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Aura Vision as a Hallucinatory Experience: Its Relation to Fantasy Proneness, Absorption, and Other Anomalous Perceptual Experiences

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The phenomenon of aura vision has a long tradition in the religious, occult, and psychical research literatures. Perceptual illusions, after-images, and contrast effects have been offered as scientific explanations for aura reports. Among a sample of 586 undergraduates, it was predicted that those who reported an aura experience (experiencers) would score higher than those who did not (nonexperiencers) on the Betts Vividness of Imagery Scale (visual and tactile), Barrett's Hallucinations Questionnaire (visual and tactile), the Creative Experiences Questionnaire (fantasy proneness), the Tellegen Absorption Scale, the Dissociative Experiences Scale, and the cognitive-perceptual subscale of the Schizotypal Personality Questionnaire. It was concluded that persons who "see" auras are likely to have a rich imaginal life.

Keywords:

According to Thalbourne (1982), the aura is a hypothetical field consisting of subtle, multicolored, luminous radiations said to surround living bodies as a halo or cocoon. Although aura vision has a long tradition in the religious, occult, and psychical research literatures, the proposition that humans can see these "fields" with the naked eye (perhaps as colors) is controversial (Alvarado & Zingrone, 1987; Baltz & Lindgren, 1997; Montandon, 1927; Perera Molina, 1981; Regush, 1977; Spence, 1920). Observations of the aura have been

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recorded in a variety of contexts, ranging from the old hypnosis literature, where it was reported that hypnotized participants sometimes claimed to see a luminous "fluid around the eyes, fingers, noses, ears of the magnetizer and of the persons with whom they were in rapport" (de Rochas, 1904, p.14) (see also Butler, 1978; Kilner, 1965) to reports of various luminous effects seen around mystics and saints (Alvarado & Zingrone, 1987; Garrett, 1939; Karagulla, 1967; Zolla, 1994), to descriptions of auras surrounding seemingly "psychically gifted" individuals or self-proclaimed psychics (e.g., Garrett, 1939; Karagulla, 1967). Auras are thought to be related to the etheric subtle body and to serve as a visual measure of the state of health of the physical body (Alfred, 2006). According to some Western traditions, each color of the aura has a precise meaning that indicates a specific emotional state (Leadbeater, 1902; Stanford, 1977; Swami Panchadasi, 1916). Some "new age" thinkers identify the aura as an electromagnetic field that surrounds all living beings and many nonliving objects (Lindgren, 1995a, 1995b; Moss, 1979). Butler (1978) associates auras with paranormal cognition (clairvoyance) and emotional outbursts, and he divides them into two main types: etheric and spiritual. Bruce (2000), on the other hand, divides them into three types: etheric, main, and spiritual.

The occult or esoteric literature postulates the existence of subtle bodies and energies that are not acknowledged by mainstream Western science. They are supposedly perceived by means of extrasensory perception (ESP; e.g., Leadbeater, 1902; Schwartz, 1980; for reviews see Bigu, 1976; Tart, 1972). Many anecdotal observations suggest that "aura reading" may be used for unconventional medical diagnosis, perhaps by serving as a vehicle for the expression of ESP-acquired information (e.g., Karagulla, 1967) or unconscious information acquired through the normal senses. Aura vision has also been associated with the development of psychic sensitivity after near-death experiences (Greyson, 1983) and with other extraordinary claims, such as seeing apparitions and having an out-of-body experience (OBE) (Kohr, 1980; Palmer, 1979). It seems that the aura is seen in the same way as apparitions are seen; that is, the image is created by the mind and brain of the observer in response to extrasensory signals exchanged between the subject and the observer.

Some who profess to have psychic abilities have reported aura vision as part of their overall pattern of psychic experiences (e.g., Garrett, 1939; Swann, 1975). There are also reported claims that an anomalous "glow" surrounding a human body has been perceived collectively (Alvarado & Zingrone, 1987). In the history of psychical research, aura vision reports have been related to investigations of hypothetical radiations such as, for example, "mesmeric fluid" and the "odic

force" (Ungaro, 1992). These have been proposed in the literature as possible causes of both ESP and PK phenomena (Montandon, 1927; Sudre, 1975).

