

# DISSOCIATION IN ALLEGED EXTRATERRESTRIAL ABDUCTEES

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## ABSTRACT

*Dissociative symptoms were assessed in twenty persons who claim extraterrestrial abduction. This paper presents the results of two inventories: the MMPI subscale for Post-traumatic Stress Disorder (PTSD) and the Perceptual Alteration Scale. To obtain comparative data, two other groups of twenty subjects each were given the inventories: sightees, people who report witnessing unidentified flying objects but do not recall extraterrestrial contact, and individuals who recall childhood sexual abuse. The sightee group served as a control, whereas the sexually abused group was included to explore any similarities between alleged abductees and sexually abused persons. PTSD symptoms were manifested by 45% of the abductees, 0% of the sightees, and 70% of the sexually abused subjects. Dissociation symptoms were demonstrated by 70% of the abductees, 10% of the sightees, and 100% of the sexually abused subjects. These results suggest that distressed individuals alleging extraterrestrial abduction may benefit from therapies designed to address dissociation and PTSD.*

## INTRODUCTION

In 1989, I began to investigate the topic of extraterrestrial abduction through my analysis of *Communion* (Strieber, 1987), an alleged autobiographical account of extensive contact with extraterrestrials and *Intruders* (Hopkins, 1987), which is a purported non-fiction collection of abduction accounts. I conducted a thematic content analysis of these two popular books following the guidelines of Lofland and Lofland (1984). Three predominant themes emerged from this analysis: (1) amnesia; (2) bodily intrusions; and (3) being chosen.

Persons claiming extraterrestrial contact and/or abduction often told stories about being violated as if they were laboratory animals. According to the stories, the extraterrestrials performed cell-sampling techniques, inserted nasal and anal probes, and even took samples of sperm and ova from their victims. These violations, combined with the prevalent themes of having amnesia and being chosen by the extraterrestrials for such unwelcome attention, caused me to wonder if some form of abuse (perpetrated by humans) might be at the heart of some of the alien abduction stories.

My research on the presence of post-traumatic stress disorder symptoms and dissociative symptomatology in persons claiming extraterrestrial contact grew out of this original suspicion. There is an entire subculture of extraterrestrial devotees in our country, and the topic is considered laughable. However, as this study and previous studies (Davis, 1988; Ring & Rosing, 1990) have demonstrated, there are important differences between the person alleging a UFO sighting and a person who says he or she was physically violated by extraterrestrial forces. There is a dark side to the stories of aliens among us: many people are suffering and it is hard for them to get help in a culture that relegates extraterrestrial abduction to the tabloids. Therefore, I undertook this study to further explore the existence of dissociative symptoms in those alleging extraterrestrial abduction, and to explore the possibility that certain therapeutic interventions designed to ameliorate trauma might be useful.

## RESEARCH DESIGN: METHODOLOGY AND INSTRUMENTATION

This study investigates the possibility that dissociative tendencies may be important in those individuals who call themselves extraterrestrial "abductees" or "contactees." Interviews and questionnaires elicited the abduction narratives while two inventories assessed PTSD and dissociation in the subject groups. This paper will focus on the results of the two psychological inventories.

These included the 49-item MMPI Subscale for the Assessment of Combat-Related Post-traumatic Stress Disorder (Keane, Malloy, & Fairbank, 1984) and the Perceptual Alteration Scale (Sanders, 1986) which measures dissociation. To yield comparative data which could be analyzed for its statistical significance, two other groups of twenty subjects each received these psychological inventories: (1) "sightees," that is, people who report witnessing unidentified flying objects (UFOs) but do not recall extraterrestrial abduction or contact experiences, and (2) individuals who report good recall of early childhood sexual abuse experiences which involve penetration.

