



The everchanging maladaptive daydreaming – a thematic analysis of lived experiences of Reddit users

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Abstract

Maladaptive daydreaming (MD) is a compulsive fantasy activity that takes precedence over one's life, interfering with other activities often, becoming source of shame. To determine the lived experiences of people suffering from MD, we analyzed a sample of 336 public Reddit posts shared in September 2023. We implemented thematic analysis using an inductive approach. We identified six key themes across the data connected to the impact MD has on a sense of self: (1) *This world is not my own: Rejecting the imperfection*, (2) *Blending of realities*, (3) *It's not a loop; it's a spiral: The changing experience*, (4) *Losing focus, cover blown: Daydreaming's influence on life*, (5) *It's keeping me alive The healing aspects of daydreaming*, (6) *I need this to stop: The ongoing struggle to quit*. MD appeared to influence the majority of aspects of the Redditors' lives, including a sense of self, motivation, behaviors, and cognitive capabilities (e.g., attention problems). The recollection of unsuccessful attempts to cease daydreaming was highlighted therefore a comparison with behavioral addiction was made. Lack of professional support and reliance on the Reddit community and daydream characters for support were also reported. The results suggest MD may be connected to various consequences that were overlooked in the past (e.g., problems with a sense of identity, motivation, frustration tolerance). Therefore, there is an urgent need for professional interventions that should encompass the multifaceted dimensions of daily functioning impacted by MD.

Keywords Maladaptive daydreaming · Dissociation · Behavioral addiction · Fantasizing · Daydreaming · Thematic analysis

Introduction

Through the years, daydreaming has been defined in various ways, such as mind-wandering (Killingsworth & Gilbert, 2010), task-unrelated thoughts (Poerio & Smallwood, 2016; Singer & McCraven, 1961), being engaged in the internal stream of thought (Zedelius et al., 2021), and a “nonworking thought that is either spontaneous or fanciful” (Klinger, 2009, p. 226). It can be seen as an expansion of the possible, built on past experiences but not limited to it (Zittoun & Cabra, 2022). The fanciful aspects of daydreaming may emerge from a childhood self-soothing technique that

allows one to seek comfort without caregivers’ input (Regis, 2013) or from fantasy play that has become internalized (Klinger, 2009).

Despite daydreaming being considered a typical experience of most people (Singer & McCraven, 1961), there is an emerging interest in the construct of maladaptive daydreaming (MD): a compulsive fantasy activity that becomes one’s main priority in life, interfering with academic, interpersonal, or work-related functioning (Somer, 2002). It is characterized by unsuccessful efforts to control daydreaming, i.e., stopping the current daydream or daydreaming altogether (Somer et al., 2017b). Research shows that MD sessions can last hours and usually occur when the Maladaptive Daydreamer (MDer) is alone (Bigelsen et al., 2016). MD includes creating fantastical images and stories or narratives that are not concerned with planning future activities, worrying or ruminating. Some MDers put themselves in the center of a story where they can have abilities, status, and fame not present in their real life (Somer et al., 2016b).

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The imaginary worlds are detailed and elaborate, with many characters and plots created over years of daydreaming (Bigelsen & Schupak, 2011). The imagination constructed during MD sessions varies in sensory components— the image can be dreamy, entirely distinguishable from real-life vision. In other cases, the daydream produces an experience similar to external reality. Despite the differences, MDers report insight into the nature of the imagined scenes (Somer et al., 2016c). Furthermore, quantitative studies show that MD symptoms are positively correlated with absorption, amnesia, and depersonalization experiences (Somer et al., 2016a), as well as emotional dysregulation (Pyszkowska et al., 2023). These findings underscore the complex nature of MD, suggesting that its symptoms are not only varied but also deeply ingrained in psychological processes. This complexity is further reflected in the evolving conceptualizations of MD.

Previously, MD had been conceptualized as a behavioral addiction (Pietkiewicz et al., 2018) and as a dissociative disorder (Soffer-Dudek & Somer, 2022) as it shares characteristics with both in terms of elevated engagement, loss of control over activity time, interfering with other activities, or being disconnected from reality. It also shares similarities with fantasy proneness—a personality trait associated with not only being involved with one's fantasies but also hypnotizability (e.g., ability to experience suggested alterations in sensory, emotional or cognitive states), and belief in the paranormal (Wilson & Barber, 1982). However, MDers, while highly invested in their fantasy world, do not endorse items related to religious experiences or paranormal activity (Bigelsen et al., 2016). This distinction highlights that while MDers exhibit a strong engagement with their fantasy worlds, their experiences are grounded in personal imagination rather than supernatural beliefs.

This capability for vivid imagination could become a source of entertainment while also acting as a self-soothing technique as MD is related to feelings of loneliness and distress that were not regulated with the help of a caregiver (Somer et al., 2016b). The source of distress could be physical or emotional neglect, experiencing abuse, or being a witness to the abuse of others (Sándor et al., 2023; Somer, 2002). Additionally, MD can play a role of a distraction from painful memories, whereas different topics of daydreaming are connected to different types of abuse the person has suffered. For example, daydreaming about a perfect family of origin is connected to emotional abuse, about the life of another idealized family to emotional neglect, and about the idealized current family to physical neglect (Somer et al., 2021). However, it should be noted that there is a substantial number of MDers who did not suffer abuse in childhood yet developed MD (Bigelsen & Schupak, 2011), which

necessitates further exploration of the pathways through which MD develops.

The exploration of its origin may provide new information that would aid in understanding the seemingly contradictory relationship between MD and emotional regulation. Although MDers see it as a source of joy and pleasure (Somer et al., 2016b), MD is connected to emotional regulation difficulties (Greene et al., 2020). Soffer-Dudek and Somer (2018) found no increase in positive emotions associated with elevated MD during the day but a positive relationship between more daydreaming and negative emotions, which may point toward a more complex relationship between MD and mood. One of the possible explanations is the role of MD as self-suppression escapism (Pyszkowska et al., 2023), which lets the individual avoid their negative feelings through another activity. Daydreaming may mask the symptoms of other disorders (e.g., isolation and withdrawal may be mistaken for social anxiety), providing respite while ultimately being a source of further suffering. As MD may be considered one's only coping method, it may create a vicious cycle of continuous daydreaming to avoid facing reality as the problems mount (Somer et al., 2016c). Of note, most MDers have reported having at least three additional diagnoses, with the highest comorbidity being between MD and ADHD, anxiety disorders, depressive disorders, and OCD (Somer et al., 2017a).

