

A COUNSELING APPROACH TO PARAPSYCHOLOGICAL EXPERIENCE*

Arthur Hastings
Menlo Park, California

In the light of increasing public, professional and scientific interest in parapsychology, counselors, psychologists and other professionals might expect to receive more inquiries from persons who have had apparent psychic experiences. These people may seek assistance in understanding such experiences or in coping with their reactions to them. In fact, therapists, clients, or anyone may have an experience of this nature—an apparent premonition, a dream that gives formerly unknown information, an out-of-the-body experience, or physical disturbances in a house with no apparent physical cause. These and similar occurrences may cause fear, confusion, and emotional disturbances which lead people to seek counseling.

The focus of this counseling, given therapeutic purposes, rather than research interests only, should be to assist the person to a state of balance, integration, and judgment relating to apparent or genuine parapsychological experience.

*the
therapeutic
purposes
of counseling*

Some facility in approaching this kind of counseling will be useful to transpersonal psychologists because psychic abilities are associated by many people with spiritual paths, and they often occur in transcendent states or altered states of consciousness outside the usual ego personality, such as dreams or reverie. However, any person working with

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others through therapy, counseling, education, or other human services will probably recognize some of the situations that this paper describes, as well as understand the difficulties that people encounter when they have such experience.

Recent surveys (Haraldsson, *et al.*, 1977; Palmer, 1979) indicate that more than half of the general population say they have had a psychic experience. The case study literature reports on these kinds of experiences and confirms that there are often emotional reactions or psychological problems associated with these experiences. A counselor who has had knowledge of psi processes ("psi" is a general term used by parapsychologists to include both extrasensory perception and psychokinesis) and therapeutic skills, can fill an important need in helping persons relate to psi experiences in balanced ways.

REALITY OF PSI

*research
evidence,
clinical
interest
and
the reality
of psi*

For parapsychological counseling to be meaningful, there must be an initial presumption of the reality of psi on the part of the counselor. While any individual case is open to determination, the existence of parapsychological abilities and phenomena is assumed, at least so far as research evidence and clinical studies imply. This is a different stance from the claim of "scientific" caution that many researchers make, though it is in line with the frequent calls to go beyond proving existence of psi and move to the investigation of its characteristics. In contrast to researchers, clinicians interested in parapsychology have been more ready to accept it as a real part of the personality processes (Ehrenwald, 1966; Eisenbud, 1970). In doing so they have been able to show its relation to motivation, emotions, interpersonal relations and the therapeutic process.

Presuming the reality of psi does not mean that any specific case is assumed to be a case of psi, only that the operation of psi is a legitimate principle to apply where the knowledgeable counselor deems appropriate.

"NORMAL" OR PARANORMAL

The phenomena that in my opinion can be given most credence by the clinician are telepathy, clairvoyance (and remote viewing), precognition, out-of-the-body experiences, poltergeist phenomena, psychokinesis (called PK) and ap-

partitions. For all of these there is well informed, extensive literature, case studies and/or laboratory research, and the clinician can draw on this body of literature for information and guidance.

However, some other phenomena are less studied, poorly defined, or are difficult to distinguish in principle as paranormal with respect to unusual psychological states, or may be reducible to other psi phenomena, e.g., a "spirit" medium may believe she is getting messages from discarnate spirits, when the source, if psychic at all, is information perceived telepathically, from the mind of her client. What someone may call demonic possession, for example, may be epilepsy, a fugue state, uncontrolled emotional reactions, multiple personality, some form of dissociation, or psychokinesis. Other examples are hearing voices (are these "spirits" or repressed parts of the self?), visits to other dimensions or realms (fantasy or reality"), and psychic attack (projection or perception").

*distinguishing
paranormal
psychological
and
psychopathological
phenomena*

Some psi phenomena can be mimicked by psychopathology. As indicated above, a person may hear inner voices purporting to come from discarnate beings-but these may also be parts of his or her personality that are separated from the main system of consciousness. So far as I know there is no objective means of distinguishing between these two possibilities. Telepathy may be a reality, but the person who says she tunes in to everyone's thoughts may be projecting her own hopes or fears.

However, even a schizophrenic may have genuine psi experiences and be troubled by them, and hence gain reality control by identifying their nature as psychic and separating them from fantasy and hallucination.

REALITY TESTING

Essentially, to tell the difference between psi and imagination, one must reality test. If a person fears he is reading the thoughts of another, he or she can learn to ask the other. Precognitive dreams can be tested by careful recording and confirmation. A person apparently traveling to another location in an out-of-the-body experience (OOBE) may attempt to test the reality of it by bringing back perceptions or information that can be confirmed.

The parapsychological counselor cannot accept the assurance of the client that a psi experience occurred, any more

than the report of a client is an unbiased description of a family quarrel. The client may misinterpret a natural occurrence out of fear or wish fulfillment. It will often be necessary to reality test to determine if psi is actually involved. For this reason the clinician should be familiar with the literature on case study investigations and laboratory work. Often occurrences can be identified as possibly parapsychological by their similarity to the patterns found in other similar cases, such as those described by Rhine (1961, 1967) and Stevenson (1970). Laboratory work, especially free-response studies, also gives insight into the psychological states related to psi, and how psi perceptions are altered by mental processing, for example, in remote viewing (Targ & Puthoff, 1977), and dreams (Ullman, Krippner & Vaughan, 1973).

