

THE JOURNAL OF THE AMERICAN SOCIETY FOR PSYCHICAL RESEARCH

VOLUME 76

OCTOBER 1982

NUMBER 4

Out-of-Body Experiences, Lucid Dreams, and Imagery: Two Surveys

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ABSTRACT: Results from two surveys are reported. In the first, 13% of a sample of 217 students reported having had at least one out-of-body experience (OBE) and 79% reported lucid dreams. In the second, 14% of a sample of 115 students reported OBEs and 73% reported lucid dreams. In the first survey, but not the second, OBEs and lucid dreams tended to be reported by the same people. In neither study were OBEs or lucid dreams related to frequency of dream recall. In the second survey, lucid dreams and flying dreams were found to be related. To explore the possibility of a relationship between imagery and reporting of these experiences, two types of imagery test were used: in the first study a shortened form of Betts' Questionnaire upon Mental Imagery (QMI) and in the second Gordon's Control of Imagery Questionnaire. In neither case was there a significant relationship between imagery scores and reporting of OBEs or lucid dreams.

INTRODUCTION

Previous surveys of the out-of-body experience (OBE) have tackled a number of questions, including that of how common the experience is. Incidences found have ranged from as low as 8% (Haraldsson, Gudmundsdottir, Ragnarsson, Loftsson, and Jonsson, 1977) to as high as 34% (Green, 1967), or even 50% for special groups (Kohr, 1980). These differences can probably be attributed to differences in the populations sampled, the questions asked, the context in which they were asked, or—a factor related to all of the above—what was understood by the questions. Respondents are most likely to misunderstand a question when there is most ambiguity in the question or least knowledge about the topic being

¹ I gratefully acknowledge the support of the Blenner-Hassett Fund and the Perrott-Warrick Studentship in Psychical Research.

asked about among the people being asked. For this reason the sample used here, that is, students knowledgeable about parapsychology, may be useful.

Larger surveys have been able to provide information on the distribution of OBEs and on what the experiences are like. Kohr found that 72% of his OBEers had had more than one OBE, and Palmer (1979) found over 80%. Collections of cases (which differ from surveys in that no attempt is made to sample a specific population) have provided comparable figures. Green (1968a) found that 39% of her subjects had had multiple experiences; Poynton (1975) found 44%; and Twemlow, Gabbard, and Jones (1980) found 66%. These figures vary considerably, but nevertheless they are high enough in relation to the incidence figures to allow the conclusion that a person who has had one OBE is more likely to have another.

There are a number of reasons why this might be so. Possibly certain types of people are more prone than others to having OBEs; or an OBE might induce changes in the experiencer that make having another OBE more likely. If the former is true, though, it is not at all obvious which types of people are more likely to have the experience. Neither Green (1967) nor Palmer (1979) found any relationship between simple variables such as age, sex, race, occupation, educational level, etc., and OBEs. The only positive finding has been that OBEers also tend to report more of other kinds of psychic or psi-related experiences. However, this could be due either to a genuine relationship between the experiences or to a nonspecific tendency for some people to report more of any kind of experience, or to overinterpret everyday occurrences as "psychic" events.

Irwin (1980) found that 21 Australian OBEers had higher scores than expected on "absorption." (This dimension of cognitive style relates to a person's ability to become involved in his or her experiences. For example, someone who can readily become absorbed in a good book or film, art, or nature will tend to score high on absorption.) He has since confirmed this finding in a comparison of OBEers with non-OBEers and by showing that high-absorption subjects are more susceptible to an OBE induction procedure (Irwin, 1981a).

Perhaps the most interesting results, however, have involved imagery. Much current debate about OBEs concerns the question whether something leaves the body or whether the experience can be accounted for in purely psychological terms. Psychological theories of the OBE usually depend heavily on the notion that what is seen during the experience is a product of hallucination or imagery (see, e.g., Blackmore, 1982; Palmer, 1978), and this has

given rise to the suggestion that people who have OBEs should show better or more vivid imagery than those who do not.

