



In Search for New Methodological Bases in Psychoanalysis-based Literary Studies: Sleep Disorder and Moral Awareness

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Abstract

This research seeks to examine sleep disorder and moral well-being in one's locale. Along with the search for new methodological bases in literary and psychoanalytic studies, it is to explore the reasons behind sleep disorders and, with the help of Shakespeare's *Macbeth*, to identify suitable treatments. A personal interview comprising eight diagnostic and therapeutic items was designed and administered to a diverse personal sample with varying ages, education levels, marital statuses, years of experience, and life hardships. Both the clean-up and information consolidation theories proposing that sleep allows the brain to self-clean and remove waste and toxins produced during the day (Nedergaard, 2013) and individuals sleep to consolidate knowledge they acquire during the day (McGaugh, 2007) were based on. In *Macbeth*, Lady Macbeth experiences different forms of sleep disturbances; namely, sleepwalking and talking in sleep. A careful examination of this play revealed that natural order is connected to sleep (cf. Smith, 2016), which helps the brain get ready for the upcoming day and process information from the previous one. A significant finding of this research is that unnatural arrangement in different demographic traits could be a reason for sleep disorder. The anticipated treatment might involve efforts to eliminate sleep disorders, restructure lifestyles, utilize sleep medications, and cease engaging in criminal activities.

Keywords: Sleep disorder, good conscience, clean-up, information consolidation, *Macbeth*

1. Introduction

In 1943, Maslow introduced a hierarchy of needs in his A Theory of Human Motivation, emphasizing that individuals possess several essential needs that should be fulfilled in a specific order. His theory suggests that individuals are motivated to fulfill these needs. Sleep is regarded as one of the most essential psychological requirements for survival, as it affects a person's mental well-being. To demonstrate this, Suni & Dimitriu (2020) ^[17] contend that when a person feels down, we often say they "woke up on the wrong side of the bed." It appears that there is a significant amount of truth; sleep is closely associated with mental and emotional health and has been connected to psychological issues like bipolar disorder, anxiety, and depression. Similarly, any condition will result in sleep disorder (cf. Smith, 2016) ^[15]. Additionally, various theories explaining why we sleep, like Nedergaard's (2013) clean-up process and McGaugh's (2007) information consolidation (ICn), can be relied upon to support the understanding of sleep disorder and how it is treated. In a literary setting, Shakespeare explores the theme of sleep disorder in his *Macbeth* (1606), through the experiences of Macbeth and Lady Macbeth.

This study adopted a psycho-analytical approach supported by literature, including Shakespeare's *Macbeth*. In the play, Macbeth and various characters experience sleep issues not only due to their guilty feelings but also because of the disrupted social hierarchy of their era (cf. Smith, 2016) ^[15]. Macbeth's society, like any other societies, is not completely free from errors, as not all individuals possess a good conscience, and this leads to an unnatural outcome (Abu Samahdaneh, 2024) ^[1].

As long as there are unnatural elements present in society, the occurrence of sleep disorders is unavoidable. In this literature-based psycho-analysis, sleep disturbances and moral integrity were examined in an Arab context. Consequently, the subsequent two research inquiries were pursued:

1. To examine the factors linked to Macbeth that contribute to sleep disorders within an Arab society.
2. To discover suitable therapies for sleep disorders as inspired by Shakespeare's artistic work(s).

The research can be of significance both theoretically and practically. Two distinct theories regarding why we sleep were used to explore the causes and effects of any sleep disorder: Nedergaard's (2013) clean-up and McGaugh's (2007) ICn. From a practical standpoint, however, the research employed the ICn theory to explore the causes of sleep disorders, suggesting that individuals sleep to assimilate the information they acquire during the day. This theory or speculative idea stresses that sleep allows the brain to get ready for the upcoming day while it is processing information from the previous day (cf. Cherry, 2020) [4]. Conversely, the clean-up theory was applied to find appropriate treatments for different sleep-disorder cases. Typically, it indicates that—during regular activities, brain cells produce waste; the brain undergoes heightened fluid flow during sleep. This liquid eliminates these waste substances from the brain and serves as a system of waste disposal.