*having
knowledge
of clinical
psychology
and
parapsychology*

The parapsychological counselor should have a knowledge of clinical psychology and parapsychology, and should understand how psychic experiences and pseudopsychic experiences interact with motives, needs, emotions, self-concept, belief systems, personality, and other psychological elements.

The goals, as in other therapeutic endeavors, are to restore freedom of feeling, thought and action, to enable judgment and choice, and connect the person with reliable reality. Beyond therapy for problems can lie greater goals of the development of psychic abilities and their use in an integrated way, not in the service of ego needs, but for transpersonal values and areas of actualization discussed by Maslow (1968), Walsh & Vaughan (1980) and others (cf. *Journal of Transpersonal Psychology*, 1969-current).

In the next sections of this paper, I will identify several categories of psychic phenomena, for each describe problems they may create for individuals, and suggest what a counselor might do to assist the person.

SPONTANEOUS ESP

A counselor told me of a woman who came to him with this story. She had dreamed of a dead body being washed up on a beach. She went to an evening party the next day at a house on the beach. There was suddenly a commotion outside the house and people found a body that had washed up on the beach, just as in her dream. She was frightened, and asked the counselor if she had caused the death.

A woman in England could not get to sleep. Her husband was at work-he worked in an ice cream plant-this was in about 1954. She couldn't get to sleep. She put it out of her mind and went to bed. About 2:00 she woke up, her husband was not home-that was not at all unusual; he often worked until 3:00 or 4:00 in the morning-but she couldn't sleep; she got up out of bed, threw a robe on over her nightgown, left her six-month-old baby sleeping, walked two miles to the plant, broke into the plant, searched the plant and found her husband locked in the freezer where he had accidentally gotten trapped, and where he certainly would have spent a cold night (Stevenson, 1970).

When the Titanic sailed in 1912, more than a dozen people had very clear precognitive experiences that it would sink. They saw it hitting an iceberg; they saw it upended in water; they saw people in the lifeboats (Stevenson, 1960).

These examples are forms of apparent spontaneous psi, which include (with overlaps) precognitive dreams, telepathic impressions in dreams or waking experiences, clairvoyant awareness of locations or events; telepathy of another's thoughts, premonitions of danger; clairvoyant or telepathic awareness of danger, more-than-coincidental coincidences; telesomatic (physical) reactions, and others. The counselor should be familiar with the reports of such events, and Louisa Rhine reports representative volunteered cases (1961, 1967). Stevenson (1970) reviews 160 earlier cases and adds 35 new ones that he investigated. The early work by Gurney, Meyers & Podmore (1970) and Sidgwick (1962), reports telepathic and apparitional cases. Surveys of ESP experiences by Palmer (1979), Haraldsson, *et al.* (1977), and others indicate the many types of psi that the general population believe they have experienced.

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spontaneous
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CUNICAL ISSUES

In a review of telepathic impression by Stevenson (1970), the most common emotional reactions at the time of the event were fear, dread, anxiety, and depression. Of course most of the perceived events were also negative. Nevertheless, it would not be surprising for persons having spontaneous psi to have generalized fear or depression. Typically when a person has a dream that comes true, or he or she has a hunch or intuition about a friend or relative, particularly if it is tragic experience, and its comes true, there are particular reactions of a psychological nature. One is fear; a second one is "I'm going crazy" i.e., worry about being psy-

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rationality
and
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to the
client*

chotic; a third one is confusion-their reality is suddenly fractured. Those three are very strong psychological reactions. Anyone who is dealing with people who have a spontaneous psi experience needs to know that the person who calls a counselor or who talks with one very likely is afraid he or she is or may be mentally ill, and is uncertain about what is happening. Basic counseling principles would suggest that one of the first things to do is to listen fully to the person tell about the experience. This requires listening all the way through, without interrupting, to find out what happened, how he or she felt, how it was interpreted, and what the person did. Attentive, emphatic listening makes a connection between you and the person, and usually will reduce emotional fears. Next, one may make a point of saying, very explicitly, if it is the case, that "You are not crazy. You are not insane. This has happened before. Other people have had it. It has been studied by scientists and psychologists." This does more to bring rationality and calmness to the client than anything else. Most studies of psi have shown little or no causal connection with psychosis, schizophrenia, or other psychopathology, though in spontaneous ESP or poltergeist cases there are often strong emotions involved (Ullman in Wolman, 1977). A parapsychological experience, per se, is not an indicator of mental disturbance. However, the counselor should always be careful to identify any psychological problems, e.g., paranoia, dissociation, emotional repressions, or physical problems including medications that might produce hallucinations, vision or hearing impairments that might contribute to a misinterpretation of the experience.

The third step is to give a label to it, some kind of name. "Yes, it has happened before; there are studies on it. What you apparently had is called a precognitive dream. Or it is called telepathy, or defined as precognition, and precognition means such and such." To give a name to something gives the person a raft in the middle of an ocean of chaos. The name indicates we have identified this as an anchor point even though we do not know all of the other characteristics of the phenomena.

A further step that gives people some way of handling the experience is to describe what is known about the type of case. This reduces the cognitive confusion that is often associated with, the violations of consensual reality produced by a psi event. One draws from the literature for this information. For example, Stevenson found that the telepathic impression cases had these commonalities: (a) the percipients were usually related to the person they got the

message about, or had an emotional connection to them; (b) the event perceived or intuited was most frequently a danger or threatening situation (always emotionally charged); (c) the person in danger often thought or mentally sent a message; (d) the percipient (receiver) often acted on the impression-ranging from telling others to changing travel plans and going to the aid of the person in danger. Describing these patterns may help worried individuals understand that they are responding to a need or relationship through a psychic channel, just as they might to a phone call or letter. This places the situation into a normal human context.