Irwin (1980) showed that his 21 OBEers were no more likely than the normal population to be either habitual "visualizers" or "imagers." He also gave them a questionnaire on vividness of visual imagery and found that their scores were lower, not higher, than norms for that group would predict. He concluded that this result was incompatible with the theory that the OBE is a form of hallucination, a conclusion later challenged by Palmer (1981). One of the aims of the present studies was to examine further the relationship between OBEs and imagery.

It has sometimes been suggested that the OBE is a kind of dream (see, e.g., Rushton, 1976). In fact, however, the evidence—both physiological (Morris, Harary, Janis, Hartwell, and Roll, 1978; Tart, 1968) and phenomenological (Osis, 1979; Twemlow et al., 1980)—is against this. Nevertheless, there are many reasons for thinking that lucid dreams are related to the OBE. Experientially they can be very similar and there is a problem in drawing any dividing line between them (Green 1968b; McCreery, 1973). Indeed, if the OBE is defined, for example, as an experience in which a person seems to perceive the world from a location outside the physical body, then some lucid dreams are, by definition, OBEs; if the dreamer chooses to "look" around the bedroom or at his or her own body lying in bed, then the experience is an OBE.

The few surveys that have been done on lucid dreams have found them to be far more common than OBEs. Green (1966) found that 73% of a student sample answered "yes" to the question "Have you ever had a dream in which you were aware that you were dreaming?" Palmer (1979) found that 56% of the townspeople and 71% of the students in his sample claimed to have had lucid dreams, and many of these said they had them regularly. In Kohr's (1980) survey, 70% of the respondents claimed lucid dreams.

If there really is a similarity between OBEs and lucid dreams then we might expect the same people to have both. Only two surveys have tested this. Palmer reported a significant relationship between OBEs and "vivid dreams," lucid dreams, and carrying out some sort of dream analysis; but no relationship between OBEs and frequency of dream recall. Kohr's findings were similar, except that in his study frequency of dream recall *was* related to OBEs. So there is some evidence relating OBEs and lucid dreams, but more would be helpful. As far as I know, there has been no attempt to relate lucid dreams to imagery skills or to any other cognitive skill or ability. The present work attempted to do this.

Two surveys are reported here. Both used student samples drawn from parapsychology and psychology classes, which seri-

ously limits their generalizability. The aim of the surveys was to find out more about the incidence of OBEs and lucid dreams and about how these two experiences are related to each other and to other variables.

STUDY 1

Method

Students of various disciplines taking a parapsychology course at the University of Surrey (during the years 1976–1980) took part in a number of experiments and completed a questionnaire on psychic and related experiences. Among the questions asked was: "Have you ever had an out-of-body experience?" Possible answers were: "No"; "Yes, once"; "Yes, occasionally" (2–5 times); "Yes, often" (more than 5 times); and "Yes, can have one at will." (In different years, other aspects of the questionnaires varied, but this question was always included.) All students had attended lectures on the OBE, were familiar with examples of OBEs, and should have understood the question.

Other data were available for some students and it was possible to determine whether the OBEers differed from non-OBEers in terms of occurrence of lucid dreams, frequency of dream recall, ESP scores, and imagery scores. The questions related to dreaming were: "How often do you remember your dreams?" and "Have you ever had a lucid dream?" The students had also attended lectures on lucid dreams.

ESP scores were obtained in class on a separate occasion, using a simple clairvoyance procedure. Targets were the five standard ESP-card symbols, and target orders were individually prepared for each subject by computer. There were eight runs of 25 trials per run, with testing completed in two sessions of four runs each. For each session the computer printed out in random order a sequence of 100 targets for each student; these target lists were then sealed in opaque envelopes, which remained unopened during testing. For the test sessions, each student was given a sealed target list and an answer sheet with the following instructions: "Please use your clairvoyance to 'see' what is written on your list and write your answers in the spaces below. . . . Do NOT open the envelope!!!" When the students had finished recording their responses, they gave their answer sheet and target envelope (still unopened) to a neighbor for scoring. All scores were later rechecked. These experiments have been described in more detail elsewhere (Blackmore, 1980a, 1980b).

The imagery test used in this study was a shortened form of Betts' Questionnaire upon Mental Imagery (QMI) vividness of imagery scale (Sheehan, 1967).

