Dream Manifestations: A Paranormal Experience?

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Abstract: The current research investigated the life-after-death (LAD) experience of a 30-year-old Australian female. The experient encountered somatosensory and auditory contact from her deceased father who woke her from the dream she was having of him. Analysis considered personality and social influences. and potential psychological explanations from Freudian, Gestalt, and Adlerian and Jungian perspectives. The experience was further evaluated theoretically with geophysical, biological and neurochemical determinants, all of which claim differing degrees of scientific support. Although a genuine LAD experience could not be refuted, the most scientifically plausible explanation identified Rapid Eye Movement (REM) extending into hypnopompic stages of sleep due to a delayed REM-off condition. But, other factors were identified as influencing the quality, timing and duration of REM and, thus, a definitive causal explanation remained elusive.

Keywords: apparitions, dreams, life-after-death, sleep paralysis, REM.

INTRODUCTION

Almost all cultures, both past and present, have reported stories of ghosts and apparitions. An apparition is encountered as a perceptual-like experience relating to a person or animal that is not physically present, and communicates without physical means, mostly from close proximity within three metres (Irwin, 2004). Apparitional experiences are also usually restricted to one or two sensory modalities with over half in one modality only. However, one case of a female experient reported in 1980 described an apparition having her father's looks, voice and smell, with the bed sagging when he sat next to her. Although most apparitional experiences are visual, at least a third have an auditory component, but experiences may occur in any modality. Some experiences are a-sensory, which are often reflected by reports of a "presence" being sensed intuitively (Irwin, 2004). Further, most experiences occur in familiar surroundings such as the family home, with many occurring indoors, and usually when the experient is in an

inactive state such as resting or sleeping (Irwin, 2004; Jinks, 2006).

According to Irwin (2004), a disembodied consciousness or some element of human personality may survive post-mortem and manifest perceptually, at least for some time after death. He described this as the survival hypothesis. Post-mortem apparitional experiences typically involve persons that have been dead for at least twelve hours, although other apparitional figures may relate to those still living. However, apparitional experiences are often connected with an identifiable person or animal and may, therefore, be distinguished from hallucinations, which are typically anonymous or known to be non-existent (Irwin, 2004). But this has not been a helpful distinction.

Irwin (2004) claimed that conceptualising apparitions as either objective or hallucinatory has been a dominant issue for parapsychologists over the last century, but that focus has proven discouragingly inconclusive. Traditionally, guidelines for paranormal research also require an apparitional figure to communicate information of which the experient might have been unaware before it could be categorised as something other than hallucinatory. However, according to Irwin, a focus on the experience or phenomenological aspects, rather than the apparition itself, may better facilitate research of such phenomena. Objective and hallucinatory categories need not necessarily be mutually contradictory, but can be complimentary aspects of an apparitional experience.

THE LIFE AFTER DEATH CASE

The present research entails the investigation and analysis of a 30year-old Australian female's life after death (LAD) experience during which her deceased father woke her from a dream. The following paper will detail the event, describe the experient and give an account of her evaluation of the event and, finally, propose alternative theoretical explanations of her experience. Although the experient considered her dream and subsequent visit by her father to be a LAD experience, not all such dreams or experiences are paranormal.

The experience occurred in 1996 and involved the experient claiming her deceased father, who was speaking to her and firmly grasping her shoulder, woke her from the dream she was having about him. Her father had passed away approximately ten years prior. The experience occurred around four or five o'clock in the morning and, according to the experient, was more tactile and auditory than visual. She was lying face down on her stomach and claimed she felt paralysed, unable to physically move and turn around. Tears were streaming down her cheeks. She said the experience was neither fearful nor did she sense any impending malevolence. Rather, she felt a profound sense of sadness but also peace and relief. While she had experienced other more benign dreams involving her deceased father, this experience was more than a dream and very different for her. Her apparitional and LAD encounter emerged from, and extended beyond, the dream. However, she has never reported previous or further experiences of this nature.