Another area which has shown the complexity of MD is its connection to sleep. Notably, as shown by preliminary research, MD is not only associated with dreaming in itself, as the name would suggest. MDers have shown higher levels of dream recall, nightmare frequency, and distress compared to the control group (Margherita et al., 2022). Some reports are ambivalent: according to Marcusson-Clavertz and colleagues (2019), MD was associated with higher levels of mind wandering but not sleep disturbances, while in qualitative inquiries, some participants reported the inability to fall asleep because of the constant need to daydream while others saw daydreaming as a pleasurable activity that accompanied falling asleep (Somer et al., 2016b). Despite its complexities there appears to be one almost universal aspect of MD: physical movement. For many MDers, it is one of the necessary components of a daydreaming session (Somer et al., 2016c). According to Bigelsen and Schupak, (2011), it could be pacing, riding on a bike, or any repetitive action. Music is another necessary element for many, as its absence would diminish the immersive quality of daydreams. Both movement and music could also play the role of triggers— whenever the person tries to listen to music or go for a walk, they ultimately start daydreaming. On the other hand, the presence of others could keep the person from being able to start daydreaming. In some cases, it was the fear of being found out since the MDer could not control

their facial expression or reenacting movement from their daydreams, while in others, having to split their attention between real-life interactions and daydreams impacted the ability to fully immerse (Somer et al., 2016b).

The current study

As the subject and conceptualization of MD are still being developed and there is an abundance of quantitative studies focusing on a questionnaire measurement of MD and its consequences, this study follows a qualitative approach. MD is neither a clinical diagnosis nor a commonly used term. Therefore, individuals who experience it discuss it online as it is the only place to share their experience and meet people who also engage in MD, forming various communities. To our knowledge, there has been no prior research analyzing MD-related content on Reddit, an online community composed of forums called “subreddits” (denoted by r/before the name of the respective subreddit) dedicated to various interests, politics, mental health, and physical health issues, academic discussions, news, and more. Additionally, Reddit allows users to set up “throwaway” accounts, created only for a particular post. It has been shown that such accounts are often used for more intimate and open conversation about experiences of mental illness (De Choudhury & De, 2014). Online discussion forums on Reddit regarding MD were utilized as they make it possible to discuss sensitive topics in an anonymous and unrestricted environment.

The present study focused on the lived experiences of MDers: how they describe the daydreaming process, its antecedents, and consequences. We aimed to explore the following research questions: “How do MDers experience MD?”, “What motivates MDers to daydream?”, and “What is the impact of MD on the MDers’ life?”. As MD is only beginning to be understood we saw it as important to explore in-depth the impact it can have on everyday life and its self-observed aspects MDers discuss anonymously without a fear of outside judgment and the restriction of interview questions. This paper fills this gap by discussing the development paths of MD, the changing experience of daydreaming itself as well as its consequences.

Materials and methods

To ensure the ethical quality of the study, several guidelines were consulted (British Psychological Society, 2021; Smedley & Coulson, 2018) and an approval by the Ethics Committee of the University of Silesia (KEUS416/10.2023) was acquired. While the large number of members in each of the subreddits considered (over 10,000) makes the posts written there more “public” than “private” (Eysenbach &

Till, 2001), and the process more similar to an observation of people in a public space the issue of collecting precise data about an individual remains (Smedley & Coulson, 2018). As this study is focused on looking for patterns in the MDers’ experiences and not analyzing individual users, we did not seek additional information about the user outside of the post being analyzed. If the user shared their experiences under different posts, we analyzed them separately, as if they were published by different users. Another ethical issue was that of seeking informed consent from authors of the posts and confidentiality of the data analyzed—additionally to the public nature of the forums we also considered the need to avoid causing a feeling of distrust which could lead to the user seeking help leaving the forums. As such we decided not to contact the authors and not to include the name of subreddits used to gather the data. What is more, we adopted several measures to protect the anonymity of the users. We do not disclose online usernames or share any of the posts verbatim. Instead, the shared quotes were paraphrased with attention to preserving the original meaning, while ensuring no backtracking could be done. To verify the effectiveness of this approach, the paraphrased quotes used in this study were first entered into the Google search engine. The current study can show previously unreported aspects of MD that can prove beneficial in creation of therapeutic measures dedicated to helping MDers, which we hope outweighs the potential harm.

Data collection

The data for the current study was collected from Reddit—an online discussion forum platform. It is composed of user-generated online communities (“subreddits”) to which users submit posts that include text, images, or links. Other users can comment and vote on those posts. First, we collected all posts from the subreddits connected to MD, next we analyzed the contents of each one to decide if they should be included in the analysis. We included posts discussing the experience of living with MD while excluding posts containing images or links to outside sources that did not result in discussion of the users’ experiences. Posts that only asked questions without the user sharing their own experience were included if other users shared their experiences in the comments. Posts focused on giving advice were included in the analysis if the user included information regarding their own experience instead of only relying on outside materials like blog posts or self-help books. For each post, all of the user’s comments were analyzed en bloc. The data consisted of posts published between 1st September–30th September 2023. Screenshots of the discussion threads were extracted using the Screenshot feature of the Mozilla Firefox web browser, which were saved in the JPG format and numbered

in the order of extraction. A total of 366 posts were included in the analysis.

Data analysis

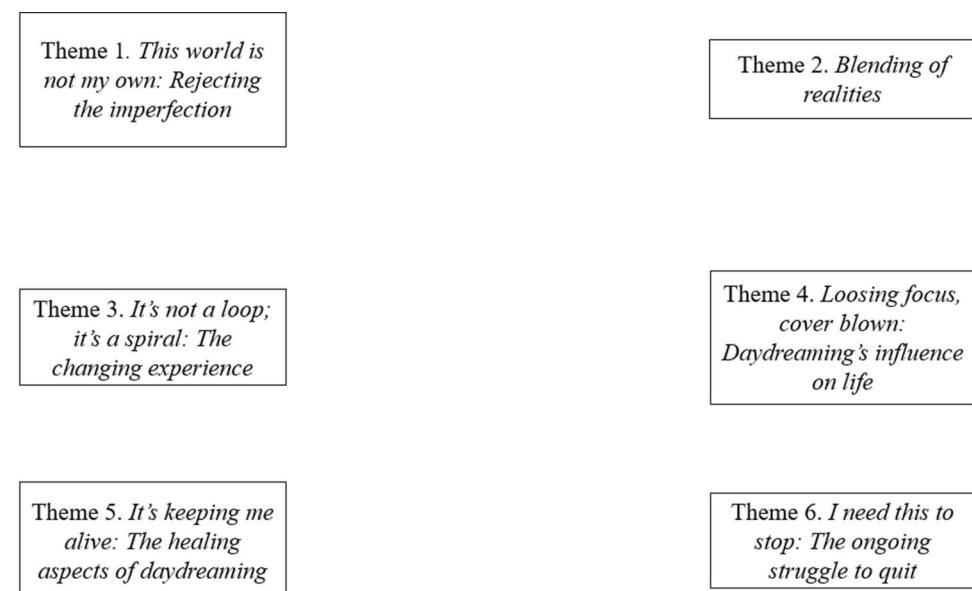
We used reflective thematic analysis (Braun & Clarke, 2006, 2019), making it possible to identify and analyze patterns across the data set. First, both AN and AP familiarized themselves with the collected data, writing down initial ideas, patterns, and meanings, and then exchanged observations. In the next step, AN coded the entire data set. The codes were generated in a bottom-up process as they captured the descriptive elements of the data. They were reworked several times as additional codes were added or modified as necessary to ensure consistent coding. Working together, both AN and AP developed candidate themes, patterns of shared meaning united by a core concept (Braun & Clarke, 2019), from the coded data. AN collected the relevant data excerpts, and both AN and AP reviewed the themes to check how well they captured the meaning of the dataset. The final set of themes was constructed after a series of discussions, ensuring that the themes were connected to the research question concerning the lived experience of MDers and reflected the ideas based on the analyzed data. For example, several posts were dedicated solely to the search for methods of stopping MD while mentions of periods of abstinence were also present when discussing the impact of MD on everyday life and how external stressors and symptoms previously masked by MD often cause relapses into daydreaming. Furthermore, some users would share their experience daily as they attempted to abstain from MD. Such posts were coded in regard to the mentions of “MD as uncontrollable”, “abstinence period”, “distress when relapse”, “outside stressors as cause”, “returning symptoms

