ABSTRACT: An apparition is an experience, such as a vision or sense of presence, in which another person appears who is often dying or undergoing some other crisis. Six hypotheses were tested: people who see or feel apparitions have a higher capacity for absorption, fantasy, and cognitive-perceptual schizotypy than nonexperients. Six hundred and fifty-six undergraduate students, 76% females and 24% males (age range 17–57), completed four scales. Experients scored higher on absorption (AE: $z = 6.06$ and SP: $z = 5.19$), fantasy proneness (AE: $z = 4.76$) and cognitive perceptual schizotypy (AE: $z = 7.01$ and SP: $z = 8.21$) than nonexperients. The results suggest that, apart from the dominant schizotypy proneness, a second dimension (absorption) may underlie the differentiation of the two groups of participants. Gender differences were overall nonsignificant. Apparitional and other apparition-like experiences are related to higher levels of reports of absorption and imaginative fantasy experiences. Visions of ghosts may be related to cognitive processes involving fantasy and cognitive perceptual schizotypy proneness. Often experients do not tell anyone about their experiences. This study demonstrated the viability of adopting a psychological approach to understand the crisis apparition experience.

Most of the apparitional research on the survival hypothesis has involved determining whether apparitions are subjective (purely created within the mind) or objectively real (existing independently of the mind of the witness). A review of over 100 papers on hallucinations in the professional psychological literature reveals only two (Smythies, 1956; Sarbin & Juhasz, 1967) that display any familiarity with the parapsychological literature on hallucinations. Several researchers (Bennett, 1987; Davidson & Russell, 1981; Emmons, 1982; Finucane, 1984) have pointed to ostensible variations in the experience across historical periods and across societies in accordance with the social functions served by a belief in apparitions. It remains uncertain, however, if these variations exist in the apparitional experience itself or merely in the experient’s cognitive reconstruction and narrative description of the experience.

Apparitions and hallucinations (both external projections) differ from imagery (perceived internally). Unlike hallucinations, apparitions

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1 This paper was originally presented at the 50th Annual Convention of the Parapsychological Association, held in Halifax, Nova Scotia, Canada, August 2-5, 2007. I would like to thank John Palmer for his support and useful comments and Juan Carlos Argibay for his statistical advice.
are never said to indicate psychopathology, and they convey veridical data that could only be obtained from an external source. In practice, the distinctions between apparition, hallucination, and imagery are blurred. L.E. Rhine (1981) believed there is a continuum between an apparition (seen within sensory range) and an ESP vision (seen outside sensory range). Evans (1984) places the apparition in the broader context of the “entity experience.” Apparitions of the dead (ghosts) are usually associated with a particular building (haunting). Apparitions of the living or dying are of two types. A crisis apparition occurs when the witness supposedly sees a figure of another person (often a relative or friend) at another locality. An experimental apparition is deliberately produced; for example, a psychic goes “out-of-body” to another location to contact a target and then sees an apparition (MacKenzie, 1982). Evans (1984) distinguishes between stereotyped entities (such as the Virgin Mary) and generalised entities (such as UFO visitors). In one survey (Rees, 1971), 47% of 293 elderly people (mean age 75) reported hallucinations of their deceased spouse: 14% included visual sightings; the other 33% involved feelings and hearing, touching, and speaking to the spouse. Professional status, a happy marriage, and the first 10 years after widowhood were the best predictors of apparitions. In another survey (Berrios & Brook, 1984), 29% of 150 persons (mean age 77) reported visual hallucinations. Few elderly people tell others about their apparitions through fear of ridicule; this is a health concern.

A satisfactory theory of apparitions should specify whether the phenomena are objective or hallucinatory and should propose one or more plausible mechanisms by which the manifestations occur. An initial distinction can be made between (a) theories that attempt to account for the phenomena in purely normal terms and (b) theories that require a paranormal element (e.g., telepathy or the laying down of some sort of “psychic trace” in the haunted place). McCue (2002) has labeled theories of the first type “naturalistic” and theories of the second type as “psi-based.” Psi-based theories can be divided into two subcategories: those positing discarnate agency and those that do not require the notion of post-mortem survival as it is generally understood.