Results

Overall, 13% of the respondents reported having had an OBE, while 79% reported lucid dreams; 46% of OBEers and 57% of lucid dreamers reported more than one such experience. Table 1 shows the distribution of these experiences. The results of the comparisons made are shown in Tables 2 and 3. (*N* is different for the different comparisons because not all of the students took all of the tests.) Most important is the significant relationship ($p < .01$) between OBEs and lucid dreams, the same people tending to report both. In fact, among the 157 students asked about both experiences, not one had had an OBE but not a lucid dream. When respondents were divided into frequent and infrequent dream recallers, however, no relationship was found between frequency of dream recall and either OBEs or lucid dreams. ESP scores were not related to reporting of either type of experience, nor were scores on the QMI vividness of imagery scale.

Table 1
INCIDENCE OF OBEs AND LUCID DREAMS (STUDY 1)

Category of Experience	N	Distribution of Yes Responses						% Yes	% More than once
		No	Yes	Once	Occas.	Often	At will		
OBEs	217	189	28	15	9	2	2	13%	46%
Lucid Dreams	157	33	124	53	47	20	4	79%	57%

Table 2
RELATIONSHIPS BETWEEN OBEs, LUCID DREAMS, AND DREAM RECALL (STUDY 1)

Relationship	N	χ^2 (2 df)	p
OBEs—Lucid Dreams	157	6.72	<.01
OBEs—Dream Recall	111	1.20	n.s.
Lucid Dreams—Dream Recall	110	2.00	n.s.

Table 3
MEAN IMAGERY (QMI) AND ESP SCORES (STUDY 1)

Category of Experience	Imagery Scores					ESP Scores ^a				
	Yes	No	t	df	p	Yes	No	t	df	p
OBEs	100	108	0.95	58	n.s.	41.0	41.0	0.00	104	n.s.
Lucid Dreams	117	111	0.73	34	n.s.	40.9	40.7	0.11	64	n.s.

^a MCE = 40.

Discussion

Because not all of the students took all of the tests, the results of this study must be treated as exploratory only. Nevertheless, some of the results are interesting. The incidence of lucid dreams is similar to that found in previous surveys, and the expected relationship between OBEs and lucid dreams was confirmed. It is worth noting that, since neither type of experience was related to dream recall, the high incidence of reporting of lucid dreams is not an artifact of recalling more of all kinds of dreams.

The incidence of OBEs, however, was lower than in most of the earlier surveys, as was the incidence of multiple OBEs. Several factors might be thought to lead to a higher, not lower, incidence of OBEs in this group: Students have previously been found to report more OBEs (Palmer, 1979), as have respondents from a population assumed to have a special interest in psi (Kohr, 1980), and respondents in the present study were students who were interested enough in parapsychology to have joined the class. But perhaps the very fact of being in the class and learning more about OBEs meant that they were less likely to give false positive responses. To test this possibility, a small survey was carried out with a group interested in parapsychology but given no information about the OBE, and this did yield a higher incidence (33%) of reporting of the experience, as well as a higher proportion (82%) of OBEers reporting more than one (Blackmore, 1981), thus lending some support to this hypothesis. What is needed, however, is a direct comparison of two groups given different amounts of information about the OBE. Such a comparison is planned.

Although the actual incidence of OBEs was smaller than in earlier work, their distribution was again such as to indicate that a person who has had one experience is more likely to have another; but the other analyses throw no further light on the reason for this. The expected relationship with imagery was not found. However, vividness of imagery may not necessarily be the important variable in getting at such a relationship. If what is seen in an OBE is a product of the imagination, it may not be vividness that is needed but the ability to produce, control, and manipulate images. There are many ways of testing these skills. One simple one is Gordon's (1949) Control of Imagery Questionnaire. In the second study subjects were given this test in the hope that it would throw further light on the relationship between imagery and OBEs and lucid dreams.