2. Related Literature

Founded by the neurobiologist James L. McGaugh from the University of California and rooted in cognitive research in 2007, the ICn theory proposes that individuals sleep to consolidate the knowledge they acquire during the day, preparing the brain for the upcoming day by processing information from the previous one. Consequently, insufficient sleep significantly impairs an individual's ability to retain and recall information. Accordingly, the brain during sleep gets engaged in particular processes that support memory consolidation. The other method bases itself on the clean-up theory proposed by Dr. Maiken Nedergaard and her team at the University of Rochester in 2013, for addressing sleep disorder. This theory stresses that sleep allows the brain to cleanse itself; while we sleep, the brain removes waste and toxins generated throughout the day. Additionally, several related prior studies effectively supported the theoretical framework of the current research.

To investigate the impact of pre-sleep arousal on sleep perception, Tang & Harvey (2004) [18] conducted two experiments. The initial one focused on contrasting the impact of anxious and neutral cognitive arousal on sleep perception, while the second was designed to compare the relative effects of anxious cognitive and physiological arousals. These experiments utilized instruments such as self-reported sleep and actigraphy-determined sleep—as well as how both might differ, involving 54 good healthy sleepers. Prior to their nap, the participants were categorized into three groups based on varying arousal manipulations. In the initial experiment, they were induced to feel anxious cognitive arousal prior to sleep, resulting in longer sleep-onset latency reports. When sleep defined by actigraphy was assessed, a larger difference between the self-reported and actigraphy-defined sleeps was observed. In the second experiment, the participants were induced to undergo anxious cognitive and

physiological arousals during their pre-sleep phase. As a result, they noted a longer time to fall asleep and a greater difference between self-reported sleep and the one defined by actigraphy.

The two experiments above demonstrated that both cognitive and physiological responses affect the altered perception of sleep. Consequently, Tang & Harvey (2004) [18] recommend further studies to clarify the connections among cognitive, physiological, and cortical arousals and the way their respective influences correspond to the altered perception of sleep in chronic insomnia. Similarly, Mahowald & Schenck (2009) [12] conducted a review of violence associated with sleep that sought to “reporting the nature of the underlying sleep-suspected conditions encountered and helping in establishing the spectrum of sleep-related behaviors resulting in forensic consequences” (p. 1059). In their analysis, they relied on the expertise of a singular sleep medicine facility regarding cases of sleep forensic studies. Over the course of eleven years, this experience demonstrated that “the forensic implications of a sleep disorder or condition are much broader than first envisioned” (p. 1063). In addition, a significant portion of cases where the legal argument centered on a sleep issue or illness was unsupported, leading to the need for an investigation of new conditions or better characterization of perceived disorders with very enigmatic behaviors.

In the literary setting of Shakespeare's Macbeth, Smith (2016) [15] demonstrated that it is not just Macbeth who experiences sleeplessness; other characters also do. A perspective on sleep that alters the inclination of literary criticism regarding this play and redefines the protagonist as a culpable figure is offered. It aims to use one's cultural insights on sleeplessness in relation to Macbeth, but the play is misinterpreted. Macbeth's inability to sleep is, in fact, a situation that transcends his own guilt; it is not a result of his guilty feelings. His anxiety about losing the crown may be the motivation—thus Macbeth begins plotting to eliminate those he fears; the natural order relates to sleep. The act of murdering Duncan and replacing him with Macbeth disrupts the natural order, resulting in the latter's insomnia. Throughout the play, insomnia serves as one of several symbols illustrating the disruption of the political and natural order caused by Macbeth's oppressive reign. Ultimately, the restoration of sleep highlights Malcolm's rightful status as king and the importance of a ruler to promote the safety and well-being of his people. In summary, sleeplessness is not connected to or caused by Macbeth's guilt; it is an issue of the natural order.

For studying lucid dreams, Appel *et al.* (2017) [2] explored consciousness within a sleep lab, employing an interdisciplinary method. Considering the latest findings on lucid dreaming, they provided an overview of a study carried out in a sleep laboratory to illustrate how methods from areas like pharmacology, electrical engineering, and psychology could be applied to induce lucid dreams. In this study, different approaches from multiple academic fields and scientific disciplines were presented in a synthetic manner. However, no definitive technique could be established to reliably and safely induce lucid dreams for every individual on any given night. Finally, further studies were suggested as necessary to identify the most effective method(s) for utilizing lucid dreams to achieve the various objectives described. The study on 'optimal techniques' for lucid dreamers to influence their dreams more effectively—along

