| Q0. This is a 15-question survey for assessing the efficacy of guided dreaming in stress reduction and problem-solving. It is part of the thesis research by MA candidate Bei Linda Tang, who developed guided dreaming. By clicking the button below, you acknowledge that you have read the Informed Consent , that your participation in the study is voluntary, and that you can choose to terminate your participation at any time for any reason. |
|--|
| I have read the informed consent and agree to begin the questionnaire |
| ○ I do not consent and do not want to participate |
| Q1. 1. Did you feel safe during guided dreaming? |
| O Definitely yes |
| ○ Somewhat yes |
| ○ Neutral |
| Somewhat not |
| O Definitely not |
| Q2. 2. Did you feel less stressed after guided dreaming than before? |
| O Definitely yes |
| ○ Somewhat yes |
| ○ Neutral |
| Somewhat not |
| O Definitely not |
| Q3. 3. Please describe the challenge you sought to resolve through guided dreaming. |
| Bodily pains |
| Bodily pairis |
| |
| |
| |
| |
| |
| Q4. 4. Please describe your dream from the guided dreaming workshop in as much details as you can recall and the emotions you felt during the dream. |
| I dreamt joyfully of running without pain |
| |
| |
| |
| |

| Q5. 5. What do you think | your d | ream me | ans, and | how may | it be relate | ed to you | r life? | | | | | |
|--|--------------------|-----------------|--------------------|--------------|--------------|------------|-------------|-------------|-------------|----------|--------------|------|
| The dream was a harsh remi | nder that r | ny life is pair | nful and not | as I wish it | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Q6. 6. Would you make | change | s in your | waking li | fe because | e of your o | dream? If | so, please | e elaborat | e. | | | |
| Absolutely not | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Q7. 7. Did guided dream | ing prov | vide insig | hts to so | lving your | problem? | If so, wh | at might th | nat be? | | | | |
| Definitely yes | | | | | | | | | | | | |
| Somewhat yes | | | | | | | | | | | | |
| Might or might not | | | | | | | | | | | | |
| Somewhat no | | | | | | | | | | | | |
| Definitely no | | | | | | | | | | | | |
| Possible insights from gu | ided drear | ning, if any. | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | h | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Q8. 8. Move the scale be extremely bad and 100 b | etween being ex | 0-100 to a | self-asse good) | ss your m | ental outlo | ook before | e and afte | r your last | t guided dr | eaming s | session (0 b | eing |
| , | Ü | , , | , | | | | | | | | | |
| | 0 | 40 | 00 | 20 | 40 | F0 | 60 | 70 | 00 | 00 | 400 | |
| | 0 | 10 | 20 | 30 | 40 | 50 | 60 | 70 | 80 | 90 | 100 | |
| Before guided dreaming | | | | | | | | | | | | 30 |
| | 1 | | | | | | | | | | | |

15

Q9. 9. What is your age group?

After guided dreaming

O Under 18

O 18-40

| \circ | 61-80 |
|---------|--|
| \circ | Over 80 |
| | |
| | |
| Q10. | 10. What gender do you identify with? |
| | |
| \circ | Male |
| 0 | Female |
| \circ | Non-binary |
| \circ | Other (please specify) |
| | |
| | |
| Q11. | 11. What religion do you identify with? |
| | |
| \circ | Christianity |
| \circ | Islam |
| \circ | Judaism |
| \circ | Buddhism |
| \circ | Hinduism |
| | Spiritual |
| \circ | Non-religious |
| \circ | Other (please specify) |
| | |
| | |
| Q12. | 12. What ethnicities do you identify with? |
| | |
| 0 | White |
| 0 | Black |
| \circ | Indigeneous |
| | Asian |
| \circ | Mideastern |
| \circ | Other (please specify) |
| | |
| | |
| Q13. | 13. What is your relationship status? |
| | |
| 0 | Single |
| | Casual |
| | Committed |
| | Married |
| | Separated or divorced |
| 0 | Other (please specify) |
| | |
| | |
| Q14. | 14. What is your education level? |

○ High school and less

College

41-60

| ○ Masters |
|-------------------------------|
| O Professional degree |
| Doctorate |

Q15. 15. How often do you engage in mindfulness activities, such as yoga or meditation?

FrequentlySometimesSparselyRarelyNever

