

UNUSUAL PERSONAL EXPERIENCES



***AN ANALYSIS OF THE DATA FROM
THREE NATIONAL SURVEYS***

**CONDUCTED BY
THE ROPER ORGANIZATION**

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PERSONAL
EXPERIENCES**

**AN ANALYSIS OF THE DATA FROM
THREE NATIONAL SURVEYS**

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**AN ANALYSIS OF THE DATA
FROM THREE MAJOR SURVEYS
CONDUCTED BY
THE ROPER ORGANIZATION**

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A NOTE FROM THE PUBLISHER

This report to mental health professionals presents the combined data from three national surveys of nearly 6,000 adult Americans. It is the collective effort of a Professor of Psychiatry at Harvard Medical School, a Professor of Sociology at Eastern Michigan University, an Associate Professor of History at Temple University, a psychiatric therapist in Springfield, Missouri, an author and researcher from New York City, and a large polling organization. The report has been funded by two interested individuals. It is being published privately and independently, and will be mailed to nearly one hundred thousand psychiatrists, psychologists and other mental health professionals.

This report on "Unusual Personal Experiences" concerns the relation between these experiences and what can be called the "UFO abduction syndrome." The survey data gathered by the Roper Organization are presented here, with analysis and conclusions. Other articles deal with the design of the survey questions, the close connection between five key "indicator" experiences and thousands of UFO abduction reports, and the authors' views, based on their research and clinical experience/ of the event-level reality of such accounts. The publisher and the five authors all share the view that the data and attendant information presented in these pages compel the particular attention of all those who share an interest in the human psyche, in the health and well-being of our people, and in the quest for scientific truth.

MENTAL HEALTH PROFESSIONALS AND THE ROPER POLL

By

John E. Mack, M.D.

February 15, 1992

HARVARD MEDICAL SCHOOL

Professor of Psychiatry

The (this) Roper Survey, conducted between July and September, 1991, suggests that hundreds of thousands, if not millions, of American men, women and children may have experienced UFO abductions, or abduction related phenomena.

Mental health professionals have, with a few exceptions, maintained an arms length attitude toward this phenomenon. There are several apparent reasons for this. The abduction stories are so unusual, so outside of reality as we have known it, that psychiatrists, psychologists and others have relegated the matter to the margin of their consciousness, assuming it to be some sort of odd delusional system or other form of mental or emotional disturbance, material perhaps for late night television or the tabloids. When abductees have turned in their distress to mental health professionals they have often become still more troubled when an attempt is made to place their cases in a familiar psychiatric category or to attribute their experiences to some other sort of trauma or troubled family relationships. Abductees know and fear this response and so, by and large, steer away from mental health professionals, preferring to seek out members of the network of people who specialize in the investigation of UFO related phenomena.

In spite of these considerations, it is important that mental health professionals become familiar with the basic features of the abduction syndrome, even if they do not choose to specialize in offering treatment and support to such cases. For abductees, though they are not usually mentally ill, may experience considerable emotional distress, confusion and social isolation, being reluctant to speak about their experiences out of fear of being labeled crazy and becoming further isolated. Their traumata have four dimensions: 1) The physically and emotionally intrusive abduction phenomena themselves, which may have recurred repeatedly during the lifetime of a particular abductee; 2) The personal isolation the experiencer has undergone, reinforced whenever their communica-

tions are misunderstood or treated as a form of strangeness or evidence of mental illness; 3) The shattering of socially agreed upon or consensus definitions of reality, which abductions bring about and that abductees, like ourselves, must undergo in their confrontation with this phenomenon; 4) The fact that the trauma, whatever its source is not over i.e. abductees cannot prevent its recurrence or protect their children and other loved ones from its effects.

Above all, mental health clinicians should learn to recognize the most common symptoms and indications in the patient or client's history that they are dealing with an abduction case. These include fears of the dark and of nightfall; nightmares, especially containing repetitive accounts of being taken by threatening figures inside a craft or enclosure; other fears or phobic symptoms (which may later prove to be related to an aspect of the abduction experience) that seem unrelated to what is otherwise known of the patient's life; a history of small beings or a presence around the patient's bed as a child, adolescent or adult; reports of unexplained missing time episodes; the appearance for no apparent reason of small cuts, scars or odd red spots; encounters with strange intense light, or even close-up sightings of oddly shaped craft.

It is possible that after the showing of the intensely promoted CBS miniseries docudrama in May, which will treat the abduction phenomenon with dramatic seriousness, great numbers of abductees and others who may fear that they are "experiencers" will turn to mental health professionals in their anxiety or self-diagnosed concern. It is especially important that these clinicians have sufficient knowledge of the phenomenon to be able to respond appropriately. They need to be open to the possibility that something exists or is happening to their clients which, in our traditional Western framework, cannot or should not be. We also need to know to whom mental health professionals can turn for further information or help.

I would like personally to invite you to attend a lecture given by an experienced researcher in the field that will provide further information about the abduction phenomenon and give you an opportunity to answer questions that you may have. Please consult the enclosed card for details.

John E. Mack is Professor of Psychiatry, Harvard Medical School at The Cambridge Hospital, and Founding Director of the Center for Psychological Studies in the Nuclear Age. As a child and adult psychoanalyst he has applied the insights of depth psychology to the nuclear weapons competition, the global ecological crisis and other collective phenomena that threaten our survival. His publications include *A PRINCE OF OUR DISORDER*, a Pulitzer Prize winning biography of T.E. Lawrence (Lawrence of Arabia).

THE UFO ABDUCTION SYNDROME

**A REPORT ON UNUSUAL EXPERIENCES
ASSOCIATED WITH UFO ABDUCTIONS,
BASED UPON
THE ROPER ORGANIZATION'S SURVEY
OF 5,947 ADULT AMERICANS**

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ABSTRACT

A survey of UFO abduction-related experiences in the United States adult population is reported. The result of an ostensible UFO abduction are symptoms akin to post-traumatic stress, with subjects reporting diffuse anxieties, disturbing dreams, sleep disturbances and imagery related to the abduction experience. UFO abduction memories may be as unacceptable to the subject or therapist, or both, so eliciting them may require additional effort. This report documents the kinds of symptoms likely to be expected with such subjects, and indicates the symptoms' relationship to the abduction experience. The incidence of abduction experiences appears to be on the order of at least 2% of the population. Additional literature and resources for further inquiry are indicated.

INTRODUCTION

The subject matter of this article is admittedly unusual in the extreme. The authors believe, however, that mental health professionals have a responsibility to those undeniably traumatized individuals who report UFO abduction experiences – their claims deserve to be treated with scientific objectivity, rather than automatic rejection.

For many years Hopkins and Jacobs have interviewed and studied individuals (“abductees”) who describe UFO-related abductions. At the conclusion of these traumatic experiences, memory is at least partially – and often totally – repressed. The details that remain are usually fragmented. In some cases the abductions have been recalled with the aid of hypnosis or other relaxation techniques, although in other cases the events are consciously remembered. An analysis of hundreds of these reports, however, has revealed common sequence of events coupled with a repeated pattern of specific details. The experiences are apparently widely distributed, they have important affects on mental health, and no current medical or psychiatric explanation for these accounts has proved viable. Furthermore, there is virtually no mention of these events in the literature of mental illness. For these reasons we have taken the unusual step of sending this interim report to the psychological and psychiatric community. We are seeking the views, observations and reports of members of the community who may have encountered similar cases and thus may be able to expand our knowledge of these phenomena.

Many readers of this report may conclude that the absence of such cases in the psychological literature indicates that they are not prevalent. This report suggests the opposite.

CLINICAL DESCRIPTION

Typically the patient might enter therapy with complaints about anxiety, depression, phobias or a pattern of frightening dreams. The patient might also be bothered about an incident involving an unexplained time gap in memory. In many respects the patient might present symptoms typical of post-traumatic stress disorder. However, patients will often withhold memories of the more bizarre UFO-related events, either out of fear that they will be rejected or because the patients do not connect them with the symptoms. One woman known to Hopkins stated that she had been in therapy for seven years and yet said nothing to her therapist about her consciously remembered UFO experiences. This reticence is not unusual.

These patients might also have dreams or vague remembrances of such images as hospital operating rooms, bright lights, huge-eyed alien beings, or even “impossible” animals such as very large owls or spiders. Careful questioning — especially under hypnosis — may reveal that these patients have specific

memories of having been immobilized by impassive alien beings who remove them, typically from a car or home, and then transport them into a UFO. There, various physical procedures are performed upon the abductees while they lie upon examination tables, naked, frightened and paralyzed. There may be a substantial number of such recollections associated with either childhood or adult experiences, or both. The patient may also have one or two unexplained scars on the legs — or occasionally on the upper body — which he or she feels are the result of these quasi-medical examinations.

It is natural for many professionals to assume that such patients are either psychotic or are masking a history of child abuse, and in a minority of cases these hypotheses may prove well-founded. For reasons discussed elsewhere, however, we do not consider either of these hypotheses useful for most of the cases we have encountered. Based on research which we and others have carried out, the patients are rarely psychotic, and child abuse, even when present, is not at the root of their fears. Instead, many of the presenting symptoms offered by these patients can only be satisfactorily explained by assuming that their abduction recollections have an objective reality.

In a blind study carried out for Hopkins by psychologist Elizabeth Slater, nine ostensible abductees were given a standard battery of personality tests. They proved to be non-psychotic, but tended to suffer from anxiety and hypervigilance. The self-concept appeared to be damaged in some of the cases, particularly in relation to sex. The protocols and Dr. Slater's interpretation were checked by a second psychologist who agreed with the initial assessment. When the subjects' abduction claims were made known to Dr. Slater, she considered that their symptomatology was consistent with what might be expected if indeed such events had taken place.

A TYPICAL HISTORY

It may be useful at this point to present a typical abduction history. We have found that abductees generally remember their first experiences as taking place when they were very young. The child is removed from his/her normal environment by small, gray-skinned, hairless figures, and floated or carried into a circular, metallic craft hovering nearby. When inside the object the child's clothes are removed and he/she is placed on a table. Physical manipulation and palpation follow. During one or more of these early experiences the child may recall that a tiny object on the end of a slender needle is inserted in his/her nose in an operation that sometimes produces nosebleeds. The child's parents may either be unaware of the abduction or may be immobilized while it is taking place, and thus be unable to come to the child's aid. It is not unusual for the abductee to acquire a scar, whose origin is not consciously remembered although its time of origin is. These scars are usually of two basic types: a round, depressed "scoop mark" or a thin, straight-line mark. (This symptom provides

the rationale for Roper survey question i. Each of these “indicator” questions will be referred to in the following paragraphs.)