with the transfer of these methods between different disciplines—could be also incorporated. Furthermore, Cellini’s (2017) [3] research on memory consolidation in sleep disorders sought to explore the impact of sleep disorders on memory consolidation and to summarize the existing knowledge. Furthermore, this data was utilized as a framework to identify ways to address memory deficits in order to alleviate sleep-related symptoms. To reach this goal, the researcher relied on reviewing multiple studies regarding Cipolli and colleagues’ work, leading to two primary findings. Initially, the issues with offline memory consolidation seemed to be linked to sleep disorders, indicated by increased post-learning awakenings and disrupted sleep patterns. Additionally, the growth and upkeep of these individuals’ cognitive skills could be hindered by these disabilities, the matter which might manifest during childhood, thereby deteriorating one’s health and quality of life and increasing his/her accident risk. A recent study by da Mota Gomes & Nardi in 2021 attempted to explore and record the case of a woman—referred to as Lady Macbeth—who experiences sleepwalking episodes along with various dissociative symptoms. This study involved a detailed review of Lady Macbeth’s situation and the utilization of her initial sleep medication. Also, it examined the unique instance of Lady Macbeth and her sleepwalking occurrences with dissociative symptoms through a case study method along with sleep medicine techniques. A connection was found to occur between Lady Macbeth’s sleepwalking and signs of dissociation, which highlights a complex relationship between sleep and

dissociation. Her sleepwalking episodes were found to happen during specific sleep stages and be preceded by awakenings from deep sleep. The study was completed by encapsulating the findings and emphasizing the importance of considering sleep disorders when assessing any dissociative symptoms—in a relatively new methodical manner (cf. Hawamdeh, *et al.*, 2025) [8].

3. Research Method

All the individuals residing within the national borders of Jordan could potentially represent this study’s theoretical population. Due to geographic proximity and convenient access to personal samples, the persons of interest were those actively participating in the Makani Project, which is a comprehensive initiative that connects efforts in education, child protection, youth engagement, and participation. It receives funding from UNICEF and is operated by the Islamic Charity Center Society (ICCS) and connected to the Ministry of Social Development in Jordan, featuring 33 centers. It also offers a range of services to individuals aged 1-18 from all nationalities and their families. These services encompass educational programs, child safeguarding, and initiatives for early childhood development. Those holding bachelor’s degrees are eligible to work on the Project. The roles of assistants are occupied by Syrians who have passed their high school examinations, Tawjihi. For the study sample, Souf Center was a branch of the Project situated in the city of Jerash, north of Jordan, with a team of seventeen (17) staff members. This Center was selected because of its close location and convenient access to the samples.

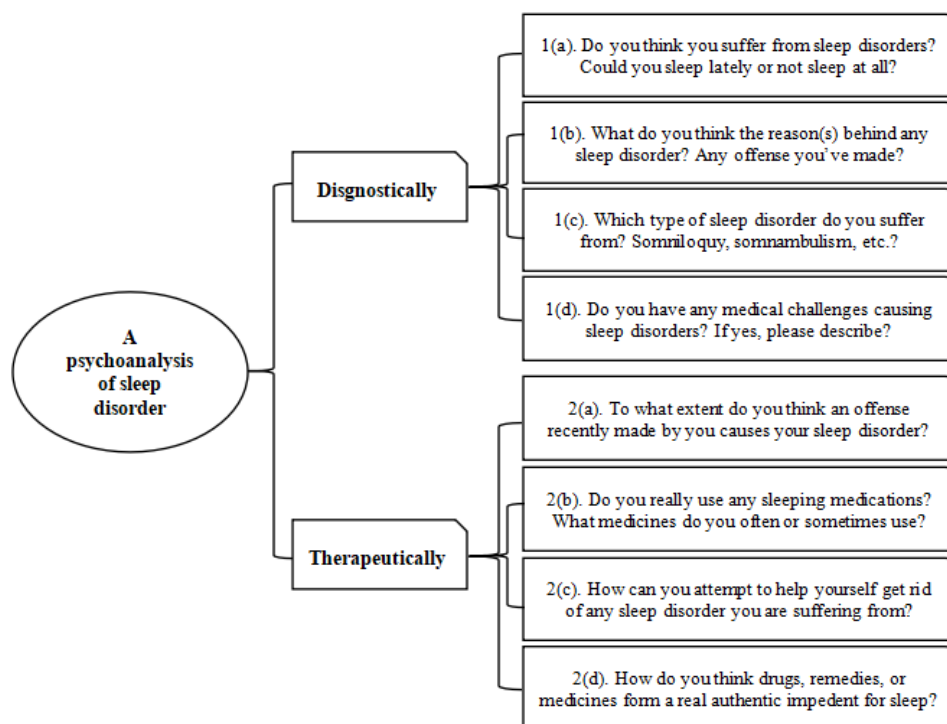


Fig 1: Research instrument of the present study

Conducted with the subject persons in their various roles and capacities as part of the Makani Project in the specified area or branch from May 3-14, 2023, a personal interview was designed to serve as the tool of this study. There were essentially five participants with varying ages, educational backgrounds, work experience, financial situations, and life challenges (see Figure 1 above). They were both young and

