video Anthology for Introductory Psychology: Consciousness – Circadian Rhythms

**Scientific American Introductory Psychology Videos:** Sleep: Why We Sleep

**III. Drugs and Consciousness: Artificial Inspiration**

(Chapter Objectives 15–17)

**Psychoactive drugs** influence consciousness by altering the brain’s chemical messaging
system and intensifying or dulling the effects of neurotransmitters. **Drug tolerance** can
result in overdose, and physical and psychological dependence can lead to addiction.
Specific effects on consciousness and behavior occur with different classes of
psychoactive drugs. These classes include **depressants, stimulants, narcotics, hallucinogens,**
and **marijuana.** Depressants are substances that reduce the activity of the
central nervous system, producing a sedative or calming effect. Examples of depressants
are alcohol, barbiturates, benzodiazepines, and toxic inhalants. Stimulants are substances
that excite the nervous system and include caffeine, amphetamines, nicotine, cocaine, and
ecstasy (MDMA). Narcotics are highly addictive drugs derived from opium, such as
heroin, morphine, methadone, and codeine. Hallucinogens produce altered sensations and
perceptions. Examples include LSD, psilocybin, mescaline, PCP, and ketamine. Marijuana,
the leaves and buds of the hemp plant, produces heightened sensations but
impairs memory and motor skills. Each of the major classes of psychoactive drugs was
developed for medical, social, or religious reasons, but each has different effects and presents a different array of dangers.

**Lecture Suggestion 5.7**

Using Drugs to Treat Drug Addiction

Getting a flu shot is an exercise in faith, hope, and luck. Health officials make educated guesses about what strain of the virus is likely to predominate in a coming year, recipients need to make sure they get the shot early enough in the season to be effective, and everyone hopes the strains don’t change. By and large, though, getting a vaccination seems like a sensible thing to do: Most of the time it works.

That same logic, along with similar dashes of faith, hope, and luck, is being applied to the treatment of drug addiction. Research is under way investigating vaccines for the treatment of nicotine, cocaine, heroin, and methamphetamine abuse. Of these, a nicotine vaccine called NicVax (by Nabi Biopharmaceuticals) is the furthest along in development. The idea is that the body’s defense system can be enlisted to “combat” the addictive chemicals found in a variety of substances. The molecules of addictive drugs are small enough to cross the blood-brain barrier. By attaching these smaller molecules to a larger molecule, the addictive substances can’t nestle into the central nervous system and thereby are left open to antibodies developed by the immune system. For example, research on a cocaine vaccine attaches the cocaine molecule to a protein produced by cholera-causing bacteria. As the cocaine molecule piggybacks on the larger protein, the antibodies will latch onto it and prevent it from crossing the blood-brain barrier.

Or so the reasoning goes. It’s very early in the development of these vaccines, so wild promises of a shot to prevent substance abuse before it starts are premature. What’s more, there are significant hurdles to be overcome. Current chemical treatments, such as those for alcohol or heroin abuse, aren’t effective for all patients, and in many instances substitute one chemical for another. Methadone, for example, still mimics the action of heroin in the brain, albeit in weaker form. The vaccines currently under consideration take a “large molecule” approach (rather than the existing “small molecule” route), but may face similar limitations. Additionally, a hardened cocaine user treated with a vaccine may simply switch to a new drug or ingest more cocaine than the immune system can handle. These psychological and behavioral strategies could render the pharmacological interventions ineffective.

For now, there seems to be promising research on an entrenched problem. Perhaps a treatment for addiction will one day be as common as a flu shot.

Sources:


Lecture Suggestion 5.8

FDA OKs MDMA for PTSD

Here are some interesting facts:

- In 1986 the Drug Enforcement Agency (DEA) outlawed the drug ecstasy, also known as methylenedioxymethamphetamine, or MDMA. This part-stimulant/part-hallucinogen was added to the list of restricted substances, along with LSD, heroin, marijuana, and other drugs.

- In 1994, however, the Food and Drug Administration (FDA) approved the use of MDMA for research with humans. In particular, MDMA was approved for clinical trials involving patients with post-traumatic stress disorder (PTSD). Initial studies of human safety were conducted at UCLA, and research is now under way at a private clinic in South Carolina using MDMA to treat Iraq veterans suffering from PTSD. (The FDA also approved LSD, ibogaine, and marijuana for research on possible medical uses.)