as cause”, “joy after controlling MD”. After several discussions we decided that those stories have a shared meaning of the need to cease MD which is accompanied by ongoing attempts to quit. The last step of the analysis involved naming and defining the reviewed themes and choosing the data extracts that best represented each theme. The original spelling of the quoted fragments has been preserved where possible. Each quotation is identified by the ID of the post from which it was extracted.

Results

We identified six themes relating to the experiences of MDers which are presented in Fig. 1. The first theme, *This world is not my own: Rejecting the imperfection*, is concerned with the response to the differences between the perfect world of daydreams and the real world. The second one, *Blending of realities*, is concerned with an overlay of the world of daydreams on real life. The third one, *It's not a loop; it's a spiral: The changing experience*, examines the stories of temporal changes in the everyday experience of daydreaming as well as the shift across the lifespan. The fourth one, *Losing focus, cover blown: Daydreaming's influence on life*, discusses how MDers navigate everyday life despite the perceived drawbacks of MD. The fifth one, *It's keeping me alive: The healing aspects of daydreaming*, includes stories of how daydreaming aids the MDers. The sixth one, *I need this to stop: The ongoing struggle to quit*, explores the repeated attempts to stop daydreaming.

Fig. 1 Thematic map of the themes pertaining to the lived experiences of the MDers



This world is not my own: rejecting the imperfection

One of the most prominent themes was the rejection of the imperfect and often arduous world the MDers live in. For instance, one Redditor wrote: “I prefer the world I daydream about compared to the real one (...). I feel like my life lacks any point, and it’s boring without daydreaming.” (ID151). In part, this feeling could be attributed to the topics of daydreaming sessions as they were often anchored in real life yet concerned things impossible to achieve, such as being a perfect version of oneself, turning back time to re-do past mistakes, or living in a conflict-free relationship. The realization that one was incapable of achieving those goals could come from confrontations with other people (e.g., an argument with friends) or facing the consequences of past mistakes. As one Redditor wrote, “The real-life relationships are never satisfying, so I go back to those in my head that I can control. Dealing with real people just disappointed and frustrated me all the time, which made me want to retreat.” (ID189). Associated with perfection but unattainable was the constant availability of support and attention from imagined characters as they were often used as motivation sources (e.g., “The only thing that makes me do things is daydreaming that my boyfriend tells me ‘Good job!’ after I finish my chores. Thank God he is always there!” [ID262]; “I tell my character that I will come back once I am done with my tasks, and they keep me accountable. They are always there for me.” [ID27]), or treated as friends, romantic partners, and confidants (e.g., “I always have a partner that takes care of me, protects me from danger, makes sure I have money” [ID59]). Often, the MDers felt they lacked support in the outside world (e.g., “I’ve talked to my significant other about daydreaming since I wanted to finally do something about it. We had a big fight and now fantasies of love, comfort and support are going through my mind.” [ID 231]).

Additionally, rejecting imperfections could extend to skills and achievements: when the effort extended to learn a new skill did not bring the desired effects, it would make the person give up, as “I keep fantasizing about being able to draw. The few attempts I made resulted in failure. Now, it makes me sad to even start drawing, so I just imagine it. It takes a lot of my time, keeping me from leaving the house because I keep listening to music and wondering what I could create. (...) I think it’s that I don’t have any talent in real life.” (ID148). Daydreaming could also set unrealistic standards for one’s performance leading to further rejection of the current life—“Daydreaming just makes your expectations and standards so high. Like nothing you really do can compare to it.” (ID122).

Blending of realities

Although the majority of MDers reported that while engaging in daydreaming, they were aware of the unreality of the events, some signaled difficulties in discerning real memories from daydreams, as one Redditor wrote: “I daydream every day about both characters and real people that I don’t meet very often but still consider friends. It feels wrong, though when I text them after I daydreamed about them, and things don’t feel like they only happened in my head; I end up mixing daydreaming and real life.” (ID192). This appeared to be limited to probable actions—events that could have happened in real life. Furthermore, the relationship between daydreaming and memory included difficulties with memory recall, as reported by one Redditor “I don’t remember large chunks of my childhood and teenage years. Every day I spend between 3–5 h daydreaming and they are what I can remember.” (ID180).

Additionally, the overlap between real life and daydreams appeared to impact the sense of identity through the many roles MDers undertake in their fantasies. They discussed presenting themselves in a completely different manner to the outside world than how they acted in daydreams. As one Redditor described, “I’m a really quiet person irl, but she is much more of a leader; she is so confident and a fighter. It makes me ask who I really am. (...) When I try to be more like this alternate version of myself it causes only shame and trouble.” (ID174). This response highlighted the issue of implementing behaviors that the person saw as desirable in their daydreams into real life. The implemented changes varied in scope as they could include changing one’s body (e.g., “I went on a diet like I am a celebrity losing weight.” [ID113]), or habits and attitudes such as trying out a new hobby (e.g., “I started to learn how to play music—music theory and all.” [ID113]), or buying items connected to the character (e.g., “I wear and buy stuff he would wear” [ID113]).