adult, both men and women, and holding such job titles as assistant managers, support staff, volunteers, and facilitators. The tool consisted of an interview featuring eight questions: i) four diagnostic questions for exploring the causes of sleep disorders in connection with a person’s moral integrity within a local community, and ii) four therapeutic ones for finding suitable treatment(s) for sleep disorder as guided by a

pertinent literary piece. The tool was created using Shakespeare's (1606) *Macbeth* along with two psychological theories, i.e., Nedergaard's (2013) clean-up and McGaugh's (2007) ICn.

In terms of validity, the extent to which the tool accurately measures what it aimed to measure or how the results could be true was assessed (cf. Joppe, 2000) ^[10]. To evaluate the credibility of the same, a set of inquiries was directed at several experts, and their replies were subsequently verified in relation to the primary aim(s) of the research (Stenbacka, 2001) ^[16]. In the analysis process, the data sets were examined both qualitatively and quantitatively. The interviews provided the data, and statistical methods were employed to identify the significant trends and patterns. The qualitative analysis included the assessment and interpretation of non-numerical data (Field, 2013; Lindgren, Lundman & Graneheim, 2020) ^[7, 11], driven by the two RQs and systematically backed by relevant statistical accounts to uncover patterns, correlations, and trends within the data (Creswell, 2014) ^[5]. In summary, the data sets were examined, refined, altered, and analyzed to uncover useful insights, reach conclusions, and help make appropriate decisions.

4. Results and Discussion

Considering the diagnostic and therapeutic reactions, along with the clean-up and ICn approaches and Shakespeare's *Macbeth* as a literary aid, the data sets of this research were examined and deliberated in two primary sections: the cause(s) of sleep disorder in a specific area and any suitable literature-supported therapies. Based on the idea that "man isa doctor of himself," the participants were requested to explain how they might eliminate their sleep disorders to

propose suitable treatments. In *Macbeth*, the Doctor informs Macbeth that his wife needs to care for herself: "Therein the patient/Must minister to himself" (5.3.54-55). On the same subject, the treatments for sleep disorder rely on the underlying causes. Specifically, if the cause is physical, the remedy will be physical; however, a psychological remedy should be used if the cause is psychological. For example, a person's requirement to exert effort throughout the day was a physical cause of his/her sleep issue, allowing to address it physically through sleep medication and by reducing work hours.

4.1. Reasons Behind Sleep Disorder in One's Locale

Upon examining the participants' explanations of sleep disorder, they could be categorized into physical and psychological aspects. The first participant cited a physical reason (specifically, putting in effort). Three of the participants had psychological motivations, such as contemplating new choices or their children. The final person's motivations were either physical or mental (specifically, a broken shoulder and concerns over Tawjihi exams) (see Figure 2). Additionally, Tang & Harvey (2004) ^[18] carried out two experiments in their research demonstrating that both cognitive and psychological arousals influence distorted sleep perception. From a literary perspective, the causes of sleep disorder are analyzed in a clinical context in Scene 5.1 of *Macbeth*, where Lady Macbeth experiences different forms of sleep disturbances, including sleepwalking and talking in sleep.

"Since his majesty went into the field, I have seen her Rise from her bed, throw her nightgown upon her, unlock Her closet, take forth paper, fold it, write upon 't, Read it, afterwards seal it, and again return to bed; Yet all this while in a most fast sleep." (5.1.3-7)