A more difficult question arises around precognition, namely, if something is precognized, will it come true? "I dreamed a friend died; should I tell her?" There are two approaches to this question. The first is that the anecdotal evidence suggests that events that are precognized can be changed through intervention. There are cases to this effect in Rhine's (1961) collection, and I have heard other anecdotal evidence that confirms them. Thus the first line of counseling is to take apparent precognitions at a reality level and if they are negative, attempt to change the circumstances to prevent them, warn others, *etc.* Cox (1950) studied train accidents, and found there were significantly fewer passengers on wrecked trains than was normal for that day and time. Some individuals, consciously or not, seem to have avoided the train (and cars) that were to be involved in an accident.

*changing
precognized
events
through
intervention*

With a client, there is rarely a need to get into more than a brief discussion of the theoretical problems of precognition and if you can change it. The two answers usually presented are: (1) What is precognized is a probable future, probabilities which can be sometimes altered by changing probability factors; or (2) it isn't really precognition, but present events, which are perceived clairvoyantly, and projected by inference into the future, and are hence changeable. Of course, a volcano erupting in a distant location, or a change in the price of platinum may not be changeable, even on the basis of psychically derived information.

The second level of work with precognition is to examine the personal or symbolic meaning of the dream. Such emotional dream events as death, earthquakes, illness, fires, birth, sexual relations, and others may not be precognitive, but reflective of personal issues and psychodynamics. Beginning with Freud's *Interpretation of Dreams* (1965) and continuing up to contemporary dream-work practitioners (Faraday, 1974; Ullman & Zimmerman, 1979; Delaney,

*the major
religious
traditions
and
psi*

1979), a multitude of techniques for understanding the personal meanings of dreams has been developed. The clinical parapsychologist can use these to release the emotional charges on real issues and to identify where the dream communicates a symbolic message. The goal is to uncover any personal issues and also learn the appropriate reality response to the dream. Not only do spontaneous experiences arouse fear, anxiety and confusion—they may go in the other direction and produce illusions of grandeur. That is, the person may say, "Ahl It's ESP. I have been chosen. I am psychic! Come to me, all who are troubled and wish advice and I will give it to you!" The experience may validate an ego need to be the great earth mother or the great wise father—in other words, it sometimes fulfills people's narcissistic and egocentric needs. This may be more difficult to deal with than fear. It is very clear that psychic abilities have no necessary relation to spiritual development, psychological health, or personal reputability. Spontaneous psi may happen to somebody while he is walking down the street thinking about paying his income tax, and this may never happen to somebody who has done spiritual practice for fifty years. It should be noted that most major religious traditions recognize that psi abilities exist as part of human capabilities. In Yoga and Buddhism they are referred to as siddhis (often translated as powers or accomplishments). They may develop at certain levels of spiritual growth, and specific practices to attain them are described in the Yoga Sutras of Patanjali and the Buddhist Abhidhamma literature. In Christian writing, Paul's First Letter to the Corinthians discusses what we might call psi abilities, e.g. • healing, as spiritual gifts coming from one Spirit. I have interviewed several religious leaders—Tibetan lamas, Zen Buddhist roshis, Hindu swamis—and what they say is this: As you develop spiritually you often, though not always, will have parapsychological phenomena. But those are distractions if you think they're anything other than just another ability or dimension of awareness. It is as though suddenly a person has been gifted with learning how to play the clarinet. The personality is not changed, and that person *still* must learn about different styles and qualities of music, and still may have the choice of playing in bars for drinks or on the concert stage. Like musical skill, psi is an ability that can be used in the service of the self and others. But it does not indicate the presence of other spiritual, psychological, or financial capabilities.

Charles Tart, a major research psychologist and parapsychologist, once told me a principle which I have named "Tart's Dictum." That dictum is: Dying does not raise your

IQ. In the same way, having psychic abilities does not raise somebody's IQ. If one wants to use psychic abilities well, develop the ability to be a good person, to be honest, to get rid of emotional conflicts, to be able to look at one's self and other people objectively-then one can use them for productive healthy ends. Inthe same vein, ifone has a spontaneous experience, it does not mean anything unless the person has developed so that those abilities can be used well.

PROJECTION

Projection and distortion frequently occur with spontaneous psi. People who have not worked through psychological issues may have emotional conflicts, personality disorders, and fears that have not been resolved at a conscious or an unconscious level. What may happen when they get some psychic impressions is that they do not receive them directly but project them out onto the world. One person told me, "I get messages from the radio. I will be thinking about something and a certain singer will come on singing and the words of his song will be exactly what I'm talking about, and I'll get information that way." From a parapsychological point of view, what we could say is her mind is scanning the environment and picking up something that's going to happen and then bringing to consciousness an issue that will tie in to that song.

*unresolved
psychological
issues
and
psychic
impressions*

Often people with suppressed or repressed impulses or strong feelings project these onto others. These projected feelings may seem to the person to be ESP information, e.g., a person might believe that he is telepathically picking up sexual or aggressive messages from another, when actually these are his own hopes or fears. For a person who is projecting in this way a counselor needs to work not on the psychic processes but on the person's psychological process. They should do inner psychological and emotional work to get rid of conflicts and neurotic reactions, issues that have been pushed out of their ccsciousness. This situation may call for psychotherapy beyond the counseling relationship, and referral to a capable clinical psychologist, psychiatrist or analyst.