The blending of realities included combining stimulus from the outside world with the content of daydreams. Some Redditors described being able to daydream parallel to any other action they were executing. The overlap could be visual, but not all MDers relied on images, as some daydreamed using sounds, emotions, or abstract ideas (e.g., “It’s like overlay of faces, actions, colors and locations from my daydreams but I can still see my surroundings.” [ID222]; “There’s a constant narration running in my head. The speakers have distinct voices, all thanks to my MD.” [ID88]).

It's not a loop; it's a spiral: the changing experience

The experience of daydreaming was described as evolving over time. Many Redditors mentioned the role of imaginary friends and using fantasy play to entertain themselves in childhood, which changed into would turn into reading fiction and then reenacting, changing, and mixing the plots in their daydreams. Often, they reported difficulties in discerning when the change from brief daydreaming sessions to constant MD happened— for some, daydreaming had been there as long as they could remember; others reported the gradual change as they grew up. However, several MDers pinpointed the exact moment they started daydreaming through most of the day (“Everything changed when I turned 12 and my siblings started to bully me which led to me starting to daydream excessively a year later.” [ID93]).

Correspondingly, the everyday experience of daydreaming was not static. Particular daydreams could become unavailable to the person if they spend too much time repeating them or, as one Redditor wrote, “I repeat scenes to get out every bit of happy hormones till I get bored.” (ID42). The worlds and their characters could enter “a state of rest” (ID08), during which it became less pleasant to spend time daydreaming about them, and the images or sounds were less vivid. It could return to a previous state when some time has passed without the world being used or through new real-life experiences. For example, finding inspiration in the real world could invigorate a particular daydream (“I put the story on hiatus so I can experience something new and have new material to work with.” [ID181]). As daydreaming itself was seen as a way to relax, the unresponsiveness of the daydreaming world could cause a sense of distress, making it more challenging to start daydreaming (“My anxiety was so high I just couldn't daydream. One day it was gone, each time I tried to imagine that world I got a few flashes and I was back to reality. It was incredibly stressful.” [ID79]). On the other hand, the daydream could start without the conscious decision of the MDer, and they would be unable to stop until it reached its end, leaving them exhausted yet attempting to find solace in more daydreaming. The additional aspect of the continued spiral of daydreaming was that the external events triggering daydreaming were often the long-term effects of MD, pushing the MDers further into the world they had created (e.g., “I didn't prioritize my real achievements and relied on daydreams as my only escape from the world. Opportunities passed me by, and I lost close friends because I didn't have time for them.” [ID31]).

Losing focus, cover blown: daydreaming's influence on life

The fourth theme relates to the challenges posed by MD in individuals' ability to navigate daily activities. MDers reported that constant daydreaming was a hindrance to reaching their goals and pursuing the life they wanted to live. Some considered daydreaming as damaging to motivation for their planned achievements (e.g., “I find it too easy to just daydream about things I want instead of putting in the work to get it in real life.” [ID122]). Despite the results of one's actions being available only in daydreams, the motivation would still dwindle (e.g., “I think of a message I might send, and my brain creates a response from him. This leads to a whole conversation in my head and now I don't feel the urge to actually talk to him anymore. I just went through the whole human interaction in my head, why would I need another one?” [ID323]). Some Redditors pointed towards the fear of failure as the leading cause of why daydreaming was a safer option than trying to take any risks (“Even when opportunities present themselves, I just neglect them because failure and disappointment scare me too much.” [ID134]).

Additionally, the need to daydream and the inability to control when it happened made it difficult to focus on any activity for a prolonged time. Redditors reported that without their conscious choice, they would find themselves daydreaming. The effort to focus on current actions was further impeded by the tendency to lose temporal awareness during daydreaming sessions. As one Redditor wrote: “Daydreaming has made it so hard to concentrate on studying. I would have all the intention to study, open my books and laptop, but then spend the entire time daydreaming.” (ID7). Those lapses in awareness could result in physical injuries as the person hit objects while pacing, stumbled, or fell (e.g., “I was lost in my fantasy last night while going through the city. I tripped on the sidewalk and face planted into the concrete.” [ID13]). Prolonged periods of daydreaming were often followed by deep exhaustion—it was often referred to as draining and tiring.

Redditors often expended great effort to hide the consequences of their daydreaming from other people as it was a source of shame (e.g., “When I talk to people, I know that I would look very strange if I started to daydream then and there. this sense of shame just overtakes the need to daydream.” [ID102]), or they felt it could impact their livelihood by potentially leading to termination of their employment contract for being perceived as “weird” or “a crazy person” (ID102). The need to hide would stop them from spending time with other people, leading to a feeling of isolation and loneliness. Nevertheless, even when alone, they would continue to be afraid of “being seen and heard, when

I stand in light or in a reflection when I am near something capable of recording.” (ID58).

It's keeping me alive: the healing aspects of daydreaming

At times, daydreaming was perceived as a positive and helpful activity. According to one Redditor, “When I am not daydreaming, I feel disappointed in myself, but when I do, I feel much better” (ID266), showing that, especially in the short term, it was presented as a source of comfort that could ease current suffering. MDers pointed towards its role as an emotion-regulating mechanism. It could generate positive emotions or prolong those already there (e.g., “To get the emotions I didn’t get in reality I just fantasize about my actions and other people reacting to them.” [ID122]). It could increase the intensity of desired emotions or offer relief from negative ones (e.g., “When I feel uncomfortable, I daydream. When my writing is bad or something bad happens on the news, I daydream.” [ID212]). In some instances, the suffering was so great that daydreaming was seen as the factor that saved the person from being entirely overwhelmed by their feelings or circumstances, a coping mechanism they could not imagine living without (e.g., “Back then when I daydreamt the most it wasn’t safe for me to do anything else. I’m not going to complain about dd since it let me survive until now, when I can do the things, I’ve always wanted.” [ID180]).

Daydreaming could offer a sense of control, as through their control over the character’s actions, the MDer could satisfy their needs in a manner ideally suited to their preferences (e.g., “Most of the time I daydream about telling my therapist about the thoughts I have at the moment or the problems I am facing. (...) He feels like a validating figure in my life.” [ID327]). Especially when it came to the experience of trauma or negligence, daydreaming could offer a feeling of connection and love in a safe environment that would not judge for one’s sexuality, gender identity, or ridicule for what might be perceived as weakness by others, e.g. crying. Additionally, through the utilization of daydreaming, negative memories could potentially be reimagined into more positive experiences. Several Redditors recounted scenarios wherein they revisited past traumas within their daydreams, often introducing new characters who would provide salvation for their younger selves. Daydreaming could also provide readily accessible entertainment (e.g., “If I have a boring day, I liven things up with an exciting daydream” [ID266]) or conversely act as a tranquilizer before sleep (“I don’t need to read a book before going to bed, I can just imagine it.” [ID282]).