Perceptual illusions, after-images, contrast effects, and entopic phenomena (the perception of spots or "floaters" in the field of vision for which the experiencer has no physical explanation) have been offered as more conventional explanations of the aura (e.g., Dale, Anderson, & Wyman, 1978; Fraser-Harris, 1932; Neher, 1980; Owen & Morgan, 1974; Rawcliffe, 1952). Some surveys of psychic phenomena report the incidence of aura reports in specific populations. In studies in which random sampling was used, the incidence of aura vision reports range from 0% to 7% (Alvarado, 1994; Haraldsson, Gudmundsdottir, Ragnarsson & Jonsson, 1977; Palmer, 1979). The incidence of the phenomenon reported when populations were nonrandomly sampled is somewhat higher, ranging from 9% to 48% (Alvarado, 1994).

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Table 1
Incidence of Aura Vision in Survey Studies

Study	Participants	*N*	% Aura vision
Chadha et al., n/d	Indian students	270	4
Palmer (1979)	US College students	268	6
Pekala et al. (1992)	US College students	575	7
Gómez Montanelli & Parra (2000)	Argentine students	432	12

Psychological Correlates of Paranormal Experiences and Aura Vision

Hallucinations. An hallucination is defined in the DSM-IV as a "sensory perception that has the compelling sense of reality of a true perception but that occurs without external stimulation of the relevant sensory organ" (American Psychiatric Association, 1994, p. 767). Hallucinations are observed not only in various clinical populations; they also have been reported in numerous studies of normal, healthy individuals who do not suffer, or have not suffered in the past, from neurological or psychiatric disorders. Several studies reveal that a substantial number of nonclinical participants (i.e., people who have not been clinically referred or have never received a psychiatric or neurological diagnosis) report having hallucinatory experiences (Al-Issa, 1995; Aleman & de Haan, 1998; Aleman & Larøi, 2008).

Slade and Bental (1988) define a hallucination as "any percept-like experience which (a) occurs in the absence of an appropriate stimulus, (b) has the force or impact of the corresponding actual (real) perception, and (c) is not amenable to direct and voluntary control by the experimenter" (p. 23). Slade (1976) and Slade and Bentall (1988) have invoked arousal as one of a number of key factors in the aetiology of auditory hallucinations. They surveyed data

suggesting that a state of high internal arousal, when it interacts with the individual's current level of hallucinatory disposition, can be a crucial factor in triggering such hallucinatory episodes. In particular, they suggest that "minimal stress. . .may trigger hallucinations in highly predisposed individuals while severe stress would be necessary to trigger an experience in a predisposed person" (Slade & Bentall, 1988, p. 12).

One particular version of Slade and Bentall's (1988) psychological model is called the continuum hypothesis, which postulates that hallucinations anchor a continuum of normal conscious experience that includes vivid daydreams and vivid but otherwise normal thoughts. This hypothesis also predicts that responses to statements concerning vivid thoughts and daydreams should be related to responses to items describing hallucinations (Bentall, 2000; Johns, Hemsley, & Kuipers, 2002). According to this line of reasoning, the main difference between pathological and normal individuals is quantitative rather than qualitative (Larøi, Marcezewski, & van der Linden, 2004).

Fantasy Proneness. People who report spontaneous auras or energies might have greater imaginative or fantasy activity or be more fantasy-prone). This hypothesis is consistent with Wilson and Barber's (1982) views of the characteristics of the fantasy-prone personality. During these episodes, individuals become totally absorbed in their experience, with "a full commitment of available perceptual, motoric, imaginative, and ideational resources to a unified representation of the attentional object" (Wilson & Barber, 1978, p. 236). There is also research suggesting that aura vision might be related to cognitive processes involving visual and tactile hallucinations and fantasy proneness (Alvarado & Zingrone, 1987; Palmer, 1979; Wilson & Barber, 1978).