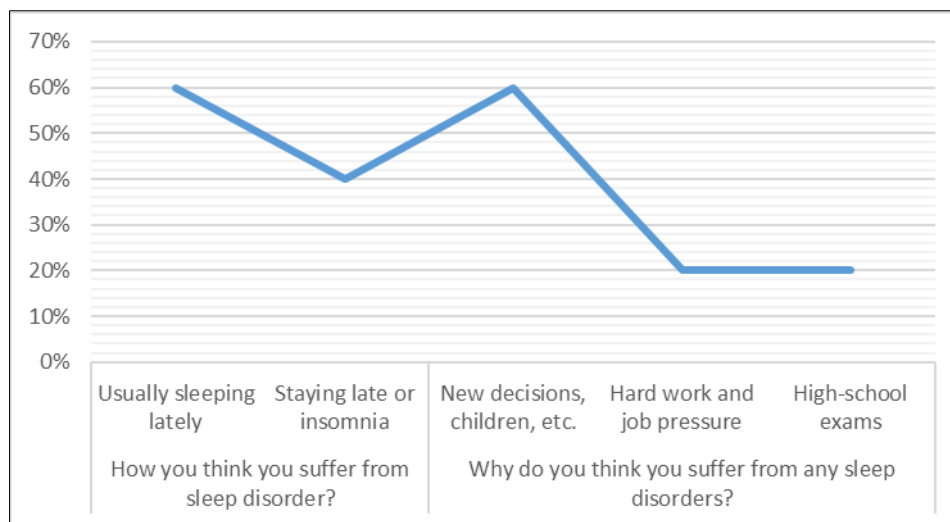


Fig 2: Reasons behind sleep disorder

The causes of Lady Macbeth's sleep disorder are psychological since she does not experience any medical issues. Furthermore, the Doctor attempting to help her by documenting, monitoring her situation, being present, and noting down, exclaims: "What a sigh is there! The heart is heavily burdened" (5.1.46). This implies that the cause of her sleep disorder is her heart, laden with grief. Consequently, this rationale is considered to be a psychological cause rather

than a physical one. According to Smith (2016) ^[15], an unnatural order is seen as another cause of sleep disorder. To demonstrate that when participants reflected on their recent choices, their sons, and their Tawjihi Exams, it indicates that there existed an unnatural factor considered a cause of their sleep issues, particularly since Smith (2016) ^[15] argues that natural patterns relate to sleep (see Figure 3). Similarly, unnatural order is regarded as Lady Macbeth's sleep

condition. A drastic unnatural disruption in her life stems from the murder of King Duncan. This irregular arrangement leads to her sleep disorder.

“Unnatural deeds.
Do breed unnatural troubles.” (5.1.63-64)

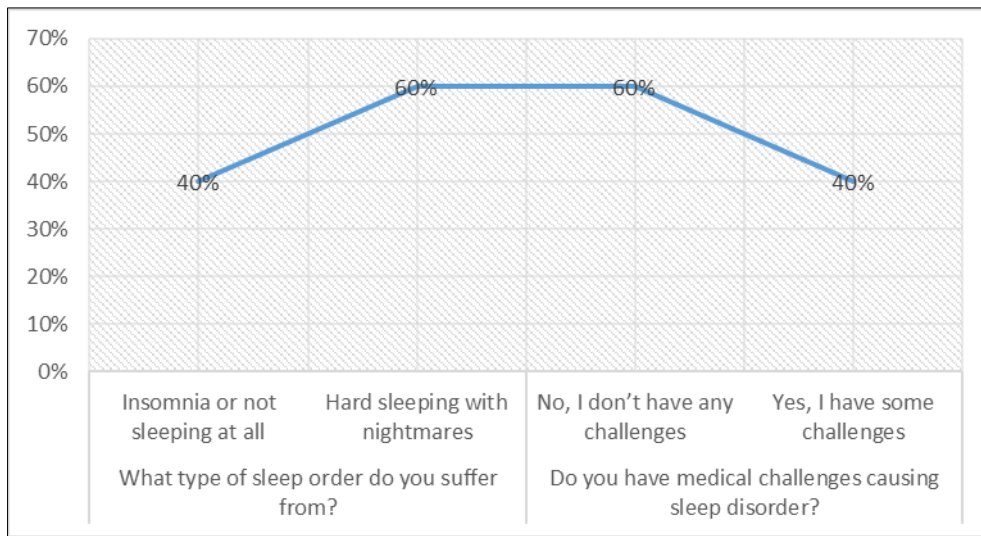


Fig 3: Reasons behind sleep disorder

Lady Macbeth experiences sleep talking as a form of sleep disorder. Drawing from the ICn theory regarding the reasons of sleep, this experience was examined and it was indicated that while one is awake, he/she takes in a significant amount of information. Furthermore, the theory stresses that sleep is vital for consolidating and processing the information a person gathers while awake throughout the day. On the other hand, when one experiences sleep disorder, he/she lacks the consolidation or connections between information that facilitate the formation of coherent memories. Additionally, in the realm of sleep research, Cellini (2017) [3] argued that the issues of offline memory consolidation seem to be associated with sleep disorder. Thus, Lady Macbeth obtains a vast amount of information, but sleep cannot help her process and consolidate this information while she suffers from sleep disturbances. Consequently, she engages in sleep talking as characterized by nonsensical speech, confused memories, and fragmented information, leading to her dialogue in this scene being composed in prose rather than verse.

