

## Survival of Bodily Death

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### Out-of-Body Experiences

Charles T. Tart, Ph.D.

Charles Tart led this discussion. He has always defined OBEs in a fairly tight way in that they must have two components. First, the subject perceives the world from a different location than where her body is. Second, the subject's consciousness is clear, close to waking consciousness. This precludes including dreams or deliriums as OBEs. This stricter definition has some disadvantages since it drastically reduces the research pool of subjects; many college sophomores report vague feelings of being out of the body at times, but this does not rise to Charles' threshold for an authentic OBE. In his mind, an OBE is differentiated from a NDE in that a NDE might start out with a classic OBE but then there is an altered state of consciousness added on top of it. Emily Kelly pointed out, though, that many NDEs do not progress beyond the out-of-body stage. Cases can become fuzzier; for example, some people report OBEs which started from lucid dreams, while others report a dream state at the end of an OBE. This illustrates the problem that real-world events do not always slip neatly into our defined categories.

From a parapsychological point of view, the most exciting OBEs are ones in which the subject not only reports being out of the body but conveys accurate details from the experience, including knowledge not gatherable elsewhere. One of the most famous researchers, Robert Monroe (1971), originally thought his sense of being out of the body meant he was crazy. Later, though, while out of the body, he saw his friends in unusual circumstances which later turned out to be accurate, convincing him that he was actually traveling.

Charles feels that the OBE is important for survival research for it suggests that the mind is able to operate independently of the body and it generally convinces those who experience it that they will survive bodily death. The big step, then, is to move it from a once-in-a-lifetime event into the realm of experiences available at will. We are not there yet. For now, the most fruitful direction for research is to find people who have a lot of these experiences and see what happens. In his early research days, he had such a subject he referred to as Miss Z (Tart, 1968) who had experienced many OBEs as a child and thought they were a normal part of sleep. He suggested that she place a series of random numbers in a box on her bedside table and to memorize the number on top while out of her body. She did this at home seven or eight times, claimed to always be right and asked if there was anything else interesting to do. Though she was moving from the area, he convinced her to spend a few nights in his sleep lab. She was excellent at waking up after an OBE and reporting when and for how long she had left her body. This allowed Charles to confirm that the times in which she was out corresponded to a stage-1 EEG pattern but with an unusually high incidence of slowed alpha mixed in, a highly unusual pattern. The only place in the literature where he could find reference to prominent slowed alpha rhythms appeared in Heron's research with sensory deprivation. Heron also reported that some of his subjects felt as if they left their body. A final intriguing part of the research with Miss Z was that she did indeed correctly identify a random five-digit number which Charles had put on a high shelf. Unfortunately, he had seen the number so he failed to control for telepathy, but it was exciting nonetheless. At the time, he viewed this primarily as a feasibility study, though it has since become clear how fortunate he was to find someone who on any given night had a reasonable chance of having an OBE. He lost track of her after she moved away.

At the other extreme, however, were Charles' attempts to induce OBEs through hypnosis. He had eight or ten excellent hypnotic subjects who had been through a number of studies in his lab and had been assessed for hypnotizability. He placed a number of unusual objects in a locked room across the hall to serve as a target. Once the subjects were hypnotized, he gave them instructions to go across the hall to the locked room and then go wherever they wanted while he was quiet for fifteen minutes. They all had experientially very real OBEs, rising up from their bodies, going across the hall, observing the objects, etc. However, none of them was even close to describing the correct objects in the room. This means we must be wary of assuming too much based upon experientially vivid and realistic OBEs, since they may not be veridical. Ed Kelly stressed that the problem of converting phenomenology to evidence is not minor.

If we could find a large number of expert subjects, a lot of interesting avenues for research open up: physiological changes in their bodies, ways of detecting their presence at remote locations, the effects of "squeezing" random number generators, etc. The dissociative anesthetic ketamine provokes a number of questions: is it a simulation of an OBE or the real thing? Perhaps it is a simulation which may open up to the real thing under certain situations. Ed Kelly was curious as to whether Charles had undertaken a survey of the cottage industry of methods to induce OBEs to determine whether any of them showed real promise. Charles responded that he has always assumed they are not interested in being tested since it might jeopardize sales.

Michael Murphy brought up the idea that just part of the body might be out of the body, like a ki arm in martial arts. Expert marksmen with whom Michael has spoken report a perceptual merging with the target, and they feel that they take the bullet and place it in the target. In golf this happens as well, the feeling of an astral arm of some sort which we might think of as a partial OBE. This brought up a second point, that perhaps the existence of a subtle or astral body -- even complete with clothes -- is a product of habituation of the mind and not fundamental to the experience. Monroe (1971) found that early in his experiences, he retained a conventional body but then he began experimenting and found that he could stretch across a room. Also, people sometimes have OBEs where they do not report a body but experience themselves as a point of consciousness. One of Charles' graduate students reported 360 degree spherical vision. Charles believes that as people spend a longer time outside of their body or do so more often, the habits of self-conceiving as a body begin to break down. There is some evidence that the dreams occurring early in the night tend to be more realistic than those after more time has elapsed; the habits of conventional reality begin to dissolve.

Psychic reach, as in the case of ki arms, could be an intermediate version of the more extreme claim of bilocation, a far-out ability which nonetheless has some fairly strong documentation in the literature of world saints and sages. Padre Pio in Italy, for example, was renowned for his bilocal abilities, which withstood the fierce scrutiny of a papal tribunal. A further complexification of the idea of subtle bodies is the possible existence of more than one "layer" of such bodies. For example, Aurobindo referred to various bodies, each of which can serve as a separate vehicle for consciousness. This parallels the writings of the Theosophists and is elucidated in Poortman's (1978) volume. Sylvan Muldoon has techniques which ostensibly allow one to get out of the denser subtle bodies. Charles pointed out that we are making a rather large leap when we discuss these nuances, given the predisposition of most scientists to view any OBE as pure fantasy.

As an adjunct to this discussion, Adam Crabtree commented that with multiple personality disorder, it is standard for each personality to perceive itself as having a distinct body. A five-year-old personality will, upon looking in the mirror, perceive a child's body, despite having the actual (to outside eyes) body of an adult. Even more interesting are those cases in which the physical body goes through dramatic changes when different personalities are in charge, such as changes in vision, allergies, etc.

## References

- Monroe, Robert.** 1971. *Journeys out of the Body*. New York: Doubleday. ([buy at amazon.com](#))  
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