Fantasy proneness appears to be greater among experiencers of so-called "paranormal phenomena" than among people who do not report those experiences (Myers, Austrin, Grisso, & Nickeson, 1983; Wilson & Barber, 1982). Owen's (1972) imagery testing supports the hypothesis that aura viewers should show evidence of being more fantasy-prone than persons who do not report seeing auras. Wilson and Barber (1982) claimed that high fantasy-prone participants report a variety of both imagery-related and anomalous/paranormal experiences. Alvarado (1994) found that aura viewers claimed significantly greater vividness of visual imagery and more imaginative and fantasy-related experiences than did a control group. In addition, the aura group, compared to a control group, reported significantly more apparition experiences, ESP in dreams, mystical experiences, and out-of-body experiences.

Absorption. People who have paranormal experiences have been found to have a substantially greater capacity for absorbed mentation than those who do

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not (Glicksohn, 1990; Irwin, 1985; Myers et al., 1983). Such experiencers are also more likely to report a parasomatic form of tactile hallucinations and sensations of so-called "subtle energies." (For example, some people who have out-of-body experiences have seen objects in the physical environment that were not actually there [see Irwin, 1985].) The high absorption capacity of people who have paranormal experiences is also compatible with observations that they tend to practice meditation (Palmer, 1979), have lucid dreams (Irwin, 1988), and score high on tests for hypnotic susceptibility (Palmer & Lieberman, 1976). Normal individuals with an internalized, curious, intellectual, and stable personality might report phenomena such as OBEs, lucid dreams, precognitive dreams, and waking ESP experiences.

As absorption has been found to be conducive to hypnotic susceptibility (Tellegen, 1981), there may be an association between hypnotic susceptibility and openness to purportedly paranormal experiences, presumably because individuals concerned with and attentive to their own mental processes may be more open to seeing auras.

Schizotypy. Schizotypy is a personality dimension normally distributed in the population. Although high scorers on schizotypy have a putatively heightened susceptibility to psychotic breakdown, this proclivity may be associated with a variety of other phenomena besides psychosis. In particular, there are strong arguments for a link between schizotypy and creativity (Claridge, 1997). Although there have been no studies relating schizotypy specifically to aura vision, those who have paranormal experiences overall have been found to score significantly higher on measures of schizotypy, perceptual aberration, magical ideation, and synesthesia than those who do not have paranormal experiences (Glicksohn, 1990; Irwin, 1985)

Rationale for the Study

I argue that aura reports are part of human experience and, as such, deserve and require study in and of themselves, both with and without efforts to relate them to possible paranormal factors. This perspective is consistent with Palmer's (1979) and Alvarado's (1994) discussion on the importance of distinguishing conventional models of explanation from paranormal models in parapsychology. To quote Irwin (2004, p. 10), "human experience includes a wide range of 'different dimensions' and there are many more aspects of psi experiences to be studied other than ostensible paranormality." Little is known about the psychological factors and processes that underlie aura vision, but there are indications in the psychological, parapsychological, and psychiatric literature that particular cognitive variables are important. The study of individual differ-

cnces in those who report aura vision is important if for no other reason than the fact that it relates a phenomenon traditionally shrouded in the mystery of occult traditions to more familiar forms of psychological functioning.

The present study directly compares aura experiencers with nonexperiencers (controls) on six psychological questionnaires measuring the psychological dimensions discussed above. These questionnaires have not been used in previous research on aura vision.

Hypotheses

The general hypothesis tested in this study is that there is a positive relationship between reports of aura vision and other relatively extreme forms of imaginal experience. In addition to the research reviewed above, this hypothesis is based, in part, on the writings of theorists who have argued that an individual may create the hallucinatory image of an aura from information received through the ordinary senses, perhaps as some measurable form of physical energy, or through ESP (Ellison, 1962; Tart, 1972).

Specifically, it was hypothesized that persons who claim that they have experienced aura vision (experiencers) have a higher capacity for (a) visual/tactile imagery, (b) visual/tactile hallucinations, (c) fantasy proneness, (d) absorption, and (e) dissociation, and are characterized by (f) greater cognitive-perceptual schizotypy than persons who claim that they have never experienced aura vision (nonexperiencers).

Method

Participants

Participants for this study were 678 undergraduate students recruited from the psychology department at the Universidad Abierta Interamericana.

Materials

Six questionnaires used to measure the cognitive-perceptual experiences and traits described in the hypotheses. The reliability values (Cronbach's alpha) were all derived from the data in the present study.