As this study was concerned with Reddit forums, another positive aspect emerged: a sense of community based on

facing the same experience. Many discussion threads were full of words of support and understanding. MDers not only sought assistance and knowledge but also extended it to others. Some remained active on the forum even after overcoming MD, aiming to share guidance and support with others. The feeling of being understood was contrasted with the lack of care from clinicians, psychologists, and family members (e.g., “My parents said everybody daydreams and my counselor, who I was hoping would help me the most, keeps telling me it can be a good thing. (...) I can only find support in this group. Is it the same for you?” [ID125]).

I need this to stop: the ongoing struggle to quit

The last theme was related to the desire to stop daydreaming and the repeated attempts to achieve it, which became an ongoing struggle. In various instances, the need to stop daydreaming was explicit (e.g. “I need to stop.”, or “I wish I never developed it and that I could let go of it.” [ID201]).

Some Redditors would actively engage with the community seeking guidance on cessation strategies, while others would offer such advice unprompted in reply to posts sharing stories of distress caused by MD. Among those seeking help, a palpable sense of helplessness often prevailed, which was occasionally alleviated following the messages of understanding and concrete instructions. The advice offered included actions that would promote proactivity, such as cultivating new interests, socializing, or pursuing lifestyle changes. On the other hand, some Redditors did not wish to stop daydreaming as a whole but wanted to control the amount of time spent and “the maladaptive parts of it” (ID201). While a considerable number of Redditors were actively seeking methods to stop, a subset would instead recount their struggles and setbacks in attempting to cease daydreaming. The period of abstinence from MD was accompanied by a worsening mood, a feeling that “My life is empty and boring. I can’t enjoy activities that I used to like doing while daydreaming” (ID156). The time immediately following the cessation of daydreaming presented the most formidable challenges: “During the first few months, I felt like I was going through withdrawal: exhausted, unable to focus, and depressed.” (ID37).

One potential explanation for the reported role of daydreaming as an avoidance mechanism is its capacity to mitigate the adverse effects of other challenges in the MDer’s life. Redditors noted their difficulties in coping without engaging in daydreaming (“My MD always helped me to escape my other mental problems. I don’t find it that surprising that I feel bad after quitting it so abruptly.” [ID26]). Seeking help from people close to them or a professional mental health advisor was reported as facilitating the process of overcoming MD. Amid the adverse repercussions

associated with cessation, a sentiment of sorrow emerged due to the necessity of relinquishing characters that held significant sway in the individual's life and were perceived as the sole reason for living ("That moment of final goodbye is very bittersweet. I cried when I said goodbye since it was like losing a part of you, a family." [ID178]). Similarly to the experience of addiction (Griffiths, 2005), there was a portion of Redditors who described relapses after being able to curb the amount of daydreaming or abstain wholly. As one wrote, "I did manage to get out of it, for some time. Then life went to shit, and that's why I'm back here looking for help. (...) What made it possible was making my life more interesting, sometimes help from family or friends, sometimes therapy or maybe you could do it alone." (ID60). This account highlights the role of social support in stopping daydreaming as well as the continuous struggle to quit despite the setbacks. Additionally, there were accounts sharing joy over the success in abstaining from daydreaming (e.g., "It's been four months since I made the decision to stop daydreaming. I've managed to increase my study time. I cover more and more of the syllabus. (...) I am focusing on my life." [ID300]).

Discussion

The current study aimed to explore the lived experiences of MD among people who are a part of the Reddit Maladaptive Daydreaming communities. The accounts analyzed support previous research and offer new insights that are valuable in both theoretical and practical contexts.

The depicted experiences of MD were in line with previous conceptualizations of the construct (cf. Schimmenti et al., 2019). MDers using Reddit forums recounted starting to daydream in childhood and presented various pathways that turned into MD. From a socially acceptable outlet for sustained imaginative engagement, enabling them to creatively reinterpret scenarios from the media consumed, it could turn into a time-consuming activity and the sole coping technique. Notably, this path parallels the internalization of fantasy proposed by Klinger (2009), yet the rewarding and soothing nature of daydreaming appears to make it a priority instead of an occasional source of entertainment. Similarly to previous studies, some MDers attributed development of MD to their experiences of trauma and neglect (Bigelsen & Schupak, 2011)—daydreaming would become a safe space that allowed the person to seek support from their characters and an avenue to experiences unavailable in the real life (e.g., closeness, belongingness). What is more, the change between daydreaming as an occasional pastime and MD appears to be a complex one. Daydreaming sessions could become longer, and more numerous as more external

stressors appeared—stressors which in some instances were consequences of prioritizing daydreaming over other activities. Yet MD may not follow a simple pattern of increase of time spent on daydreaming, as MDers reported periods when they were unable to daydream or when the daydreams were less pleasant. The current findings suggest that MDers may experience tolerance (Griffiths, 2005), a symptom of behavioral addiction that appears when the intensity of a given activity ceases to provide the same level of stimulation and satisfaction. Therefore, one would need to focus on a new material (e.g., new real-life experiences or consumed fiction) to experience stimulation again, or a period of abstinence would make daydreaming enjoyable until the topic once more would stop being rewarding.

A new aspect presented in the current study is the relationship between MD and motivation. On the one hand, characters could encourage MDers to achieve the planned goals providing support and fostering accountability. The personas inhabited in daydreams could inspire the MDers to explore novel pursuits. Conversely, daydreaming could pose a barrier to the realization of their aspirations. This phenomenon seemed to be linked to the perceived ease of achieving success within daydreams, as well as to the sense of contentment and fulfillment elicited by the daydreams. Previous studies have shown a relationship between positive fantasies and a decrease in goal commitment and energization (Kappes & Oettingen, 2011; Oettingen et al., 2009), which has been for the first time also noted in the group of MDers. Furthermore, the inability to translate imagined actions into real-world implementation, particularly those activities in which MDers excel within their fantasies, could lead to ceasing future attempts and retreating into daydreaming about them instead. Confronting a lack of proficiency in practical skills could also become a source of great distress. The results appear similar to the effect proposed by the self-discrepancy theory (SDT; Higgins (1987)), whereas the contrast between the perfect and real self is related to negative affect, guilt/shame, and anger (Mason et al., 2019). In the case of MDers, the process of embodying a perfect self within the daydreams may engender a persistent dichotomy between the two selves upon reintegration into external environments. The resulting distress and dissatisfaction could further incentivize the return to daydreaming as a means of self-soothing. Additionally, the act of inhabiting different selves in daydreams appears related to troubles with identity. These challenges may stem from the constant use of daydreaming, the limited control over the content of the fantasy, and its high level of immersion, wherein an individual enacts diverse behaviors depending on the character they are inhabiting. It would differentiate it from other forms of creativity, such as character writing, and align it more closely with dissociative

identity disorder (Soffer-Dudek & Somer, 2022). Attempts to emulate their characters and investing time and resources to acquire analogous skills may be seen as an attempt to diminish the difference separating the two lives the MDers inhabit. Such an effect may be further assisted by the capability of daydreams to impede the recollection of actual past events and, when the scenarios depicted are plausible within real-life contexts, their potential to generate false memories. The accounts provided are in line with the case study investigating false memory acquisition present in MD (Somer, 2024), yet present it as a more prevalent phenomena than previously assumed.

