People who have OBEs (OBEs) often comment that their first OBE occurred in childhood. Examples include Eileen Garren (who apparently used it to escape mental pain, "Crookall, 1961"); Keith (previously Blue) Harry (Harrar, 1980); Sylvan Muldoon (Muldoon and Carrington, 1968) and Michael Whiteman (1961) who had their first OBE at age 12, Alex Tanous who had his at five or six and Inigo Swann who claimed that he was only two and a half when his happened (see Irwin, 1985). Of course this raises problems of the accuracy of memory. They may have misremembered the experience or the age at which it occurred.

The question of whether, and how often, OBEs occur in childhood is not just of anecdotal but also theoretical interest. If the OBE can occur to anyone regardless of age then we should expect a gradually increasing incidence with age. It requires some level of cognitive sophistication (as suggested for example in the psychological theories of Blackburne, 1984a or Irwin, 1983) then it should appear only at the age at which such skill is attained. Alternatively if it occurs because of lack or breakdown of cognitive skills then it might be expected to be prevalent especially in the very young and very old (as well, of coarse, as in the sick and dying or nearly dying).

There are several cultures in which the OBE is commonly believed to be more common among the very old and very young (Sheils, 1978). There is also a long tradition that young children are especially gifted psychically (e.g. Spinhelli, 1978; Blackburne, 1980, Ehrenwald, 1971). Specifically Spinhelli has suggested that psychic ability drops off dramatically once children reach the stage of concrete operations at about 8 years of age. If OBEs are in any way related to psychic ability then this might imply more OBEs among the under eights. This is the precise opposite of the prediction of the psychological theories.

So how are OBEs related to age? Their incidence in adults is well known. In several surveys of various groups it has been found to lie between eight and 25 per cent (Blackmore, 1984a, Green, 1966, Haraldsson, 1985, Palmer, 1979). However, none of these surveys included children as respondents. Correlations between age and reporting OBEs were generally not found but in most surveys the distribution of the ages of respondents was not taken into consideration when looking at age correlations. Some did include questions about the age of respondents' first OBE. Irwin (1985) provides data for 39 respondents whose first OBE occurred under age 18. They are roughly equally distributed over the age of 5. Before that there is only one but, as Irwin points out, this could reflect either a lack of OBEs before that age or he be a result of the typical amnesia for events of that age.

It is clear that if we want to know more about OBEs in young children, and avoid these problems, we need to ask the young children themselves. Recent psychological theories of the OBE (Blackmore, 1984a, Irwin, 1985) make explicit a connection between imagers skills and OBEs. In particular Blackmore predicted that OBEs should be more likely to recall dreams and waking events from an observer perspective (as though above the head) than
from the normal (behind the eyes) perspective. These perspectives are both used in recall and imagery (Nigro and Neisser, 1983). Both Blackmore (1987) and Irwin (1986) confirmed this for dreams but not for waking events.

In this study young children were interviewed about possible OBEs and asked to recall and visualise a number of scenes to determine the perspective they used. The intention was to find out the ages at which children reported OBEs, to study the perspectives used in their memory images and to compare these for OBEs and non-OBEs.

METHOD

Subjects were 52 children from a school in the St Phillips area of Bristol; half of each sex and aged between 5 and 12 years (mean 8 years 4 months). They came from a variety of ethnic backgrounds. To make interviewing as pleasant and relaxing as possible for the children, the second author spent much time pleasuring to know them. For three to four months he helped with lessons, games and sports in the school so that all the children knew him before the interviews began.

Interviews were structured and tape recorded. Some questions were always phrased the same way and their order randomised. To avoid the obvious problems of children not understanding what an OBE is they were asked instead about flying or flying: 'Can boys and girls float in the air?' and 'Have you ever floated in the air?'. They were also asked to close their eyes and recall their part in the school Charlies play and their own Charlies dinner. They were then asked whether they could see themselves in this memory along with everyone else (observer perspective) or whether they could see everyone else but not themselves (field perspective).

RESULTS

Only one of the 52 children reported an OBE (see Table 1), this is, of course, a dramatically lower incidence than ever found in surveys of adults. This could mean that OBEs are far less common in childhood than previously thought. However, it could be argued that the question did not fairly tap the OBEs children had. This possibility may be reduced by the fact that the interview knew the children so they were less likely to be shy or inhibited and the one child who did report an OBE responded immediately to the idea of floating and described the experience without showing any fear of doing so. Interestingly this child was new, as were almost all the children, that children could not float in the air. Nevertheless he said he had done so.

This boy was eleven years old and the experience occurred when he was nine. He was asked 'Have you ever floated in the air?' and answered as follows: 'Only when I was really bad'. Could you tell me about it? 'I was lying down on the bed and I felt as though I was flying around the sky'. 'What did it feel like? 'It was just like off the bed'. 'Did you have your eyes open? 'Yes'. 'What could you see?'
The results showed a very low incidence of OBEs in the children interviewed. There were some remaining problems with this research, in particular the comparatively small sample and the uncertainty over whether any children could have had OBEs and still not respond to this question. However, by asking young children themselves, rather than relying on the memory of childhood experiences by adults, we feel that a far more accurate impression of the incidence of OBEs in children has been obtained. This is two per cent and therefore very much lower than any figure ever obtained for adults.

This raises the question: if this incidence is anything like accurate, why do so many adults apparently recall OBEs from childhood? One possibility is that they are recalling the observer perspective memory images which they formed as children and only later interpreted as having been experienced that way—as OBEs. Obviously more research is needed to test this possibility.

Several aims of this study proved impossible, such as comparing OBEs with age or stage of cognitive development and with perspectives used in imagery. In the light of this very low incidence it is obvious that very much larger samples are needed.
Table 1

<table>
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<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Don't know</th>
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<td>Can boys and girls float in the air?</td>
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<td>51</td>
<td>1</td>
</tr>
<tr>
<td>Have you ever floated in the air?</td>
<td>51</td>
<td></td>
<td>1</td>
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</tbody>
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REFERENCES