The founders of the (London) Society for Psychical Research published their first case collection (Gurney, Myers, & Podmore, 1886), followed by the “Census of Hallucinations” (Sidgwick, Johnson, Myers, Podmore, & Sidgwick, 1894), in which data were gathered from 17,000 people, of whom about 10% reported some sort of hallucinatory experience. Some reports were of animals, and only 20% of the 830 realistic apparitions were recognizable as dead people (ghosts). This focus on “benign hallucinations” (from sane people) is important because such hallucinations differ from those associated with mental illness and drug states (Anderson & Anderson, 1982; Asaad & Shapiro, 1986).

Some studies (Mavromatis, 1987; Sherwood, 1999) have demonstrated that apparitions often occur in states of consciousness in
which mental images are experienced as particularly lifelike and “real” — for example, the hypnagogic state (falling asleep) and hypnopompic state (waking up). In fact, a surprising number of normal individuals, when questioned, report a history of hallucinatory experiences (39% in Posey & Losch, 1983; 30% in Barrett & Etheridge, 1992; 12% in Sidgwick, Johnson, Myers, Podmore, & Sidgwick, 1894; 14% in West, 1948; 25% in McKellar, 1968; see also Tien, 1991). Moreover, there is evidence of quite substantial cultural variations in the disposition to have hallucinatory experiences (Al-Issa, 1977, 1995). Psychotic patients with a history of auditory hallucinations differ from nonhallucinating patients and normal persons in having poorer “reality testing” (Slade, 1976). Reality testing refers to the ability to distinguish a present perception (reality) from a present act of imagination (hallucination or apparition). Reality testing is probably important also for normal people who report visual hallucinations or apparitions, although participants are recalling a memory of an apparition seen in the past. A better term here is “reality monitoring” (Johnson & Raye, 1981; Bentall & Slade, 1985), which refers to the distinction between a past perception and a past act of imagination. In conclusion, more than just skill at visual imagery (vividness) is involved. One aspect of reality monitoring is the ability to focus attention (absorption). Another aspect is the ability to create stories out of one’s visual imagery (fantasy proneness).

Data on the cognitive styles of apparitional experiencers are scarce (McCreery & Green, 1986). Some studies indicate that mental imagery skills make a substantial contribution to the apparitional experience (Irwin, 1989) and that experiencers and nonexperiencers do not differ in their capacity for psychological absorption (Hough, 1991; Irwin, 1985). Fantasy proneness is also emerging as a strong discriminator: as a group, experiencers seem to be highly inclined to fantasize (Cameron & Roll, 1983; Myers et al., 1983; Osis, 1986; Wilson & Barber, 1983).

Wilson and Barber (1983) coined the term “fantasy prone personality” to refer to a small group of persons (about 4% of the population) who fantasize most of the time. They fully see, hear, and touch what they fantasize. Its basic feature is a deep involvement in fantasy, that is, a habitual capacity to suspend reality monitoring, unlike the momentary capacity indicated by absorption. The people studied by Wilson and Barber reported a high incidence of a wide variety of psychic experiences, including apparitions. A problem is that some participants had visual fantasies only with their eyes closed; thus, they could not see apparitions, which by definition require that one’s eyes be open. In two studies (Council & Huff, 1990; Myers & Austrin, 1985), a strong correlation was found between fantasy proneness and absorption, and both correlated significantly with a measure of psychic experiences that included seeing apparitions.

Absorption is the capacity to focus attention exclusively on some object (including, mental imagery) to the exclusion of distracting events. The object seems to have a heightened sense of reality, as do apparitions.
People must also have a motivation or need for the experience of absorption, as well as a situation suitable for inducing it (Irwin, 1985). High absorption indicates the ability to momentarily inhibit reality monitoring. The Tellegen Absorption Scale (Tellegen & Atkinson, 1974) has been used by many researchers. Although the limited number of studies suggests no difference in capacity for absorption between experients and nonexperients, there is some suggestion that they may differ in their need for absorption (Irwin, 1985, 1989).