What is more, this study provides a potential rationale for the rise of negative emotions observed after days characterized by increased daydreaming activity (Soffer-Dudek & Somer, 2018) as well as the connection between MD and emotional dysregulation (Greene et al., 2020). Previously it has been proposed that daydreaming may be an emotional regulation strategy that can assist in crystallizing moods into emotions which can be further processed (Regis, 2013), a sentiment also present in our study and most vividly seen through the example of MDers discussing emotions with their characters. Furthermore, MDers mentioned using daydreaming as a coping strategy that provided and prolonged the presence of positive emotions, and down-regulated negative ones. In several instances they reported daydreaming as the only possible way of coping with extremely distressing situations. On the other hand, there were many accounts of daydreaming not fulfilling its positive functions as it impeded achieving one's goals in real life, was a source of strong negative emotions and exhaustion. It could set high standards for one's mood and skill which when not met would be a source of distress and self-doubt. Through the fear of stigmatization and feeling of shame it could lead to further isolation of the MDer and higher reliance on one's characters as companions. The complex relationship between MD and emotions can also be seen in relation to a sense of control. While daydreams may generate positive emotions due to a sense of complete control over a narrative and its characters, the lack of stable control over one's MD sessions' intensity and duration can simultaneously be a source of great distress. Our data suggests that for many MDers daydreaming may exhibit positive short-term effects, yet in long-term overreliance on daydreaming as a coping strategy appears to lead to higher levels of distress. Many MDers reported being aware of the negative consequences MD has on their life yet being unable to stop daydreaming. It should be further noted that while MD is highly comorbid with other disorders, e.g., ADHD, anxiety, and depression (Somer et al., 2017a), many users reported reluctance to seek help due to diminished presence of symptoms while daydreaming and the lack of understanding of MD by the

mental health professionals. It is possible that this may hinder the attempts of controlling MD as underlying reasons for reliance on daydreaming would remain untreated. Redditors seeking assistance often used informal channels, relying on peer-to-peer support and advice which once implemented may inadvertently exacerbate rather than alleviate symptoms for some individuals.

Of note, some Redditors described their experiences using words and symptoms typical for behavioral addiction, which aligns with previous suggestions regarding MD as an addiction (Pietkiewicz et al., 2018). For some Redditors, the descriptions of MD sessions matched behavioral addiction symptoms proposed by Griffiths (2005), including salience, mood modification, conflict, tolerance, and relapse. Redditors pointed at MD as a significant emotion regulation strategy and the only way to achieve contentment or happiness. Additionally, the need to engage in daydreaming was described as urgent and uncontrollable, which resulted in long-lasting MD sessions, neglecting real-life chores and activities, conflicts in relationships or work, and influence on one's attention, making studying or decision-making difficult to accomplish. Some accounts reported an increasing amount of MD over the lifespan, especially when faced with difficulties or disappointments in everyday life that led to isolation or loneliness; relapse was also mentioned as a result of unsuccessful attempts at MD abstinence. Based on the current analyses, it was not clear whether MD may exhibit withdrawal symptoms, although some users characterized their attempts to stop engaging in MD as exhausting and negatively affecting their mood.

Despite the handful of negative consequences summarized above, many Redditors repeatedly pointed out the positive aspects of MD, including community building (e.g., finding acceptance and understanding not only during MD sessions but also on Reddit forums). Given that MD is not a clinical diagnosis, nor is it widely recognized by either the general public or the psychiatric community (Soffer-Dudek & Somer, 2018), many MDers experience shame, loss, and lack of support from professionals. Furthermore, in some cases, daydreaming was used to actively change past memories, putting the dreamer in an active role of helping their younger self or having someone else rescue them, similar to therapeutic interventions in schema therapy (Young & Klosko, 1993) or in treating PTSD (Watkins et al., 2018). Although these ways of coping with trauma or setbacks can be helpful, engaging in them outside of the therapeutic context may maintain symptoms, including promoting rumination, rather than solving the problem. To date, only one study has examined the impact of internet-based mindfulness training on MD symptoms (Herscu et al., 2023) while a case study has presented a positive role of interventions

such as behavioral modification, trigger identification, and relapse prevention (Sharma & Mahapatra, 2021).

The current study allows for clinical implications. First, in accordance with the lived experiences of the MDers and a lack of MD awareness and knowledge among mental health specialists, this topic should be a) raised in the therapeutic environment as underrepresented, b) considered in clinical interviews and potential conceptualizations, especially among patients who are at risk of MD (e.g., those with PTSD, ADHD, or withdrawal tendencies). Based on our study, many MDers do not report their symptoms due to shame and negative outcomes (e.g., lack of understanding from the mental health specialist in the past), therefore asking about these symptoms may be normalizing and increase patient's openness in discussing this topic and, in turn, allow for conducting therapeutic work in this matter. Second, given that many MDers engaged in this activity as a coping and emotional regulation strategy, it is significant to focus on these abilities during the therapeutic process. As emotional dysregulation is one of the most prominent correlate of MD (cf. Greene et al., 2020; Pyszkowska et al., 2023), therefore a dialectical behaviour therapy (DBT) approach seems as a potentially beneficial in working with MDers as it mainly focuses on emotional regulation, distress tolerance, and adaptive coping strategies, especially those aimed at avoidance (cf. Bloom et al., 2012; Chen et al., 2021; DeCou et al., 2019), and its effectiveness has been proven in addictive behaviors (Siste et al., 2022). Furthermore, based on previous literature and the current study, MD can be considered as a behavioral addiction, and its symptoms should be included in therapeutic conceptualization.

Strengths and limitations

The data examined in the current study provided a rich and nuanced insight into previously unreported aspects of MD. Several future areas of study were identified and information that may prove to be valuable for therapeutic interventions was provided. Additionally, as topics of discussions were not instructed by the researchers' questions the resulting data provided naturalistic environment to discuss the experiences of living with MD. One of the main limitations of the present study is its qualitative nature. While this approach facilitated a nuanced exploration of MD experiences, the findings may not be broadly applicable to MDers whose posts were not analyzed in the study or who do not engage with Reddit forums. Furthermore, as there was no demographic data available, the sociodemographic characteristics of the sample are unknown. Additionally, the lived experiences of non-English speaking MDers also remain unknown.