“Out, damned spot! Out, I say! —One, two. Why, then,
'Tis time to do 't. Hell is murky! —Fie, my lord, fie!
A soldier, and afeard? What need we fear who knows it?
When none can call our power to account?— Yet who would

Have thought the old man to have had so much blood in him.” (5.1.31-36)

In brief, Lady Macbeth’s cause of talking in sleep is her deficiency of ICn in recollection. When Ihalainen (1989) [9] contended that an individual committing a crime(s) against life frequently suffers from sleep disorders; he also introduced another factor of sleep disorder, i.e., the act of committing crimes against life. That is precisely what occurs with Lady Macbeth, who takes part in the act of murdering Duncan. Subsequently, she experiences guilt and endures sleep disturbances. Ultimately, based on participants’ responses from the personal interview, the ICn theory regarding the necessity of sleep, the textual analysis of the literary work, Macbeth, and academic viewpoints from related research, several factors contributing to sleep disorders could be identified. These reasons might be physical or emotional, depending on the participants’ responses (see Figure 4). Based on the ICn theory, insufficient consolidation of information in memory leads to sleep disturbances. In this vein, Smith (2016) [15] states that unnatural disorder contributes to the same. Ihalainen (1989) [9] also notes that engaging in acts of violence and experiencing guilt leads to sleep disturbances.

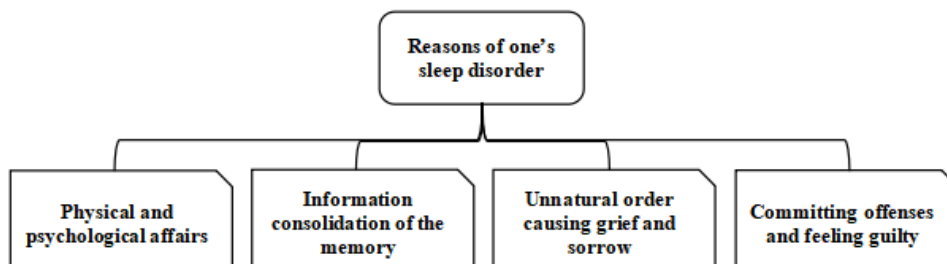


Fig 4: Illustration of the reasons of sleep disorder

4.2. Appropriate Literature-Assisted Treatments

Lady Macbeth’s sleep disorder stems from psychological issues, so the treatment must be psychological. In this vein, The Doctor indicates that: “More needs she the divine than the physician. God, God forgive us all. Take care of her” (5.1.66-67). The Doctor thinks that Lady Macbeth’s sleep disturbance is caused by an unnatural state and the grief in her heart. Since Lady Macbeth’s sleep disorder is psychological, the therapy should be by consulting a clergy member instead of a doctor. In Scene 5.3, Macbeth requests The Doctor to heal his Lady by providing her with a potion

that induces forgetfulness and alleviates her troubled heart, as her heart and mind are filled with grief. “And with a gentle, unaware remedy. Purify the filled heart of that dangerous matter, which burdens the soul” (5.3.51-53). Theoretically, it appears that Shakespeare relies on the clean-up theory of sleep to address Lady Macbeth’s problem. This theory proposes that sleep enables the brain to eliminate toxins and waste while resting (see Figure 5). Macbeth informs The Doctor that what Lady Macbeth requires is to cleanse her heart and memory of her grief and the impact of the unnatural order.