The concept of schizotypy is derived inductively from the traits and symptoms found in schizophrenia and schizotypal or borderline personality disorders. Three latent factors — cognitive-perceptual deficits, interpersonal deficits, and disorganization — appear to underlie the schizotypal personality in the normal population. Factor analysis of these traits reliably produces four factors, one of which (unusual experiences) contains items consonant with the positive symptoms of psychotic illness (i.e., hallucinations, delusions, and thought disorder), together with cognitive disorganisation, introvertive anhedonia, and impulsive nonconformity. Healthy schizotypy is described as: “the uncoupling of the concept of schizotypy from the concept of disease” (Claridge, 1997). Healthy schizotypy represents a departure from the quasi-dimensional, pathological model for schizotypy and suggests an extension into a fully dimensional model (McCreery & Claridge, 2002) with health as a starting point (Claridge, 1997; Claridge & Beech, 1995).

Thus, despite the evident overlap between paranormal beliefs/experiences and schizotypy, it does not necessarily follow that paranormal beliefs and experiences are associated with psychological ill health. McCreery and Claridge (1995, 1996, 2002) found that out-of-body experients showed signs of schizotypy but otherwise appeared to be healthy. The out-of-body experients had higher scores than nonexperients on positive symptoms of schizotypy but not on negative symptoms. Moreover, some of the experients seemed to be healthy not only despite of their out-of-body experiences but also because of them. These individuals were called “happy schizotypes” (McCreery & Claridge, 1995).

Therefore, the apparitional experience — which refers to experiencing or clearly seeing a figure of human form, someone who was not physically present at that moment (Thalbourne, 1982) — and the sense of presence — which refers to increased, vivid sensations of some presence, as if someone or something touched or pressed on all or some part of the body (Cheyne, Newby-Clark, & Rueffer, 1999) — are phenomena worthy of study in their own right, like other aspects of human experience. Thus the focus is on the experience or phenomenon, whatever the interpretation. Apparitions, like everything else in the mental life of the healthy individual, do not occur in a vacuum but are closely interwoven with many other psychological and parapsychological processes.

For these reasons, I argue that apparition reports are part of human experience and as such deserve and require study in and of them-
selves, with and without efforts to relate apparitions to possible paranormal components. My perspective is consistent with Palmer’s (1979) discussion of the importance of distinguishing conventional models of explanation from paranormal ones in parapsychology. It is also consistent with recent pleas to consider the experiential aspects of psi claims as part of parapsychological research without necessarily focusing on paranormal explanatory models (e.g., Alvarado, 1997; Schouten, 1986; White, 1990). 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 the apparitional experience, but there are indications in the psychological, parapsychological, and psychiatric literature that particular cognitive (mental) variables are important. Three of these cognitive variables are absorption, fantasy proneness, and proneness to cognitive-perceptual schizotypy.

Hypotheses

Although the present study is exploratory, six specific hypotheses are tested: Students who have apparitional experiences (AE experients) have a higher capacity for (1) absorption, (2) fantasy proneness, and (3) cognitive-perceptual schizotypy proneness than nonexperients, and students who feel a sense of presence (SP experients) have a higher capacity for (4) absorption, (5) fantasy proneness, and (6) cognitive perceptual schizotypy proneness than nonexperients.

Method

From a total of 678 undergraduate students recruited from the psychology department, I received 650 usable questionnaires (95.8%). Participation was voluntary and the students received no pay. The students who returned the questionnaires included 494 (76%) females and 156 (24%) males, ranging in age from 17 to 57 (M = 25.57; SD = 7.23). Students who answered “yes” (one time, sometimes, or frequently) were grouped as “experients” and students who answered “no” were grouped as “nonexperients” (see Table 1).