- In 2005, research was under way at McLean Hospital in Massachusetts, where doctors from Harvard University began testing the drug with 12 terminally ill cancer patients.

What’s happened in the past 25 years? Well, probably a lot of things . . . too many to mention here. But MDMA has certainly swung from “hip underground mind expander” to “dangerous substance to be avoided” to “maybe we’re not so sure.”

Part of the reason is the effects brought on by MDMA. The feelings of euphoria, empathy, and contentment it produces were part of the appeal for rave kids in the ’80s and ’90s, but those same feelings may have a medicinal benefit. The reasoning is this: A willingness to talk (especially about one’s feelings) and be open to the environment can set the stage for PTSD sufferers to confront their feelings in a more therapeutic way. Terminal cancer patients, filled with anxiety about their impending death, can address their fears and establish closer relations with their loved ones. What’s more, ecstasy takes effect within about 30 minutes, and can last for 3 to 5 hours, making it a more attractive choice for these applications. (Currently, antidepressants are prescribed for PTSD, but they can take several weeks to start working; antidepressants are also prescribed for fear and anxiety in terminally ill patients, but MDMA can produce a more calming effect.)

Will the mind-expanding properties of MDMA ultimately prove helpful in the treatment of mental and physical disorders? It’s clearly too soon to tell. The cautious forays into research on the subject are at least a good sign: Evidence is generally better than doctrine in making such decisions. Perhaps another turn of events will result in the coming 20 years.

While this might suggest that MDMA might have therapeutic uses, there is other evidence to consider. MDMA has been shown to be a potent serotonin neurotoxin in animals. Most troubling has been the research showing how long the depletion of
serotonin neurons persists. Hatzidimitriou and colleagues (1999) administered twice-daily doses of MDMA to a group of squirrel monkeys for 4 days. Some of the animals were examined 2 weeks after their last drug dosage and others were examined 6–7 years after drug administration. Examination of serotonin innervation in cortical and subcortical regions revealed significant loss of serotonin neurons 2 weeks after MDMA administration and this loss of neurons was still observed in the animals examined 7 years later.

Sources:


For images: http://www.jneurosci.org/content/19/12/5096/F3.expansion.html, http://www.maps.org/

Lecture Suggestion 5.9

Guest Lecturer: Drug Counselor

Although your knowledge of states of consciousness may be considerable, you might want to defer to someone who deals with (altered) states of consciousness on a regular basis. Chances are good that there is a drug or alcohol rehabilitation counselor available near your campus; for that matter, there are probably more than a few on your campus. Assuming your students are in the early part of their academic careers, they might not know about the resources available to them, should issues arise with substance abuse or dependence. By inviting a drug counselor to speak to your class, you can kill multiple birds with one stone: The counselor can provide a first-person account of working with clients who grapple with substance abuse issues; she or he can probably share a wealth of knowledge about drugs themselves and their psychological and physiological effects; and your students can get more information about the counseling opportunities available on campus.

NAADAC, the Association for Addiction Professionals, may be able to help you find a suitable speaker in your town or city (http://naadac.org/). You might also consult your local yellow pages and contact a professional who would be willing to visit your class.

Classroom Exercise 5.7

Drug Grab Bag

Don’t let the title fool you; this is not the laboratory component of the “artificial inspiration” section of your course. Rather, this exercise offers a way to get students talking about drugs and their physiological and psychological effects.
Handout 5.3 contains a list of street slang for common classes of drugs, such as stimulants, narcotics, or marijuana. Depending on the size of your class, you might:

■ Select several of these terms.
■ Reprint them on small slips of paper.
■ Jumble them in a hat.
■ Ask students to draw one slip of paper each.
■ Ask students if they can identify either the specific drug in question (i.e., Xanax, heroin) or the category (i.e., depressants, hallucinogens).
■ With a larger class you might simply show the handout as an overhead transparency or read some of the terms out loud for student comment. In any event, you can use individual or collective responses as a way of introducing the topics of drug use, dependence, and drug effects on behavior.