The author, who was lying next to her at the time, witnessed the spontaneity and strong emotionality associated with her experience and, although her experience was entirely subjective, it seems difficult to suggest confabulation. Some people manufacture details in memory consistent with beliefs such as LAD. For example, when features of a dead person's likeness or personality have not been fully grasped (such as only hearing and feeling but not seeing her father), an experient may subliminally supply details to round out a description of the revenant from their own cognitive associations (Maher, 1999). If an experience is especially disturbing by its strangeness (e.g., never happened before), the experient feels obliged, albeit unconsciously, to clothe the story with a degree of familiarity before it enters consciousness. However, she did not attempt to provide any visual or other sensory descriptors. The memory of the dream experience remains intensely vivid, because her description of the event now appears as accurate as that given when it actually occurred, at least to this researcher's recollection. The more diversely a memory is encoded (e.g., with auditory and somatosensory, but particularly emotional inputs as in the present case), then the faster and more accurately it will be recalled. This effect is heightened for females who might be considered more extroverted (Canli et al., 2001).

Personality

The present experient's personality could be described as reflecting strong interpersonal sensitivity and sincerity. She is very intuitive of others with a natural ability to empathise, something Kosslyn and Rosenberg (2004) describe as high emotional intelligence. Nevertheless, while also being acutely aware of her own emotions, she is somewhat guarded in overtly expressing them. She would not be regarded as introverted, however, because she is generally outgoing and enjoys the company of others. But, personality traits are intricately interwoven with experience, which suggests that investigators of paranormal phenomena need to gather as much information about the individual as the event (Kennedy, 2005).

Although most demographic variables are poor predictors of apparitional encounters, personality traits such as extraversion, neuroticism and defensiveness have been found to correlate significantly with psi and

other paranormal experiences (Irwin, 1986, 2004), and traits like suggestibility may play as much a role in determining paranormal experiences as they do paranormal beliefs. Some people, particularly believers in the paranormal, display an uncritical acceptance of propositions-for example, spooky stories told by others. Since they are more accepting and trusting, what they have been told will reinforce an already-strong belief system (Hergovich, 2003). Research using Jung's personality typology with its separate dimensions of introversion/extroversion, thinking/feeling and intuition/sensation, also found slightly extroverted, high feeling (less thinking) and high intuition (less sensation) types were more likely to be paranormal believers (Fox & Williams, 2000).

Psychosocial Influences

Other researchers have also discussed the importance of considering a subject's perceptual set or prior beliefs and expectations when investigating paranormal or unusual experiences (Sherwood, 2002; Wiseman & Morris, 1995). These have often been shown to further influence subsequent interpretations of paranormal events. In the case of the present experient, she is not devoutly religious, but has for many years had some beliefs regarding LAD. During her late-teenage and early adult life, her social circle was interested in séance and tarot readings. She has been intrigued by and interested in contemporary media portrayals of LAD (e.g., the television series "Medium" and "Ghost Whisperer"). Although these productions were aired well after her experience and, therefore, could not in themselves influence her belief that her father contacted her in the dream, television has promoted self-appointed mediums such as Dorothy Stokes as far back as the 1970s. Her more contemporary counterpart, John Edward, enjoys the popularity associated with the LAD phenomenon that has become increasingly publicised. Such prominence in the popular media no doubt colours individual perceptions, but can also entrench greater uncritical acceptance of paranormal phenomena into the broader social fabric to become part of the cultural mindset. According to the psychosocial hypothesis, social stories often assist a psychological requirement (Irwin, 2004; Jinks, 2006), and many experients report stories that are a product of cultural and social construction rather than genuine direct experience. People learn themes from the folklore of their surrounding culture.

However, social influences could be minimised by looking for aspects that do not conform to popular stereotypes (Irwin, 2004). Indeed, the present experient did not describe her encounter using the commonly accepted visual and behavioural characteristics often attributed to apparitions, such as floating, or passing through objects. Further, she identified a clear purpose for her dream experience as an important visit by her father, who said he contacted her from the dream to assure her he was at peace and that his love for her was enduring. The message she perceived was that she now had her own family who also loved her and needed her attention and devotion. She had felt guilty for not being with her father when he passed away. In his final days he was at home receiving palliative care, but she was away when receiving the sad news. She was very upset at not being able to say goodbye, feeling a prolonged sense of unfinished business perhaps until he contacted her in the dream. When asked why she believed she had this dream, she responded that this was a point in her life where she just felt she needed his reassurance.