Design and Materials

Students completed three scales: the Creative Experiences Questionnaire (25 true/false items; Merckelbach, Horselenberg, & Muris, 2001), which measures fantasy proneness; the Tellegen Absorption Scale (34 true/false items; Tellegen & Atkinson, 1974), which measures how frequently people engaged in absorptive activities; and the Schizotypal Personality Questionnaire, or SPQ (74 yes/no items; Raine, 1991; Raine,
I developed an 8-item self-report inventory to collect information on spontaneous paranormal experiences, inspired by the English version of the Anomalous/Paranormal Experiences Inventory (Gallagher, Kumar, & Pekala, 1994), and Palmer’s (1979) survey of students in Charlottesville, VA. The two questions on apparitions were: “Being awake, I have had the experience of hearing voices or seeing appearances invisible to others, which forewarned me about an impending danger that occurred shortly thereafter” (Spanish version: Estando despierto, he tenido la experiencia de oir voces o ver presencias invisibles para otros que me indicaban acerca de un peligro inminente que luego ocurrió) (Item 5). The question refers to “crisis apparitions,” that is, visions seen or voices heard at the moment of an individual’s death or during a time of great stress such as illness, serious injury, or a life-threatening situation. For sense of presence: “Being alone, I have had the vivid impression of a sensation of presence, but nothing was visible where I was” (Spanish version: Estando solo, he tenido la vívida impresión de una sensación de presencia, pero invisible
donde me encontraba) (Item 8). Both questions tapped three dimensions of experience: frequency (never, once, sometimes, frequently), subjective explanation (i.e., rational, unknown, paranormal), and positive or negative (emotional) impact (“none” and a 1–7 scale for some impact, 7 being the highest).

**Results**

Data were compared on apparitional experience (AE) for experients, \((N=67)\) versus nonexperients \((N=583)\), and on sense of presence (SP) for experients \((N=295)\) versus nonexperients \((N=355); \) see Table 2.

**Tests of Hypotheses**

First, a two-sample KS test was used for comparing experients and nonexperients \((TAS, p<.001; CP-SPQ, p=.08; CEQ, p=.004)\), as it is sensitive to differences in both location and shape of the empirical cumulative distributions of the two samples. Because the data were not normally distributed, the Mann-Whitney \(U\) test was used to test the hypotheses (see Table 3).

Hypothesis 1 was that AE experients would score higher on absorption than nonexperients on the TAS. This hypothesis was supported: the mean for experients was significantly higher than for nonexperients \((z = 6.06, p < .001, \text{ one-tailed})\).

Hypothesis 2 was that AE experients would score higher on fantasy proneness than nonexperients on the CEQ. This hypothesis was supported: the score for experients was significantly higher than for nonexperients \((z = 4.34, p = .0001, \text{ one-tailed})\).

Hypothesis 3 was that AE experients would score higher on cognitive-perceptual schizotypy proneness than nonexperients on the CP-SPQ. This hypothesis was supported: the score for experients was significantly higher than for nonexperients \((z = 7.01, p < .001, \text{ one-tailed})\).

Hypothesis 4 was that SP experients would score higher on absorption than nonexperients on the TAS. This hypothesis was supported: the score for experients was significantly higher than for nonexperients \((z = 5.19, p < .001, \text{ one-tailed})\).

Hypothesis 5 was that SP experients would score higher on fantasy proneness than nonexperients on the CEQ. This hypothesis was supported: the score for experients was significantly higher than for nonexperients \((z = 5.17, p < .001, \text{ one-tailed})\).

Hypothesis 6 was that experients would score higher on cognitive-perceptual schizotypy proneness than nonexperients on the CP-SPQ. This hypothesis was supported: the score for experients was significantly higher than for nonexperients \((z = 8.21, p < .001, \text{ one-tailed})\).
### Table 2