Here are some points to keep in mind. First, some students may not recognize any of the terms on the list, whereas other students may recognize all of them . . . and be able to supply the etymology, variations, regional dialects, and so on! Recognize that the general comfort level of your students should guide the course of this exercise. Second, this is a comparatively small list of slang terms; there are many, many more ways to describe pretty much any substance that can be ingested. Your students may know of other terms and may feel comfortable volunteering that knowledge. For more terms and/or more explanation of the terms, visit the links below.

Sources:
http://www.whitehouse.gov/ondcp
http://www.homedrugtestingkit.com/drugterms.pdf
http://www.mdma.net/ecstasy-mdma.html
http://www.erowid.org/psychoactives/slang/slang5.shtml

Classroom Exercise 5.8

Peer-to-Peer Drug Education

An effective way to promote active learning in the classroom and increase engagement in subject matter is to have students teach one another. Learning from peers can be perceived as less intimidating (than learning from an “expert”—you!) and perhaps more enjoyable, as students get to interact with one another during the learning process.

Kerri Goodwin, of Loyola College in Maryland, suggests a peer-taught activity for learning about drugs, their classification, uses, abuses, and effects.
Just prior to and concurrent with your coverage of drugs and consciousness, assemble small groups of students (perhaps three or four to a group) and assign them a particular drug. For example, one group might receive “Xanax,” another “Adderall,” and another “Opium.”

You can decide the specificity of the drug (i.e., “barbiturates” versus “Nembutal”) and the range of options (i.e., everything from hallucinogens to stimulants, or just one class of drugs, or just common drugs such as Valium, Seconal, or MDMA), depending on your interests, the size of your class, and so on.

Along with the drug, you might also assign a specific question to be addressed, such as, “Is using Adderall casually, such as when studying for exams, a good idea? Why or why not?” or perhaps “Is marijuana addictive; what evidence is there on both sides of this issue?” Such questions will give groups a main discussion point, and they should provide information on the psychological and physiological effects of the drug, the prevalence of its use (in the United States and/or worldwide), its potential for abuse, or any other information that you’d like the class to know.

Each group should develop a 15-minute PowerPoint presentation that helps engage the remaining students in active learning (e.g., using a question and answer format, posing debate questions, answering some drug fact questions).

The result of these presentations should be greater knowledge all around. The students in each group should gain a better understanding of their particular drug, and the remaining students should learn more about the variety of drugs and the issues associated with them.

Source:


**Multimedia Suggestions**

**Feature Film: Drugstore Cowboy (1989, 102 min, rated R)** Matt Dillon, Kelly Lynch, and Max Perlich star in this tale of a junkie couple and their drugged-out friends. It is an honest but not altogether pleasant glimpse into the world of addiction.

**Feature Film: Rush (1989, 102 min, rated R)** Jason Patric, Jennifer Jason Leigh, and Max Perlich star in this tale of undercover narcotics officers who get wrapped up in the seedy world they seek to infiltrate. The officers walk a fine line between law and lawlessness. Gregg Allman also appears as a villainous club owner and drug dealer.

**Feature Film: Requiem for a Dream (2000, 102 min, rated R)** Jared Leto and Ellen Burstyn star in this tale of four addicts whose four lives spiral into four failed existences. Rather grim stuff! The actors deliver strong performances in this realistic look at drug addiction.
**Feature Film: Trainspotting (1996, 94 min, rated R)** This film was released to critical and popular acclaim, in no small part due to the good looks and considerable talents of star Ewan MacGregor. Sick Boy, Spud, Begbie, and a host of other Edinburgh lowlifes wander their way through life and love, with heroin as a constant presence in their midst.

**Feature Film: Spun (2002, 101 min, rated R)** Mickey Rourke, Jason Schwartzman, and John Leguizamo take the lead in this look at the crystal meth culture. From cooker to dealer to speed freak, the ins and outs of life on meth—a very sped-up life—are examined.

**Feature Film: My Name Is Joe (1998, 105 min, rated R)** A romance in Glasgow, featuring an unlikely pair: a recovering alcoholic (played by Peter Mullan) and a social worker (played by Louise Goodall). This film is a love story, a drama, a comedy, a bit of a suspense film... really, a glimpse at the day-to-day struggles of someone motivated to change his ways.