PSYCHOANALYTICAL PERSPECTIVES

Such needs and emotions have long been a focus in psychoanalytic explanations of dreams. Freud himself dreamt of a seemingly innocuous incident following his father's funeral (Monte & Sollod, 2003). He dreamt of a notice at a railway station requesting to "close the eyes". The funeral Freud provided for his father was rather low-key in line with his father's wishes. Some family members supported his wishes, but others believed the family would be shamed by such an austere event. Freud's analysis was that this notice reflected his duty to "close his father's eyes" upon his death and was manifested due to self-reproach. He perceived his handling of the funeral as failing his filial duty and suspected the dream was connected with even deeper feelings of guilt related to his somewhat ambivalent feelings toward his father. Freud struggled to deal with the associated emotions and was still experiencing the painful reverberations of his experience some eight years later (Monte & Sollod, 2003).

Perhaps for the experient in this study, however, her inability to express how she felt toward her father and guilt associated with not being able to say goodbye may have been carried by her as unfinished business, even ten years after his passing. Her emotional reaction to the visit by her father elicited a profound sense of sadness, but also relief and closure.

From another perspective, the German term Gestalt roughly translates as "wholeness" or "form" and is more often used in a sensory capacity to explain visual concepts of figure and ground (Goldstein, 2002). Gestalt psychology, however, takes a holistic approach toward the individual that requires completed Gestalten. It is only when a Gestalt is completed and subsequently destructed that the individual can move on to the next Gestalt. In a sense, incomplete Gestalten represent unfinished business. If a Gestalt is not completed it hinders progress for the individual

and draws on psychic energy that cannot be freed up for more adaptive purposes (Patterson, 1986). In Freudian terms, diversion of mental energy acts to divert conscious attention, keeping material unconsciously repressed. But this material is only latent until manifesting as a dream.

Freud referred to dreams as the "royal road to the unconscious" but Gestalt psychologists saw the dream as the "royal road to integration"—an existential message that contains, in some form, an unfinished unassimilated situation. Dreams were seen as possibly the most spontaneous expression of the human being, a message of yourself to yourself; to whatever part of you may be listening (Patterson, 1986). Dreams allow the individual to identify with alienated parts of the self that have been avoided by whatever means, and integrate them. The experient's dream thus allowed her to destruct an uncompleted Gestalt by dealing with her father's passing, and move on.

Alfred Adler's Individual Psychology takes another, somewhat different, view of dreams. They are not, as Freud often proposed, to be interpreted as disguised unacceptable wishes with defensively obscure meanings. Instead, they represent attempts to resolve problems that dreamers had not mastered with their conscious powers of reason (Adler, 1979). The purpose of the dream, according to Adler, is related to the mood it evokes. Thus, a dream is an attempt by the dreamer's unconscious mind to create an emotional state that, upon waking, would enable the dreamer to take an action they had been reluctant to attempt. New energy may be provided that promotes a new direction in life. One could see in the present study how the strong emotionality experienced was perhaps cathartic for the experient, providing closure or a reappraisal of her life and allowed her to move on. She may have been reluctant in the past to acknowledge the feelings she was carrying in relation to her father and his passing.

Continuing thematically with the unconscious, Jung identified the important process of "individuation" where the unconscious is harmonised with the ego. The purpose of an individual's life was the full development of all aspects of the psyche into a unique and harmonious whole, with the Self actually the reconciler of opposites. Some individuals find their purpose in religion and strive for wholeness by bringing the spiritual and material opposites into balance (Monte & Sollod, 2003).