### Sample

The subject population in this study consisted of three groups: twenty abductee/contactees, twenty sightees, and twenty sexually abused subjects. The abductee/contactee group in this study included individuals who either asserted that they had had "abduction experiences" or who fit the

*Close Encounters of the Third Kind* (CE3) category. Table 1 summarizes several characteristics of the typical abduction narrative (Bullard, 1987) while Table 2 (Bloecher, 1980) presents CE3 categories. Subject selection for the abductee/contactee group was conducted by comparing the initial descriptions of extraterrestrial or UFO encounters (detailed on the data sheets) to the patterns established by Bullard (1987) and Bloecher. The prospective subject did not have to describe every component of the abduction sequence specified by Bullard (1987) or the CE3 sequence (Bloecher, 1980); however, it was imperative that the subject indicated that he or she recalled contact with extraterrestrial forces.

The twenty abductee/contactee subjects who were selected to participate in this research project were located in the following way. Preliminary packets were sent to prospective abductee/contactee subjects who had either (1) responded to a letter I sent to members of a national UFO organization, or (2) volunteered to tell me their stories when I attended an East Coast UFO conference. This preliminary packet included a data sheet requesting information about the individual's age, occupation, and history of extraterrestrial contacts.

In order to be a part of the research study, abductee/contactees needed to meet some of the criteria set forth in Tables 1 and 2. Packets of questionnaires were then sent to selected subjects who met the abduction/contactee criteria. Each testing packet contained (1) a questionnaire investigating the subject's abduction account; (2) a copy of the 49-item MMPI Subscale for the Assessment of Combat-related Post-traumatic Stress Disorder (Keane, Malloy, & Fairbank, 1984);

TABLE 1  
Abduction Narrative Sequence Adapted  
from Bullard (1987)

1. Capture
2. Examination
3. Conference
4. Tour
5. Otherworldly Journal
6. Theophany
7. Return
8. Aftermath

and (3) the Perceptual Alteration Scale, hereafter referred to as the PAS (Sanders, 1986).

All subjects in the abductee/contactee group in this study are individuals who claim to have had close encounters with aliens. Twelve of the twenty subjects allege that they were involuntarily abducted from a natural environment, taken aboard spacecraft or some other-worldly place, and then returned to "Earth." The other eight subjects report that they had direct contact with extraterrestrials.

TABLE 2  
Close Encounters of the Third Kind Categories  
Adapted from Bloecher (1980)

**Type A**

Entity is observed inside object only (the true occupant), through doors, ports, etc. Association explicit.

**Type B**

Entity is observed getting into and/or out of object (or the "egressed" occupant). Association is explicit.

**Type C**

Entity is seen only in vicinity of object, not entering or leaving it. Association is implicit.

**Type D**

Entity is observed only, although there is general UFO activity in the area at the time. Association is circumstantial.

**Type E**

Entity is observed independent of object and there is no record of UFO activity at that time. Association is negative.

**Type F**

A close encounter with an object, but no entity seen; however, voices are heard or messages received. Association is implicit.

**Type G**

ABDUCTION or "on board" experience by witness, with entities usually present. If not, their presence is implicit.

The MMPI Subscale for PTSD and the PAS measuring dissociative tendencies were also administered to two other groups of subjects: (1) twenty "sightees," that is, people who report witnessing unidentified flying objects (UFOs) but do not recall extraterrestrial abduction or contact experiences, and (2) twenty individuals who report good recall of early childhood sexual abuse experiences which involve penetration. The members of this second group were people who are currently in therapy and who do not recall any extraterrestrial contact. The sightees were included to function as a control group, since previous research has indicated that persons who report witnessing unidentified flying objects (UFOs), without reporting any subsequent abduction or contact with extraterrestrials, tend to produce normal scores on psychological tests (Davis, 1988). The sexually abused group was included to determine whether there were any similarities between the scores of alleged abductees and persons reporting sexual abuse.

Members of the two comparative subject groups were located in a variety of ways. The sightee group was composed of individuals who volunteered to tell their stories to me when I attended an East Coast "UFO" conference, respondents to an ad I placed in a UFO newsletter, and individuals referred to me by therapists. All twenty subjects in the group composed of sexually abused individuals were people referred to me by clinicians.