STUDY 2

Method

Subjects were 115 psychology students at the University of Bristol, who were tested in two groups ($N = 60, 55$) during the

autumn term of 1980. In a single session in class they were given Gordon's Control of Imagery Questionnaire (Gordon, 1949; Richardson, 1969) and another questionnaire devised for the present study (see Appendix A). Gordon's test asks the subject to imagine a car and then to change its color and put it through a series of changes culminating in the car cemetery. The second questionnaire concerned OBEs, lucid dreams, frequency of dream recall, and flying dreams, among other topics. Flying dreams were included because of suggestions that they are related to astral projection (Muldoon and Carrington, 1929), lucid dreams (Green, 1968b), and OBEs (Twemlow et al., 1980). For those who claimed OBEs there were additional questions about the nature of their experiences.

Results

Of the students answering the relevant questions on the questionnaire, 16 (14%) reported having had at least one OBE, 83 (73%) reported lucid dreams, and 56 (50%) reported flying dreams. The distribution of responses is shown in Table 4. Over half of those reporting OBEs (56%) claimed to have had more than one of the same kind of experience, as did most of those reporting lucid (89%) and flying (88%) dreams. In each case there were more multiple experiences than would be expected according to a chance distribution.

Relationships of the three types of experience to each other and to frequency of dream recall are shown in Table 5. No significant relationship was found between OBEs and lucid dreams, or between OBEs and flying dreams; but the same people did tend to report both lucid and flying dreams ($p < .01$). Again, none of the three types of experience was related to frequency of dream recall. There were no age or sex differences between OBEers and non-OBEers.

The expected relationship with imagery scores was not found; OBEers did no better than non-OBEers on the imagery test, and

Table 4
INCIDENCE OF OBEs, LUCID DREAMS, AND FLYING DREAMS (STUDY 2)

Category of Experience	N	No	Yes	Distribution of Yes Responses				% Yes	% More than once
				Once	Occas.	Often	At will		
OBEs	115	99	16	7	6	3	0	14%	56%
Lucid Dreams	114	31	83	9	40	31	3	73%	89%
Flying Dreams	113	57	56	7	31	18	0	50%	88%

Table 5

RELATIONSHIPS BETWEEN OBEs, LUCID AND FLYING DREAMS, AND DREAM RECALL (STUDY 2)

Relationship	N	χ^2 (2 df)	p
OBEs—Lucid Dreams	114	3.72	n.s.
OBEs—Flying Dreams	113	0.26	n.s.
Lucid Dreams—Flying Dreams	112	6.56	<.01
OBEs—Dream Recall	115	0.00	n.s.
Lucid Dreams—Dream Recall	113	0.12	n.s.
Flying Dreams—Dream Recall	113	3.79	n.s.

there were no significant differences in imagery scores for those who reported lucid or flying dreams (see Table 6).

Of the 16 subjects who had had an OBE, 15 also answered the questions on the nature of their experiences. The numbers are too small for any detailed analysis, but some aspects of the responses are interesting. (In the following paragraphs, the numbers in parentheses refer to the number of respondents who reported at least one experience of the type being discussed. Totals may be more than 15 because of multiple experiences reported by a single subject.)

Circumstances under which the OBEs took place included taking drugs (6, including cannabis, LSD, and "speed"), accidents and operations (5), resting (5), and normal waking activity (4). One student had his only OBE while running. Only one had induced an experience deliberately. Before the OBE, twisting or spiraling, disorientation, and unusually vivid imagery were frequently noted. Most of the respondents (9) just found themselves "out," but a few (3) passed through a doorway or tunnel, and one thought she had moved but found that physically she had not.

The reported duration of the experiences varied from a few seconds to "a whole day." The respondent's state of consciousness also varied: Several said it was like normal waking consciousness (5), and several like a dream (5) or drug (4) experience. One described it as a state of "special wakefulness." Most did not travel far in their OBEs. Asked how the OBE world appeared, the most

Table 6

MEAN SCORES ON GORDON'S CONTROL OF IMAGERY QUESTIONNAIRE (STUDY 2)

Category of Experience	Yes	No	t	df	p
OBEs	20.4	18.4	1.29	113	n.s.
Lucid Dreams	18.6	18.7	0.09	112	n.s.
Flying Dreams	18.4	19.0	-0.56	111	n.s.

common response was "like the physical world but distorted or with errors" (7). Others saw it as normal (5) or like a dream or fantasy world (5). None reported another world such as that described by Monroe (1971).