During adolescence and beyond, the abductions are likely to continue with increasing attention to the genitals and the abdomen. Male abductees report sperm sampling operations, while females describe the insertion of needles in the navel or lower abdomen. Female abductees often suffer from a variety of gynecological problems during these years, including what they regard as anomalous pregnancies and miscarriages. In some instances when abortions have been undertaken, subsequent medical reports have shown no fetal tissue among the products of pregnancy. (This condition can occur even though positive pregnancy tests have eliminated the possibility of pseudocyesis.). Many such accounts from both male and female abductees suggest that reproductive experiments are central to the abduction experience.

A variety of abduction locations have been described, with the encounters taking place at all hours of the day and night. In a majority, however, the abductees awake in bed, fully aware of their surroundings, but physically paralyzed to such a degree that they may not even be able to move their eyes. This state of paralysis often continues for several minutes. The abductees usually sense a presence in the room but very often actually see one or more diminutive, large-eyed figures standing beside the bed. (See Roper survey question d.) If the abduction should take place from an automobile, the motor may inexplicably die, a similar paralysis may be felt, and the aliens may appear standing near the stalled vehicle, staring at the immobilized driver and/or passengers. Abductees may then be walked or floated towards a landed UFO, but very often they recall rising up in mid-air towards the bottom of a hovering UFO. This latter experience is often recalled later as a “flying dream” in which the landscape below is remembered in vivid, accurate detail. (See Roper survey question e.)

If abductees take notice of the time before and after these partially recalled events, they may become aware of having “lost” one to three hours - the average duration of UFO abduction experiences. This puzzling realization, described by investigators as the “missing time” phenomenon, is one of the key elements in the UFO abduction syndrome. These periods of “missing time” are frequently experienced by two or more people simultaneously, as in the following example:

In the summer of 1975, on a bright Sunday afternoon, a young, recently married man and woman were driving home from the New Jersey shore. In what seemed to be the next instant, it was nighttime. They were sitting in their car, parked in the middle of a field, with the engine and lights turned off. Feeling lost, frightened and disoriented, they took several minutes to find their way onto the road, and finally back to the main highway. They had “lost” approximately six hours. Subsequent investigation and hypnotic regression elicited a UFO abduction account. (Hopkins) (See Roper survey question g.)

Abduction experiences are often accompanied by inexplicable humming,

beeping or buzzing sounds which, though perceived by the abductee, are usually inaudible to others in the same vicinity. Unusual visual phenomena, such as bright lights or floating, maneuvering balls of light inside one's room are also reported frequently. (See Roper survey question h.) Unlike the auditory phenomena, however, these unusual visual phenomena are apparently perceivable by abductee and accidental witness alike. Direct sightings of unidentified flying objects as well as vivid dreams about these objects - and about their interiors and occupants - are also frequently reported by UFO abductees. (See Roper survey questions c and k.) However fragmented or vivid they may appear at first glance, all of these memories and perceptions and unusual experiences together comprise important elements in the UFO abduction syndrome.

HOW WIDESPREAD IS THE ABDUCTION SYNDROME?

For several years there has been speculation about how wide-spread the UFO abduction syndrome might be. Before 1966 only one report (Brazil: Antonio Villa-Boas case) appeared in the UFO literature. With the publication of John Fuller's *INTERRUPTED JOURNEY* (1966: Betty and Barney Hill case) a much greater awareness of the abduction phenomenon took place. A second report (Hickson and Parker case) was given national publicity in 1973. Several more cases came to light in 1975, the year when a TV movie about the Hill case was first shown. The number of cases increased after the release of Budd Hopkins' first book (1981: *MISSING TIME*), but it was still not clear how widespread these experiences might be. The situation resembled the early years of awareness of the "battered child syndrome", when investigators knew of only a few cases. Only when further research was published did the general social awareness of child abuse increase. At the present time, with knowledge of the phenomenon widespread, it is difficult to remember that child abuse was once a "hidden event."

Similarly, with the UFO abduction phenomenon, the number of reports has swelled as social awareness has increased. Several new books on the subject have been published, two of which (*INTRUDERS*, *COMMUNION*) have appeared on the *NEW YORK TIMES* Best Seller list. Thoughtful reviews and articles on the phenomenon have been published in many magazines and newspapers (*ATLANTIC MONTHLY*, *WASHINGTON POST*, *NEW YORK TIMES*, *HARVARD MAGAZINE*). Nationally broadcast TV and radio programs dealing seriously with the subject have further widened public awareness. As a result increasing numbers of abductees have been emboldened to seek investigators to help clarify their experiences.

The idea of a national survey was put forward at a meeting of researchers and interested individuals by Robert Bigelow. He and a second contributor, who wishes to remain anonymous, supplied funds for the undertaking. Hopkins and Jacobs then approached several polling firms and finally selected the Roper

Organization to conduct the survey. The major difficulty with such a survey was that the question "Are you a UFO abductee?" would not necessarily reveal the extent of those with potential abduction experiences. As has been pointed out, many such people do not have enough conscious recollection of these events to answer affirmatively. Instead, Hopkins and Jacobs decided to ask about particular "unusual experiences" which research indicated were closely associated with abduction histories.

Three Roper "Omnibus" polls in 1991, involving a total of 5,947 adults, repeated the same battery of eleven questions, five of which were key "indicator" questions designed to elicit experiences related to abductions. These were accompanied by two check questions, one about UFO sightings and another about the fictional word "trondant." The first question allowed comparison with other surveys and the second was designed to check on positive response bias. The remaining four questions could provide additional support for a respondent's possible abduction involvement. (See final article "How the Survey was designed).

FINDINGS FROM THE SURVEY

Although researchers had assumed that the abduction syndrome was a rare phenomenon, the survey showed that the experiences known to be associated with UFO abductions are surprisingly prevalent in the American population. Some percentages will be presented in the following pages along with demographic information and analysis.

In an effort to determine the potential incidence of abduction experiences, Hopkins and Jacobs used the frequency of positive responses to the five key indicator questions. Assuming that multiple positive responses would be more indicative than single ones, the Roper Organization calculated the number of respondents with multiple answers. The total population with at least one positive response was 1,868. Within this group:

- 1,033 reported only one experience
- 484 reported two experiences
- 232 reported three experiences
- 101 reported four experiences
- 18 reported all five experiences

(To minimize positive response bias, the Roper Organization automatically eliminated the 1% Trondant-reporting respondents from the above population.)

Even though the five remaining questions may well be indicative of abduction activity, alternative explanations for "yes" answers make them less suggestive than the five key indicator questions. With regard to these indicator questions, the survey established that:

Nearly one adult in five has wakened up paralyzed with the

sense of a strange figure or presence in the room.

Nearly one adult in eight has experienced a period of an hour or more in which he or she was apparently lost but could not remember why.

One adult in ten has felt the experience of actually flying through the air without knowing why or how.

One adult in twelve has seen unusual lights or balls of light in a room without understanding what was causing them.

One adult in twelve has discovered puzzling scars on his or her body without remembering how or where they were acquired.

It is helpful to establish a clear-cut criterion as to how many respondents we feel are likely to have experienced UFO abductions. During the last seventeen years, Hopkins and Jacobs have together worked with nearly five hundred people reporting such encounters. Based upon the data we have collected, we decided to regard only those respondents who answered "yes" to at least four of our five key indicator questions as probable abductees. In the Roper Survey, a total of 119 people reported having had four or five of the "strong indicators." This is 2% of our sample, and it therefore suggests that 2% of the adults in the American population have had a constellation of experiences consistent with an abduction history. Therefore, based on our sample of nearly 6,000 respondents, we believe that one out of every fifty adult Americans may have had UFO abduction experiences.

These findings suggest that the kinds of "unusual personal experiences" associated with UFO abductions are much more prevalent in the population than many professionals may be aware. While UFO abductions may occur in only a small fraction of the population, this is still a large number of people. It is not improbable that a therapist's practice may include one or two persons who belong to this group.

THERAPY

The authors and other professionals with whom they have consulted have found that ventilation of the experiences, with or without the aid of hypnosis is the major contribution the therapist can make to the patient's improvement. Openly discussing these memories and helping the patients deal with them will relieve much of their anxiety and allow their conscious minds to cope. Denying the reality of these recollections seldom does anything but force the patients' memories underground. We have also found that appropriately managed support groups are helpful for the patients to deal with their feelings of helplessness, fear and incongruity.

Unfortunately, the therapist cannot promise the one thing that patients desire most: the cessation of abductions. In our experience, the frequency of such events may decline for adults; they seldom can be counted upon to cease entirely. Furthermore, other members of the patient's family, including parents, spouse, siblings and children, may also be involved. This circumstance may be an additional source of stress, guilt and restricted communication. If other members of the family are involved, it may be useful for the family to discuss their experiences and feelings openly.

How an individual therapist chooses to regard a patient's memories will differ from one professional to another, but most patients are not likely to be shaken in their beliefs that their recollections are true.

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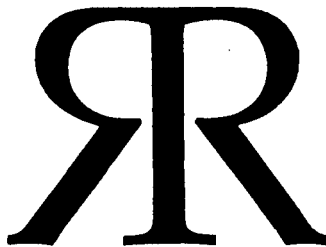
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Unusual Events Survey Findings

**conducted for
Bigelow Holding Company**

By



**The Roper Organization Inc.
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INTRODUCTION

This summary presents the findings of research conducted for Bigelow Holding Company by The Roper Organization. Results presented in this summary are the summation of a question included in three separate waves of Roper's in-home omnibus service, Limobus™.

Roper's Limobus™ service offers clients the ability to "tack-on" questions to the regularly scheduled in-home service, Roper Reports™. A limited number of omnibus questions are available each month in Roper Reports™. Every effort is made to place questions, within the preset questionnaire, in such a way as to eliminate question order bias and allow the questionnaire to "flow" smoothly.

