Misidentified Flying Objects?
A Critique

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ABSTRACT: This critique reviews Stuart Twemlow's excellent paper and presents some evidence—not proof—for the existence of unidentified flying objects (UFOs). My differences with Twemlow concern primarily his view of the psychological and social characteristics of UFO abductees and near-death experiencers (NDErs). I review the evidence for the "fantasy-prone personality," report personal anecdotes with patients who believe they are UFO experiencers, and briefly discuss the psychoanalytic hypothesis that NDEs can be accounted for by a defense mechanism.

Stuart Twemlow's remarkable paper, "Misidentified Flying Objects? An Integrated Psychodynamic Perspective on Near-Death Experiences and UFO Abductions," deserves praise. He writes cogently of variables that all psychotherapists should consider anew with each patient. It is often said that what matters is not what happens to a person, but how a person interprets the experience. Twemlow's integrated psychodynamic perspective speaks eloquently to this theme.

Years ago Lawrence LeShan (1976) addressed the question of what is really real. He said there are at least two sets of ways to determine when our view of reality is no longer useful. Both ways occur gradually and finally add up to the realization that our old ways of conceptualizing events or reality are not working well. The first clue occurs when we're faced with new problems, or in this case finding satisfactory...
answers to events such as near-death experiences (NDEs), out-of-body experiences (OBEs), and UFO abductions. After a period of time it becomes evident that our old methods of evaluating these problems or explaining anomalous experiences are not satisfactory.

Slowly it is becoming obvious to all of us that our system of describing reality—upon which rests our ability to solve problems—is not adequate to the new tasks. We need a new system. The old one worked well for yesterday's problems, but does not work well for those we face now. (LeShan, 1976, p. 5)

LeShan wrote that a second way critical observers realize change is imminent is the small incongruities, the little things that don't conform to our larger concept of reality. Individually these discrepancies are small and can be ignored or explained away in an awkward but partly satisfactory manner.

Twemlow's ideas about the creation of reality are exciting, coming from a traditionally trained psychoanalyst who seems to share the views of some physicists. The quantum physicist and the mystic were thought to view the world differently, but lately it has become more difficult to distinguish between the two. A case in point is the sensitive Michael Schuster, who commented that "the origins of physical reality lie in non-physical worlds" (1990, p. 37). Schuster wondered if we have arrived at a crucial junction where linear thinking and categorization have reached the point of diminishing returns. If so, we have come to the limits of our materialistic theories and we may have to speculate that "consciousness is capable of far greater input into the manipulation of matter" (Schuster, 1990, p. 37) than we are comfortable admitting.

Carl Becker also speculated that, based on Werner Heisenberg's indeterminacy principle, perhaps the "mental state or conviction of the scientific investigator actually influences the behavior of the external world in some instances" (1990, p. 11). There have also been some intriguing data presented regarding the Maharishi Effect (Arons and Arons, 1986) that suggest consciousness might influence human events. The reports of near-death experiences, out-of-body experiences, and UFO abductions have shifted our frame of reference to that boundary between the physical and nonphysical world.

The experiences of NDErs and UFO abductees strain the credulity of those who have never experienced them. These are the stuff from which wonderful delusional systems could be fashioned. Certainly they do not reflect a belief system that many mental health professionals or
the general public share. Twemlow’s provocative title “Misidentified Flying Objects?” appropriately enough includes a question mark.

In a time when some psychiatrists and psychologists do not believe in the unconscious or in repression, his paper offers a valuable map for psychotherapists who minister to persons with post-traumatic stress disorder, NDEs, OBEs, and UFO experiences. His idea that “reality is an integration of what is ‘out there,’ or ‘really real,’ and what is ‘in the head,’ and each impinging on the other and with reality being defined by the degrees of familiarity and unfamiliarity with the sensory perceptual data being experienced” seems quite useful as a heuristic device.

Twemlow’s paper is a creative and scholarly work that is a good example of a paradigm stretcher. As I read it I found more with which to agree than to disagree. His thought regarding reality and therapist neutrality are well taken. In my experience, the central fear of the UFO experiencer is that people will not believe him or her. This is analogous to the experiences of a few aboriginal people who were taken from their isolated native Amazon or Borneo villages and brought to New York City in the early decades of this century, and then after sightseeing, returned to their society. After experiencing a civilization with electric lights, automobiles, movies, etc., these “lucky” natives returned to their tribes only to be branded as liars and treated as outcasts. The NDEr and the UFO abductee face similar reactions from their peers.

My differences with Twemlow are small and are concerned primarily with his view of the psychological and social characteristics of the NDEr and UFO abductee. Leo Sprinkle (1988) wrote that in the 1970s NDErs and UFO abductees were thought by the mental health community to include a high percentage of psychotics, while in the 1980s such people were no longer psychotic but neurotic, and now in the 1990s such people are “fantasy-prone personalities.” Such people are said to be so adept at fantasy productions that they have difficulty in discriminating between memories of fantasies and memories of real events.