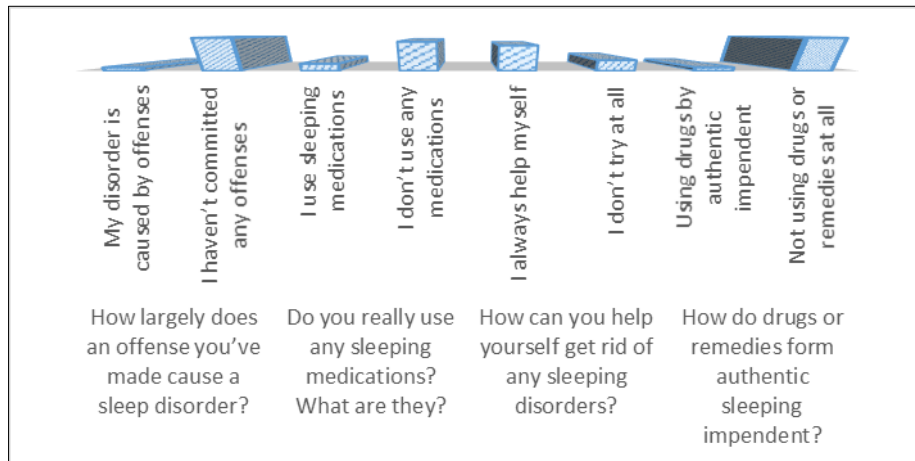


Fig 5: Treatments of sleep disorder

The distinction here is that Lady Macbeth’s heart and memory require cleansing through the intervention of a clergyman or psychologist, rather than by a physician’s potion. In fact, Macbeth fails to understand that the psychological cause of his sleep issues needs psychological treatment. Ultimately, The Doctor finds that Lady Macbeth’s causes of her sleep disorder are rooted in psychology, and her treatment should likewise be psychological. Regrettably, there is no elixir that can purify her heart and memory other

than getting a good sleep, during which the brain eliminates the waste of an unnatural kind (see Figure 6). No definitive technique has been discovered that consistently and safely induces lucid dreams for every individual and on any desired night (cf. Appel *et al.*, 2017) [2]. In conclusion, drawing on the clean-up theory of sleep, the viewpoints of scholars in their relevant research, the literary work *Macbeth*, and the responses of interview participants, various treatments for sleep disorders could be identified.

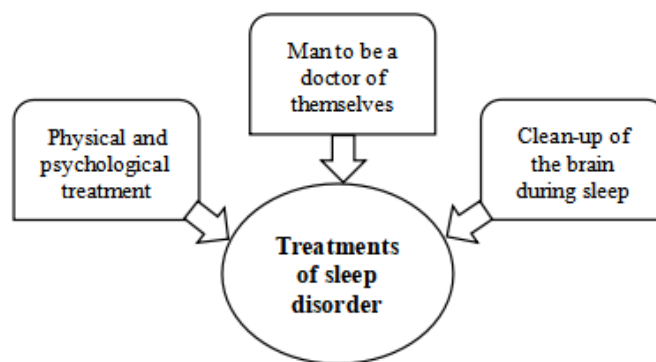


Fig 6: Illustration of sleep-disorder treatments

5. Conclusions

Policymakers could gain from the study’s findings by incorporating literary works used in schools and universities to address current issues like sleep disorder. Additionally, this research is viewed as a partnership among scientists to share techniques. It is based on the personal-interview method, designed to investigate ‘literature’ for identifying causes and discovering treatments for sleep disorders. In fact, the same has never occurred prior. The research holds practical importance in multiple aspects. To begin with, the

understanding of such a literary piece as Shakespeare’s *Macbeth* will be enhanced; particularly in this research, multiple excerpts from this literary piece were cited. Secondly, the readers enhance their self-awareness to investigate the causes of sleep disorders and discover treatments for their sleep issues. Also, this research confirms the concept of using literature to investigate the causes and discover the remedies for sleep disorder. This study accomplishes this by focusing on a clinical moment in Shakespeare’s *Macbeth* where The Doctor meticulously

attempts to report, observe, and be present to diagnose and address Lady Macbeth's sleep disorder.

Based on the implications above, there are also several suggestions. Decision-makers can advocate for the integration of literary pieces into the curriculum of schools and universities. These literary pieces, particularly *Macbeth*, could enhance the awareness of sleep disorder among readers and students, making it essential to include in school and university curricula. Furthermore, to prevent experiencing sleep issues, the research suggests using a mobile App (namely, the biological clock) to establish users' bedtime and waking hours. It must be based on personal interviews that have not been conducted previously, leading us to suggest the establishment of a research network, workshops, conferences, or mobile applications for sharing research methodologies and other concepts related to the studies. This study recommends conducting additional research on how technology impacts sleep disorders and exploring methods for preventing them.

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