Some ‘maladaptive daydreamers’ reported trouble holding down jobs. *Illustration: Thomas Pitilli for The Wall Street Journal*

By 
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May 9, 2016 2:25 p.m. ET

Can daydreaming become extreme to the point where it impacts daily functioning?

It is a controversial notion, but Eli Somer, a clinical professor of psychology at the University of Haifa in Israel, believes extreme daydreaming—when individuals immerse themselves in vivid alternative universes which they prefer to reality—should be considered a mental disorder with a clinical diagnosis and treatment options.

In a study published in the journal Consciousness and Cognition in March, Dr. Somer and co-researchers documented the experiences of 340 people who self-identified as “maladaptive daydreamers,” a term Dr. Somer coined more than a decade ago, compared with 107 in a control group. The maladaptive daydreamers engaged in daydreaming on average 57% of their waking time compared with 16% in the control group. They also had more elaborate and fanciful daydreams often involving fictional or
Eli Somer, a clinical professor of psychology at the University of Haifa, Israel, developed the term ‘maladaptive daydreamer.’

Historical figures, celebrities, or idealized versions of themselves. In contrast, the control group’s daydreams centered around events in real life or concrete wishes, such as winning the lottery.

The greatest difference, said Dr. Somer, is the maladaptive daydreamers reported that the activity interfered with their daily life. They also reported higher rates of attention-deficit and obsessive-compulsive symptoms, and more than 80% used kinesthetic activity or movement when daydreaming, such as rocking, pacing, or spinning.

“Everyone has moments of mind-wandering in which one plans a future discussion or anticipates an event in the near future,” said Dr. Somer. “They do not interfere with functioning and they do not cause any distress or provide any particular pleasure.”

People who suffer from maladaptive daydreaming can differentiate between their fantasy and reality, unlike people with schizophrenia. Though they usually can control when they daydream it evolves into an addictive habit.

About one-quarter of the maladaptive daydreamers Dr. Somer has interviewed are trauma survivors who use daydreaming as an escape. Many have reported having family members with a propensity to daydream and have reported being shy and socially isolated. Over the years, he has received emails from hundreds of people around the world seeking help for a trait that they say can become addictive.

Dr. Somer and collaborating researchers developed a 14-item rating scale to assess patients and differentiate between normal and maladaptive daydreamers in a study published in Consciousness and Cognition this year, which he hopes can be used as a research tool in future studies.

His next step is to develop diagnostic criteria and research treatment models. He would treat any underlying issues and also employ therapies used to treat addictions.
It isn’t clear how many people experience maladaptive daydreaming. Dr. Somer says since he coined the term testimonials and support groups have sprouted on social media sites like Facebook, YouTube and Yahoo Health. The Wild Minds Network website has more than 5,300 members, according to the site.

Rachel Bennett, a 27-year-old Jacksonville, N.C., resident, joined a support group on Facebook a few months ago. Ms. Bennett, who is currently unemployed, said she usually dreams up new episodes of her favorite Japanese animé characters and shows. She’s also created four families of fictional characters which have grown with her over the years.

“I’d much rather stay home and daydream than go out,” she said.

Her daydreaming made it hard to keep retail jobs because her mind tends to wander often, particularly when she is bored. And her daydreams are constantly in the background which can make it hard to remember things.

“I enjoy my daydreams very much,” Ms. Bennett said. “I just want a much better control over it.”

Some experts think it is going too far to label extreme daydreaming with a diagnosis. “It seems like something that would be worthy of identification by psychologists and psychiatrists,” said Jonathan Schooler, a professor in the department of psychological and brain sciences at the University of California, Santa Barbara. “But whether it deserves its own distinct diagnosis and the degree to which it’s not just anything more than the extreme end of the distribution of mind-wandering is not clear to me.”

Frequent mind-wandering can be a symptom of a variety of other mental conditions, such as attention-deficit disorders and depression, added Dr. Schooler who isn’t a clinician but conducts research on mind-wandering.

Eric Klinger, a professor emeritus in the psychology discipline at the University of Minnesota, Morris, doesn’t believe there is currently enough evidence suggesting that maladaptive daydreaming should be its own separate mental condition. “I’m very reluctant to create a category for a mind-wandering disturbance,” he said. “Once you start psychopathologizing these things you can get yourself in trouble because often normal mechanisms account for this.”

For example, experts say it’s normal and healthy for children to have imaginary friends and engage in pretend play. That usually evolves into daydreaming as children grow up and such behavior can be associated with creativity. A small minority of children who have a motor disorder called stereotypic movement disorder (SMD) engage in
Jayne Bigelsen, a New York City lawyer for a nonprofit, has researched maladaptive daydreaming after discovering she suffers from it.

Some research has shown repetitive movements and they engage in fantasy in their head. Dr. Somer believes repetitive movements and some research has shown they do this when engaging in fantasy in their head. Dr. Somer believes that SMD may be a precursor to maladaptive daydreaming, which is also associated with movement.

Jayne Bigelsen is a 45-year-old New York City lawyer for a nonprofit whose interest in maladaptive daydreaming stems from her personal experiences. Ms. Bigelsen was the subject of a case study published in 2009 in Consciousness and Cognition and a 2013 study in the journal Frontiers in Psychology in which researchers did an fMRI brain scan on her while they told her to mind-wander. The scans showed increased activity in the reward areas of the brain.

She went on to co-author three studies, a 2011 study that documented the experiences of 90 people and she worked with Dr. Somer on co-authoring the two recent studies in Consciousness and Cognition.

In her case, the harmless childhood habit began to take over her life as she got older. She graduated from Harvard Law School. For years psychologists and family members told her the daydreaming wasn’t a problem. Finally when she was 26 years old, a doctor put her on a medication, fluvoxamine, often used for people with obsessive-compulsive disorder because she had a family history of OCD.

“A month or six weeks later [extreme daydreaming] all went away,” she said. “I couldn’t do it if I wanted to.” She was never diagnosed with OCD and since then she has stopped taking the medication, feeling that she no longer needed it. She probably still daydreams more than most people, usually when in a boring situation, like riding the bus, but it is a habit in her control, she said.

Like Dr. Somer, she believes maladaptive daydreaming should be in the Diagnostic and Statistical Manual of Mental Disorders (DSM) but only if daydreaming is an impediment. “I don’t think everyone who daydreams like this has a problem,” she said.

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