Jung's self-analysis from 1913-1917 of the dreams, visions and nightmares that flooded his consciousness strongly convinced him that a higher power was responsible for at least some content of mental life (Jung, 1961). He, therefore, postulated a personal unconscious similar to that conceptualised by Freud, and a collective unconscious that transcends the personal experiences of the individual. Such experiences were often recognised in the form of archetypes. Because of their spiritual connotations, archetypes often appear spirit-like in dreams or even as ghostly apparitions (Jinks, 2006).

The Self is such an archetype and, although it could be expressed in many different forms, Jung claimed the perfect mythological symbol of the Self was Christ. Yet, even this divine figure is a composite of opposites, Christ/Antichrist, God/Satan, and Light/Dark. Jung claimed that people needed a religion of some form. Without God (the Holy Father) or a symbolic equivalent of God to which one could aspire, such as an ideal or even a God-like political figure, people were forever condemned to the incompleteness of their own existence. Whatever God is, according to Jung, was mostly irrelevant. It was more important to preserve a sense of the spiritual outside the traditional formulations and institutions of religion (Monte & Sollod, 2003). For the present experient, a Jungian interpretation might regard the visit by her father as a representation of the archetype of "Father" as she has come to know it in its personal and collective form. Its purpose was to reconcile the incompleteness of her psyche by bringing the opposites of spiritual and material into harmony. She claimed she held few, if any, religious beliefs but her dream may have served to dispel any doubts she had toward spirituality and strengthened her belief in the existence of something powerful beyond this world and perhaps LAD.

Alternatively, it could be suggested that the experient herself contacted her father during a dream-like state through the use of ESP. Her unconscious needs may have been conducive to the expression of an ESP ability she was unaware she had. According to Irwin (2004), the apparitional experient, rather than the referent person, could be the instigator of the experience by reaching out extrasensorily to that person. Irwin reported a potential psychodymamic factor after it was found that those not repressing their dreams were significantly more open to ESP.

While some of these explanations lack consensus and some critics consider them highly speculative, they are not the only ones. Other explanations that address biological, neurochemical, and even geophysical aspects also claim differing degrees of scientific support.

BIOLOGICAL CONDITIONS

Persinger and Makarec (1987) allege that microseizures of the Temporal Lobe resembling mini epileptic seizures, referred to as Temporal Lobe Epilepsy (TLE), are common in anybody at anytime, particularly in sleep, but only manifest as subjective experience when a number of them combine to create a seizure focus. Such *petit mal* type seizures are non convulsive and show no outward signs. Because TLE occurs without pathology in "normal" populations it is often labelled Temporal Lobe Lability (TLL) but reflects similar symptoms such as the "sense of presence" reported by the experient. The associated hippocampus is

prominent in encoding and retrieval of memory, but is prone to "kindling". This means that in labile individuals, seizures can occur when these neurons become abnormally active and fire synchronously. This activity spreads and builds to other brain areas such as the motor cortex controlling skeletal muscles that result in convulsive or *grand mal* seizures but may focus instead on the temporal lobes and underlying limbic systems¹ or even the somatosensory cortex.² This may explain the emotionality and auditory and tactile sensations connected with the experient's dream.

In most people, the left temporal lobe dominates conscious processes such as language, sense of self and coherence. But sometimes, according to Persinger (2001), intrusion by the right-side equivalent of the sense of self, normally prevented by reciprocal inhibition via corpus callosum and anterior commissure, is brought to conscious awareness, manifesting as a sense of presence. This might be some explanation for what the experient sensed as her father. However, occasional intrusion of activity also occurs normally due to transient intercalations³ in dream sleep or with the emotional stress accompanying bereavement (Persinger & Makarec, 1987). Mental diplopia⁴ may then result where, rather than fusing a thought or image, a presence is experienced as something external or separate (hand on shoulder) instead of part of the dream. Greater interhemispheric coherence fosters transliminality⁵ where right-side unconscious material, sometimes charged with specific emotions, manifests consciously. Coincidentally, hemispheric lateralization⁶ of emotions generally shows positive emotionality associated with the left-side and negative emotionality, such as

¹ A set of forebrain areas traditionally regarded as critical for emotion and memory, which form a border around the brain stem, including the olfactory bulb, hypothalamus, hippocampus, amygdala, cingulate gyrus of the cerebral cortex, and several other smaller structures.