The Roper Reports™ questionnaire is a mixture of lifestyle, behavior, attitude, and opinion questions. Topics as diverse as Activities in Past Week, and Optimism/Pessimism About Our Country's Future form the vast majority of the Roper Reports™ questionnaire.

The three separate waves of Bigelow Holding Company's Limobus™ questionnaire were conducted in July, August, and September of 1991. Sample sizes in each wave were, respectively, 1,992, 1,983, and 1,972, resulting in a total of 5,947 respondents.

The technical appendix of this summary presents the methodology employed by The Roper Organization to produce a sample of respondents representative of the population of the continental United States.

While individual month readings for the question asked have a margin of sampling error of $\pm 3\%$, the averaged total sample presented in this summary carries a $\pm 1.4\%$ margin of sampling error.

Full question item wording can be found in the appendix, along with the three month total results for the question as well as sampling methodology.

The question included in Limobus™ reads as follows: This card contains a list of things that might have happened to you at some point in your life, either as a child or as an adult, or both. I'd like you to read down the card, and for each item tell me, to the best of your knowledge, if that has happened to you more than twice, once or twice, or never.

- a. Seeing a ghost
- b. Feeling as if you left your body
- c. Seeing a UFO
- d. Waking up paralyzed with a sense of a strange person or presence or something else in the room
- e. Feeling that you were actually flying through the air although you didn't know why or how
- f. Hearing or seeing the word TRONDANT and knowing that it has a secret meaning for you

- g. Experiencing a period of time of an hour or more, in which you were apparently lost, but you could not remember why, or where you had been**
- h. Seen unusual lights or balls of light in a room without knowing what was causing them, or where they came from**
- i. Finding puzzling scars on your body and neither you nor any one else remembering how you received them or where you got them**
- j. Having seen, either as a child or adult, a terrifying figure—which might have been a monster, a witch, a devil, or some other evil figure—in your bedroom or closet or somewhere else**
- k. Having vivid dreams about UFO's**

OVERALL FINDINGS

Out of the list of eleven occurrences, the one most frequently reported is “waking up paralyzed with a strange person or presence or something else in the room.” A total of 18% of Americans say this has happened to them. Thirteen percent say it has happened to them once or twice, and 5% say that it has happened more than twice.

Fifteen percent of respondents report “having seen, either as a child or adult, a terrifying figure—which might have been a monster, a witch, a devil, or some other evil figure—in your bedroom or closet or somewhere else.” Eighty-four percent say this has never happened to them, while 11% say it has happened once or twice, and 4% say it has happened more than twice.

The third most frequently reported occurrence is “feeling as if you left your body.” A total of 14% say this has happened to them. 10% say it has happened more once or twice, and four percent say it has happened more than twice. The other 85% of respondents say it has never happened.

Thirteen percent of Americans report “experiencing a period of missing time of an hour or more, in which you were apparently lost, but you could not remember why, or where you had been.” Ten percent say this has happened once or twice, while 3% say it has happened more than twice.

Roughly 1 in 10 Americans (11%) report “seeing a ghost.” Eight percent say they have seen a ghost once or twice, and 3 percent say they have seen a ghost more than twice. Eighty-eight percent of Americans say they have never seen a ghost.

One in ten Americans say they recall “feeling that you were flying through the air although you didn’t know why or how.” Seven percent report this has happened once or twice, and 3% percent say it has happened more than twice.

Eight percent say that they have “seen unusual lights or balls of lights in a room without knowing what was causing them, or where they came from.” Six percent say this has happened once or twice, and 2% say it has happened more than twice.

Eight percent of respondents report “finding puzzling scars on your body and neither you or anyone else remembering how you received them or where you got them.” Six percent say this has happened once or twice, and 2% say it has happened more than twice.

Seven percent of Americans say they have seen a UFO. 6% say they have seen a UFO once or twice, and 1 percent say they have seen a UFO more than twice. Ninety-two percent say they have never seen a UFO.

While 7% of Americans report having seen a UFO, 5% report “having vivid dreams about UFO’s. Four percent report having the dreams once or twice,

and 1% report having them more than once. The least frequently reported item is “hearing or seeing the word TRONDANT and knowing that it has a secret meaning for you.” Only 1% of Americans say this has happened to them.

THE POLITICAL SOCIAL ACTIVES— ROPER’S INFLUENTIAL AMERICANS

Interestingly, there is a group that is far more likely than the total population to say items on the list have happened to them—the political social actives, termed the Influential Americans by Roper.

Influential Americans are, by definition, the people who play an especially active role in their communities and in the nation. They are the community leaders, the committee members, the workers in all kinds of local organizations. They are the letter writers, the good government advocates, the political party workers.

Over the past four decades, the Influential Americans have consistently numbered approximately 1 in 10 of the total adult American population. The Influentials are predominantly in their thirties and forties, are married and have children. They are wealthier than most Americans, with a median income of \$38,700, compared to \$28,300 for the total population. On average, Influentials are also better educated—43% of Influentials are college graduates, compared to 20% of the total population. Influentials are usually the trend *setters*, rather than trend *followers*.

As mentioned, the Influential Americans are significantly more likely than the rest of the population to report all items on the list. Twenty-eight percent of Influentials report “waking up paralyzed,” compared to 18% of the total population. This tendency is also particularly noticeable for “feeling as if you left your body” (23% of Influentials, compared to 14% of the total population) and “feeling that you were flying through the air” (18% of Influentials, 10% of total).

Influentials also differ from the public, albeit to a lesser degree, for “seeing a ghost” (16% of Influentials compared to 11% total), “experiencing a period of time of an hour or more in which you were lost, but you could not remember why or where,” (17% of Influentials, 13% of total) and “having seen a terrifying figure” (19% of Influentials, 15% of total).

Influentials are also more likely to report having “seen unusual balls of light” (11% of Influentials, 8% of total), and “seeing a UFO” (10% of

Influentials, 7% of total). Influentials differ from total respondents *least* for the following items: “having vivid dreams about UFO’s (6% of Influentials, 5% of total), “finding puzzling scars on your body” (9% of Influentials, 8% of total) and “hearing or seeing the word TRONDANT” (2% of Influentials, 1% of total).

CONCLUSIONS

The Roper Organization’s research on behalf of Bigelow Holding Company produced results that were unexpected by Bigelow Holding Company; chiefly because the number of people reporting occurrences of items on the list far exceeded what was anticipated, and also because the answers cut across most demographic subgroups.

An item containing a fictional word— “hearing or seeing the word TRONDANT and knowing that it has a secret meaning for you” was included by Bigelow with Roper’s approval, in an attempt to gauge the reliability of people’s responses. It is interesting to note that only 1% of respondents, the lowest for any item, report this as having happened. The higher numbers of people that report other occurrences should not, therefore, be dismissed out of hand as yea-sayers or unreliable respondents. It is clear that significant numbers of people do report that these unusual events occurred, independent of any factors in the survey that might increase responses.

The Roper Organization and Bigelow Holding Company will investigate the effect of question wording in future Limobus™ studies.

How often has occurrence happened to you?

	Total (5,947) %	July (1,992) %	August (1,983) %	September (1,973) %
<i>Waking up paralyzed with a sense of a strange person or presence or something else in the room</i>				
Has happened	18	20	17	17
More than twice	5	6	4	5
Once or twice	13	14	13	12
Has not happened	81	79	82	83
Don't know	1	1	1	*
 <i>Having seen, either as a child or as an adult, a terrifying figure — which might have been a monster, a witch, a devil, or some other evil figure in your bedroom, closet, or somewhere else</i>				
Has happened	15	17	14	13
More than twice	4	5	3	3
Once or twice	11	12	11	10
Has not happened	84	83	85	86
Don't know	1	1	2	1
 <i>Feeling as if you left your body</i>				
Has happened	14	17	12	12
More than twice	4	5	3	3
Once or twice	10	12	9	9
Has not happened	85	82	86	87
Don't know	1	1	1	1
 <i>Experiencing a period of time of an hour or more, in which you were apparently lost, but you could not remember why, or where you had been</i>				
Has happened	13	15	11	12
More than twice	4	4	2	3
Once or twice	10	11	9	9
Has not happened	85	84	88	88
Don't know	1	1	1	1

* indicates less than 0.5%

How often has occurrence happened to you?

	Total (5,947) %	Julv (1,992) %	August (1,983) %	September (1,973) %
<i>Seeing a ghost</i>				
Has happened	11	13	10	10
More than twice	3	4	2	3
Once or twice	8	9	8	7
Has not happened	88	86	88	89
Don't know	1	1	1	1
<i>Feeling that you were actually flying through the air although you didn't know why or how</i>				
Has happened	10	12	9	11
More than twice	3	4	2	4
Once or twice	7	8	7	7
Has not happened	88	87	89	89
Don't know	1	1	1	*
<i>Seen unusual lights or balls of light in a room without knowing what was causing them, or where they came from</i>				
Has happened	8	10	6	8
More than twice	2	2	1	2
Once or twice	6	8	5	6
Has not happened	91	90	92	92
Don't know	1	1	1	*

* indicates less than 0.5%

How often has occurrence happened to you?

	Total (5,947) %	July (1,992) %	August (1,983) %	September (1,973) %
<i>Finding puzzling scars on your body and neither you nor anyone else remembering how you received them or where you got them</i>				
Has happened	8	9	7	8
More than twice	2	2	2	3
Once or twice	6	7	5	5
Has not happened	91	90	92	92
Don't know	1	1	1	*
<i>Seeing a UFO</i>				
Has happened	7	9	7	6
More than twice	1	2	1	1
Once or twice	6	7	6	5
Has not happened	92	90	92	91
Don't know	1	1	1	1
<i>Having vivid dreams about UFOs</i>				
Has happened	5	6	4	5
More than twice	1	2	1	1
Once or twice	4	4	3	4
Has not happened	94	93	95	95
Don't know	1	1	1	1
<i>Hearing or seeing the word TRONDANT and knowing that it has a secret meaning for you</i>				
Has happened	1	2	1	1
More than twice	*	*	*	*
Once or twice	1	1	1	1
Has not happened	97	96	97	98
Don't know	2	3	2	1

* indicates less than 0.5%

How often has occurrence happened to you?

