

5. *Precognitive dream type*: Typical for 84 persons were experiences of precognitive dreams. 40% of them also reported ESP, almost 30% apparitions/altered states of consciousness, and about 25% poltergeist phenomena and internal phenomena/influence.
6. *Mediumistic type*: The smallest group with 44 persons has exceptional experiences in the context of occult techniques and mediumship. 20% to 30% of them report internal phenomena/influence, poltergeist phenomena and ESP.

The obtained types of clients show significant differences with respect to sex, age, employment status, general stress, specific stress due to EE, experience with psychiatric treatment and assessment of psychological disruption. Future work has to clarify if the obtained typology could serve as a starting point for specific counselling and treatment concepts.

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EXCEPTIONAL EXPERIENCES AND MENTAL HEALTH – RESULTS AND PROBLEMS OF A QUESTIONNAIRE STUDY

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Clinical psychology and psychiatry have in general regarded exceptional human experiences as psychopathological in nature, interpreting them mostly as destabilising events. During the last three decades this point of view slowly began to change under the influence of striking research results within the field of salutogenesis and transpersonal psychology: it was discovered that certain types of exceptional experiences can have positive effects on the mental and physical health of individuals. However, the relevant research results, which are mainly based on questionnaire research, are in summary quite heterogeneous, and as a result of this the question arises whether quantitative research methods are appropriate and valid research methods for the scientific investigation of exceptional experiences and their after-effects.

To investigate this unsolved question the Department of Evaluation Research in Complementary Medicine (director: Harald Walach) at the Institute of Environmental Medicine (University Hospital Freiburg), conducted a study (“Freiburg survey of exceptional experiences”), supported by the IGPP, in which we combined quantitative and qualitative research strategies. In this study we included a clinical sample (N = 56), a sample of practitioners of spiritual or religious techniques (N = 350), and a sample of people who don’t practice spiritual techniques (N = 299).

In the quantitative method part of the study we used a questionnaire developed by ourselves, which has already been revised, for the measurement of exceptional experiences beside standard instruments for the measurement of sense of coherence, social support, mental distress and transpersonal confidence.

A factor analysis (principal component analysis with varimax rotation) clearly assigned the 57 items of our scale to four factors, accounting for a total of 48% of variance explained. The first factor contains positive mystical experiences (e.g. “I am in contact with everything.”), the second factor describes experiences of ego loss and deconstruction (e.g. “My world-view is falling apart.”), the third factor includes psychopathological experiences (e.g. “I am controlled by alien forces.”), and the fourth factor is pertaining to dreams (e.g. “I dream of future events which occur afterwards.”). After six months the retest reliability of the scales ranged between $r = .66$ (factor III) and $r = .89$ (factor I).

The analysis of correlations between our questionnaire and other scales, as well as SEM models (Structural Equation Models; AMOS), confirm the hypothesis that spiritual and psychopathological experiences represent different classes of experiences, and that they can be phenomenologically separated by questionnaires. Although the effects of exceptional human experiences on mental health show quite ambivalent outcome effects, a lot of spiritual practices techniques (e.g. meditation, contemplation) seem to adjust the focus on positive outcome effects, while negative impact is apparently suspended.

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