Louisa Rhine, who has studied spontaneous cases extensively, concludes that ESP information comes in a two-step process (1962). First it arrives in the mind at a non-conscious level, outside the level of consciousness. Then it is psychologically processed and moved into conscious awareness in the form of an image, a hunch, impression, or

words. Obviously, if the parts of the mind outside of that level of mind have some distortion, bias, fear, or desires, that is going to bias the way the information is formulated when it is processed. Thus when people are experiencing psychic phenomena, the counselor must be attentive to conscious and unconscious processes.

POLTERGEIST PHENOMENA

*human
agents
as the
source of
poltergeist
phenomena*

Another type of spontaneous case frequently encountered is the poltergeist. Usually taking place in a home (or sometimes in a place of business), objects move, noises are heard, bottles pop their lids, things break or malfunction, and other physical effects occur, without apparent physical causes (Owen, 1964; Roll, 1972). At one time these were attributed to spirits, or specifically a mischievous household ghost. Now the general belief among parapsychologists is that the phenomenon comes from a human agent and is unconscious psychokinesis, motivated by repressed feelings of frustration, fear, anger, or blocked impulses. Most of the contemporary investigations have found human agents rather than spirits as the focus of the phenomenon, though this should not be taken to exclude discarnate entities as a possibility (Stevenson, 1972).

The clinical counseling approach to a poltergeist case again should begin *with* a description of *the* situation by the person or persons involved. Usually I find that the description of one person is not sufficient, if there is a family or other individuals involved. One listens to the story with only minimal interruptions; it is better not to probe for evidence or data during the initial telling. One may inquire as to how the person felt, what action was taken, how he or she attempted *to* understand or explain it. *Inquire* as to other persons on the scene or in the household or office, and learn about them. Descriptions of the phenomena from the other individuals are usually essential to understanding the situation.

After the initial recounting of the incidents, the counselor should consider if they appear to be normal events, misinterpreted (or a hoax, fabrication, or prank), or if they appear to be paranormal. Principally this determination is made on the basis of evidence—a close description of the events, and elimination of possible human or natural causes for them on a one-by-one basis. If the disturbances appear to arise from normal causes, the task of the parapsychologist is to explain this to the persons involved. They may welcome natural explanation, and appreciate the reduction of mystery and

confusion. On the other hand, if the clients have identified with a hope or expectancy that the supernatural is occurring, there may be resistance to a normal explanation (Krippner & Hastings, 1961). There may be a need to save face, which can be managed by tactful explanation and reassurance of the unusual appearance of the events.

If the events seem paranormal, the quickest route to an understanding, in my experience, is to explore the emotional dynamics of the individuals and the group. Where there are strong emotional charges, there may be motivation for a discharge of energy in the form of a poltergeist manifestation. In a case I investigated in Oakland, California (Hastings, 1978), the agent was a 19-year-old man in a business office. He was the low man on the totem pole—in addition to his typing work, he had to run errands, make coffee and wash cups, was harassed by another typist, was made to toe the line by the boss, and had just gotten married. He was under much emotional pressure, and was of a personality type that could not be assertive or extraverted. When he was in the office, typewriters malfunctioned, coffee cups broke, phones did not work right, things fell off desks. When he was not in the office, nothing happened.

*exploring
emotional
dynamics of
individuals
and groups*

In the Seaford case, Pratt & Roll (1958) concluded that two children in their early teens were the focus agents—i-children approaching puberty who were having to deal with the frustrations of a strict religious family (one of the objects that broke was a statue of the Virgin Mary). The irritations arising from a woman living with her mother seemed to be the dynamics of a case studied by Roll (1970).

From the emotional interactions one can infer possible functions of the poltergeist effects as expressions of feelings by the individual, as though the persons cannot for some reason express themselves overtly and directly, so it occurs physically in the environment through psychokinesis. The expression may be interpreted symbolically, as the breaking of the statue of the Virgin by a pubescent child, or simply as the discharge of energy, like breaking a dish in anger. However the counselor need not interpret the events to the participants, but consider the possibility for his own information in working with the situation.

A second approach to identifying key persons is to carefully analyze who is present during the paranormal events. If one person is always present when they occur, and the events do not occur during that person's absence, then the individual is a necessary, if not sufficient, cause.

In the cases where one individual does not stand out, there may be a group presence necessary for the phenomena, or it may be impossible to identify a particular human agent.

As with spontaneous ESP cases, persons in poltergeist situations are often confused, frightened, and want to know what is going on. They may have "social" problems also, in that they may be kidded by their friends or told they are imagining things. The basic approaches of careful listening with sympathy and understanding, and reassurance that this is a real occurrence are very important here. A description of poltergeist cases, and their typical nature, may be useful.

However, to give the explanation of unconscious psychokinesis may lead to pointing a finger of causation at one individual, who may be seen as a culprit, especially if the situation has become emotionally charged. With tact, the emotional dynamics can be discussed if there is likely to be understanding and sympathy for the feelings involved. This may lead toward resolving the situation that is producing the difficulty.