	Total (5,947) %	PSA(s)/ Influential Americans (565) %
<i>Waking up paralyzed with a sense of a strange person or presence or something else in the room</i>		
Has happened	18	28
More than twice	5	9
Once or twice	13	19
Has not happened	81	72
Don't know	1	*
 <i>Having seen, either as a child or as an adult, a terrifying figure — which might have been a monster, a witch, a devil, or some other evil figure in your bedroom, closet, or somewhere else</i>		
Has happened	15	19
More than twice	4	4
Once or twice	11	15
Has not happened	84	81
Don't know	1	1
 <i>Feeling as if you left your body</i>		
Has happened	14	23
More than twice	4	7
Once or twice	10	16
Has not happened	85	76
Don't know	1	*
 <i>Experiencing a period of time of an hour or more, in which you were apparently lost, but you could not remember why, or where you had been</i>		
Has happened	13	17
More than twice	4	4
Once or twice	10	13
Has not happened	85	82
Don't know	1	*

* indicates less than 0.5%

How often has occurrence happened to you?

	Total (5,947) %	PSA(s)/ Influential Americans (565) %
<i>Seeing a ghost</i>		
Has happened	11	16
More than twice	3	5
Once or twice	8	11
Has not happened	88	84
Don't know	1	1
<i>Feeling that you were actually flying through the air although you didn't know why or how</i>		
Has happened	10	18
More than twice	3	8
Once or twice	7	10
Has not happened	88	81
Don't know	1	1
<i>Seen unusual lights or balls of light in a room without knowing what was causing them, or where they came from</i>		
Has happened	8	11
More than twice	2	8
Once or twice	6	3
Has not happened	91	89
Don't know	1	*
<i>Finding puzzling scars on your body and neither you nor anyone else remembering how you received them or where you got them</i>		
Has happened	8	9
More than twice	2	3
Once or twice	6	6
Has not happened	91	91
Don't know	1	*

* indicates less than 0.5%

How often has occurrence happened to you?

	Total (5,947) %	PSA(s)/ Influential Americans (565) %
<i>Seeing a UFO</i>		
Has happened	7	10
More than twice	1	1
Once or twice	6	9
Has not happened	92	89
Don't know	1	1
 <i>Having vivid dreams about UFOs</i>		
Has happened	5	6
More than twice	1	1
Once or twice	4	5
Has not happened	94	93
Don't know	1	1
 <i>Hearing or seeing the word TRONDANT and knowing that it has a secret meaning for you</i>		
Has happened	1	2
More than twice	*	1
Once or twice	1	1
Has not happened	97	97
Don't know	2	2

* indicates less than 0.5%

METHODOLOGY

Sampling Method

The persons interviewed in this study comprise a representative sample of the population of the Continental United States, age 18 and up—exclusive of institutionalized segments of the population (military bases, nursing homes, prisons, etc.).

A multi-stage, stratified probability sample of interviewing locations is employed in this research. The probabilities of selection at each stage are based on the latest U.S. Census population data, and detailed Census maps are used to identify and locate the selected areas.

At the first stage, 100 counties are selected with probabilities proportionate to population, after all the counties in the 48 contiguous states and the District of Columbia are ordered by population size within 18 strata. The strata are constructed by classifying counties as metropolitan and non-metropolitan with each of the 9 Census Geographic Divisions.

At the second stage, within each primary sampling unit, two Census block groups (or Census Enumeration Districts, when Census block statistics data are unavailable) are selected with probabilities proportionate to population from a computer listing in which the block groups (ED's) are stratified by size of place in which located.

At the third stage, within each sample block group (ED), two sample locations (blocks or rural equivalents of blocks) are selected. When Census block data are available the sample blocks are selected with probability proportionate to size (population) from a cumulative computer listing. When no such block data are available, sample Enumeration Districts are broken into identifiable segments (small areas defined by roads, streams, railroad tracks, or other unambiguous boundaries), and the sample segments are selected with equal probability.

At the block (segment) level, the interviewer is assigned a starting point and a path to proceed around the sample area. Quotas for men and women over and under age 45 are imposed, as are quotas for employed people. In addition it is required that interviewing on half the assigned blocks (segments) be conducted after 5 PM on weekdays or on Saturday or Sunday, to facilitate fulfilling the employment quota. While the assigned quotas produce the proper number of men and women over and under 45, there are small imbalances when the sample is examined in finer age terms, e.g., too few 18-29 year olds, too many 30-44 year olds. Accordingly the sample is weighted to achieve the correct proportions of men and women 18-29, 30-44, 45-59 and 60 and over.

A validation is made by telephone of all interviewers' work from our centralized telephone facility.

Demographic Breakdowns

11 standardized breakdowns plus six additional key analysis groups are shown for every substantive question asked in this study. Certain of these demographic breaks require no comment, others do. Sex is recorded by interviewer observation. Age is asked. Income is reported total annual family income. "Married couples income" is designed to show one and two income families among married respondents.

Occupation relates to the respondent interviewed, not to the head of the household. Titled executives and members of professions are included in the executive/professional category. In addition, owners of farms, owners of small businesses and higher ranking military personnel are included in Executive and Professional. White Collar ranges from retail sales clerks to minor administrative office personnel to travelling salesmen to lab technicians and the like, and would include such people as junior officers in the military. Blue Collar includes all other employed people both skilled and unskilled. It would include lathe workers, janitors, firemen, policemen, taxi drivers, etc. Homemakers are women who are not employed and who designate themselves as housewives. Those who are unemployed, students or retired are not shown but are included in the total sample and are both included and classified according to other demographic breakdowns (sex, age, etc.). Most of these other "occupational" groups are statistically too small to show separately and it would be meaningless to combine them. Moreover, we have tried to compress as many meaningful breaks into two pages of computer printout as possible. We have, therefore, eliminated various smaller subgroups or meaningless combinations of subgroups from the demographic breaks.

Employed females include both full-time and part-time workers.

Union members are respondents who report they themselves belong to a union. (Non-union family members of union people are not included.)

A Political/social activity index was built out of responses to a list of activities respondents reported having engaged in the last year—such things as having run for political office, having written a letter to the editor, having made a speech, or written an article, having worked in a political campaign, being an officer of a civic or fraternal organization, signed a petition, etc. "Signed a petition" was put on the list largely so that anyone who wanted to say he had done something would have something to say. All responses to "signed a petition" are ignored in building this scale. Respondents who have done three or more of the things on the list (beyond signing a petition) are classified as "Pol/Soc Active"—and may be roughly equated with "thought leaders."

Any college education causes a person to be included in the College category. Trade school or secretarial school following high school does not, however, count as college. Anyone who is a high school graduate (with or without additional trade school education) is included in High School Graduate.

Anyone with an 11th grade education or less is included in Non-High School Graduate. Since these are self-reported education levels, they are subject to some exaggeration.

Members of minor political parties and those who refuse to identify their party affiliation are not shown.

Political philosophy is based on how people regard their own political/social outlooks—as being conservative (very or moderately so), middle-of-the-road, or liberal (very or moderately so).

Geographic area conforms to, but combines U.S. census regions. The Northeast is New England and the Middle Atlantic states. The Midwest is the East North Central and West North Central states. South is South Atlantic, East South Central and West South Central. West is the Mountain and the Pacific states.

Market size is a definition created by the A.C. Nielsen Company basically for marketing purposes. “A” markets are the major markets, “D” markets are the minor markets. “A” markets consist of all counties comprising the 25 largest metropolitan areas. “B” markets consist of all other counties that either individually have a population of 150,000 or more, or form part of a metropolitan area having an aggregate population of 150,000 or more. “C” markets are all other counties having an individual population of 35,000 or more or forming part of a metropolitan area having a population of 35,000 or more. “D” markets are all remaining counties in the country.

The presence of children aged 0-18 is shown as one category in the statistical tables. The former demographic breaks showing households with children under the age of 13, and between the ages of 13-18, are still available by special request.

Cable TV subscribers are self-reported. The “no cable” category includes both those who have cable TV available to them but do not subscribe and those who live where cable TV is not available.

Other demographic breaks not shown in the statistical tables are available by special request. These include religious affiliation (a former banner point), one and two person families (also a former banner point), and any other demographic shown in the “Demographic characteristics” pages of the report.

Percentages Not Totalling 100%

The computer rounds off each percentage to the nearest whole percent. As a result, the percentages in a given column of figures frequently add to 98, 99, 101, 102 rather than 100.

Where a question permits multiple answers, percentages may add to 130, 185, 210, or even more, depending on the number of answers each respondent gives.

Dashes (-) are used when answers fall below 0.5% among a given subgroup.

TABLE 01-A
(continued)

THIS CARD CONTAINS A LIST OF SOME THINGS THAT MIGHT HAVE HAPPENED TO YOU AT SOME POINT IN YOUR LIFE, EITHER AS A CHILD OR AS AN ADULT, OR BOTH. I'D LIKE YOU TO READ DOWN THE CARD, AND FOR EACH ITEM TELL ME, TO THE BEST OF YOUR KNOWLEDGE, IF THAT HAS HAPPENED TO YOU MORE THAN TWICE, ONCE OR TWICE, OR NEVER.