Twemlow cited Robert Bartholomew, Keith Basterfield, and George Howard’s survey (1991) finding that abductees have a proneness to fantasizing, and Susan Powers’ claim (1991) that 20 to 35 percent of fantasy-prone individuals are maladjusted. The implication is that such a person is the victim of his or her idiosyncratic fantasy. “Fantasy-prone personality” is a pejorative term that has been adopted by a variety of critics who seem to believe that it explains these anomalous experiences and it is used in such a fashion by some (not including Twemlow) to suggest that such individuals are only half a
step above half-crazy. I have not read of any studies that link fantasy-proneness to delusional systems or psychotic disorders.

Bartholomew, Basterfield, and Howard's (1991) survey linking abductees to fantasy-proneness was "a retrospective examination of biographical content from widely disparate archival sources" (p. 217). They evidently considered their abductee or contactee subjects to be fantasy-prone if they had one or more fantasy-prone personality characteristics; that seems to me to be overinclusive. The fact that some abductees are fantasy-prone personalities does not mean that all abductees have that trait. There seems to be as much or more evidence that fantasy-proneness is not overrepresented in abductees.

For example, Mark Rodeghier, Jeff Goodpasture, and Sandra Blatterbauer (1991) explored the psychosocial characteristics of abductees, administering psychological tests including measures of fantasy-proneness. Ninety-two percent of their sample were negative for fantasy-proneness; the 8 percent that were positive is not much higher than the rate in the general population. Kenneth Ring and Christopher Rosing's (1990) data also did not bear out the fantasy-prone personality hypothesis for UFO experiencers. Ring and Rosing further stated that UFO experiencers and NDErs are quite comparable psychologically—that is, they are not as a group fantasy-prone personalities—and are "affected similarly by their separate encounters, suggesting that these two categories of experience may in many ways be functionally equivalent" (1990, p. 59).

Sheryl Wilson and Theodore Barber (1983) found fantasizers to be highly hypnotizable. Twemlow cited George Ganaway's observation (1989) that "UFO abductees are highly hypnotizable, highly imaginative, and typically uncover their first memories of an abduction experience during hypnotic interrogation by self-proclaimed UFO abduction experts" (1989, p. 213). In my experience as a psychologist with 15 therapy patients who believe they are abductees, and in conversations with approximately 75 other such people, I have found this was not typical. My sample, however, is limited, and may not be typical of the population.

One of the therapy patients with whom I have worked is a man who claims recent lifting of repressed memories of numerous UFO contacts spanning several decades; his memories attached to specific times and places number more than 100. His presenting symptoms were depression and anxiety, and in spite of his desire to be hypnotized he was not a particularly good hypnotic subject. Another patient, up late one night with her sick child, glanced out the upstairs window and saw, in the bright moonlight, a "saucer" across the road from her country home
and two small "alien-like" figures on her front walk. In spite of immediate amnesia for the rest of the night, this woman could not be hypnotized during three sessions of an hour and a half each.

Of the 15 adults I have treated with hypnotherapy, only one was an unusually good subject, and even that man was not able to recount all that he thought happened. My study with Twemlow and Glen Gabbard of psychological characteristics of people who had had OBEs and NDEs unfortunately included no scales to measure fantasy-proneness (Jones, Twemlow, and Gabbard, 1983). The Roper study mentioned by Twemlow (Hopkins, Jacobs, and Westrum, 1992) reported that an estimated 7 percent of the non-institutionalized, civilian, adult population of the continental United States responded positively to four of five indicator questions, suggesting that 2 percent of our population may have had abduction experiences rather than merely having sighted a UFO. The Roper Organization study concluded: "Therefore, based on our sample of nearly 6,000 respondents, we believe that one out of every fifty adult Americans may have had UFO abductions experiences" (Hopkins, Jacobs, and Westrum, 1992, p. 15). If their sampling techniques are as representative of the population as they claim, then there may be at least 3,700,000 American abductees.

As Twemlow pointed out, we are all prisoners of our own belief systems. He offered an enlightened integrated psychodynamic perspective that is a significant improvement over most of the other psychological paradigms. His interpretation of Rima Laibow's report (1989) is logical, parsimonious, and likely accurate for a variety of patients. For Laibow's particular patient we have no way of knowing which interpretation was accurate, or indeed if the patient's memory was so distorted that neither Laibow's nor Twemlow's hypothesis was correct.

At times like this, I turn to advice I was given by an elder of the Oneida Tribe: "In unusual situations, where there is doubt about causation, use 'The Rule of Six' " (Paula Spencer, personal communication, 1992). This rule dictates that for every unusual event the person attempts to understand, he or she should find six plausible alternatives that might explain it. Spencer cautioned not to become attached to any of the six hypotheses until reasonable evidence was available.