## RESEARCH INSTRUMENTS

### *MMPI Subscale for Post-traumatic Stress Disorder*

A primary objective of this research was to investigate the possibility that interventions designed to ameliorate the distress reported by victims of post-traumatic stress disorder (PTSD) (Spiegel, 1986) may be appropriate initial interventions for individuals who assert that they have been traumatized by extraterrestrials. Of interest here is whether or not the results of this 49-item MMPI Subscale for the Assessment of Combat-related Post-traumatic Stress Disorder (Keane, et al., 1984) indicated that UFO "abductees" demonstrate post-traumatic stress disorder tendencies. Also of interest are data yielded through comparison of abductees/contactee scores to those of sightees and sexually abused individuals.

Although initial research (Keane, Malloy, & Fairbank, 1984; Koretzky & Peck, 1990) indicated that thirty was the optimal cutting score for differentiating between PTSD and control groups (82% accuracy), subsequent testing (Orr, Claiborn, Altman, Fogue, de Jong, Pitman, & Herz, 1990) indicates that the optimal cutoff score on the MMPI PTSD scale (Keane et al., 1984) is twenty-one. This score was found to be appropriate for samples which are not composed of inpatients such as the subjects in this research project.

### *The Perceptual Alteration Scale (PAS)*

The purpose of administered the Perceptual Alteration Scale (PAS) (Sanders, 1986) was to investigate the hypothesis that individuals recalling extraterrestrial abductions may be persons who are experiencing a form of dissociation. Sanders (1986) initially developed this instrument through

selecting items from the MMPI which matched Hilgard's (1977) description of neo-dissociation:

- 1) modification of regulatory control;
- 2) changes in self-monitoring;
- 3) concealment both from oneself and from others; and
- 4) modifications of consciousness. (Sanders, 1986, pp. 95-96).

In addition to items involving modifications of affect, Sanders also included MMPI items that involved changes in sensory and perceptual experience (Sanders, 1986, p. 96).

This research employed Sanders' (1986) PAS Scale 2, a sixty-item form worded in the style of a self-rating Likert-type scale with a response range from one to four. This particular scale was submitted to a Cronbach Alpha test of internal consistency which yielded an alpha score of .95 "demonstrating internal consistency" (Sanders, 1986, p. 97).

An item analysis revealed three factors: modification of affect, modification of control, and modification of cognition. Sanders (1986) states that these factors suggest that dissociation "may be a broader construct than a defense mechanism... Dissociation may function as a personality trait, interacting with various aspects of the personality" (pp. 98-99).

According to Sanders (1986), the three factors of modification of affect, control, and cognition are significantly correlated with personality measures that suggest construct validity:

- The Control factor was found to be related to the Rotter; the Affect factor was related to a variety of Affect scales; and the Cognitive factor was related to a very low Self-esteem factor. (p. 101)

Therefore, the results of the PAS (Sanders, 1986) could be useful in investigating appropriate therapeutic strategies for those individuals who are distressed by their memories of extraterrestrial abductions.

## RESULTS

### *Statistical Results of the PTSD and PAS Inventories*

The scores of the PTSD subscale (Keane et al., 1984) and the PAS (Sanders, 1986) were submitted to a one-way ANOVA. The one-tailed test was used because previous research (Davis, 1988) has indicated that sightees achieve low or "normal" scores on psychological inventories whereas some persons alleging extraterrestrial contact have demonstrated dissociative symptomatology (Ring & Rosing, 1990). Therefore, there was no reason to think that abductees would score lower on the inventories than sightees, while there were reasons to think they would score higher.

The following results were found. There were significant differences between the groups on the PAS:  $F = 25.13$ ;

TABLE 3  
Results of One-Way Analysis of Variance on the PTSD and PAS Scores of the Three Subject Groups  
(PTSD Subscale, Keane et al., 1984)

Group	PTSD			PAS	
	N	Mean	SD	Mean	SD
Abductee/ Contactee	20	19.050	9.997	116.200	20.531
Abused	20	31.200	11.386	146.050	30.732
Sightee	20	6.000	3.524	97.100	9.323

Tukey's Studentized Range (HSD) Test for Variable: PTSD

Alpha = 0.05                      df = 57                      MSE = 80.669

Critical Value of Studentized Range = 3.403

Minimum Significant Difference = 6.834

df = 2,57; and  $p = .0001$ . The PTSD results were similar:  $F = 39.38$ ; df = 2,57; and  $p = .001$ . Table 3 presents means and standard deviations for the three subject groups.