OBEs are often thought to be exclusively visual and to involve clearer perception than normal. To test this assumption, the subjects were asked to rate the clarity of their OBE perception for the five senses on a 7-point scale ranging from "totally clear" (1) to "very vague and dim" (7). Average ratings for the 15 respondents were 2.3 for vision, 3.5 for hearing, 4.7 for touch, 5.1 for smell, and 5.2 for taste. This seems to confirm the belief that vision is the dominant sensory modality, although most subjects also reported the other four senses as present to some extent.

Seeing one's own physical body is often reported in OBEs, but here six of the respondents did not see it, two trying and failing. Of the nine who did see their bodies, seven said that it looked normal and two that it was distorted in some way. In answer to the question "Of what did 'you' consist during the experience?" only three OBEers reported having another body; one was some other shape, six a point in space, and one did not seem to exist at all.

Claims of paranormal perception during OBEs are often cited as though they formed an important aspect of the experience (e.g., Green, 1968a; Tart, 1974). Of the 15 OBEers responding here, however, only six noticed anything that they would not have known about beforehand, and of those only two bothered to check whether what they had seen or heard was correct. (In one case it was; in the other it was not.) So this aspect of the experience did not seem to be a key one at least as far as these subjects were concerned.

Finally, most respondents claimed that the experience was enjoyable (10) and that they would like to have another (13). Only five found it frightening. Asked whether it had changed their views in any way, only three said that it had—that it was thought-provoking and made them notice things more. The OBEers were about equally divided between those who had known a little about OBEs before their experience and those who had known nothing.

Discussion

Figures for the incidence of OBEs and lucid dreams, as well as for the distribution of these experiences, are comparable to those in the first study, and a relatively high incidence of flying dreams was found. Because there was again no relationship between any of these experiences and dream recall, the reported frequency of lucid and flying dreams cannot be an artifact of more frequent recall of

dreams in general. The previous finding that persons who have at least one OBE are more likely to have another one was again confirmed, and the same was also true for those reporting lucid and flying dreams. However, as in the first study, the other analyses failed to give any clues as to why this might be so.

The expected relationship between lucid and flying dreams was confirmed in this study; but that between OBEs and flying dreams was not, and the strong relationship between lucid dreams and OBEs found in the first study was not repeated. No reasons for this discrepancy are apparent.

Some specific assumptions about the nature of the OBE were supported by respondents' descriptions of their experiences (e.g., the belief that vision is the dominant sensory modality); but others were not (e.g., the belief that paranormal experiences form an important aspect of the OBE).

As before, the predicted relationship between OBEs and imagery scores was not obtained. The Control of Imagery Questionnaire was used in the present study because it was thought that it might tap skills more relevant to the OBE than just vividness of imagery. However, like the vividness of imagery scale used in the first study, it was unable to distinguish OBEers from non-OBEers; nor did it show any relationship to either lucid or flying dreams. Thus the imagery test again failed to provide an answer to the question why some people seem prone to having OBEs and lucid (or flying) dreams while others do not.

GENERAL DISCUSSION

In both of the studies reported here the incidence of lucid dreams was comparable to that found in previous surveys, but the incidence of OBEs was not. Because the population tested here was one of students knowledgeable about OBEs, it is possible that the lower incidence of reporting was due to a decreased tendency on the part of the respondents to give false positive responses; since they were more familiar with the topic being asked about, they should have been less likely than some of the other populations sampled to misunderstand what was being asked.

While the specialized nature and small size of this sample greatly restrict the generalizability of the results, it is interesting to note that several features of the experiences found in previous surveys were repeated here. For example, in spite of the lower incidence of reporting of OBEs, both of the present studies confirmed the earlier finding that persons who have had one OBE or lucid dream are more likely to have another. However, results concerning the expected relationship between the two types of

experience—i.e., that the same people should tend to report both—were mixed: one study confirmed the expectation, but the other did not.

Neither of the imagery tests used in the present studies showed the predicted relationship of imagery skills to OBEs or lucid dreams; it appears that having vivid or controlled imagery does not make one especially likely to have either of these experiences. This confirms the previous negative findings of Irwin (1980) and may be thought to weaken the case for the psychological theories of the OBE (see Irwin, 1981a). However, there are several reasons for hesitation in reaching such a conclusion.