**Apparitional Experience and Sense of Presence: Frequency, Emotional Impact, and Explanation**

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Apparitional experience</th>
<th>Sense of presence</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Males (N= 66)</td>
<td>Females (N= 229)</td>
</tr>
<tr>
<td>One time</td>
<td>20 (33.9%)</td>
<td>55 (24.6%)</td>
</tr>
<tr>
<td>Sometimes</td>
<td>(71.4%)</td>
<td>(49.1%)</td>
</tr>
<tr>
<td>Frequently</td>
<td>4 (28.6%)</td>
<td>4 (5.4%)</td>
</tr>
<tr>
<td>Emotiona</td>
<td>Mean (1–7)*</td>
<td>3.50 (3.54)</td>
</tr>
<tr>
<td>l impact</td>
<td>Rational/explicable</td>
<td>4 (28.6%)</td>
</tr>
<tr>
<td>Explanation</td>
<td>I do not know</td>
<td>5 (35.7%)</td>
</tr>
<tr>
<td>Paranormal/</td>
<td>5 (35.7%)</td>
<td>23 (41.8%)</td>
</tr>
<tr>
<td>unexplained</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*a (negative) to 7 (positive) emotional impact.*
### Table 3

<table>
<thead>
<tr>
<th>Variables†</th>
<th>Apparitional experience</th>
<th>Sense of presence</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>M</td>
</tr>
<tr>
<td>TAS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-experients</td>
<td>509</td>
<td>23.43</td>
</tr>
<tr>
<td>Experients</td>
<td>63</td>
<td>72.18</td>
</tr>
<tr>
<td>CP-SPQ</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-experients</td>
<td>509</td>
<td>7.30</td>
</tr>
<tr>
<td>Experients</td>
<td>63</td>
<td>12.44</td>
</tr>
<tr>
<td>CEQ</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-experients</td>
<td>509</td>
<td>32.11</td>
</tr>
<tr>
<td>Experients</td>
<td>63</td>
<td>41.74</td>
</tr>
</tbody>
</table>

**p < .001, one-tailed

† TAS = Tellegen Absorption Scale (M = 24.41; SD = 13.48; Mdn = 21.87); CP-SPQ = Cognitive- Perceptual factor of the Schizotypal Personality Questionnaire (M = 7.87; SD = 4.93; Mdn = 7.00); CEQ = Creative Experiences Questionnaire (M = 32.86; SD = 15.79; Mdn = 31.60).
As a way of exploring gender differences, I split the data into males/females and experients/nonexperients and examined the number of participants who obtained scores at or above the mean with those who obtained scores below the mean, using the Fisher exact probability test. Analyses of the scores for males versus females were overall nonsignificant, which was also the case when experients and nonexperients were examined separately. In other words, I did not find evidence for gender differences in the data.

Discussion

The characteristics of the apparitions (seeing or feeling presences) reported in this sample are similar to those reported in previous studies, and they are consistent with the core characteristics described by Osis (1986). The concept of reality monitoring may prove crucial to the more complete understanding of the apparitional experience, as this concept does not require that the apparitional experient be particularly skilled in consciously producing vivid visual images. The experience is a function of cognitive style rather than skill.

An individual who grows to adulthood in a society that recognizes the existence of ghosts or that values spiritual experiences is more likely to attribute reality to the image of a deceased relative than a person who reaches maturity in a materialistic, scientifically oriented society. The impact of external stimulation on hallucinations also can be understood in terms of the source-monitoring hypothesis. In conditions in which external stimulation is degraded (either by sensory restriction or by white noise), individuals are likely to adopt more liberal criteria for assuming that perceived events are real and are therefore more likely to misattribute internally generated thoughts to an external source (Bentall, 2000). The impact of stress and emotional arousal on hallucinations can be understood if it is assumed that the cognitive operations involved in source monitoring, as in other cognitive operations, are disrupted by emotional arousal.

The state of absorption could be associated with a low level of reality monitoring. While in this state, the focal object of attention, even if imaginary, becomes totally real to the experient (Tellegen & Atkinson, 1974). In this study, however, perhaps capacity for absorption is only one of a constellation of related factors, and style may be more important than capacity or skill. Or maybe we should distinguish between two types of reality monitoring: momentary attention and a more enduring propensity to suspend reality monitoring. The TAS measures only capacity for absorption, the extent to which a person can be so engrossed in a mental experience at a given moment that reality monitoring is temporarily inhibited. A scale that measures need for absorption, a motivational variable (Irwin, 1985), may indicate a more habitual use or recurrent desire to engage in absorbed
mental activity, such that habitually poor reality monitoring becomes an enduring aspect of cognitive style.