Although the MMPI PTSD subscale's optimal cut-off score to determine post-traumatic stress syndrome tendencies in non-inpatient populations is twenty-one (Orr et al., 1990), this study's sexually abused population had a mean score of thirty-one. This is significantly above the score of twenty-one ( $p = .333$ ) required to determine PTSD symptomatology.

The mean score of nineteen for the abductee/contactee group is very close to the cutoff point of twenty-one. Table 4 presents the individual scores on the PTSD inventory for all three subject groups: sexually abused, abductee/contactee, and sightee. Nine of the abductee/contactee scores are twenty-one or above. Therefore, according to the criteria established by Orr et al. (1990), 45% of the abductee/contactee subject population has test results which indicate PTSD tendencies.

The abductee/contactee population mean of nineteen is lower than the mean of twenty-five produced by Vietnam combat veterans in the study by Orr et al. (1990). This lower score could reflect less severe PTSD symptomatology in the abductee/contactee subject group.

The mean score on the PTSD inventory for the sightee group is 6.0. This suggests the sightee group effectively functioned as a control group manifesting no PTSD symptomatology. This corresponds with the previous research conducted by Davis (1988) which revealed that individuals alleging UFO sightings devoid of extraterrestrial beings or communication tend to produce scores within the normal range on

psychological inventories.

The standard deviations listed in Table 3 indicate that the most variety in scores occurred in the sexually abused subject population (SD = 11.386). The range of scores was from 19 to 45, and 70% of these scores indicated PTSD symptomatology. The least variety in scores occurred in the sightee group which had a standard deviation of 3.524, scores which ranged from 1 to 12, and 0.0% indications of PTSD tendencies. The abductee/contactee group had a standard deviation of 9.997, scores that ranged from 3 to 40, with 45% of the subjects matching or exceeding the PTSD cut-off score. It is important to note that neither the sexually abused nor the abductee/contactee group is homogenous. The heterogeneous make-up of these groups suggests that, in subsequent research projects, it would be helpful to refine the criteria for subject selection or to establish subgroups.

The PAS (Sanders, 1986) inventory yielded results which parallel the PTSD scores (see Tables 3, 4, and 5). The highest scores were produced by the sexually abused group; the abductee/contactee scores are sufficiently high to indicate dissociative tendencies; and the sightee group produced "normal" scores (Sanders, 1986).

In addition, the standard deviations also followed the pattern established by the PTSD inventory. The highest standard deviation was produced by the scores of the sexually abused group (SD = 30.732). Heterogeneity was also indicated by the scores of the abductee/contactee group with its standard deviation of 20.531. The scores of the sightee group produced the lowest standard deviation of 9.323.

The mean of 146.050 for the sexually abused popula-

TABLE 4  
Individual Scores on the PTSD Inventory of the  
Three Subject Groups

	Abductee/ Contactee	Sexually Abused	Sightee
1.	16	19	1
2.	14	19	8
3.	3	38	3
4.	17	44	6
5.	22	20	0
6.	19	22	6
7.	8	40	4
8.	21	45	5
9.	21	21	3
10.	4	19	11
11.	15	39	6
12.	14	45	8
13.	20	21	12
14.	25	19	11
15.	40	38	7
16.	22	45	2
17.	37	19	10
18.	24	25	9
19.	33	40	2
20.	6	46	6

tion in this research project is close to the mean Sanders (1986) determined to be indicative of multiple personality disorder ( $M = 148.500$ ,  $SD = .50$ ). Severe dissociative tendencies in the sexually abused group are suggested by this finding. It is important to note that my study had a relatively small subject population ( $N = 20$  in the sexually abused group) and that a larger study might present more representative findings. The abductee/contactee mean of 116.200 is higher than the mean Sanders (1986) associated with eating-disordered populations with dissociative tendencies ( $M = 108.000$ ,  $SD = 21.370$ ). And, as a last point of comparison, the mean for sightees, 97.100, is somewhat higher than the mean of 89.000 ( $SD = 18.820$ ) Sanders (1986) established for normals. The findings of this test suggest that dissociative tendencies are present in some members of the sexually abused and extraterrestrial abductee/contactee populations.