See the Preface for product information on the following items:

**Interactive Presentation Slides for Introductory Psychology** 4.3 Psychoactive Drugs

**PsychSim 5 Tutorials** Your Mind on Drugs

**Worth Video Series**

- Video Anthology for Introductory Psychology: Biology, Behavior, and Mind – The Runner’s High
- Video Anthology for Introductory Psychology: Consciousness – The Medical Use of Marijuana
- Video Anthology for Introductory Psychology: Consciousness – The Nature and Abuse of Ecstasy
- Video Anthology for Introductory Psychology: Consciousness – Experimenting with Alcohol and Drugs
- Video Anthology for Introductory Psychology: Consciousness – Chemically-Induced Hallucinations: Studies of Anesthetic Drugs

**IV. Hypnosis: Open to Suggestion**

(Chapter Objectives 18–19)

Although there are many claims for hypnosis that overstate its effects, this altered state of consciousness characterized by suggestibility does have a range of real effects on individuals who are susceptible, making them feel that their actions are occurring involuntarily and leading them to follow the hypnotist’s suggestions. Inductions of
hypnosis can also influence memory reports, create analgesia, and even change brain activation in a way that suggests that hypnotic experiences are more than imagination.

**Lecture Suggestion 5.10**

Guest Lecturer: Hypnotist

Invite a trained hypnotist to give a guest lecture on the process of hypnosis and its common misconceptions to complement the text’s discussion. Ask the lecturer to give students a demonstration of hypnosis. This will mostly likely rely on gradual relaxation yet focused concentration and hypnotic suggestion. Volunteers can describe their experiences afterward, and then questions and comments can be addressed. Consider finding a trained hypnotherapist who could inform your students of the various clinical applications of hypnosis, including treatments for overeating, smoking, fears and phobias, grief, migraine headaches, insomnia, and sexual dysfunction.

**Lecture Suggestion 5.11**

Hypnosis and Memory

Hypermnesia is the term psychologists use to describe the enhancement of memory that occurs under hypnosis. The problem is that hypnosis can also create false memories or pseudomemories, and research has shown that hypnotized eyewitnesses feel more confident of their memories regardless of the accuracy of those memories. In a seminal study by Laurence & Perry (1983), subjects were hypnotized and given the hypnotic suggestion that they had been awakened by a loud noise during the preceding week. Laurence and Perry found that when questioned afterward half the subjects claimed that the event had actually occurred. However, what was most interesting was that half of these subjects continued to insist that the event had occurred even after they were informed that they had been given a hypnotic suggestion to believe that they had been awakened. As the authors note, the results raise serious questions about the legitimacy of using hypnosis as a tool for legal investigations.

Source:


**Classroom Exercise 5.9**

Hypnosis on the Fly

There are several quick demonstrations that play on the same kind of suggestibility used in hypnosis. Share these with your class as an easy way of demonstrating hypnotic effects.

1. Ask your students to close their eyes and imagine that they are cutting a large, sour, bitter lemon, a lemon so full of juice that it is dripping on the floor. Then tell them to
imagine that they are sucking the juice from a large chunk of that lemon. Nearly all of
your students should be awash in saliva by this point!

2. Bring a small, sealed jar of colored but odorless liquid (e.g., water with a few drops of
food coloring added) to class, and tell your students that it contains an exotic liquid
made from foreign ingredients. Tell them that you will open the jar and take it around
the room and that they should raise their hands as soon as they smell it. To facilitate
acceptance of this suggestion, you might wrinkle your nose as you uncork the jar or
even arrange for a handful of cooperative confederates to raise their hands.

3. Create the perception of a bodily itch by making several suggestions to itching and
scratching. Start by reminding students how pleasurable it is to scratch an annoying
itch, such as a tickle on the back or the ankle or the nose. Suggest that students might
be starting to perceive slight itching sensations on various parts of their body, and that
these might get progressively stronger so that they soon won’t be able to refrain from
scratching (scratching yourself unobtrusively at this point helps). The more you play
this up (e.g., by describing your itches and scratches in great detail and with emotion),
the more students will feel compelled to scratch. Before long, the majority of your
audience will be scratching itches on their heads, shoulders, faces, and arms that exist
only in their minds. Suggesting a compelling urge to swallow also works well, as
does the suggestion of the need to yawn (especially when accompanied by a wide,
exaggerated yawn on your part).