	SEX		AGE						HOUSEHOLD INCOME						EDUCATION						MARITAL STATUS			PARENTS OF KIDS AGED 0-17															
			18-29		30-44		45-59		UND 15M		15M 30M		UND 30M		30M 50M		UND 50M		50M+ GRAD		HS GRAD		SOME COLL		COLL GRAD		BOTH 0,1 WORK		UNMARRIED		AGE BOTH 0,1 44-45+ WORK WORK								
			FE	MALE	29	44	59	60+	UND	15M	30M	50M	50M+	UND	30M	50M	50M+	UND	30M	50M	50M+	UND	30M		50M	50M+	UND	30M	50M	50M+		UND	30M	50M	50M+				
TOTAL	5947	2825	3122	1539	1916	1172	1321	1034	1455	1388	836	1186	2194	1389	1164	1708	1803	1528	900	1014	1247	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			
SEEING A UFO	65	41	24	17	31	11	6	14	13	23	7	14	24	19	8	19	15	24	7	12	15	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%		
MORE THAN TWICE							*																																
ONCE OR TWICE	366	201	165	98	147	74	47	57	93	105	54	54	142	99	71	126	90	110	40	83	85	6%	7%	6%	4%	6%	7%	5%	7%	4%	8%	7%	4%	8%	7%	8%	7%		
NEVER	5447	2546	2901	1406	1716	1069	1256	949	1328	1246	770	1105	1996	1257	1079	1539	1679	1377	843	908	1132	92%	90%	93%	91%	90%	93%	90%	93%	90%	94%	90%	94%	90%	91%	91%	91%		
DON'T KNOW	69	37	32	18	22	17	12	14	21	13	5	13	33	15	6	24	19	16	10	11	16	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	
WAKING UP PARALYZED WITH A SENSE OF A STRANGE PERSON OR PRESENCE OR SOMETHING ELSE IN THE ROOM	302	119	183	89	129	57	28	65	71	81	47	49	105	75	72	95	61	112	35	63	84	5%	4%	6%	5%	5%	6%	6%	3%	7%	4%	6%	7%	4%	6%	7%	4%	7%	
MORE THAN TWICE							2%	6%	5%	6%	6%	4%	5%	5%	6%	6%	3%	7%	4%	6%	7%																		
ONCE OR TWICE	773	342	431	253	273	137	109	162	197	198	102	156	278	193	143	224	217	230	102	139	192	13%	12%	14%	16%	14%	12%	8%	16%	14%	12%	13%	12%	15%	11%	14%	15%	14%	15%
NEVER	4833	2344	2489	1186	1505	968	1174	800	1178	1097	684	976	1788	1116	944	1381	1512	1177	754	807	959	81%	83%	80%	77%	79%	83%	89%	77%	81%	82%	81%	84%	77%	84%	80%	77%	80%	77%
DON'T KNOW	40	20	20	11	9	10	9	7	10	12	3	5	23	5	5	8	13	9	9	5	12	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%

TABLE O1-A
 (continued)

THIS CARD CONTAINS A LIST OF SOME THINGS THAT MIGHT HAVE HAPPENED TO YOU AT SOME POINT IN YOUR LIFE, EITHER AS A CHILD OR AS AN ADULT, OR BOTH. I'D LIKE YOU TO READ DOWN THE CARD, AND FOR EACH ITEM TELL ME, TO THE BEST OF YOUR KNOWLEDGE, IF THAT HAS HAPPENED TO YOU MORE THAN TWICE, ONCE OR TWICE, OR NEVER.

	SEX	AGE												HOUSEHOLD INCOME												EDUCATION												MARRIED						UNMARRIED						PARENTS OF KIDS AGED 0-17
		18-				30-				45-				15M			30M			NON-			HS			SOME COLL			COLL GRAD			BOTH 0, 1			AGE 44-			AGE 45+			WORK	WORK	WORK							
		FE	MALE	100%	100%	29	44	59	74	89	104	119	134	149	164	179	194	UND	15M	30M	50M+	UND	15M	30M	50M+	HS	GRAD	SOME	COLL	GRAD	COLL	GRAD	WORK	44-	45+	WORK	WORK													
TOTAL	5947	2825	3122	1539	1916	1172	1321	1034	1455	1388	836	1186	2194	1389	1164	1708	1803	1528	900	1014	1247	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%												

FINDING PUZZLING SCARS ON YOUR BODY AND NEITHER YOU NOR ANYONE ELSE REMEMBERING HOW YOU RECEIVED THEM OR WHERE YOU GOT THEM

MORE THAN TWICE	146	70	75	62	43	21	20	32	35	37	17	32	51	42	20	36	37	58	15	25	37	2%	2%	4%	2%	1%	3%	2%	3%	2%	2%	2%	2%	2%	4%	2%	2%	3%
ONCE OR TWICE	327	165	162	147	103	46	32	67	85	86	40	74	125	80	49	86	73	145	23	50	84	6%	6%	5%	4%	6%	6%	4%	5%	4%	5%	4%	9%	3%	5%	7%	8%	
NEVER	5430	2573	2858	1318	1760	1092	1260	927	1319	1257	776	1070	1997	1261	1092	1573	1681	1315	853	932	1118	91%	92%	86%	92%	93%	90%	91%	94%	92%	93%	86%	95%	92%	90%	90%	90%	
DON'T KNOW	44	16	27	13	9	12	9	8	16	8	3	10	22	7	4	12	12	10	10	7	8	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	

HAVING SEEN, EITHER AS A CHILD OR ADULT, A TERRIFYING FIGURE—WHICH MIGHT HAVE BEEN A MONSTER, A WITCH, A DEVIL, OR SOME OTHER EVIL FIGURE—IN YOUR BEDROOM OR CLOSET OR SOMEWHERE ELSE

MORE THAN TWICE	220	92	127	83	78	35	23	47	54	56	27	42	79	52	44	56	50	90	23	33	59	4%	3%	4%	5%	3%	4%	3%	4%	4%	3%	3%	6%	3%	3%	5%	5%			
ONCE OR TWICE	650	313	337	218	257	111	64	123	149	176	93	123	226	168	131	202	153	216	79	138	154	11%	11%	11%	14%	13%	9%	5%	12%	10%	12%	11%	12%	8%	14%	9%	14%	12%		
NEVER	5015	2386	2629	1221	1560	1012	1221	857	1235	1140	711	1015	1858	1158	977	1432	1585	1206	784	831	1021	84%	84%	84%	79%	81%	86%	92%	83%	85%	86%	85%	83%	84%	84%	88%	79%	87%	82%	82%
DON'T KNOW	62	33	29	16	20	13	13	6	17	16	5	6	31	11	12	18	15	16	13	12	14	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%		

LIMBUS - JULY, AUGUST, SEPTEMBER, 1991
 THE ROPER ORGANIZATION

TABLE 01-A
 (continued)

THIS CARD CONTAINS A LIST OF SOME THINGS THAT MIGHT HAVE HAPPENED TO YOU AT SOME POINT IN YOUR LIFE, EITHER AS A CHILD OR AS AN ADULT, OR BOTH. I'D LIKE YOU TO READ DOWN THE CARD, AND FOR EACH ITEM TELL ME, TO THE BEST OF YOUR KNOWLEDGE, IF THAT HAS HAPPENED TO YOU MORE THAN TWICE, ONCE OR TWICE, OR NEVER.

	SEX	AGE						HOUSEHOLD INCOME						EDUCATION						MARITAL STATUS						PARENTS OF KIDS AGED 0-17										
		18-29		30-44		45-59		60+ UNK		15M UNK		30M UNK		50M UNK		50M+ UNK		NON-HS GRAD		HS GRAD		SOME COLL GRAD		COLL GRAD			BOTH 0,1 WORK		MARRIED		UNMARRIED		AGE 44-45+		AGE 46-47	
		FE-MALE	MALE	FE-MALE	MALE	FE-MALE	MALE	FE-MALE	MALE	FE-MALE	MALE	FE-MALE	MALE	FE-MALE	MALE	FE-MALE	MALE	FE-MALE	MALE	FE-MALE	MALE	FE-MALE	MALE	FE-MALE	MALE		FE-MALE	MALE	FE-MALE	MALE	FE-MALE	MALE	FE-MALE	MALE		
TOTAL	5947	2825	3122	1539	1916	1172	1321	1034	1455	1388	836	1186	2194	1389	1164	1708	1803	1528	900	1014	1247	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			
HAVING VIVID DREAMS ABOUT UFOS	71	36	36	26	28	8	10	4	20	24	12	7	26	20	17	28	12	26	5	16	4	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%			
MORE THAN TWICE	220	140	80	78	88	36	17	33	48	68	28	30	80	70	40	78	49	77	16	52	39	4%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%			
ONCE OR TWICE	5604	2626	2978	1424	1784	1118	1278	981	1378	1284	791	1136	2068	1290	1099	1592	1727	1407	870	940	1193	94%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%			
NEVER	52	23	29	12	16	10	14	16	10	12	6	12	21	10	8	10	15	17	9	6	11	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%			
DON'T KNOW	1%	1%	1%	1%	1%	1%	1%	2%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%				

TABLE O1-B
(continued)

THIS CARD CONTAINS A LIST OF SOME THINGS THAT MIGHT HAVE HAPPENED TO YOU AT SOME POINT IN YOUR LIFE, EITHER AS A CHILD OR AS AN ADULT, OR BOTH. I'D LIKE YOU TO READ DOWN THE CARD, AND FOR EACH ITEM TELL ME, TO THE BEST OF YOUR KNOWLEDGE, IF THAT HAS HAPPENED TO YOU MORE THAN TWICE, ONCE OR TWICE, OR NEVER.

	RACE												GEOGRAPHIC AREA				MARKET SIZE				POLITICAL AFFIL				POLITICAL IDEOLOGY				OCCUPATION				OTHER PERSONAL DEMOGRAPHICS							
	BLACK			HISPANIC			WHITE			OTHER			N		S		C		D		DEM		REP		LIB		PROF		EXEC		WHITE COLL		BLUE COLL		HOME MAKR		UN-EMPL		POL/ION SOC	
	TOTAL	%		TOTAL	%		TOTAL	%		TOTAL	%		A	B	C	D	CON	REP	DEM	LIB	PROF	EXEC	WHITE COLL	BLUE COLL	HOME MAKR	UN-EMPL	ION SOC	FEMS	MERS	ACTV	UN-EMPL	ION SOC	FEMS	MERS	ACTV					
TOTAL	5947	100%	1273	1498	1987	1189	2477	1827	888	756	2207	1696	2561	1101	1012	1029	1635	746	1641	566	565	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			
FEELING THAT YOU WERE ACTUALLY FLYING THROUGH THE AIR ALTHOUGH YOU DIDN'T KNOW WHY OR HOW MORE THAN TWICE	201	3%	12	23	2%	50	59	69	78	63	38	23	76	56	90	44	49	50	42	17	50	23	46	3%	2%	3%	4%	4%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%		
ONCE OR TWICE	442	7%	39	70	6%	135	124	113	191	130	80	40	152	114	176	96	87	92	122	38	126	51	56	7%	6%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%		
NEVER	5256	88%	618	1172	1303	1789	992	2191	1617	760	687	1966	1520	2277	957	862	878	1453	686	1447	487	460	88%	92%	87%	90%	89%	89%	88%	85%	89%	92%	88%	86%	81%	81%	81%	81%		
DON'T KNOW	49	1%	6	8	1%	15	15	17	17	10	5	12	6	17	5	4	9	19	5	17	5	3	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%		
HEARING OR SEEING THE WORD TRONDANT AND KNOWING THAT IT HAS A SECRET MEANING FOR YOU MORE THAN TWICE	18	*	1	1	*	2	9	6	12	3	2	1	6	7	6	5	4	6	4	1	7	4	3	*	*	*	*	*	*	*	*	*	*	*	*	*	*	*		
ONCE OR TWICE	53	1%	10	5	1%	14	28	6	34	5	9	5	16	20	25	11	5	16	17	4	10	7	6	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	
NEVER	5754	97%	1258	1433	1912	1151	2396	1779	842	738	2149	1634	2483	1059	992	989	1573	726	1588	541	547	97%	99%	96%	96%	97%	96%	97%	96%	98%	98%	96%	97%	97%	95%	97%	95%	97%		
DON'T KNOW	122	2%	8	9	1%	49	38	26	35	40	34	12	36	34	48	26	12	18	42	15	37	14	9	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	

THIS CARD CONTAINS A LIST OF SOME THINGS THAT MIGHT HAVE HAPPENED TO YOU AT SOME POINT IN YOUR LIFE, EITHER AS A CHILD OR AS AN ADULT, OR BOTH. I'D LIKE YOU TO READ DOWN THE CARD, AND FOR EACH ITEM TELL ME, TO THE BEST OF YOUR KNOWLEDGE, IF THAT HAS HAPPENED TO YOU MORE THAN TWICE, ONCE OR TWICE, OR NEVER.