 $^{^2}$ The somatosensory cortex processes inputs from a sensory network on the surface of the body. It is more than one sense, monitoring discriminative touch, deep pressure, cold and warmth, pain, itch, tickle, and the position and movement of joints.

 $^{^3}$ The usual hyperactivity of the left hemisphere inhibits a normally hypoactive right hemisphere, but this inhibition reduces when asleep or stressed. A greater balance and permeability between hemispheres may then occur.

⁴ Sometimes conceptualized as a feeling of being in two places at once. In the present experient's case, this might be awake and in a dream at the same time.

 $^{^5}$ Transliminality (Thalbourne & Delin, 1994) refers to the extent to which unconscious material such as imagery or ideas, or anything else below the threshold of awareness, can cross over into conscious thought. It is a trait possessed by all people but to different degrees along a continuum.

 $^{^{6}}$ Lateralization is the division of specialised labour between the two brain hemispheres. In the case of emotions, their experience, expression and recognition in others is processed in specific sides of the brain.

the sadness reported by the experient, with the right side (Kalat, 2004; Canli, 1999).

GEOPHYSICAL INFLUENCES

Moreover, Persinger (2001) proposed Tectonic Strain Theory as a further explanation of TLL symptoms. He argued that the earth's normally static geomagnetic field can fluctuate quite markedly in a relatively short time and that induced electrical spikes may interfere with the brain's natural electrical flow to increase seizures and disrupt the functional integrity of synaptic transmission and the biological systems responsible for neurotransmitter release. The hormone melatonin, which induces sleepiness, for example, is decreased.

Persinger argues that there is a greater likelihood of this occurring around 2.00 AM to 4.00 AM at specific sleep cycles, particularly when normal sleeping patterns are also perhaps disrupted by bereavement or stress. For some people this latter part of the sleep cycle may coincide with a usual hypnopompic⁷ stage and bring TLL symptoms to awareness. The dream experience under investigation occurred around this time. Because greater permeability between conscious and unconscious occurs at hypnagogic⁸ and hypnopompic sleep stages, it is possible to hear one's name called or experience tactile sensations when just falling asleep or awakening (Sherwood, 2002). This is consistent with what the experient described. However, it is unlikely geophysical effects are a causal factor for the experient's dream, particularly its content; rather such effects might provide the condition for a dream state in which the experient, who was perhaps already predisposed to dream of her father, could experience what she reported. Indeed, she claimed that her encounter occurred at a time when she felt she needed her father's reassurance.

SLEEP CHARACTERISTICS

Different stages of sleep and their cyclical nature are also characterised by different levels of cortical activity reflected as electrical waveforms and detected with EEG analyses. Sleep generally cycles through Stage 1, distinguished as medium frequency and low amplitude waves,

⁷ The transition point between sleep and waking up.

⁸ The transition point between wakefulness and falling asleep.

progressing to Stage 4, often referred to as deep sleep, with slow waves of high amplitude and low frequency. Progress then reverses back to Stage 1 and Stage 1-REM, or dream sleep. This cycle takes about 90-120 minutes and repeats throughout the sleep period. In eight hours of sleep, the cycle occurs about five times, but REM periods tend to increase as sleep duration increases (Franken, 2002).