4. Tell students to hold their fists in front of them about 15 inches apart with their index
fingers pointing toward each other. Then suggest that their fingers are becoming
nervous and shaky in this position and that consequently their fingertips are not
pointing precisely together. At this point, suddenly and immediately instruct them to
bring their fingertips together instantly, without any hesitation (“NOW!”). Although
this sounds amazingly easy, the mere suggestion of shakiness and doubt throws many
people off just enough to make their fingertips miss.

5. Ask your students to stand and close their eyes. The students are to imagine that they
are holding a suitcase in one hand. As they are standing there holding their suitcase,
ask them to envision a brick being added to the suitcase, and then another, and then a
third. At this point, some of the students should be leaning to their sides, and you can
have them open their eyes and view the variability in the class’s susceptibility to
suggestion.

In complying with these suggestions, your students will demonstrate the enormous
human capacity for accepting an idea and responding to it almost automatically. Note that
some students will be more responsive to these suggestions than others, and you can
discuss how this variability relates to real individual differences in susceptibility to
hypnosis.

Source:

Multimedia Suggestions

**Feature Film: The Manchurian Candidate (2004, 129 min, rated R)** This remake of the 1962 film of the same name features Denzel Washington as a Gulf War veteran who is troubled by a series of disturbing events. One of the men in his unit, Sergeant Raymond Shaw, has become a vice presidential nominee, but the facts just don’t add up. Could it be that the entire platoon was brainwashed into believing Shaw was a war hero? Is there a sinister force at work rigging the election? Can Denzel save the day? Watch and see.

**Feature Film: Office Space (1999, 89 min, rated R)** Peter Gibbons is an infinitesimal speck on the organizational chart of Initech. What’s more, his girlfriend is cheating on him, his next-door neighbor is a pain in the neck, and he’s miserable on a daily basis. Luckily, a hypnotherapist plants the suggestion that Peter is in a state of utter bliss and then the therapist promptly dies, leaving Peter with a carefree existence. He no longer cares about keeping his job, which perversely makes him more attractive to the company. The hypnotic spell has changed his life for the better—or has it?

See the Preface for product information on the following items:

*Interactive Presentation Slides for Introductory Psychology* 4.2 Altered States of Consciousness

*Worth Video Series*

Video Anthology for Introductory Psychology: Consciousness – Hypnosis: An Altered Mental State

Video Anthology for Introductory Psychology: Consciousness – Hypnosis: Medical and Psychological Applications

**Other Film Sources**

*Cannabis: Satanic Herb or Healing Potion?* (2005, 44 min, FHS). Maybe a little of both. Are those the only options? Watch and find out.

*The Case of Carol: Possibilities and Probabilities* (2005, 64 min, IM). Carol is at a crossroads in her life; she’s 61 and can’t decide if she wants to divorce her husband. Hypnosis is used to help her focus on what she wants and how to get it.

*Coma: Four Case Studies* (2007, 120 min, FHS). This acclaimed HBO series looks at the lives of four coma patients and their families. The stark realities of day-to-day existence are revealed as all parties involved—doctors, nurses, caregivers, and loved ones—deal with the issues related to brain injury.

*Consciousness* (1995, 58 min, FHS). Computer simulations, neuroscience, philosophical speculation . . . there’s a little of everything in this overview of consciousness.
Cozy Killer: The History of Cigarettes (2006, 28 min, FHS). The health hazards of tobacco were known as early as the 1930s, so what kept the information a secret for so long? This video provides some answers.

Crank: Made in America (2003, 56 min, FHS). This HBO documentary looks at the new rural high: methamphetamine. It’s cheap, it’s easy to cook, and it has the lowest recovery rate for addicts; not a pleasant combination. Some scenes and some language in this film are also not pleasant, so be advised.

Designer Drugs: Uncertain Borders (2005, 44 min, FHS). Peyote, mushrooms, and iboga have given way to LSD, ecstasy, and other manufactured hallucinogens. Has greater scientific understanding brought with it greater safety in the psychedelic experience?

The Drugtakers (2001, 25 min, IM). Sociologist Jock Young’s classic study of deviance amplification is the basis for this look at media fantasies and harsh realities of drug use.