First, the tests used here dealt only with intentional imagery, and differences between intentional and spontaneous imagery may be important. Palmer (1981) has pointed out that intentionally generated imagery may not be relevant for a spontaneous OBE; and, although Irwin (1981b) has argued that the two types of imagery cannot be separated, this point has not been tested. It is possible that the imagery scores on these tests may be related to the ability to induce an OBE voluntarily, but not to having a spontaneous OBE. Alternatively, imagery may be more important when there is not already some other overriding inducement to an OBE such as accident or illness (Blackmore, 1982). Of the 15 OBEers for whom there are data in these surveys, only one had induced an OBE voluntarily, so the numbers are too small for comparative analysis. However, these suggestions might be investigated in the future by (a) collecting imagery data for larger groups of OBEers or (b) trying to induce OBEs in subjects differing in intentional imagery skills.

Second, the imagery tests used so far have been very limited in scope with regard to the skills required; tests of manipulative imagery or spatial ability have yet to be tried. If the people who have OBEs are those who are best able to imagine the world, familiar places, etc., as though flying over and through them (which is what seems to be required if OBEs are psychological in origin) then perhaps it would be more relevant to test skills of manipulative imagery, the ability to visualize familiar objects from unfamiliar angles and to rotate and manipulate forms in three dimensions. There are tests designed to assess such skills and it may be that these would show a consistent relationship to OBEs—especially deliberate OBEs—where other tests have failed.

Third, one last point is important. I think few people would seek to deny that lucid dreams are products of hallucination, fantasy, or imagery; yet these studies also failed to show any relationship between the imagery skills tested and reporting of lucid dreams. This should lead us not to conclude that the lucid dream is something other than a product of the imagination, but rather to question

the relevance of our tests. I think the same is true for OBEs: The negative findings of these studies should not lead us to reject a psychological, imagery-based theory of the OBE any more than they should lead us to reject such a theory of the lucid dream.

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APPENDIX A
QUESTIONNAIRE FOR STUDY 2

Name _____ Age ____ Male/Female

Please answer the following questions by underlining the appropriate answer. You may underline more than one answer if necessary, and please give further comments overleaf if you wish to.

1. How often do you remember your dreams?
(a) Never (b) Rarely (c) Occasionally (e.g., once a month)
(d) Often (once a week) (e) Almost every day
2. Have you ever had a dream in which you were able to fly?
(a) No (b) Yes, once (c) Yes, occasionally (2 to 5 times)
(d) Yes, often (more than 5 times) (e) Can have one at will
3. Have you ever had a "lucid dream"—that is, one in which, at the time, you knew it was a dream?
(a) No (b) Yes, once (c) Yes, occasionally (2 to 5 times)
(d) Yes, often (more than 5 times) (e) Can have one at will
4. Have you ever had a general anesthetic (for example, when having an operation)?
(a) No (b) Yes, often (c) Yes, occasionally (2 to 5 times)
(d) Yes, often (more than 5 times)

If yes, do you remember having any conscious experiences during the anesthetic, when your body was apparently unconscious?

- (a) No (b) Yes, once (c) Yes, more than once

If your answer was yes, please describe your experiences briefly overleaf, if possible.

5. Have you ever been close to death (i.e., nearly died)?
(a) No (b) Yes, once (c) Yes, occasionally (2 to 5 times)
(d) Yes, often (more than 5 times)
If yes, was this because of
(a) Accident (e.g., road accident) (b) An operation (c) Heart attack (d) Other illness (e) Childbirth (f) Drugs (if possible, please specify _____) (g) Other (please specify _____)
6. Have you ever been with anyone when he or she died?
(a) No (b) Yes, once (c) Yes, occasionally (2 to 5 times)
(d) Yes, often (more than 5 times)

If yes, did that person (or persons) report any visions, hallucinations, or religious-type experiences before death (within 6 hours)?

- (a) No (b) Yes

If your answer was yes, please describe briefly overleaf, if possible.