Periods of REM are characterised by rapid eve movements, increases in blood flow by up to 40%, increased metabolism and spontaneous firing of neurons beyond the waking level. When people are awakened from REM they often report vivid dreams. Paralysed voluntary movement and muscle atonia⁹ also occurs when REM inhibits the motor cortex bv hyperpolarizing¹⁰ motor neurons, usually referred to as sleep paralysis (SP), although opening the eyes is still possible as a normal function of REM. Autonomic functions such as breathing, heart rate and body temperature, controlled in the hindbrain by the medulla, remain unaffected (Franken, 2002: Kalat, 2004). However, since apparitions communicate by nonphysical means, this could explain how the experient felt her father's hand on her shoulder when sensory input is also normally shut down in REM. Her unsuccessful attempts to, perhaps, physically react to her experience, such as turning her head to look or get up, would promote feelings of paralysis when no sensory or motor feedback was available. Episodes of SP occur in about 30% of the population with 75% of episodes being accompanied by hallucinatory sensations in at least one modality (McNally & Clancy, 2005). Dreams can, however, occur at other sleep stages without paralysis. This is sometimes expressed as sleepwalking, but the sleeper generally does not recall these incidents. Indeed sleepwalkers are often confused and disoriented when woken (American Psychiatric Association, 2000). Equally, sleep in stages other than REM does not show the hyperactive neuronal activity associated with REM dreaming.

Sleep paralysis may account scientifically for many paranormal encounters, but can be problematic because many investigations rely heavily on descriptive vignettes or leading questions. Many contain "core aspects" of the SP state, for example, "have you ever awakened in the morning and found yourself unable to move" (Ohayon, Zulley, Guilleminault, & Smirne, 1999; Spanos, McNulty, DuBreuil, Piries, & Burgess, 1995). Participants can readily respond affirmatively to having that experience and then add further supportive information like sleeping

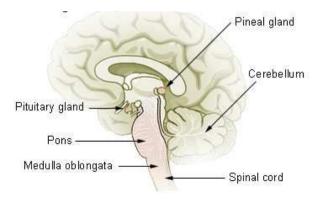
 $^{^9}$ Lacking the state of normal muscular tension or tone, which is maintained by the prioceptive reflex for keeping the body in a general state of preparedness.

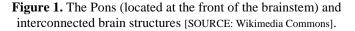
 $^{^{10}}$ An increase or exaggeration of the usual negative charge within a cell. For an action potential to occur (firing of the neuron), a much larger depolarization is then needed to reach that neuron's threshold.

position, feeling pressure on the body, hallucinations and sense of presence. However, the present experient reported symptoms of paralysis without coercion or prior exposure to such information. Equally, an actual LAD encounter should not be disregarded; particularly when such encounters tied to SP cannot be reliably induced experimentally. Although a relationship may exist between paranormal experiences and SP, it certainly cannot be assumed one causes the other.

Sleep and Dream Activation

Another brain area influencing sleep and dreaming is the pons (see Figure 1) and, according to the Activation Synthesis Hypothesis, dreams begin with periodic bursts of spontaneous activity in this area (Hobson, Pace-Schott & Stickgold, 2000). Dreaming associates with high amplitude electrical potentials known as PGOs (pons-geniculate-occipital) that partly activate many, but not all, parts of the cortex. Primary areas are shut down, unable to compete with self-generated stimulation, and hallucinations result. The cortex tries to combine this haphazard input with whatever activity was already occurring and synthesise a story that appears coherent. If the present experient was somewhat preoccupied with thoughts of her father before sleep, this could have provided both the context, and much of the content of her dream. Pons input also activates the amygdalae in the temporal lobes enhancing the emotional content of dreams. However, the inactivity of the prefrontal cortex during PGO inhibits memory, promoting a tendency to forget dreams on awakening, but if REM extends into consciousness, even briefly, dreams appear very real and are not forgotten.





The pons has also been identified as containing cells that facilitate REM-on and REM-off conditions (Jinks, 2006). The timing of these conditions is critical in maintaining normal sleep patterns. At hypnagogic stages, if REM-on cells are hyperactive and REM-off cells hypoactive, dreams may occur too early, still within awareness. Alternatively, at the hypnopompic stage, dreams may continue into consciousness if the same REM conditions are maintained. The experient may have conceivably endured a delayed hypnopompic REM-off condition. Since REM occurs in conjunction with Stage 1 sleep, crossing the awareness threshold might be easier.