	RACE		GEOGRAPHIC AREA				MARKET SIZE			POLITICAL AFFIL.			POLITICAL IDEOLOGY			OCCUPATION			OTHER PERSONAL DEMOGRAPHICS									
	TOTAL	BLCK	NE	MW	SO	WST	A	B	C	D	DEM	REP	CONS	LIBL	EXEC	WHTE	BLUE	HOME	UN-	POL/	EMPL	ION	SOC					
TOTAL	5947	675	1273	1498	1987	1189	2477	887	888	756	2207	1696	2561	1101	1012	1029	1635	746	1641	566	565	100%	100%	100%	100%	100%	100%	100%

EXPERIENCING A PERIOD OF TIME OF AN HOUR OR MORE, IN WHICH YOU WERE APPARENTLY LOST, BUT YOU COULD NOT REMEMBER WHY, OR WHERE YOU HAD BEEN

MORE THAN TWICE	171	27	27	46	59	39	67	55	31	19	57	37	63	49	28	32	45	15	38	17	24	3%	4%	2%	3%	2%	3%	2%	3%	4%							
ONCE OR TWICE	578	87	94	154	191	139	208	178	120	73	217	171	248	141	80	107	174	44	152	65	74	10%	8%	7%	10%	10%	13%	8%	10%	11%	6%	9%	11%	13%			
NEVER	5152	589	1144	1289	1718	1002	2187	1585	723	658	1923	1475	2226	906	900	883	1395	679	1437	482	466	87%	87%	90%	86%	84%	88%	87%	87%	82%	89%	86%	85%	91%	88%	85%	82%
DON'T KNOW	46	3	8	8	20	9	15	9	14	7	9	14	24	5	3	7	21	8	15	2	2	1%	*	1%	1%	*	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	

SEEN UNUSUAL LIGHTS OR BALLS OF LIGHT IN A ROOM WITHOUT KNOWING WHAT WAS CAUSING THEM, OR WHERE THEY CAME FROM

MORE THAN TWICE	102	23	12	27	39	24	49	21	16	15	36	24	34	33	12	20	29	9	23	8	15	2%	3%	1%	2%	2%	1%	2%	2%	1%	2%	2%	1%	1%	1%	3%	
ONCE OR TWICE	374	43	60	97	139	79	141	124	58	52	133	106	156	106	47	70	124	41	122	36	47	6%	5%	6%	7%	7%	6%	10%	5%	7%	8%	6%	7%	6%	8%		
NEVER	5439	607	1197	1362	1800	1079	2277	1674	803	684	2034	1557	2355	959	951	932	1471	689	1489	520	502	91%	90%	94%	91%	91%	92%	92%	90%	91%	90%	92%	91%	92%	91%	88%	85%
DON'T KNOW	32	2	4	12	9	7	10	7	11	4	4	10	16	4	2	6	11	7	8	3	2	1%	*	1%	*	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	

LIMBUS - JULY, AUGUST, SEPTEMBER, 1991
THE ROPER ORGANIZATION

TABLE 01-B
(continued)

THIS CARD CONTAINS A LIST OF SOME THINGS THAT MIGHT HAVE HAPPENED TO YOU AT SOME POINT IN YOUR LIFE, EITHER AS A CHILD OR AS AN ADULT, OR BOTH. I'D LIKE YOU TO READ DOWN THE CARD, AND FOR EACH ITEM TELL ME, TO THE BEST OF YOUR KNOWLEDGE, IF THAT HAS HAPPENED TO YOU MORE THAN TWICE, ONCE OR TWICE, OR NEVER.

	POLITICAL												OCCUPATION												OTHER PERSONAL DEMOGRAPHICS																	
	GEOGRAPHIC AREA						MARKET SIZE						AFFIL						IDEOLOGY						AFFIL						POL/		SOC									
	RACE	BLK	NE	MW	SO	WST	A	B	C	D	DEM	REP	CONS	LIBL	EXEC	WHITE	BLUE	HOME	MAKR	COLL	COLL	COLL	COLL	COLL	COLL	COLL	COLL	COLL	COLL	UN-	POL/	EMPL	ION	SOC	FEMS	MERS	ACTV					
TOTAL	675	1273	1498	1987	1189	2477	1827	888	756	2207	1696	2561	1101	1012	1029	1635	746	1641	566	565	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
HAVING VIVID DREAMS ABOUT UFOS	71	14	16	29	12	38	19	10	4	28	23	23	23	10	23	16	4	25	7	8	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%
MORE THAN TWICE	4%	3%	3%	4%	4%	4%	3%	5%	3%	4%	4%	4%	4%	3%	5%	3%	5%	3%	6%	5%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	2%	
ONCE OR TWICE	220	18	35	67	73	45	103	46	26	78	66	95	53	34	56	80	13	52	33	28	4%	3%	3%	4%	3%	5%	3%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%
NEVER	5604	645	1218	1397	1867	1122	2316	1750	818	720	2089	1592	2419	1018	963	943	1522	723	1548	519	525	94%	96%	93%	94%	92%	95%	92%	95%	92%	93%	97%	94%	92%	93%	94%	92%	93%	94%	92%	93%	
DON'T KNOW	52	4	6	19	9	20	12	16	5	12	14	24	7	5	7	18	7	16	7	4	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%	1%

ANALYSIS OF THE SURVEY RESULTS

In the history of UFO research, many have tried to estimate how many individuals may have undergone abduction experiences, but now, for the first time, we have reliable numbers to study, and scientifically-gathered statistics to analyze. A survey of this kind, with so many built-in controls and such a large, carefully-selected demographic sample, has long been a desirable but seemingly unattainable research goal. In the spring of 1991, when financial support finally became available and planning for the survey began to take shape, project directors Jacobs and Hopkins held informal discussions with many mental health professionals, sociologists, journalists and our colleagues in UFO research professions. All applauded the effort and gave helpful suggestions, but none, the present authors included, predicted that we would find the high percentages of "yes" answers that we are now making public

The Roper sample of 5,947 adults is so large that the results of the survey contain a margin of error of only $\pm 1.4\%$. The careful attention to demographics and the face-to-face polling methods used by the Roper Organization, described in an earlier section of this report, will not be repeated here. (It should be reiterated, however, that the Roper sample excludes everyone under the age of 18, all residents of Alaska and Hawaii, and all those residing in group facilities such as dormitories, hospitals, and so on.) Though the population of the United States is a bit less than 249,000,000, the actual number of people represented by the Roper Survey after these demographic exclusions is about 185,000,000. When calculating the percentage of the population represented by our "yes" answers, we use the lower figure. Thus, when 8% of our respondents reported that they have "seen unusual lights or balls of light in a room without knowing what was causing them, or where they came from," that 8% can be said to represent a total of 14,800,000 Americans.

ESTIMATING NUMBERS

It is useful to translate the actual percentages of "yes" respondents in our sample of 5,947 to the equivalent number of people among the 185,000,000 ostensibly represented by Roper's demographically balanced sample. The process yields some surprising results:

The item which yielded the highest number of "yes" responses is also the only double-barreled question in the survey. Unlike a simple query such as "have you ever seen a UFO?", this question asks if two conditions have occurred simultaneously. One might therefore expect it to have a lower percentage of positive responses than the other, simpler items. Yet 18% of our respondents say they have wakened up paralyzed with a sense of a strange person or presence or something else in the room. This percentage, with a ± 1.4 margin of error represents: 33,300,000 people.

Those who have experienced a period of an hour or more in which they were apparently lost but did not remember why or where they had been: 24,050,000 people.

Those that were actually flying through the air although they didn't know why or how: 18,500,000 people.

Those who found puzzling scars on their bodies, with neither they nor anyone else remembering how they received them or where they got them: 14,800,000 people.

Taken one by one, these percentages and the corresponding large numbers of people they represent may indicate nothing more than the fact that a huge number of Americans willingly report highly anomalous personal experiences. Considered singly, each of these symptoms of a possible UFO abduction can have other, more mundane explanations (even though these explanations may in themselves turn out to be quite surprising). But as has been explained earlier, when a respondent answers "yes" to at least four of these five indicator questions, there is a strong possibility that individual is a UFO abductee.

The total number of respondents who answered "yes" to four or five of the five key symptomatic questions is 119, or 2% of the sample of 5,947. Two percent of the 185,000,000 adult Americans represented by the Roper sample is 3,700,000 people. This figure, as has been pointed out, excludes all children, the populations of Hawaii and Alaska, and anyone living in shared, institutional quarters.