7. Have you ever had an OBE (out-of-body experience)? That is an experience in which "you" seem to leave the physical body, or to be located outside of it, and are able to see the world from a different location. (If in doubt, answer no.)
(a) No (b) Yes, once (c) Yes, occasionally (2 to 5 times)
(d) Yes, often (more than 5 times) (e) Can have one at will
If you have had such an experience, then please answer the questions on the next sheets. If not, you may stop here. Thank you for your help.

The following questions apply only to those who have had OBEs. If you have had just one such experience, then please underline the appropriate answer in each case. If necessary you may underline more than one answer. If you have had several such experiences, please write the number of experiences to which each answer applies. For example, if you have had three, of which one occurred while lying in bed and two while taking drugs, then write "1" by (b) and "2" by (f) for question 8.

8. Under what circumstances did the experience occur?
(a) Normal waking activity
(b) In bed (not asleep/asleep)
(c) Deliberate attempt
(d) After or during an accident
(e) After or during an operation
(f) When taking drugs (please specify if possible _____)
(g) Other _____
9. Did you notice any strange feelings immediately before the experience?
(a) Shaking or vibrating feeling
(b) Twisting or spiraling feeling
(c) Strange noises (please specify _____)
(d) Disorientation
(e) Unusually vivid imagery
(f) Other _____
10. How did the experience start? (Please give details wherever possible.)
(a) Just found yourself "out"
(b) Passed through a "gate," "window," or "doorway" of some sort
(c) Passed through a "passage" or "tunnel" of some sort
(d) Someone or something helped you
(e) Other _____

11. How long did the experience last?
- A few seconds only
 - Less than a minute
 - 1 to 5 minutes
 - 5 to 30 minutes
 - More than 30 minutes
 - Don't know
12. What was your state of consciousness like during the experience?
- Like normal waking consciousness
 - Like a drug experience (specify if possible _____)
 - Like dreaming
 - Other _____
13. How did the world you saw appear?
- Exactly like the normal physical world
 - Like a dream or fantasy world
 - Like another world you have never visited
 - Like the physical world but distorted or with errors
 - Like the physical world but with less detail
 - Other _____
14. How were the things you saw lit?
- It was dark
 - By daylight
 - By artificial light
 - By self-luminance
 - Other _____
- Did this lighting correspond to the physical situation (i.e., dark if it was nighttime and so on)?
- No
 - Yes
15. Where did you go during the experience?
- Nowhere
 - Traveled _____
16. How clear was your perception during the experience? For each of the senses mentioned below, please underline a number from 1 to 7. (1 corresponds to "totally clear and vivid, like a normal perception"; 7 corresponds to "very vague and dim.") If you had no vision, smell, or whatever, then please write "none."
- | | |
|-------------|---------------|
| (a) Vision | 1 2 3 4 5 6 7 |
| (b) Hearing | 1 2 3 4 5 6 7 |
| (c) Touch | 1 2 3 4 5 6 7 |
| (d) Smell | 1 2 3 4 5 6 7 |
| (e) Taste | 1 2 3 4 5 6 7 |

17. Did you see your physical body from outside? If so, what was it like?
(a) No, did not notice it
(b) No, tried to see it and failed
(c) Yes, it looked quite normal
(d) Yes, it was distorted in some way _____
(e) Other _____
18. Of what did "you" consist during the experience?
(a) Another body just like the physical
(b) Another, different, body
(c) Another shape _____
(d) A point in space
(e) Other _____
19. Did you see or hear anything that you could not have known about at the time? (For example, you might have heard the conversations of others somewhere else, or observed the locations or details of objects that you did not know about.)
(a) No
(b) Yes, but did not check whether details were correct
(c) Yes, checked details and they were correct
(d) Yes, checked details and they were not correct
20. Did you enjoy the experience?
(a) No (b) Yes
21. Was the experience frightening?
(a) No (b) Yes
22. Would you like to have another such experience?
(a) No (b) Yes
23. Did the experience change your views in any way?
(a) No (b) Yes
If your answer was yes, please give brief details _____
24. Did you know about these experiences before having one yourself?
(a) No (b) Yes, a little (c) Yes, had read books about them, etc.

THANK YOU VERY MUCH FOR COMPLETING THIS QUESTIONNAIRE.

You may be sure that all answers will be treated as entirely confidential.