*two
case
situations
and
their
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For example, in one unpublished case, doors were slamming and glassware breaking in one house. In an interview, I found that the husband was due to be transferred to one of two cities, but his company would not tell him which one. The family, and particularly the wife, who was rather obsessively neat, were very frustrated with the uncertainty of the situation. Without singling out the wife, I observed to them that their frustration, about which they could do nothing, could be producing the disturbances through some form of psychic energy or psychokinesis. That seemed reasonable to them, appeared to relieve their anxiety over the situation, and the events apparently stopped. In the Oakland case mentioned above, I discussed the possible role of the young man with other members of the office staff. They were supportive of this explanation (perhaps because they realized their role in putting pressure on him), and we arranged that he would take his work home, rather than do it at the office. The poltergeist disturbances halted at the office, and did not occur at his home.

In discussing the psychokinesis idea, I have usually described PK as psychic energy, a term which seems more amenable to current acceptance and which does not seem to need further definition. When I use "PK" or "telekinesis," these terms themselves need further definition. When asked what PK is or how psychic energy works, one can answer that we do not know, but it is being investigated scientifically.

Usually the family or individuals involved will want the disturbances to stop, especially if lives, business, or property are being disrupted. Parapsychologists have not found any certain way of halting poltergeist phenomena, though the presence of a bonafide parapsychological researcher on the scene may often stop anything visible from happening! Several actions may contribute to at least reducing poltergeist activity. First is the action of investigating the phenomena. This often places a different emotional set on the situation and may sufficiently change people's reactions and perceptions to stop the disturbances. A second intervention is explaining the motivation or emotional causes of the events, relating them to individual needs where appropriate, as described above. This may release enough of the tension so that the poltergeist activity is not necessary to express the emotional needs. In conjunction with this, a third approach may be to facilitate individual or group counseling for psychological or emotional issues. A fourth avenue is to intervene in the situation by changing living arrangements, family rules, having the agent transferred or work at home, *i.e.* shifting the circumstances so as to change the dynamics involved.

*four
intervention
approaches*

In folklore, occult, and religious traditions there are further ways of reducing poltergeist activity. Handfuls of salt cast about in rooms, charms, burning incense, prayers and mantra, and exorcism ceremonies have been practiced (Fortune, 1930). I do not know if any of these have been given systematic evaluations. At least one case I investigated was finally resolved by an exorcism authorized by the Roman Catholic Church. My impression is that it needed the full temporal weight of the church to allow the family to justify abandoning their emotional frustrations with each other. Any of these methods takes into account a genuine effect of a belief system: if the individual believes the technique (or the user thereof) to be powerful or effective, that belief can trigger psychological and emotional changes, which will alter the feelings and behavior, and hence the poltergeist activity. There may be effects beyond this of a psychic or spiritual nature that may be evoked by these traditional techniques, and which may justify their use on an exploratory basis by the parapsychological counselor.

*the
effect of
belief
systems*

In a class on this topic that I taught at John F. Kennedy University, we found that listening may be sufficient to handle a case of poltergeists, or apparent poltergeists. People simply needed somebody to talk to, and this may be enough to express the feeling. We also found that cases were most often of a mixed sort. Some events were likely to be paranormal, but others were coincidence, fearful projec-

tion, exaggerated and everyday occurrences that were now being seen as weird. Once an expectancy-set that poltergeists are afoot gets established, those involved may interpret nearly everything they can to confirm that set (Hastings & Krippner, 1961).

Another useful attitude is the technique suggested by Honneger (n.d.), that the situation be examined as if it were a dream. One asks the question, "If this were a dream, how would I interpret it? What needs are being served by these strange events? What are the elements (internal and external) of the synchronicities?" For example, sometimes the poltergeist events may be seen as a metaphor for the inner life of the agent, in the same way that a person who has a precognition of an airplane crash or a volcano may be reflecting his or her inner state as well as an external event. If this provides insights, then the counselor can work with the psychological processes of the person.

OUT-OF-THE-BODY EXPERIENCES

*the
survival
reaction*

The most common reaction to OOREs is fear, primarily the elementary fear of survival. A person wakes up and finds herself standing by the side of the bed. Looking back at the bed she notices there is someone in it, and suddenly realizes it is her body. The obvious conclusion is that she has died, and there is a feeling of terror, panic, and shock. This usually results in the person snapping back into the body, heart racing, and wide awake. Since we are trained by our cultural belief systems that to be in the body is to be alive, and that there is no life outside the body, we have a deep reaction that our survival is threatened if we are outside the body. It would seem that reassurance and reflection would reduce the intellectual aspects of this reaction, but only experience and emotional acceptance would reduce the automatic deepseated panic.

*the
fear of
madness*

A second aspect of fear is that of mental illness. OOREs are becoming more discussed in popular literature, but still the experience of one may create fears of madness, and particularly among persons who are not familiar or interested in affairs paranormal. Monroe describes this fear from the viewpoint of an ordinary businessman who unexpectedly began having OOREs (Monroe, 1971). The most direct way to reassure individuals is through explanation of the experience and perhaps recommendations of selected readings in the literature on this subject, which has many first-person accounts (Monroe, 1971; Muldoon & Carrington, 1951; Crookall, 1966).

An issue that may arise is the purpose of out-of-the-body experiences. ESP perhaps can be said to increase our perception and knowledge. Poltergeist phenomena of the psychokinetic type express or communicate feelings. But what are the purposes of OOBEs? They are not necessarily spiritual in nature—they do not necessarily raise one's "spiritual IQ." Nor are they limited to higher states of psychological or mental health, so far as we know. Many of those who experience OOBEs have used them to explore the qualities of altered time, alternate realities, or states of internal dreamlike worlds. This is another experience, like psi abilities, that relies on the level of personality, values and desires of the individual for its utilization. Anyone counseling individuals who are experiencing OOBEs may well attend to the emotional, psychological, and spiritual aspects of the individual, because these will go with them into the OOB state.