While few demographic relationships were found, we encountered two that were striking. They are illustrated in the following tables:

RELATIONSHIP BETWEEN FIVE INDICATOR EXPERIENCES AND SOCIAL/POLITICAL ACTIVISM

	Overall	Pol/Soc Actives
Waking up paralyzed with sense of strange figure	18%	28%
Missing time	13%	17%
Feeling of actually flying	10%	18%
Balls of light in room	8%	11%
Puzzling scars	8%	9%

The Roper Organization's study of social/political actives describes them as trend setters rather than trend followers, and elsewhere refers to them as "influential Americans." The positive correlation between social/political activism and indicator experiences came as a surprise to us. A priori, one might expect that more passive individuals would show more of the indicator experiences, yet the data shows the reverse. Could these experiences be causes of increased anxiety, and could this anxiety in turn be a motivator of social and political activities? It has also been theorized that this correlation does not necessarily mean that social/political actives are actually having more than the average number of unusual experiences. If respondents in this group are more confident and independent in their thinking, perhaps they are more willing than others to discuss unusual personal experiences. In this reading of the data the non-social/political actives may be under-reporting their unusual experiences.

RELATIONSHIP BETWEEN FIVE INDICATOR EXPERIENCES AND AGE

	AGE				
	Overall	18-29	30-44	45-59	60
Waking up paralyzed with sense of strange figure	18%	22%	21%	17%	10%
Missing time	13%	14%	13%	13%	10%
Feeling of actually flying	10%	11%	13%	10%	8%
Balls of light in room	8%	11%	9%	7%	5%
Puzzling scars	8%	14%	7%	6%	5%

In virtually every case indicator experiences decline with age, especially after 44. This is puzzling, since older people would be expected to have accumulated more such experiences. One hypothesis is that indicator experiences are concentrated in the younger years - the time of greatest UFO abduction activity in an individual's life and are then forgotten with advancing age. We know from surveys of crime victims that memory of even major crimes tends to fade over time. It is also possible that the number of individuals undergoing UFO abductions is increasing year by year; since these events begin in childhood, the total number of abductees in each age group would be greater among the youngest groups.

While the Roper Organization was polling its samples of nearly 6,000 adult Americans, Hopkins and Jacobs informally queried an opportunistically selected group of mental health professionals – psychiatrists, psychologists and therapists.. They were shown our eleven questions and asked to estimate what percentage of adult Americans they believed might answer “yes” to each item. We found that this group of 35 mental health professionals showed a marked tendency to underestimate the percentage of “yes” answers, particularly with respect to our five indicator experiences.

Though some of those who read this report are likely to disagree with our interpretation of the survey results, it should be noted that a major reason for our opinion is the massive weight of evidence, both physical and psychological, supporting the event-level reality of UFO abductions. And from an emotional perspective, we have found that everyone - scientist, layman, abductee and UFO researcher alike - wants to deny the reality of such bizarre and unsettling encounters. Denial offers comfort and reassurance to anyone troubled by the possibility that the UFO phenomenon, as represented by the thousands of UFO sightings, the photographs, radar reports and abduction accounts might actually represent a non-human intelligence and technology. In this context it is only natural to prefer easy, unreasoned denial to the effort of objective investigation.

But no matter how much we may prefer to sweep the UFO issue under the carpet, no one can accept with equanimity the fact that so many normally functioning people report such a cluster of alarming, thoroughly anomalous experiences. These surprisingly large numbers must be dealt with. Since the mental health professionals we interviewed greatly underestimated the prevalence of these strange recollections, a wide-ranging investigation of their meaning becomes even more imperative. To find out how to join us in this important research please fill out and return the mailer included in this booklet. In the meantime, one truth is self-evident: An extraordinary phenomenon demands an extraordinary investigation.

Budd Hopkins, David Jacobs and Ron Westrum.

JOHN CARPENTER COMMENTARY

My name is John S. Carpenter, and I am a licensed clinical social worker. I work as a psychiatric therapist in Springfield, Missouri, providing individual, marital, family, and group therapy for hospitalized psychiatric patients. I received a Masters in Social Work from Washington University in St. Louis in 1979 after obtaining a Bachelor's degree in Psychology from DePauw University, Indiana, in 1977. I received my initial training in Clinical Hypnosis from the Menninger Clinic in Topeka, Kansas in 1980. I have worked closely with several psychiatrists in dealing with a multitude of psychiatric disorders — including Multiple Personalities and other Dissociative Disorders. I have used hypnosis with sensitivity and creativity toward many positive and lasting changes.

I had followed the UFO phenomenon with casual interest but became more intrigued when reading about psychiatric professionals using hypnosis to break through periods of amnesia in people who had quietly reported an observation of a UFO. The accounts recovered seem remarkably alike from persons so vastly different in their backgrounds. In 1988 I volunteered my services to investigate these reports using my psychiatric experience and hypnotic skills. Although I thought I might manage to participate in at least one interesting case, I fully expected to have to wade through a variety of psychological issues first - including fantasies of hysterical individuals, dramatic confabulations from Borderline Personality Disorders, dissociative episodes as with Multiple Personalities, attention-seeking antics of sociopathic characters, intricately-woven psychodynamics of those traumatized in childhood, and the space-age delusions of insecure individuals, influenced by extraterrestrial themes and speculations in all of the media.

None of these expectations has become valid in my research thus far — much to my astonishment. I have interviewed many wonderful people — including schoolteachers, policemen, businessmen, college professors, and community leaders — and found no psychopathology which would even begin to explain these reports. These individuals normally cope well, but experience the symptoms of Post Traumatic Stress Disorder from some traumatizing or unsettling experience which is not only beyond the realm of their everyday routines but also “invisible” or mysteriously absent for our review and inspection. This leaves the individual doubting his sanity, minimizing his feelings, and remaining silent about his experiences — despite a nagging notion that **something** very real *did* occur.

That obsessive need to learn more has begun to compel hundreds and now thousands to come forward with their private recollections to any researchers and therapists who would listen with sensitivity and an open mind. This is reminiscent of how the immensity and complexity of the problems of family incest and child abuse were first doubted and disbelieved — until the growing

number of reports finally forced the consideration of these issues by the mental health community.

Scattered psychological testing from all over the United States seems to support the clinical impressions that the vast majority of those reporting UFO abduction experiences are basically healthy and free of psychopathology. Creativity and confabulation would produce a wide variety of individualized scenarios and details, reflecting one's unique background. Similarly, dreams may be alike in general themes but quite different in their specific details, characteristic of the individual and his life situations. Data collected from many researchers produce striking similarity in abduction theme, procedure, behavior, bizarreness, order of events, etc. Significant correlations are being found among written symbols observed, insignias on uniforms, anatomical detail, and other small and precise details which remain unpublished and, therefore, unavailable to the public.

Could people develop similarities subconsciously from exposure to publications, documentaries, and movies? A large percentage of these persons have had no exposure to details of abductions and actually no desire to know or even be involved in the subject. Most would tell you that they have been quite happy in their lives and did *not* want this unexpected intrusion. When simple folks from rural areas with no television, and small children who cannot read begin to recite the same familiar abduction scenario, how can one account for the supposed media influence?

Could hypnosis or the hypnotist, himself, be partly responsible? Not well known is the fact that approximately one-fourth of all UFO abduction cases are recalled consciously without the aid of hypnosis and yet correlate just as well with those experiences retrieved from amnesic periods. I deliberately attempt to lead individuals with direct hypnotic suggestions into sensible and credible directions but find consistent resistance to follow my lead. Instead, the person relates his/her own bizarre experience which then matches the accounts of others without the subject even realizing this. There is genuine relief and emotional bonding among abductees who have been fortunate enough to find support groups.

Are these hoaxes? Do some people desire attention or have a psychological need for something stimulating and exotic? First of all, hoaxes have been statistically documented at fewer than 5 % for all UFO reports. Secondly, what purpose is there to a hoax if the individual is fearful of telling others and avoidant of publicity? How could a farmer in Kansas construct the same exact detailed lies as a businessman in New York or an artist in Paris? And for what obscure purpose? There is generally *no* sense of gratefulness, appreciation, or "specialness" in these witnesses who have had their normal lives disrupted and confused by these unexpected events. Some have been quite angry and upset while others seek emotional relief.

Unknowingly, some mental health professionals have encountered some of

these individuals and categorized them as “paranoid”, “delusional”, or even “psychotic” because such encounters would *have to be fantasy!* It is our own disbelief that sets and defines the boundaries for what we accept comfortably as reality. How can we *know* for certain all that can or cannot exist? How egocentric are we to believe that we are the only intelligent life in the universe — and that if there is anyone else, we would certainly locate them *first*.

I recently worked with two mature women — both ignorant of all UFO data and scoring as “normal” on the MMPI — who had shared a period of amnesia for the same two hours just following the sighting of a bright, fast-moving ball of light. Their travel journal documented that it took them three hours to travel 72 miles at 75 m.p.h. — but only using one hour’s worth of gas. They remember pulling over briefly with great excitement and observing light beams shooting down from the light, 100 feet away. In what seems like the next moment they are pulling back onto the road and feeling irritable, restless, and exhausted. I hypnotized them separately and recovered two unexpected abduction scenarios with hours of detail. Analysis revealed at least 42 direct correlations between their independently-retrieved accounts. Some details even matched unpublished data that nobody from the general population could have known. Significantly, their anxieties were eased, restful sleep was restored, and genuine relief was experienced with the release of the repressed material from the amnesic period that they *both* had shared.

Many stories are now surfacing from children as young as two years old, who describe abduction experiences. Typically, a child might report that “funny little men” with “big black eyes” take him “into the sky” to see the little “space doctor” in his “round exam room”. The child reports that the “doctor talks to me in my head” and “tells me I will think it was just a dream.” These stories might easily be passed off as typical fantasies until the child is actually found absent from his crib, dazed in a nearby field, or outside of the bolt-locked home at night. Peculiar incisions, needle-marks, triangular bruises, and scoop-like scars of unknown origin seem to add further “evidence” as to the existence of some kind of anomalous event. Furthermore, when asked to make drawings, these young people draw the familiar hairless, skinny, gray humanoids with big black eyes. In sharp contrast, a classroom of children was asked to “draw an alien” — but *none* produced a “typical gray” alien as reported in research. All drew wonderfully creative and vastly different figures which displays — as one would expect — unique representations of their own personalities and individual experiences.

Many will insist that this *must* be some kind of psychological phenomenon or modern folklore. If this were true, then we would have to account for those persons who have actually witnessed an abduction occurring — observing the beam of light engulfing the individual, watching someone floating out his window, and witnessing the existence of small beings as well. With multiple witnesses, documented absences, correlating wounds and perfectly-round scorched

areas of earth, the phenomenon becomes much more than mythical or imaginary. There is a great need for sensitive, informed and open-minded professionals to aid in the research and treatment of those who report such traumatic experiences. Thousands are coming forth with very few reliable individuals in which to trust or seek credible answers.