Interestingly, however, Sherwood (2002) acknowledged that while hypnopompic imagery is usually regarded as persistence of dream imagery into wakefulness, images are not always dream or REM continuation because such images can begin after waking. Indeed, many LAD experiences are reported beyond the context of sleep or dreams, but it would seem unlikely for REM characteristics of paralysis to occur.

NEUROCHEMISTRY

Hobson (1994) provided a neurochemical explanation of the cyclical nature of REM and NREM sleep based on two main chemical systems, the aminergic¹¹ and cholinergic¹² systems. Upon falling asleep the brain enters NREM, characterised by cerebral cortex inactivity and suppression of the aminergic system. Levels of monoamine transmitters, norepinephrine and serotonin are reduced. Higher amine levels when awake help rational decision-making and inhibit the cholinergic system but the reverse occurs when sleeping. Left unchecked by the aminergic system, the cholinergic system activates the visual, auditory and somatosensory cortices in REM. Without rational control of images, rules of time can be violated and additional sensory experiences tend to make dreams appear even more bizarre and hallucinatory. Hobson claims the cyclical nature of sleep occurs because these two systems operate in a complimentary fashion. It is conceivable, therefore, that neurotransmitter imbalances could affect sleep quality and dream experiences and provide some explanation for what the experient reported.

¹¹ The aminergic system comprises the neurons and neural pathways that synthesize and release non-acidic monoamine transmitters such as serotonin, dopamine, norepinephrine and epinephrine.

¹² The cholinergic system comprises the neurons and neural pathways which, when stimulated, release acetylcholine, or for which acetylcholine is the neurotransmitter.

Sleep deprivation is also linked to paranormal experiences such as LAD encounters (Shermer, 2005). The same executive control regions in the prefrontal and parietal cortices are deactivated when one is sleep-deprived as when naturally drifting off to sleep (Fosse, Stickgold & Hobson, 2004). However, experients might argue that they were not sleep-deprived before their LAD encounter. Indeed, the present experient claimed her sleeping patterns were normal both before and after the event. Neurochemistry provides a logical explanation for the conditions, which are conducive for the experient's dream encounter, but, again, cannot address its qualitative aspects.

CONCLUSION

The experient in this study provided a lucid and coherent account of her unique dream and life-after-death experience. The apparitional encounter she described was clearly recognised as her father who had passed away approximately ten years prior, and was experienced indoors in familiar surroundings. Contact occurred in two sensory modalities, elicited a significant emotional reaction consistent with the feelings she held toward him, and its perceived purpose was to provide her with important information. According to the criteria mentioned by Irwin (2004), and the survival hypothesis, this experience could be considered a more genuine life-after-death encounter. Further, a potential for complementarity has also been suggested, where a discarnate entity might intentionally help to bring about some of the aims described by psychoanalytic theories.

Similar complementarity could also occur when specific physical, geophysical, neurological or neurochemical factors prevail which a discarnate entity might use to facilitate a "visit" to the experient (L. Storm, personal communication, May 6, 2009). However, the conventional theoretical explanations that have been proposed might suffice in undermining such experiences, with perhaps the most scientifically plausible explanation identifying REM extending into hypnopompic stages of sleep due to a delayed REM-off condition. Tactile and auditory sensations, emotionality and SP are clearly symptomatic of such conditions. But, other factors have been identified as influencing the quality, timing and duration of REM and, thus, a definitive causal explanation remains elusive.

REFERENCES

Adler, A. (1979). Superiority and social interest: A collection of later writings (Edited by H. L. & R. R. Ansbacher). New York: Norton.