Twemlow speculated that neutral investigators studying individual abductees might find that their abductions coincided with unusual personal life changes. This is a hypothesis worthy of study. Twemlow stopped short of stating that unusual personal change equals unusual stress, which equals distortions in reality testing—although this is a logical conclusion. But would a variety of such stressors produce the similarities across abductees from such widespread socioeconomic and
educational levels? What kind of stress and what degree of stress would be needed to produce such remarkably similar UFO scenarios from a diverse population? I have talked to ranch hands, cooks, firemen, lawyers, and medical doctors who have all given remarkably similar accounts of their abduction experiences. It is easier to make a case for stress producing the depersonalization experiences that are often confused with OBEs or NDEs.

Twemlow disagreed with David Jacobs' (1992) view that the similarity of phenomenological detail and the convergence of abductees' narratives is evidence for reality of the experience. Twemlow stated that this similarity may be accounted for by the human beings' "similar mental mechanisms and especially similar basic defenses." His intensive psychotherapeutic work with abductees has suggested that their "experiences" are predicated on, or at least colored by, past experiences. I agree with Twemlow that our defense mechanisms work in similar ways; the suspiciousness and paranoid-like thinking that some abductees report are good examples of these defenses. But it is my opinion that the warp and woof of the abduction reports are not the total product of the defense systems. I tend to agree with Jacobs' view, as the phenomenological similarities across patients have made me consider the possibility that these experiences may represent veridical events.

There are some intriguing bits of evidence concerning the UFO question; and I realize that one person's evidence may be no evidence at all to his or her colleagues. The first is the sighting of UFOs on radar by military and civilian pilots; some radar sightings were matched by simultaneous visual sightings. Second, to date the governments of six countries, including Belgium, Sweden, and Brazil, have made public statements that they believe UFOs exist. The third is sightings by law enforcement officers of UFOs on the ground and the landing traces found at the place of the sighting. And fourth is wreckage of a UFO, as in the 1947 Roswell, New Mexico, incident. But even if the existence of UFOs were established, it would not prove they have abducted people.

In his concluding section entitled "Research Questions," Twemlow asked why this phenomenon is a relatively modern one, as Thomas Bullard (1987) suggested. If Zecharia Sitchin's (1976) translation of ancient Sumerian cuneiform writings is accurate, contact from other worlds may have occurred thousands of years ago. Jacques Vallee (1969) wrote that Japanese records reported that on October 27, 1180, an unusually luminous object described as an "earthen ware vessel" flew from a mountain in the Kii Province beyond the northeastern mountains of Fukuhara. On January 7, 1749, chaos spread over Japan
when three round objects "like the moon" appeared and were observed for four days. Vallee also quoted a headline from the Chicago Chronicle of April 13, 1897, that read "Airship Seen in Iowa." The Wright brothers didn't invent the airplane until 1903; balloons had been in existence for some time, but the population of Fontanelle, Iowa, described the "airship as being 60 feet in length, and the vibration of the wings could be plainly seen. It carried the usual colored lights, and the working of machinery could be heard, as also could the strains of music, as from an orchestra" (Vallee, 1979, p. 143).

Does any of this "evidence" make any difference when mental health professionals work with people who believe they've had these unusual experiences? I agree wholeheartedly with Twemlow that the worst thing we can do is pathologize the experience and the patient. But is healthy skepticism or total neutrality more conducive to patient recovery than an attitude of "I don't know what to think of your experience, but I believe that there may be such things as UFOs"? I don't know. At present, I adopt the same attitude toward UFO abductees that I do toward Vietnam veterans who have post-traumatic stress disorder: I take them at their word.

As I write this response, I think that some, but not all, people who have NDEs may be, as Gabbard and Twemlow (1991) believe, experiencing the results of a defense mechanism. Their psychodynamic interpretation of the NDE is presented as a scholarly hypothesis, but it does not explain the accurate perceptual reports of NDErs who were near death and immobile, yet later told of events that happened at a distance that they could not have "seen." This is illustrated by Michael Sabom's (1982) report about a man who "observed" his own open-heart surgery from the ceiling of the operating room and described it in vivid detail and color. He "saw" that all of the surgical team had the green tie-ons covering their feet except one physician, whose blood-splattered white leather shoes could be seen from the patient's out-of-body view. The same patient also noticed that one of the doctors had "a bad little finger," as a blood clot under the nail could be seen under the surgical gloves. If the NDE and out-of-body experience were only defensive mechanisms in service of the ego, why and how could such veridical reports occur? I think there is a mystical side to life and death, but as social scientists we must always invoke the Rule of Six and not be too quick to fill a knowledge vacuum with mystical theory.

I agree that it is likely that the UFO experience will become less traumatic as society becomes more familiar with these extraordinary experiences. There is so much right with Twemlow's paper that the exceptions I've raised seem pedantic. And as I review my remarks—not
Twemlow's—I think of a statement of Michel de Montaigne: "No one is exempt from talking nonsense; the misfortune is to do it solemnly" (1993, III, i). So I reserve the right to disavow or affirm my present opinions as more compelling evidence becomes available. Thus, even when working with patients with post-traumatic stress disorder who are the victims of well-documented disasters, the therapist is left with the person's interpretation of the experience, and it is that interpretation and the associated feelings that furnish the raw material of psychotherapy.

References