I have used fantasy proneness because apparitional experiencers are clearly more fantasy prone than their nonexperiencer counterparts. This need not mean that all apparitions are pure fantasies, as some could still be veridical. It is possible that the absorbed fantasy state is a psi-conducive state. In other words, extrasensory information is incorporated into the ongoing fantasy and, because of low reality monitoring, witnessed as a hallucinatory image. Hence, in the context of this study, the distinction between purely subjective experiences and those considered paranormal (veridical) is irrelevant. Veridical experiences may depend on the same psychological predispositional factors as do nonveridical experiences (see Irwin, 1994, for a phenomenological approach).

The main analyses confirmed the two clusters of hypotheses: that apparitional experiences are related to higher levels of absorption and imaginative/fantasy experiences. This finding is also in conceptual agreement with studies which have found that measures of fantasy proneness seem to be successful predictors of psychic phenomena other than apparitional experiences (Myers, Austrin, Grisso, & Nickeson, 1983; Wilson & Barber, 1983). Such findings suggest that visions of ghosts may be related to cognitive processes involving fantasy proneness and cognitive perceptual schizotypy proneness, and that these factors are correlated. Raine observed that one of the factors, the cognitive-perceptual schizotypal factor (made up of unusual perceptual experiences, magical thinking, paranoid ideation, and ideas of reference) may be analogous to the positive symptoms factor (delusions and hallucinations) found by Arndt, Alliger, and Andreasen (1991) in schizophrenia. However, this may not be the whole picture. The low number of apparitional cases prevents us from exploring the influence of factors other than those measured by the CP-SPQ, TAS and CEQ, such as the context in which the apparitional and apparition-like experience occurred (e.g., emotional circumstances related to death).

The apparitions question used in this experiment refers specifically to “crisis apparitions,” that is, visions seen or voices heard at the moment of an individual’s death or during a time of great stress, such as illness, serious injury, or a life-threatening situation. Although I restricted my sample to crisis apparitions, I see no reason to think that the correlations I found with the predictors apply only to crisis apparitions. Maybe this qualification defines the “cutoff point” between veridical and nonveridical apparitional experience. This question needs further investigation.

Apparitional experiences also have implications for the philosophy of perception. The occurrence of hallucinations, that is, perceptual experiences without justifying sensory stimuli, has long been one of the standard objections to the philosophical theory of direct realism (Goldstein, 1996; Matlin & Foley, 1997). According to this theory, we are in some sense in direct contact with the external world while we seem to be perceiving
it, and not merely in direct contact with some mediating representation in our mind, such as a sense-datum or an image, which may or may not correspond to external reality.

This study demonstrates the viability of adopting a psychological approach in order to better understand the veridical apparitional experience. It is tentatively concluded that the constellation of interrelated factors that make up the construct of the “fantasy-prone personality” (Wilson & Barber, 1983) provide a psychological predisposition for the apparitional experience. It also supports the view that apparitional experiences of the type described here may have important clinical applications. Many therapists still regard a client who reports apparitions (or other possibly parapsychological experiences) as 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).

Apparition experiencers report a significantly higher frequency of ESP in dreams, mystical experiences, apparitions, and out-of-body experiences (Gómez Montanelli & Parra, 2005), and they also score higher on dissociation and hypnotic susceptibility (Pekala, Kumar, & Marcano, 1995; Parra & Argibay, 2006). These findings correspond to those reported by Kohr (1980) and by Palmer (1979) that relate apparitions to other experiences; that is, it is rare to find a person who reports apparitional experiences but makes no other claims of psychic experiences. However, it must be stressed that we are dealing here with claims that depend solely on questionnaire responses. The meaning of these claims is unclear if we are not sure that the participants’ answers are actually related to what we were asking — an assurance we cannot expect to find without the benefit of follow-up interviews or, at the very least, a written description of the experiences.

References


Facultad de Psicología
Universidad Abierta Interamericana
Salta 2015 (C1137ACQ) Buenos Aires
Argentina
rapp@fibertel.com.ar