Conclusion

In conclusion, MD exerts a multifaceted influence on various aspects of daily life. While it appears to be primarily connected to emotional regulation it continues to affect motivation, sense of identity, and cognitive capabilities. It is a changing phenomenon contingent upon the individual's current situation, emotional state, and previous engagement with daydreaming. Our findings suggest that there is an urgent need for support from mental health specialists that are informed about the ways MD manifests and what areas of life it can impact. It could prove beneficial to investigate effectiveness of interventions previously found successful for behavioral addictions due to the similarities between this group of disorders and MD. Additionally, focusing on learning different emotion regulation skills and implementing frustration tolerance strategies may aid MDers in recovery. Future studies should also investigate self-stigmatization due to MD symptoms as well as the relationship between MD, motivation, sense of identity, and memorization difficulties.

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Data availability The data supporting the findings was gathered from the Reddit platform where it is accessible. Due to confidentiality particular posts will not be shared by the authors.

Declarations

Ethics approval The research was approved by the University of Silesia Ethics Committee in Katowice (KEUS416/10.2023).

Informed consent Informed consent was not obtained from all individual participants included in the study because the comments were posted on a public forum and IEC deemed it not required.

Conflict of interest The Authors declare no conflict of interest.

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References

- Bigelsen, J., & Schupak, C. (2011). Compulsive fantasy: Proposed evidence of an under-reported syndrome through a systematic study of 90 self-identified non-normative fantasizers. *Consciousness and Cognition*, 20(4), 1634–1648. <https://doi.org/10.1016/j.concog.2011.08.013>
- Bigelsen, J., Lehrfeld, J. M., Jopp, D. S., & Somer, E. (2016). Maladaptive daydreaming: Evidence for an under-researched mental health disorder. *Consciousness and Cognition*, 42, 254–266. <https://doi.org/10.1016/j.concog.2016.03.017>
- Bloom, J. M., Woodward, E. N., Susmaras, T., & Pantalone, D. W. (2012). Use of dialectical behavior therapy in inpatient treatment of borderline personality disorder: A systematic review. *Psychiatric Services*, 63(9), 881–888. <https://doi.org/10.1176/appi.ps.201100311>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/147808706qp063oa>
- Braun, V., & Clarke, V. (2019). Reflecting on reflexive thematic analysis. *Qualitative Research in Sport, Exercise and Health*, 11(4), 589–597. <https://doi.org/10.1080/2159676X.2019.1628806>
- British Psychological Society. (2021). *Ethics guidelines for internet-mediated research*. <https://doi.org/10.53841/bpsrep.2021.rep155>
- Chen, S. Y., Cheng, Y., Zhao, W. W., & Zhang, Y. H. (2021). Effects of dialectical behaviour therapy on reducing self-harming behaviours and negative emotions in patients with borderline personality disorder: A meta-analysis. *Journal of Psychiatric and Mental Health Nursing*, 28(6), 1128–1139. <https://doi.org/10.1111/jpm.12797>
- De Choudhury, M., & De, S. (2014). Mental health discourse on reddit: Self-disclosure, social support, and anonymity. *Proceedings of the International AAAI Conference on Web and Social Media*, 8(1), 71–80. <https://doi.org/10.1609/icwsm.v8i1.14526>
- DeCou, C. R., Comtois, K. A., & Landes, S. J. (2019). Dialectical behavior therapy is effective for the treatment of suicidal behavior: A meta-analysis. *Behavior Therapy*, 50(1), 60–72. <https://doi.org/10.1016/j.beth.2018.03.009>
- Eysenbach, G., & Till, J. E. (2001). Ethical issues in qualitative research on internet communities. *BMJ*, 323(7321), 1103–1105. <https://doi.org/10.1136/bmj.323.7321.1103>
- Greene, T., West, M., & Somer, E. (2020). Maladaptive daydreaming and emotional regulation difficulties: A network analysis. *Psychiatry Research*, 285, 112799. <https://doi.org/10.1016/j.psychres.2020.112799>
- Griffiths, M. (2005). A “components” model of addiction within a biopsychosocial framework. *Journal of Substance Use*, 10(4), 191–197. <https://doi.org/10.1080/14659890500114359>
- Herscu, O., Somer, E., Federman, A., & Soffer-Dudek, N. (2023). Mindfulness meditation and self-monitoring reduced maladaptive daydreaming symptoms: A randomized controlled trial of a brief self-guided web-based program. *Journal of Consulting and Clinical Psychology*, 91(5), 285–300. <https://doi.org/10.1037/cep0000790>
- Higgins, E. T. (1987). Self-discrepancy: A theory relating self and affect. *Psychological Review*, 94(3), 319–340. <https://doi.org/10.1037/0033-295X.94.3.319>
- Kappes, H. B., & Oettingen, G. (2011). Positive fantasies about idealized futures sap energy. *Journal of Experimental Social Psychology*, 47(4), 719–729. <https://doi.org/10.1016/j.jesp.2011.02.003>
- Killingsworth, M. A., & Gilbert, D. T. (2010). A wandering mind is an unhappy mind. *Science*, 330(6006), 932–932. <https://doi.org/10.1126/science.1192439>
- Klinger, E. (2009). Daydreaming and fantasizing: Thought flow and motivation. In K. D. Markman, W. M. P. Klein, & J. A. Suhr (Eds.), *Handbook of imagination and mental simulation* (2nd ed., pp. 225–239). Psychology Press.
- Marcusson-Clavertz, D., West, M., Kjell, O. N. E., & Somer, E. (2019). A daily diary study on maladaptive daydreaming, mind wandering, and sleep disturbances: Examining within-person and between-persons relations. *PLoS ONE*, 14(11), e0225529. <https://doi.org/10.1371/journal.pone.0225529>
- Margherita, G., Caffieri, A., Mariani, R., Filosa, M., Manari, T., Lenzo, V., Quattropani, M. C., Vegni, E., Borghi, L., Castelnovo, G., Saita, E., Freda, M. F., Varallo, G., Franceschini, C., & Musetti, A. (2022). Dreaming or daydreaming during COVID-19 lockdown: A comparison between maladaptive and nonmaladaptive daydreamers. *Psychology of Consciousness: Theory, Research, and Practice*. <https://doi.org/10.1037/cns0000333>
- Mason, T. B., Smith, K. E., Engwall, A., Lass, A., Mead, M., Sorby, M., Bjorlie, K., Strauman, T. J., & Wonderlich, S. (2019). Self-discrepancy theory as a transdiagnostic framework: A meta-analysis of self-discrepancy and psychopathology. *Psychological Bulletin*, 145(4), 372–389. <https://doi.org/10.1037/bul0000186>
- Oettingen, G., Mayer, D., TimurSevincer, A., Stephens, E. J., Pak, H., & Hagenah, M. (2009). Mental contrasting and goal commitment: The mediating role of energization. *Personality and Social Psychology Bulletin*, 35(5), 608–622. <https://doi.org/10.1177/0146167208330856>
- Pietkiewicz, I. J., Nećki, S., Bańbura, A., & Tomalski, R. (2018). Maladaptive daydreaming as a new form of behavioral addiction. *Journal of Behavioral Addictions*, 7(3), 838–843. <https://doi.org/10.1556/2006.7.2018.95>
- Poerio, G. L., & Smallwood, J. (2016). Daydreaming to navigate the social world: What we know, what we don’t know, and why it matters. *Social and Personality Psychology Compass*, 10(11), 605–618. <https://doi.org/10.1111/spc3.12288>
- Pyszowska, A., Celban, J., Nowacki, A., & Dubiel, I. (2023). Maladaptive daydreaming, emotional dysregulation, affect and internalized stigma in persons with borderline personality disorder and depression disorder: A network analysis. *Clinical Psychology & Psychotherapy*. <https://doi.org/10.1002/cpp.2923>
- Regis, M. (2013). *Daydreams and the function of fantasy*. Springer.
- Sándor, A., Bugán, A., Nagy, A., Nagy, N., Tóth-Merza, K., & Molnár, J. (2023). Childhood traumatization and dissociative experiences among maladaptive and normal daydreamers in a Hungarian sample. *Current Psychology*, 42(11), 9509–9525. <https://doi.org/10.1007/s12144-021-02223-3>
- Schimmenti, A., Somer, E., & Regis, M. (2019). Maladaptive daydreaming: Towards a nosological definition. *Annales Médico-Psychologiques, Revue Psychiatrique*, 177(9), 865–874. <https://doi.org/10.1016/j.amp.2019.08.014>
- Sharma, P., & Mahapatra, A. (2021). Phenomenological analysis of maladaptive daydreaming associated with internet gaming addiction: A case report. *General Psychiatry*, 34(2), e100419. <https://doi.org/10.1136/gpsych-2020-100419>
- Singer, J. L., & McCraven, V. G. (1961). Some characteristics of adult daydreaming. *The Journal of Psychology*, 51(1), 151–164. <https://doi.org/10.1080/00223980.1961.9916467>
- Siste, K., Hanafi, E., Adrian, Sen, L. T., Alison, P., & Beatrice, E. (2022). Online dialectical behavioral therapy for adults with internet addiction: A quasi-experimental trial during the COVID-19 pandemic. *Psychiatry Research*, 315, 114698. <https://doi.org/10.1016/j.psychres.2022.114698>
- Smedley, R. M., & Coulson, N. S. (2018). A practical guide to analysing online support forums. *Qualitative Research in Psychology*, 18(1), 76–103. <https://doi.org/10.1080/14780877.2018.1475532>
- Soffer-Dudek, N., & Somer, E. (2018). Trapped in a daydream: Daily elevations in maladaptive daydreaming are associated with daily psychopathological symptoms. *Frontiers in Psychiatry*, 9. <https://doi.org/10.3389/fpsyg.2018.00194>