John S. Carpenter, MSW, ACSW, LCSW

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HOW THIS SURVEY WAS DESIGNED

by

Budd Hopkins and David Michael Jacobs, Ph.D.

Every month the Roper Organization conducts an “omnibus poll” which deals with many different subjects, political, social, and economic, as well as with specific market research issues. The interviews are conducted face-to-face, in the respondent’s home, rather than by telephone, and the full survey is designed to take roughly fifty minutes. (See the Roper Organization’s full report for further information on methodology).

At the very beginning of this project the decision was made not to ask any direct questions about the UFO abduction phenomenon. Since, as we have seen, these experiences are usually recalled only partially, in separate, dream-like fragments and through unusual periods of “missing time,” we decided to ask only about specific symptoms. Few abductees are fully, consciously aware of their unenviable status, and fewer still, we thought, would admit being so aware to a Roper representative.

The eleven questions were designed to follow in a particular and unvarying order. The first (a) was, “Do you remember ever seeing a ghost?” This question was marginal to our central purpose, but it had an important function: the introduction of unusual, occult subject matter to those being interviewed. Obviously, many people who believe they have seen ghosts may not be involved with the UFO abduction phenomenon. On the other hand, UFO investigators have encountered abductees who long ago decided that the strange, small white figures they had seen by their bedsides must be ghosts. (What else could they be?) The question was useful even though the 11% who said they had seen a ghost comprise a group of respondents not clearly relevant to the UFO issue.

Question (b), “Do you remember feeling as if you left your body?” deepens the effect created by the first question. The classic “out-of-body” experience is another common issue in the world of occult and paranormal phenomena, but, again, its intersection with the symptoms of UFO abduction is inconclusive. (Many abductees have described to investigators the feeling of having left their bodies). At a time when many Americans practice meditation and follow a variety of New Age theologies, out-of-body experiences are perhaps more acceptable than encounters with ghosts; thus 14% of the population is unafraid to admit the feeling of having left the body.

Question (c), “Do you remember seeing a UFO?” allows us to measure positive response bias. In the past, numerous individuals and polling firms, including Gallup’s national surveys and Dr. Peter Sturrock’s questionnaire of

astronomers and astrophysicists, have asked this same question. In most of these earlier surveys, about 10% of the respondents have answered affirmatively. The Roper report's 7% supports the idea of little positive response bias. Since UFO abductees often do not consciously remember having seen the craft from the outside, this statistic by itself is an uncertain indicator of the abduction phenomenon.

With question (d) we are dealing for the first time with a major component of the of UFO abduction syndrome: "Do you remember waking up paralyzed with a sense of a strange person or presence or something else in the room?" A fleeting sensation of paralysis is not unusual in either hypnogogic or hypnopompic states, but adding the phrase "with a sense of a strange person or presence or something else in the room" forcefully narrows the scope of the question. And following, as it does, more conventional inquiries about ghosts and UFOs, the respondent can easily overlook the highly unusual nature of the question. With this frequently reported symptom of UFO abduction coupled with other equally characteristic yet highly unusual symptoms, we hoped to be able to estimate the extent of what might be called an otherwise nearly invisible phenomenon. It is highly significant that "waking up paralyzed with a strange presence in the room" was reported by 18% of the nearly 6,000 respondents.

Question (e) asks, "Do you remember feeling that you were actually flying through the air although you didn't know why or how?" In the dream state and perhaps even in childish fantasy the sensation of flying is common, so again our problem was to phrase the issue in such a way as to discount these familiar manifestations. By using the adverb "actually" (flying) and adding the qualifying phrase "although you didn't know why or how," we hoped that the respondents would not consider that simple flying dreams required a "yes" answer. If one seemed "actually" to be flying but knew moments later that it had been merely a dream, the awakened dreamer would obviously know why the sensations had occurred. UFO abductees, on the other hand, often remember being actually aloft in a very real, non-dream state, though they do not know how this is possible or why it is occurring. 10% of our respondents claimed to have felt the sensation of actually flying without knowing why or how..

Item (f) is a simple control question to measure positive response bias: "Do you remember hearing or seeing the word TRONDANT and knowing that it has a secret meaning for you?" The word TRONDANT was invented by Budd Hopkins for use in an earlier OMNI magazine poll, and is quite devoid of any meaning, secret or otherwise. To discover the number of respondents who might simply say yes to every odd or paranormal question, it was imperative to include just such a control question. The fact that only 1% found meaning in this invented word is a strong indication of the accuracy of the other responses.

Question (g) is at least as important as (d): "Do you remember experiencing a period of an hour or more, in which you were apparently lost, but you could

not remember why, or where you had been?" The language of this question was designed to eliminate certain not uncommon experiences of missing time, such as "road fatigue," in which a driver or passenger may not remember exact details of a long drive and thus may regard an hour or so as having been "lost." Similarly, if a respondent recalled having lost an hour or more due to an alcoholic or drug blackout or a seizure of some kind, again he or she would know why, and probably also where the missing time episode took place. Therefore, it seemed to us that having been lost for an hour or more without remembering why or where would be quite a rare experience (apart from the UFO abduction phenomenon where it is frequently reported). A surprising 13% of the respondents stated that they had such an unsettling experience - nearly double the percentage of those who reported having seen a UFO.

Question (h) also deals with a commonly reported symptom of the UFO abduction phenomenon: "Do you remember having seen unusual lights or balls of light in a room without knowing what was causing them, or where they came from?" A specific locale - indoors, in a room - was mentioned to eliminate recollections of a variety of possible light effects one might observe in the night sky. Sighting unexplained lights or balls of light inside one's home or work place, we believed, would be so unusual an event as to be virtually nonexistent outside the UFO abduction phenomenon, and yet a surprising 8% of our respondents claimed such a sighting.

Question (i) dealt with a purely physical issue: "Do you remember finding puzzling scars on your body and neither you nor anyone else remembering how you received them or where you got them?" Probably every human being has a scar somewhere, the origin of which is not recalled. But to narrow the question here we used the qualifying word "puzzling" to describe more the respondents emotional reaction than the quality of the mark itself. Though characteristic scoop mark and straight-line cuts are found on most abductees, they often describe feeling very uneasy about the origins of these marks, making their reactions at least as significant as the appearance of the wounds themselves. Often the parent of an abductee will mention how upset he or she was when the mysterious scar was first seen. Thus, through the use of the word "puzzling" we tried to elicit just such cases. The 8% of the sample which answered yes to this question is surely smaller than the percentage of adults bearing scars of forgotten but mundane origin, and may more accurately indicate the percentage which found their wounds "puzzling."

Question (j) is the longest of the eleven: "Do you remember having seen, either as a child or adult, a terrifying figure — which might have been a monster, a witch, a devil, or some other evil figure — in your bedroom or closet or somewhere else?" The majority of UFO abductees have said yes to this question, and yet many non-abductee adults remember being afraid of a bogey man or monster during their childhood. The only wording in this question which might

separate the two groups is the absence of any qualifying phrases as “might have seen” or “thought you saw,” words which would have allowed vague childish fears and suspicions to elicit a yes answer. It is significant, perhaps, that the 15% which answered yes to this question is greater than the 11% which admitted to seeing a ghost. Presumably the 4% of the respondents who saw a terrifying figure of some sort did not believe it to be “merely” a ghost.

The final question (k) is simple and straightforward: “Do you remember having vivid dreams about UFO”? Though UFO abductees frequently have such dreams, presumably non-abductees might also include UFO imagery in their dreams. 5% of the population does remember having such dreams.

As has been explained earlier, in seeking clues as to whether or not a respondent may have had UFO abduction experiences, we placed heavy emphasis on the responses to questions d, e, g, h and i. Our research has shown that these experiences - missing time, paralysis with a figure in the room, etc. - are among the most common symptoms of UFO abduction. At the same time these questions inquire about extremely unusual experiences for normal, non-abductee humans. Question (f) was, as we've indicated, an effective control on confabulation, while the less crucial questions a, b, c, j and k, when answered affirmatively by a respondent saying yes to questions d, e, g, h, and i, may provide further evidence that respondent is a possible abductee.

AFTERWORD

**By
Robert Bigelow**

As I was flying to the conference on Anomalous Phenomena in Philadelphia in January of 1991, I sat wondering what I could do to help satisfy my own discovery process concerning the many reports of human (UFO-connected) abduction experiences. To satisfy my own curiosity, I decided sometime between naps, to promote the idea of nationwide surveys that might produce some form of measurement of this phenomenon.

Upon meeting the noteworthy sponsor of this conference, I took him aside and explained my proposal. Without hesitation, he agreed to the proposed project and the sharing of all costs of such an undertaking. Then and there, we established a fairly large budget to be used for multiple national surveys and other relevant work.

This effort was initiated without any expectation of unique results. But, now that apparently unexpected results have occurred, I feel it is important that additional surveys and other research be implemented. We did not fund this project for profit from sale of materials, nor for any monetary gain, media involvement or publicity; quite the opposite (my co-sponsor asks for anonymity). But, we strongly feel that it is important for the psychiatric community to consider the information and have the opportunity to conduct its own inquiry.

We are willing to fund workshops, seminars or forums in which any mental health professionals, with any personal view of the phenomenon, can participate fully.

Please let us know your response or commentary. All communications will be kept strictly confidential.

The authors and I thank you.

NOTES

Because information pertaining to the subject of this publication is frequently encountered, a few additional pages are provided so that the reader of this booklet can note additional information as desired.

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Future Conference Locations

Depending on the volume and locations of those who return these cards, conferences and workshops will be organized. Attendees will pay for travel, lodging and food. If you are interested in attending these free conferences for the purpose of asking questions, hearing more details about this phenomena, and determining whether there may be substance to the information in this booklet, please indicate your name, address, and which American cities would be convenient for your attendance. (Please pick at least 3.)

We shall respond as soon as possible with some tentative dates, locations and names of conference and workshop presenters.

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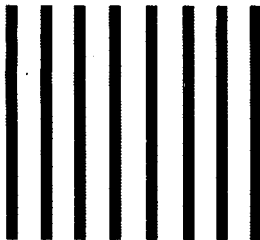
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A few possible locations for future free conferences.

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