1. *Betts Vividness of Imagery Scale.* This scale consists of 35 items (Sheehan, 1967; Richardson, 1990) and measures the vividness of mental images in seven different sensory modalities — for example, "the sun as it is sinking below the horizon" (visual) and "reaching up to a high shelf" (tactile). Participants rate each image on a 1–7 scale. Cronbach's alpha = .77.

2. *Barrett's Hallucinations Questionnaire.* This questionnaire consists of 22 items and measures the propensity toward hallucinating in six sensory modali-

ties, of which two (visual and tactile) were used in this research (Barrett, 1993; Barrett & Etheridge, 1992, 1994). Participants rate their responses on a 0-5 scale. Cronbach's alpha = .93.

3. *Creative Experiences Questionnaire (CES).* The CES consists of 25 true/false items and measures fantasy proneness (Merckelbach, Horselenberg & Muris, 2001). Cronbach's alpha = .77.

4. *Tellegen Absorption Scale (TAS).* The TAS consists of 34 true/false items and measures how frequently people become engaged in absorbing activities (Tellegen & Atkinson, 1974).

5. *Dissociative Experiences Scale (DES).* The DES consists of 28 items and measures a variety of dissociative tendencies (Bernstein & Putnam, 1986). Participants rate their responses on a 0–100 scale. Cronbach's alpha = .85.

6. *Schizotypal Personality Questionnaire (SPQ).* The SPQ consists of 74 yes/no items and measures three components of schizotypy: cognitive-perceptual, disorganized, and interpersonal (Raine, 1991, 1992; Raine & Baker, 1992; Raine & Benishay, 1995). Only the cognitive-perceptual factor was used for this experiment because it measures perceptual abnormalities. Sample items are: "Have you ever seen things invisible to other people?" (Cronbach's alpha = .91), and "Are your thoughts sometimes so strong that you can almost hear them?" (Cronbach´s alpha = .89).

I also developed an 18-item self-report inventory to collect information on spontaneous paranormal/anomalous experiences. It is based on the English version of the Anomalous/Paranormal Experiences Inventory (Pekala, Kumar, & Cummings, 1992) and Palmer's (1979) survey of students and townspeople in a mid-sized university town in the southern United States. To assess aura vision experiences, participants were asked how frequently they "have had the experience of seeing energy fields or lights around the body of a person" ("never," "once," "sometimes," or "frequently"). If they reported having such an experience at least once, they were asked to rate the emotional impact of the experience(s) on a 7-point scale, with 1 being the most negative and 7 being the most positive. Students who claimed to have had at least one aura vision experience were classified as "experiencers," and students who claimed never to have had such an experience were classified as "nonexperiencers" (see Table 1).

Procedure

Each participant was given an envelope during one class period, as previously agreed upon with the teachers. Each envelope contained the six cognitive-perceptual questionnaires described above, which were collectively given the pseudo-title "Questionnaire of Psychological Experiences, Form A [B or

C]." To reduce biased responding, the questionnaires in Forms A, B, and C were counterbalanced; this ordering is the only thing that distinguished the forms from one another. Approximately the same number of students received each form. The students received vague information about the aims of the study, and they were asked not to write their names on the questionnaire to preserve anonymity. They were told that their participation was voluntary, and they were not paid. They filled out the questionnaires in the class.

Results

Usable questionnaires were returned by 588 of the 678 students (85.3%). There were 83 experiencers (32% male, mean age = 24.72 years) and 503 nonexperiencers (22% male, mean age 25.34 years). For the former, the frequency, emotional impact, and explanation of the aura experience are summarized in Table 2.

Tests of Hypotheses

The Mann-Whitney *U* test was used to test the hypotheses, as the scores were not normally distributed. The resulting *U* statistics were transformed into *z*-scores for the purpose of assigning probability values. All comparisons are one-tailed. (See Table 3 for statistical details.)

Hypothesis 1 — that experiencers would score higher on visual and tactile imagery than nonexperiencers on the Betts Vividness of Imagery Scale — was not supported.

Hypothesis 2 — that experiencers would score higher on visual and tactile hallucinations than nonexperiencers on Barrett's Hallucinations Questionnaire — was significantly supported.

Hypothesis 3 — that experiencers would score higher on fantasy proneness than nonexperiencers on the CEQ — was significantly supported.