*experiences
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are not
necessarily
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The clinician should learn to distinguish between genuine OOBEs and vivid dreams, lucid dreams, and states of dissociation. Regarding the latter, I have noticed that some persons who have altered state experiences incorrectly say they have been "out of their body" when they have no memory for a period of time, or when they have experienced visual imagery or visionary realms. Vivid dreams or lucid dreams (in which one is conscious of dreaming) have some similarities to OOBEs. However, dreams are usually set in dreamworld landscapes, while OOBEs usually occur in everyday realities, which cannot be altered by the conscious will of the dreamer. Further in the OOB state, there is fuller consciousness and feeling of ego presence on the part of the experiencer,

*distinguishing
dreams,
dissociation
and
OOEs*

For persons wishing to develop skill in out-of-the-body states, it may be important to inquire about the motives and purposes for pursuing these states, and the willingness to risk psychological stress. As to methods of training, there are various techniques suggested in the literature (Monroe, 1971; Muldoon & Carrington, 1951; Ophiel, 1968; Swann, 1975), though few report follow-up studies from persons who have used the methods successfully. Some esoteric and quasi-religious organizations claim to train OOBEs, but because of the controversial issues around such groups, one should be cautious in recommending them. The Monroe Institute of Applied Sciences offers OOB training programs and tape recordings (Monroe, 1971) to facilitate the experience though as yet these have not been definitively studied by parapsychologists. For assisting individuals experiencing OOBEs, the counselor should suggest that the

person be in good physical health, and have no major psychological problems not being addressed. Any techniques should be explored slowly and gradually to gain familiarity with and control over the experiences. While many of the reports of OOBEs in the literature show that the person was in a debilitated physical state, or an emotional crisis at the time of the experience, these were spontaneous states, often in a society in which this was neither sought nor even familiar. Techniques described currently in the literature resemble directed visualization or meditative procedures. Even with intentionally produced OOBEs, the person may become frightened, confused, and may become disoriented while in the OOB. Training in conscious centering, awareness, and focused attention would seem to be valuable, along with methods of leaving the OOB state and returning to an IBE (in-the-body-experience).

Psychic Reading or Psychic Counseling

*client
concerns
arising
from
psychic
readings*

The number of persons who consult "psychics" or "sensitives," ..spiritual advisors," or "mediums" for counseling or advice seems to be increasing, as are the number of psychics. I do not have data for the increase, but Palmer's (1979) survey found that as much as 10% of those questioned had visited a psychic for advice. Clients may come to a counselor with concerns arising from these psychic readers. As with other kinds of cases, the initial response of the counselor is to listen to the client, and to find out what it is that the client wants the counselor to provide.

In taking the history or description of the case, I find it is important to learn the reader's exact words and statements, and precise phrasing of the client's questions, which may be useful in discriminating projections from actual information. Typically a client will want assistance in appraising the message of the reader, whether it is a frightening prediction, (a relative will die), or a recommendation (you should take more minerals, especially zinc), or general information that mayor may not be true.

Persons representing themselves as psychic readers vary in quality. I have known some who were usually accurate, either through psychic channels or "normal" channels (or both), and others who were usually not accurate beyond what anyone might have guessed and sometimes below that standard. However, every psychic that I have known has had biases, points of views, blind spots, projections, and emotional reactions that were incorporated in their response

to a client. Thus the psychic reader's own fears or angers, character pattern, and emotional reactions may be presented as psychically received advice for the client, and few clients are able to evaluate such material.

In addition to the psychic's personal material intruding on any non-personal information, a phenomenon I have noticed is that some material in the reading appears to be obtained from suppressed or repressed pre-conscious or subconscious levels of the client's mind. If a fear has been repressed (I have cancer), or an uncomfortable idea (was my divorce the correct decision), this may be returned as information during the reading, with the implication or actual statement that it is true since it comes from psychic sources ("My spirits are saying something about cancer," or "You should never have gotten divorced; that was a mistake."). The external statement of this, as true, draws up the issue from the mind of the client and links with the emotional charge on it which results from both the issue and the energy that was required to push it out of consciousness. Since it has bypassed the normal conscious processing, the issue receives a strong emotional charge that is difficult to understand or rationally dislodge.

In this case emotional processing can often be useful: having the client express the emotional response—fear, anger, sadness—as fully and openly as possible. This may reduce the level of emotion enough so that the client can consciously reflect on the information from a reality testing position, and can distinguish between single feelings (I regret divorcing my spouse) and balanced perspectives. (Regrets are natural, but do not necessarily negate the reasons and feelings that led to the decision.)

*the
usefulness
of
emotional
processing*

There must still be an objective appraisal of information given in a reading by a claimed psychic. Few psychics warn clients that their perceptions may be incomplete, inaccurate, or biased. The feedback that a psychic adviser gets is also likely to be almost entirely positive. This is complemented by the client, who may remember only comments that the client believes to be true, or that have emotional charge. The result is that clients may be accepting of anything said by the adviser, with strong positive transference and dependency.