TABLE 5  
Individual Scores on the PAS (Dissociation)  
Inventory of the Three Subject Groups

	Abductee/ Contactee	Sexually Abused	Sightee
1.	125	121	101
2.	118	108	110
3.	80	187	94
4.	114	172	105
5.	125	120	102
6.	129	110	104
7.	97	175	93
8.	101	165	100
9.	122	170	99
10.	95	108	101
11.	112	129	89
12.	86	168	103
13.	118	124	103
14.	129	112	97
15.	158	179	109
16.	124	169	101
17.	141	119	92
18.	121	119	84
19.	144	190	74
20.	85	176	81

Table 5 presents the PAS scores for the individuals in all three subject groups. Applying the 108 cut-off point Sanders (1986) established as indicative of dissociative tendencies makes it apparent that fourteen abductee/contactee individuals (70%), all twenty abused subjects (100%), and two sightees (10%) present dissociative symptoms. It would appear that further research on the production of dissociative symptomatology is warranted. The presence of PTSD and dissociative symptoms in distressed persons reporting extraterrestrial contact or abductions must be considered when these persons seek therapy.

#### CONCLUSION

This study's positive findings with respect to the presence of dissociative symptomatology in purported extraterrestrial abductees/contactees supports previous findings by

Ring and Rosing (1990). These researchers found that subjects alleging extraterrestrial contact achieved elevated scores in comparison to a "normal" control group (an unselected sample of 270 undergraduates at the University of Connecticut). The UFO experiencers in Ring and Rosing's (1990) research averaged a score of 110.78 whereas the control group of undergraduates achieved an average of 91.90 (Sanders, McRoberts, & Tollefson, 1989).

In addition, research by Ring and Rosing (1990) also indicates that persons who claim to be extraterrestrial contactees often have a childhood history of physical and/or sexual abuse. It is noteworthy then that, in this research, 100% of the dissociation scores of persons who have been sexually abused, and 70% of the scores of persons alleging extraterrestrial abduction/contact fall into the range that indicates dissociation according to Sanders (1986).

These research results lead to the following question: Why would the sexually abused population produce higher scores on the PTSD and PAS inventories than the abductee/contactee group? One possible explanation is that the abduction/contact narratives are screen memories for early childhood trauma such as sexual abuse. These screen memories may function as coping mechanisms which mitigate the experience of re-lived trauma. Perhaps remembering the reconstituted memory (for example, in the form of an extraterrestrial abduction) is less stressful than confronting the trauma of childhood abuse perpetrated by relatives or family friends.

This research also indicates that further investigation of clinical syndromes is merited, particularly into the syndromes of fantasy-proneness, MPD, and PTSD. Fantasy-prone individuals may relive trauma in a disguised yet repetitious manner akin to the reliving of trauma reported in PTSD syndrome (Spiegel, Hunt, & Dondershine, 1988). This "reliving" of traumatic childhood events may be in service of ultimately integrating information currently outside the individual's range of consciousness. If this is the case, then fantasy-prone individuals might be recalling extraterrestrial abductions which are screen memories for abuse perpetrated by humans.

A better understanding of the extraterrestrial abduction/contact phenomenon might also be gained by examining etiological variables in MPD. Two factors determined to influence the onset of MPD (Kluft, 1984) are (1) an innate capacity to dissociate and (2) exposure to overwhelming trauma. This study found that 70% of the individuals claiming extraterrestrial abduction/contact achieved scores indicating dissociative tendencies on the dissociative scale (Sanders, 1986), and that three individuals (15%) had scores within seven points of the mean determined to indicate MPD (148.500 is the cut-off for MPD according to Sanders, 1986). These results support a contention made by Ganaway (1989) that MPD may occur on a continuum of dissociative severity sometimes manifesting as accounts of Satanic cult ritual abuse and extraterrestrial abduction.