Hypothesis 4 — that experiencers would score higher on absorption than nonexperiencers on the TAS — was significantly supported.

Hypothesis 5 — that experiencers would score higher on dissociation than nonexperiencers on the DES — was significantly supported.

Hypothesis 6 — that experiencers would score higher on cognitive-perceptual schizotypy than nonexperiencers on the SPQ — was significantly supported.

Logistic Regression Analysis

Which of the eight variables best discriminate experiencers from nonexperiencers of auras? A binary logistic regression analysis was performed to

Table 2
Frequency (Percentages) and Mean Emotional Impact (Standard Deviations) of Aura Vision Experiencers

		Males ($N = 26$)	Females ($N = 57$)	Total ($N = 83$)
Frequency	One time	5 (19.2)	18 (32.1)	23(27.7)
	Sometimes	17 (65.4)	30 (53.6)	48(57.8)
	Frequently	4 (15.4)	9 (14.3)	12 (14.5)
Emotional Impact	Mean (1–7)	2.27 (1.31)	2.52 (1.54)	2.44 (1.47)
Explanation	Rational/Explicable	11 (42.3)	17 (31.5)	28 (35)
	I do not know	9 (34.6)	23 (42.6)	32 (40)
	Paranormal/ Unexplained	6 (23.1)	17 (25.9)	23 (25)

Table 3
Comparisons Between Aura Experiencers and Nonexperiencers on Psychological Variables

Variables	Groups	*N*	*M*	*SD*	*U*	*z*
Visual Imagery	Nonexperiencers	504	12.38	6.64	13699.50	.78
	Experiencers	83	11.53	6.05		
Tactile Imagery	Nonexperiencers	504	13.56	7.16	14173.00	.35
	Experiencers	83	13.34	7.07		
Visual Hallucination	Nonexperiencers	504	1.49	2.64	11843.50	2.75*
	Experiencers	83	3.88	4.35		
Tactile Hallucination	Nonexperiencers	504	1.55	2.15	10722.50	3.79***
	Experiencers	83	3.57	3.99		
Fantasy Proneness	Nonexperiencers	504	31.89	15.01	9923.00	4.24***
	Experiencers	83	41.20	17.85		
Absorption	Nonexperiencers	504	24.00	13.21	11640.00	2.67*
	Experiencers	83	28.58	14.43		
Dissociative Tendencies	Nonexperiencers	504	23.21	11.68	11531.00	2.77**
	Experiencers	83	26.68	12.3		
Schizotypy	Nonexperiencers	504	7.58	4.91	9641.50	4.50***
	Experiencers	83	10.34	4.84		

*$p < .05$; **$p < .01$; ***$p < .001$. All p-values are one-tailed

answer this question. Partly due to colinearity among the scales, the forward Wald method was applied, after verifying that the assumptions of the test were met. As it still seemed desirable to reduce the colinearity, the scales measuring visual imagery, kinetic imagery, and tactile hallucinations were excluded from the regression. For the sample of 504 respondents, the best model revealed (in step 2) that visual hallucinations is the best predictor of aura experiences, β = .18, Wald = 11.24; df = 1; p = .001; Exp(B) = 1.20; Nagelkerke's R^2 = .063. Cognitive-perceptual schizotypy was the second-best predictor, β = .05, Wald = 3.98; df = 1; $p < .04$; Exp(B) = 1.05; Nagelkerke's R^2 =.075. Beta was significant only for visual hallucinations (.18). The remaining variables contributed nothing of significance to the prediction.

Gender Differences

Because evidence for gender differences in vividness of visual imagery and fantasy proneness has been reported in the literature (Wilson & Barber, 1978), this possibility was examined in a post-hoc analysis. As a way to explore gender differences, the numbers of males and females who obtained scores at or above the mean were compared with the number who obtained scores below the mean on each of the eight psychological scales, using Fisher exact probability tests. None of these comparisons are statistically significant. Therefore, no evidence for gender differences was found in the data.

Discussion

The present study examined the differences between persons who do report aura vision (experiencers) and who do not report aura vision (nonexperiencers) on various cognitive and personality measures. Five of the six hypotheses were confirmed. The results show significantly greater visual/tactile hallucinations, fantasy proneness, absorption, dissociation, and cognitive-perceptual schizotypy in experiencers than in nonexperiencers.