- Soffer-Dudek, N., & Somer, E. (2022). Maladaptive daydreaming is a dissociative disorder: Supporting evidence and theory. In M. J. Dorahy, S. N. Gold, & J. A. O’Neil (Eds.), *Dissociation and the dissociative disorders: Past, present, future* (2nd ed.). Routledge.
- Somer, E. (2002). Maladaptive daydreaming: A qualitative inquiry. *Journal of Contemporary Psychotherapy*, 32(2/3), 197–212. <https://doi.org/10.1023/A:1020597026919>
- Somer, E., Lehrfeld, J., Bigelsen, J., & Jopp, D. S. (2016a). Development and validation of the maladaptive daydreaming scale (MDS). *Consciousness and Cognition*, 39, 77–91. <https://doi.org/10.1016/j.concog.2015.12.001>
- Somer, E., Somer, L., & Jopp, D. S. (2016b). Childhood antecedents and maintaining factors in maladaptive daydreaming. *Journal of Nervous & Mental Disease*, 204(6), 471–478. <https://doi.org/10.1097/NMD.0000000000000507>
- Somer, E., Somer, L., & Jopp, D. S. (2016c). Parallel lives: A phenomenological study of the lived experience of maladaptive daydreaming. *Journal of Trauma & Dissociation*, 17(5), 561–576. <https://doi.org/10.1080/15299732.2016.1160463>
- Somer, E., Soffer-Dudek, N., & Ross, C. A. (2017a). The comorbidity of daydreaming disorder (maladaptive daydreaming). *Journal of Nervous & Mental Disease*, 205(7), 525–530. <https://doi.org/10.1097/NMD.0000000000000685>
- Somer, E., Soffer-Dudek, N., Ross, C. A., & Halpern, N. (2017b). Maladaptive daydreaming: Proposed diagnostic criteria and their assessment with a structured clinical interview. *Psychology of Consciousness: Theory, Research, and Practice*, 4(2), 176–189. <https://doi.org/10.1037/cns0000114>
- Somer, E., Abu-Rayya, H. M., & Brenner, R. (2021). Childhood trauma and maladaptive daydreaming: Fantasy functions and themes in a multi-country sample. *Journal of Trauma & Dissociation*, 22(3), 288–303. <https://doi.org/10.1080/15299732.2020.1809599>
- Somer, E. (2024). *When imagination feels like reality: A case study of false memories and maladaptive daydreaming in visual impairment*. <https://doi.org/10.31234/osf.io/6su9b>
- Watkins, L. E., Sprang, K. R., & Rothbaum, B. O. (2018). Treating PTSD: A review of evidence-based psychotherapy interventions. *Frontiers in Behavioral Neuroscience*, 12, 258. <https://doi.org/10.3389/fnbeh.2018.00258>
- Wilson, S. C., & Barber, T. X. (1982). The fantasy-prone personality: Implications for understanding imagery, hypnosis, and parapsychological phenomena. *PSI Research*, 1(3), 94–116.
- Young, J. E., & Klosko, J. S. (1993). *Reinventing your life*. Smithmark Publishers, Incorporated.
- Zedelius, C. M., Protzko, J., Broadway, J. M., & Schooler, J. W. (2021). What types of daydreaming predict creativity? Laboratory and experience sampling evidence. *Psychology of Aesthetics, Creativity, and the Arts*, 15(4), 596–611. <https://doi.org/10.1037/aca0000342>
- Zittoun, T., & Cabra, M. (2022). Daydreaming. In V. P. Glăveanu (Ed.), *The palgrave encyclopedia of the possible* (pp. 343–350). Springer International Publishing. https://doi.org/10.1007/978-3-030-90913-0_83

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