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A Conceptual Matrix for Mapping Encounter Experiences

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Abstract

Individuals in the general population are known to report anomalous experiences involving encounters with seemingly autonomous paranormal 'entities.' These accounts resemble positive symptomatology in psychosis, but research suggests that these encounter experiences are consistent with a syndrome-type model that is rooted in known attentional, perceptual, and attributional processes (Laythe et al., 2021). We propose that the phenomenology of these experiences and associated threat indexes can be mapped to a simple two (Setting: spontaneous—ritualized) by two (Proximity: close—distant) dimensional matrix, which is partly mediated by transliminality, i.e., the degree of somatic-sensitivity to internalized and externalized stimuli. Our recommended 'Encounter Matrix' accordingly contextualizes experients' cognitive interpretations, emotional reactions, and general meaning-making of these occurrences for both research and clinical applications.

A Conceptual Matrix for Mapping Encounter Experiences

Entity encounter experiences (or encounter experiences; EEs) are commonly reported across the world (Hill et al., 2018) and comprise a 'family tree' of related anomalies spanning claimed interaction with 'spirits, angels, gods, demons, poltergeists, extraterrestrials, and folklore-type little people' (Evans, 1987; Houran et al., 2019). Techniques that alter waking consciousness

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can apparently induce EEs, e.g., N-dimethyltryptamine (DMT) — the 'spirit molecule,' transcranial magnetic stimulation, trance and meditative states, or facilitated exercises like mirror-and eye-gazing and séance-type sessions (for discussions, see Houran & Lange, 2001). However, the attribution or interpretation for the EE follows in part from the sociocultural context in which the experience occurs.

EEs can also occur unexpectedly and within everyday settings. In fact, as we address later, there are people who recurrently report spontaneous EEs. Some authorities might explain away EEs as positive symptoms of schizophrenia or schizotypal personality disorder, yet their prevalence rates in the general population agree with psychometric studies that suggest experients do not have cognitive deficits per se (Laythe et al., 2018). However, absent of any other psychosis criteria, EEs can pose interventional challenges to clinicians, who lack a working knowledge of anomalistic psychology, parapsychology, or religio-cultural beliefs or practices (Hastings, 1983; Murray, 2012). Accordingly, we introduce a conceptual matrix with practical value for authorities who need support with interpreting and responding to discrete cases of EEs from a humanistic perspective.

Phenomenology of EEs

EEs simultaneously involve nuances in their perceptual contents and associated experiencer psychology. First, Houran et al. (2019) found that accounts of EE consistently reference two types of anomalies. *Subjective* (*S*, or psychological) events tend to be experienced by singular observers and understandable as overactive imaginations, perceptual aberrations, or psychosomatic symptoms (e.g., apparitions, sensed presences, or unusual bodily sensations). *Objective* (*O*, or external), involve measurable temperature changes, knockings, electrical disturbances, malfunctioning equipment, and apparent object movements. Although these appear as two distinct categories of events, statistical modelling indicates that *S/O* phenomena form a robust, unidimensional construct (Houran et al., 2019). This strongly suggests that EEs fundamentally are a behavioral expression of an embodied and structured 'narrative.'

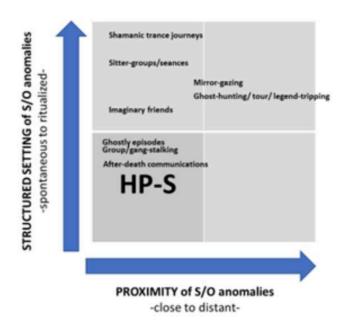
Second, research indicates that 'encounter-prone' people score high on transliminality (Laythe et al., 2018), which is a perceptual-personality variable involving "a hypersensitivity to psychological material originating in (a) the unconscious, and/or (b) the external environment' (Thalbourne & Maltby, 2008, p. 1618). High-transliminals therefore have access to much more mental material that is relatable to external factors and vice versa. Taken altogether, viewing EEs from the perspective of clinical systems theory can ostensibly reveal important insights, information, and context about experients' attentional, perceptual, and attributional mechanisms.

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Contextualizing EEs

Noting the above, we propose an 'Encounter Matrix' for clinically mapping EEs based on their experiential 'backdrops.' In turn, positions within this Matrix are expected to help determine the anticipated "threat index" of EEs for given experients. This information should help clinicians to contextualize, and potentially influence, an experient's process of meaning-making. We argue that this approach likewise has broad research applications. Figure 1 assumes that EEs are locatable within a simple two (Setting: spontaneous to ritualized) by two (Proximity: close to distant) dimensional matrix, mediated by the level of Transliminality, i.e., one's sensitivity to S/O anomalies.