A binary logistic regression was used to provide a more refined discrimination between experiencers and nonexperiencers. The results show that only visual hallucinations and cognitive-perceptual schizotypy significantly discriminated the two groups of participants. This analysis also provides some discriminant validity by showing that the other variables in the model are not in fact associated with aura vision when the variance they share with the other predictors is partialled out.

None of the scales included any controls for a response bias on the part of "experiencers" to endorse experiential phenomena. This alternate interpretation cannot be ruled out and must be taken seriously. However, this hypothesis would

predict significant differences on all the scales. The failure to find such a difference for visual and tactile imagery argues against the response bias hypothesis.

The hypothesis that auras are a form of fantasy-prone personality could be examined in the laboratory by using tests based on drawings and diagrams such as those employed by Matsuoka, Onizawa, Hatakeyama, and Yamaguchi (1987). After-image persistence — tested by presenting flashes of light to participants — has been studied in relation to hypnotic susceptibility and visuospatial skills (Atkinson & Crawford, 1992). The results of this study also suggest that absorption and fantasy proneness are associated with aura vision.

A possible theoretical model that seems to emerge from the present results is that of a "happy schizotype" (McCreery & Claridge, 1995). Such people are functional in spite of, or perhaps even partly because of, their anomalous experiences. The term *hallucination* has pejorative overtones because of its almost exclusive association with mental illness or abnormal states. However, the apparently widespread occurrence of anomalous perceptual experiences in the normal population, and sometimes in apparently normal states, suggests that such experiences are not exclusively pathological. It is interesting that some participants report beneficial effects from aura viewing (Milton, 1992). For example, it may reflect the state of health of the physical body or an ability of others to heal by ostensibly paranormal means. Also, it has been claimed that people may be able to improve their ability to see auras (Brennan, 1988). If these propositions are true, aura experiencers should also experience the shifting of other cognitive maps, such as those that presumably underlie depersonalization experiences. This idea is supported by the studies discussed in the introduction, which found positive relationships between perceptual anomalies such as synesthesia and a variety of hallucinatory experiences and perceptual distortions.

Based on the fact that eidetic imagery is vivid and hallucinatory (Wilson & Barber, 1982), Marks and McKellar (1982) have suggested that auras are a form of eidetic imagery. (See also Ahsen, 1977, for distinctions between eidetic imagery and other kinds of imagery, including hallucinations; Ahsen, 1982, on the relationship of fantasy to proximal and distal imagery; and Ahsen, 2000, for a study on the vividness of hallucinatory or hallucinogenic imagery.)

The neuropsychology of aura vision should also receive attention. One possibly fruitful line of research is that of Persinger (e.g., 1984), who has explored the relationship between temporal lobe signs and reports of psychic phenomena. Past drug use may also be an interesting variable to study. Abraham (1983) has reported a higher incidence of halos seen around objects by individuals who suffer from LSD flashbacks.

The results of this study support the view that aura vision experiences of the

type described here may have important clinical applications. Many therapists still regard a client who reports such experiences (or other possibly parapsychological experiences) as either mentally ill or deluded. For this reason, fantasy-prone persons, fearing ridicule, often do not tell anyone about their experiences (Tart, 1983a, 1983b, 1984, Gómez Montanelli, & Parra, 2003, 2005). Aura experiencers do not necessarily consider their experiences to be psychopathological. Such aspects of dissociation may be particularly important for an understanding of the cognitive processes presumed to underlie altered states of consciousness and a variety of perceptual or quasi-perceptual experiences. Although aura viewers may be sensitive to a variety of synesthetic and anomalous perceptual experiences, as a group they are not more neurotic than non-experiencers (Alvarado & Zingrone, 1994.

In conclusion, the results of this study support the idea that claims of aura vision are related to claims of vivid visual imagery, as well as fantasies and other imaginative experiences. Further studies of aura vision could profitably focus on imaginal, neuropsychological, and perceptual correlates of the experience, as well as on integrating occult, religious, and folk beliefs about the experience with the relevant phenomenology.

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