A major purpose of this study was to explore the appropriateness of PTSD and dissociation therapeutic interventions as useful techniques for those persons who are distressed by their recollections of extraterrestrial contact. There is regrettably little information on how to address this par-

ticular delusion in therapy. However, due to the *non-verifiable* nature of this extraterrestrial phenomenon, it would appear that initially those PTSD interventions which are non-confrontational may be most helpful.

In some cases, it might be useful for therapists to begin with interventions which do not immediately challenge delusional systems (Riebel, 1985) especially for use with mildly to moderately impaired patients. A combination of supportive psychotherapy and judicious use of medicine has been indicated to be helpful for some delusional patients (Manschreck, 1992). With respect to schizophrenia, Levin (1989) and Karon (1988) have discussed the effectiveness of establishing a therapeutic alliance through listening to the subjective experience of the patient and taking the patient's point of view. Perhaps a similar *initial* approach to the alleged abductee could be productive.

For the person claiming extraterrestrial abduction, a downward spiral might be perpetuated in the following circumstances: first, the individual is incapacitated by horrific memories, and then he or she is further assaulted by a psychological system which challenges the veracity of these memories. Effective therapy is made almost impossible because the individual feels further traumatized by the therapy itself.

In the scenario just depicted, Spiegel's (1986) therapeutic interventions may ameliorate the distress experienced by purported abductees/contactees in a non-confrontational manner. The principles of these strategies are to (1) confront trauma, (2) condense the traumatic experience into a manageable image, (3) support the patient's period of confession, (4) console and provide empathy, (5) assist the patient in making conscious previously repressed or dissociated material, (6) incorporate conflicting images and work toward patient's development of an integrated self through concentration, (7) help the patient develop a sense of control, and (8) help the patient cognitively restructure his or her view of the dissociated traumatic experience (pp. 128-129).

An important aspect of these interventions is that they do not require that the patient *immediately* abandon his or her belief in the extraterrestrial abduction experience. Therefore, they could be employed in a non-threatening way to help the patient cope with his or her authentic experience of trauma without undermining the individual's sense of sanity. A more productive time for the therapist to challenge his or her belief system may be after the patient becomes more comfortable both with the memories and in the therapeutic setting.

Initially, non-confrontational interventions like Spiegel's (1986) could assist the therapist in gaining the patient's trust, providing a sanctuary from a harsh world which can demand logic in the face of unimaginable confusion and terror, and—perhaps most important—these interventions might lead to the patient getting on with life. However, in some cases the therapist may determine that validating approaches could strengthen the delusional system in destructive ways. In this case, the therapist might begin with step one, confronting the trauma, by challenging the origin of it (perhaps abuse was perpetrated by a human). Then step five of Spiegel's

interventions — making conscious repressed or dissociated material — would be the most crucial work.

In addition to Spiegel's (1986) interventions, existential approaches to dissociation, and more specifically, the PTSD condition, may be very beneficial. Greening (1990) and Flannery and Harvey (1991) emphasize that therapeutic interventions need to go beyond medication, catharsis, and deconditioning. Attention to sociological and existential concerns are integral in the process of restoring meaning to lives in which that meaningfulness has been stripped away. Furthermore, educating the individual about dissociation and PTSD symptomatology may prove to be very helpful in the course of therapy (Ochberg, 1991).

The therapist attempting to help the distressed person alleging traumatic extraterrestrial encounters is in a difficult position. Perhaps there is no "correct" approach to this particular dilemma. While de-emphasizing veracity issues may be confusing in a world that frequently demands empirical evidence, therapeutic approaches utilizing interpretive techniques may be the *kindest*, although not the most ruthlessly practical strategies. Thus, the eclectic interventions proposed by Ochberg (1991), Spiegel (1985), Greening (1990), and Flannery and Harvey (1991), all of which aim to assist traumatized patients who frequently are also dissociative, may be productive methods for psychotherapists to employ in their work with persons alleging extraterrestrial contact. ■

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