"Encounter Matrix"

The percipient's perceived threat index is a cognitive-affective evaluation based on how spontaneous and proximal the anomalous events are relative to the percipient... i.e., the more spontaneous and closer the anomalous events = the higher the perceived threat index of the experiences (perceived as unsettling or outright negative).

It is expected that co-variates to this Matrix include whether experiences are: (i) private vs. social and (ii) solitary vs repetitive.

Figure 1. The Encounter Matrix

Setting and Proximity are important aspects because they help to influence the flow and salience of *S/O* anomalies. The Matrix therefore implies that changes in an experient's 'backdrop' alter the corresponding 'threat index' and hence the tone or interpretation of specific EEs (cf. Ben-Zeev et al., 2011; Freeman et al., 2002). Illustratively, anomalous events that occur spontaneously and within one's personal space are likely to produce higher levels of perceived threat, meaning that experiences are received as unsettling or negative. Here, the

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interplay between prevailing factors like *context* (e.g., an allegedly haunted location) or *ideology* (e.g., belief in the paranormal) act as an interpretive lens to provide meaning and thus reduce anxiety associated with uncertainty or ambiguity. In contrast, *S/O* anomalies will likely be judged as less threatening when they manifest (i) under conditions involving expectation or priming (i.e., more predictable), or (ii) further away from the experients in question. Conversely, we contend that EEs will be attributed to paranormal agencies more often when *S/O* anomalies reside in the lower left-corner quadrant. That is, the more spontaneous and closer the *S/O* anomalies, the more personally relevant or meaningful ambiguities are likely to seem.

Haunted People Syndrome (HP-S)

We previously characterized people who recurrently experience S/O phenomena in spontaneous contexts in terms of HP-S (Lange et al., 2020; Laythe et al., 2021; O'Keeffe et al., 2019). The syndrome rubric is intended here as a descriptor of its associated phenomenology versus an indicator of an implicit medical condition or diseased state. Specifically, we argue that HP-S is a special variant of EEs and involves transliminal perceptions ('the right people') that are structured due to attentional and perceptual mechanisms and facilitated by transliminality-conducive biopsychosocial environments ('the right settings'). These occurrences often produce a self-reinforcing loop ('perceptual contagion') that is contextualized and strengthened by attributions of external agency ('belief in the paranormal') as a natural coping mechanism. Simply put, the confluence of sensory-somatic sensitivities, situational context, and social conditions prompts certain individuals to adopt the notion of supernatural entities or agencies as the preferred explanation for the perceived complexity (i.e., unresolved ambiguities) that they are biased to notice and give credence to within their environment (cf. Lange & Houran, 2001). Ultimately, HP-S depicts EEs as non-pathological delusion-like ideations. We acknowledge, however, that future research might identify other contributing factors as well, such as rooted in physical, anthropological, or parapsychological mechanisms.

Discussion

Our framework is consistent with evidence that indicates EEs are mostly explained by psychological processes explicitly, the contextual structuring of imagination, cognition, and personality (Lange & Houran, 2001; O'Keeffe & Parsons, 2010). Accordingly, the Encounter Matrix proposes that EEs reflect the reification of ambiguous psychological and physical phenomena as "paranormal." This process makes the intangible and inexplicable meaningful.

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Of course, we acknowledge that an experiential 'backdrop' is likely an intricate concept involving other facets, such as Location, e.g., naturalistic (or external) environs versus built (or internal) structures, or Social Density, e.g., peripheral cues (environmental, group, and non-argument related variables) that can facilitate persuasion and potential contagion effects (see Drinkwater et al., 2019).

Another potential limitation with the present iteration of the Matrix is that the effects of Setting and Proximity may vary differentially in *strength*. For instance, the impact of 'distance' may diminish more rapidly than that of 'spontaneity.' Thus, EEs typically draw heavily on background, whereas the relative importance of phenomena often varies as a function of distance from the stimulus. Thus, *S/O* anomalies outside of the 'haunted' setting are less likely to be attributed to the paranormal. Balancing this, so-called poltergeist activity sometimes stays with experients rather than the settings— albeit these individuals can be subsumed under HP-S. In such person-centered cases, the designation of an EE is based on events happening close to the experient, *not* the original location. Although these occurrences are relatively rare, and it is possible that the experient assumes the role of a proxy-context, this example is important because it illustrates that the two dimensions in the Encounter Matrix psychologically intersect.

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