One approach to facilitating a more balanced view is for the counselor and client to use a tape recording or transcript (*i.e.*, notes taken by the client) of the reading and to review it item by item. The counselor notes what exactly was said

by the psychic adviser, and the client and counselor discuss what facts were stated, how the client interpreted them, and what basis they have in reality, either now or in any indications of future events. It is useful also in gathering this information to consider if the psychic adviser could have inferred the information from observation or knowledge of the client, how general such information is for others the same age or personality type of the client, and to what extent the information is concrete or must be interpreted. For any advice given or decision recommended, the client can consider whether this advice might just as equally come from a "non-psychic-" friend or counselor, and also the practical reasons that could be generated for or against a recommended decision. These processes all place the "psychic" advice into the arena of conscious attention, which can draw on reasoning, known facts, a range of emotional responses, various motives and life goals, and test the advice against them. The process can give a more balanced response to psychic information, both in learning to reduce unthinking, emotional dependency, and to encourage giving attention to reliable perceptions.

*the
counselor
and the
analysis
of readings*

The person who wishes to be a parapsychological counselor will benefit from visiting various psychics, mediums, and fortune tellers, and applying this process of analysis to the readings. Tape recording the consultation is valuable, and is the best way to have an exact record of what was said. To understand the emotional significance of such readings, it is important to go in with a specific question or issue, drawn from personal or professional concerns. The psychic reader may ask for the question to be stated, or it may be written, or the client asked to think of it. Some readers will do "billet reading," which is telling the content of the question without apparently reading it from the written billet. This is hardly a test of psychic ability, for readers with no paranormal ability can use sleight of hand or trickery to obtain information about the question. Nevertheless, for a fair appraisal, a question or stated issue will help focus a reading, and clients should be advised to reflect on their life concerns as they prepare for a session with a psychic reader.

The parapsychological counselor should be aware of cautionary patterns with mediums, spiritual advisers, and psychics. Patterns such as these suggest that the reader may be using deception; (a) gives mostly general information that, while true, would be true of most persons of the age, sex or general appearance of the client; (b) gives some information, then offers more for an additional price; (c) will

not allow tape recording or note taking; (d) gives advice based on palmistry, cards, crystal ball, or other means with higher prices for the more prestigious techniques; (e) encourages the client to donate to the church of the psychic; (f) produces materializations, spirit photographs, or apports; (g) does billet reading of sealed questions; (h) charges high fees; (i) offers information about past lives, karma, or other statements which are non-verifiable. There is ample literature on tricks used by fake mediums and psychic readers (Abbott, 1907; Crimmins, 1944; Houdini, 1972; Hastings, 1979).

Because of emotional needs, transference reactions, and also genuine interest, members of the public can be attracted to apparent psychic readers and advisers who with little ethical compunction manipulate them for money and narcissistic needs. There are others who believe themselves to be genuine, and who serve up advice from their own imagination, emotional reactions, and random intuitions (and perhaps some occasional ESP). A person with some ESP ability may find it mingling with nonverbal inferences, personal experience, or drawing from the client's own thoughts, hopes and fears. Since it is not agreed that there is a domain of pure or absolute truth, from which one can obtain accurate information about past, present, and future, regardless of the framework and experience of the reader or client, any information that is produced in a psychic reading comes from a source or sources that have their own characteristics. A parapsychological counselor can educate clients to reduce their uncritical acceptance of "psychic information" and to apply tests of reflection and reality to it.

*educating
clients
to reduce
uncritical
acceptance of
"psychic information"*

PSYCHIC CHANNELING

This approach applies to persons who believe they are receiving messages or creative material from the "other side," from discarnate beings or spirits. There is virtually no way to test the origin of such communications. In the early part of this century this was considered mediumship; in the 1980s it is being called channeling. Examples are the work of Pearl Curran (Litvag, 1972), Eileen Garrett (1949), Betty White (S.E. White, 1937), Jane Roberts (Roberts, 1970), and the well-known mediums of early research. Some of this material is creative—novels, poetry, artwork—while other parts are inspirational or instructional—details of other dimensions, scientific writing, spiritual growth; other parts are messages to individuals from discarnate relatives and friends. There is no accepted way to test the origin of such

communication. Artistic, instructional, or scientific works can be created by persons with conscious intent and with the contribution of conscious processes. It seems agreed that such creation can also be done at an unconscious level, without going for assistance outside the individual psyche, but admittedly there is no coherent model that explains how creation occurs consciously or unconsciously. The possibility of spirits or discarnate entities (or muses) as the sources of such messages should not be ignored, but it should be remembered that there is no way to determine if a seemingly independent message is the individual's own product, or from an outside source, regardless of what is claimed in the message. Nor is there reason to believe that if a message comes from a discarnate entity that it is thereby more reliable than if it comes from one's own self or a next-door neighbor. Tart's dictum applies in this case as well.

*"channeling"
and
evaluating
the merit
of materials*

The approach in counseling that I use is to look at the content at the material itself, and to ask the client to evaluate it on its own merits. Can it be checked or tested for accuracy? Is it sound advice? How concrete or specific is it? Are there value judgments that can be appraised? What direction does it recommend and what would be the consequences? Again, with purported channeled material there may occur emotional transference, feelings of awe, or dependence (I knew one woman who asked her spirit guide from the fourth plane every morning what she should prepare for breakfast and what she should wear that day).