The Final Mystery: What Is Consciousness? (2000, 50 min, FHS). If the human brain is made up of the same basic stuff as the rest of the body, what makes it so special? How does it generate consciousness? And for that matter, what is consciousness, anyway?

HairKutt: Breaking the Heroin Death Grip (2007, 77 min, FHS). Bryant “HairKutt” Johnson was hooked on heroin for 15 years, so his well-meaning friends brought him to an isolated cabin in the woods for a cold-turkey detox. The only problem is that only about one in five such strategies works; in HairKutt’s case he suffered internal bleeding and dehydration and had to be rushed to the hospital. Oh, and he got back on heroin again. See this chilling real-life tale of addiction and the struggles that accompany it.

Inhalants (2005, 20 min, FHS). The Ramones sang “Now I Wanna Sniff Some Glue,” but many kids didn’t need the extra prompting. Solvents, aerosols, and nitrites offer potent opportunities for drug abuse.

Insomnia (2004, 28 min, FHS). Insomnia carries with it emotional, physical, and psychological concomitants, as this video points out.

Law and Disorder? Holland’s Solution to Illegal Drugs (2001, 14 min, FHS). This ABC News segment looks at a society in which one can purchase and smoke marijuana in coffeehouses. Although statistics support the Dutch contention that state-tolerated marijuana use disinclines people to turn to harder drugs, U.S. lawmakers believe otherwise.

Legal Drugs: Still Addictive, Still Deadly (2005, 44 min, FHS). Quick: How many athletes, celebrities, or politicians can you name who’ve publicly admitted to being hooked on prescription drugs? That many, huh? Just because someone in a white lab coat sells it to you, rather than someone in a dark alley, doesn’t mean it can’t get you hooked.

The Magic of Consciousness (2006, 55 min, IM). Wanna see a magic trick? Look; I’m introspecting! Wanna see it again? Much of consciousness does seem magical and mysterious; this video explores how and why that is.
**Making of a Hangover** (2002, 51 min, FHS). This Discovery Channel production follows seven volunteers as they get drunk in a bar. The uselessness of hangover remedies and the pharmacological progression of alcohol ingestion are chronicled.

**Messing with Heads: Marijuana and Mental Illness** (2005, 46 min, IM). Is there a link between marijuana and schizophrenia or other forms of psychosis? THC certainly affects the developing brain. Watch and see.

**Narcolepsy** (2006, 28 min, FHS). Falling asleep at inopportune times throughout the day is a drag. More than that, it can be life-threatening. This overview of narcolepsy looks at how and why it happens.

**Narcotics** (2005, 29 min, FHS). Codeine, morphine, opium, heroin: The very names in this category of drugs conjure up images of desperation and despair. Is it as gloomy as all that? Probably so.

**PCP and Ketamine** (2005, 17 min, FHS). The history of PCP and ketamine (a veterinary tranquilizer) and the biological effects of these drugs are discussed.

**Pharm Country** (2006, 20 min, FHS). A pharm party is the teenage equivalent of Russian drug roulette. A mix of drugs, mostly from household sources (such as inhalants, prescription drugs, or cold remedies) is offered for the taking. See where this bad idea leads when the kids have nothing better to do on a Friday night.

**Sergio’s Story: End of the Line** (2000, 24 min, FHS). Sergio is hard-core. He is addicted to snorting heroin, despite holding a steady job and being the married father of three children. Sergio’s solution is also hard-core: rapid detox, a procedure that should rid his brain of opiate dependency in 4 to 6 hours.

**Sleep Disorders** (2000, 52 min, FHS). Unfortunately, there are plenty of ways to be robbed of a good night’s sleep. This video runs through the list of such sleep disturbances.

**Smoking Out the Truth: Teens and Tobacco** (2006, 22 min, FHS). Everybody knows smoking looks cool. The film explores how teenagers are susceptible to the marketing campaigns of Big Tobacco.

**Stimulants: The Mechanics of Pleasure** (2005, 44 min, FHS). Cocaine and amphetamines offer the brain a dazzling array of ways to stimulate itself. This look at the history and current status of euphoria-inducing substances examines how that happens.

**Understanding How Drugs Work** (2000, 60 min, IM). The psychopharmacological effects of various drugs on the human nervous system are explored.

*Due to loss of formatting, Handouts are only available in PDF format.*