- American Psychiatric Association. (2000). *Diagnostic and statistical* manual of mental disorders: Text revision. (4th ed.). Arlington, VA: APA.
- Canli, T. (1999). Hemispheric asymmetry in the experience of emotion: A perspective from functional imaging. *Neuroscientist*, *5*, 201-207.
- Canli, T., Zhao, Z., Desmond, J., Kang, E., Gross, J., & Gabrieli, J. (2001). An fMRI study of personality influences on brain reactivity to emotional stimuli. *Behavioural Neuroscience*, 115, 33-42.
- Fosse, R., Stickgold, R., & Hobson, A, (2004). Thinking and hallucinating: Reciprocal changes in sleep. *Psychophysiology*, *41*, 298-305.
- Fox, J. & Williams, C. (2000). Paranormal belief, experience, and the Keirsey Temperament Sorter. *Psychological Reports*, 86(3, PT2), 1104-1106.
- Franken, R. E. (2002). *Human motivation* (5th ed.). Belmont, CA: Wadsworth.
- Goldstein, E. B. (2002). *Sensation and perception* (6th ed.). Pacific Grove, CA: Wadsworth.
- Hergovich, A. (2003). Field dependence, suggestibility and belief in paranormal phenomena. *Personality and Individual Differences*, 34(2), 195-209.
- Hobson, A. J. (1994). *The chemistry of conscious states*. Boston: Little Brown.
- Hobson, J. A., Pace-Schott, E. F., & Stickgold, R. (2000). Dreaming and the brain: Toward a cognitive neuroscience of conscious states. *Behavioral and Brain Sciences*, 23, 793-1121.
- Irwin, H. (1986). Personality and psi performance: Directions of current research. *Parapsychology Review*, 17(5), 1-4.
- Irwin, H. J. (2004). An introduction to parapsychology (4th ed.). North Carolina, USA: McFarland.
- Jinks, T. (2006). The psychology of superstitious belief and paranormal experience: *Resource book*. Penrith, Australia: University of Western Sydney.
- Jung, C. G. (1961). *Memories, dreams, reflections* (A. Jaffe, Ed.). New York: Pantheon.
- Kalat, J. W. (2004). *Biological psychology* (8th ed.). Belmont, CA: Thomson Wadsworth.
- Kennedy, J. E. (2005). Personality and motivations to believe, misbelieve and disbelieve in paranormal phenomena. *Journal of Parapsychology*, *69*, 263-292.
- Kosslyn, S. M., & Rosenberg, R. S. (2004). *Psychology: The brain, the person, the world* (2nd ed.). Boston, MA: Allyn and Bacon.

- Maher, M. C. (1999). Riding the waves in search of particles: A modern study of ghosts and apparitions. *The Journal of Parapsychology*, 63, 47-80.
- McNally, R. J., & Clancy, S. A. (2005). Sleep paralysis, sexual abuse and space alien abduction. *Transcultural Psychiatry*, 42, 113-112.
- Monte, C. F., & Sollod, R. N. (2003). *Beneath the mask: An introduction to theories of personality* (7th ed.). New Jersey: Wiley.
- Ohayon, M. M., Zulley, J., Guilleminault, C., & Smirne, S. (1999). Prevalence and pathologic associations of sleep paralysis in the general population. *Neurology*, 52, 1194-1200.
- Patterson, C. H. (1986). Theories of counselling and psychotherapy: Gestalt therapy. New York: Harper and Row.
- Persinger, M. A. (2001). The neuropsychiatry of paranormal experiences. *Journal of Neuropsychiatry and Clinical Neurosciences*, 13, 515-523.
- Persinger, M. A., & Makarec, K. (1987). Temporal lobe epileptic signs and correlative behaviours displayed by normal populations. *Journal of General Psychology*, 114, 179-195.

Shermer, M. (2005). Abducted. Scientific American, 292, 34-35.

- Sherwood, S. J. (2002). Relationship between the hypnagogic/hypnopompic state and reports of anomalous experiences. *Journal of Parapsychology*, 66, 127-150.
- Spanos, N. P., McNulty, S. A., DuBreuil, S. C., Piries, M., & Burgess, M. F. (1995). The frequency and correlates of sleep paralysis in a university sample. *Journal of Research in Personality*, 29, 285-305.
- Thalbourne, M. A., & Delin, P. S. (1994). A common thread underlying belief in the paranormal, creative personality, mystical experience and psychopathology. *Journal of Parapsychology*, *58*, 3-38.
- Wiseman, R., & Morris, R. (1995). Recalling pseudo-psychic demonstrations. *British Journal of Psychology*, 86, 113-126.

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