People who engage in channeling can obtain destructive results of course, whether it is through ouija boards, crystal gazing, mediumship or spirit guides. I know of one person who, on the advice of a discarnate communicator, spent his savings buying land and digging for gold that the spirit said was under it. At last his savings were exhausted and he was left with land and no gold in sight. Other persons have been contacted by "Moses," or "Jesus," and told that they will be the founders of a new church. These messages may link with the needs of the individual, but often they create dissonance that counseling can resolve.

Parapsychologists know the difficulty of evaluating this material, and often tend to interpret it within the belief system of material reality, such as subconscious thinking or dissociation and multiple personalities. There is no agreed upon model for para-material domains that would encompass psychic communication, creativity, discarnate beings, thought forms, out-of-the-body experiences, psychokinesis, and other parapsychological phenomena. Rather than one

belief system to model these, there are many, and disparate facts fit into each in various ways. For this reason, it is difficult for a counselor to reduce uncertainty for a client by giving an explanation in terms of theory, as one may do, for example, when the atmospheric phenomenon of a sun dog gives the illusion of a UFO, or in explaining how a microwave oven heats food.

A therapist may explain how a suppressed feeling can come out in devious ways—in actions and thoughts, for example. However, the parapsychological counselor does not have much theory to use as explanation. One can suggest possibilities, or discuss "as if" something is the case, but it is best to warn against placing full reliance on any theory or model. The ultimate question in counseling is how the client can change toward a better relationship with himself or herself in responding to parapsychological experience.

OTHER PARAPSYCHOLOGICAL PHENOMENA

Several other experiences are likely to be presented to the counselor: appearance of apparitions, cases of alleged possession, near-death experiences, alleged psychic healers, aura readers, past life memories, and various occult practices and their results, *e.g.*: spells. While this paper does not discuss them, some of the same principles and procedures of counseling will be appropriate. For each type of experience it will be useful to develop an understanding of its characteristics, *emotional* reactions, personality-psychic interactions that occur, and the specific counseling approaches that can be applied.

*principles
and procedures
applied to
other
parapsychological
phenomena*

RESOURCES AND TRAINING FOR PARAPSYCHOLOGICAL COUNSELING

As implied, the person doing parapsychological counseling should be versed in basic counseling techniques, including listening and communication skills, working with emotions, intervention processes, and a balanced fluid ability to respond. Some counseling skills can be learned through books on clinical psychology or counseling. However, clinical experience with real people enables these skills to be manifested and trained.

Specifically in the subject matter of parapsychology, the counselor will need familiarity with research studies and findings. In my opinion, case material provides the first line

*case
materials*

of information, because it presents psi phenomena in real life experiences, where motivations, emotional reactions, behavior, and dynamics are often more evident. Case material is available for all of the topics discussed in this article, *e.g.* spontaneous cases (Rhine, 1961, 1967; Stevenson, 1960, 1970; Gurney, Myers & Podmore, 1970; Sidgwick, 1962); poltergeists (Owen, 1964; Roll, 1970, 1972); out-of-the-body experiences (Monroe, 1971; Crookall, 1966; Muldoon & Carrington, 1951); psychic advisers and mediums (Garrett, 1949; Litvag, 1972; LeShan, 1974; Roberts, 1970).

The psychodynamics of psi and the personality should be part of the counselor's understanding, built up through experience and drawing on writing by Ehrenwald (1966), Eisenbud (1970), and Devereux (1971).

*professional
research*

The professional research (both field studies and laboratory experiments) is well reviewed by leading researchers and scholars in Wolman (1977). Another guide, written for the general public, is Bowles and Hynds, with Maxwell (1978), which reports on research findings, cases and experiences, and applications of psi.

Other sources that may be useful are Rhea White's (1964) description of how various psychic subjects generate their information through control of mental states, Fortune's (1930) book on occult practices and psychic self-defense; and Milbourne Christopher's (1975) writing on psychic occurrences as seen from the perspective of a professional magician.

CONCLUSION

*the counseling
procedure
summarized*

The procedure that I have suggested for counseling a person having difficulty with an apparent psi experience can be summarized in this way. Initially, and at an early point in this process, the counselor should find out what the client wants or expects from the counselor, and respond in the light of this information. Then these steps can be followed as they seem appropriate: 1.) Ask the person to describe the experience or events. 2.) Listen fully and carefully, without judging. 3.) Reassure the person that the experience is not "crazy" or "insane," if this can be appropriately said. 4.) Identify or label the type of event. 5.) Give information about the event—what is known about this kind of situation or process. 6.) Where possible, develop reality tests to discover if the event is genuine psi or if there are non-psychic alternative explanations. 7.) Address the psychological

reactions that result from the experience, or the emotional disturbances that contribute to it, whether the phenomena are parapsychological in nature or not.

When counselors, transpersonal psychologists, parapsychologists, and other human service professionals receive inquiries about psychic abilities, requests for advice and assistance, and cases to investigate, any resulting counseling requires both therapeutic skills and knowledge of psi phenomena. The goal should be to assist the person to move toward an integrated response to his or her experience, and to perhaps incorporate it as a balanced part of the total personality. There is a need for responsible counseling of this nature and it can draw on the body of knowledge already accumulated in parapsychology. In turn, this clinical work can contribute information, ideas, and questions for further scientific understanding of psi. Effective counseling may provide ways of integrating the psi processes into a healthy personality, as well as reducing the disruptive effects that often occur as people encounter psychic experiences.

*the
need for
and
contribution of
responsible
counseling*

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Requests for reprints to Arthur Hastings, California Institute of Transpersonal Psychology, 250 Oak Grove Ave., Menlo Park, CA 94025.