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Young People and Paranormal Experiences: Why Are They Scared? A Cognitive Pattern

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Abstract

Two qualitative projects have brought together non-directive and semi-directive interviews with 49 young people who had a paranormal experience (mainly spiritualism) between the ages of 11 and 18. A sequential analysis shows an emotional and cognitive pattern comprising four stages, accompanied by periods of anxiety. Young people move through those stages that correspond to a cognitive acceptance or rejection of what they are experiencing in order to maintain or re-establish paradigmatic stability. This study complements the many observations linking paranormal beliefs and anxiety, bringing with it the new discovery of a mechanism underlying the link between anxiety and some aspects of paranormal or anomalous experiences in young people.

Keywords

adolescence; paranormal experience; anxiety; cognitive structure; paradigmatic change; anomalous experience

Introduction

There seems to be a recurring link between paranormal beliefs and anxiety (Lange & Houran, 1999). Several studies show a link between paranormal beliefs (PBs) and anxiety due to a feeling of helplessness stemming from childhood experiences (Streib, 1999; Granqvist & Hagekull, 2001; Perkins, 2006). PBs would therefore function mainly as a means of finding balance or coping. Indeed, to believe that forces external to oneself are at work may facilitate acceptance that events and suffering are beyond the control of the individual and may explain why superstition, which reinforces personal responsibility (Groth-Marnat & Pegden, 1998), is a predictor of anxiety (Wolfradt, 1997). A

link between PB and anxiety is also reflected in some distinguishable personality traits, particularly among adolescents, for whom neuroticism seems linked to PBs, while extraversion and psychoticism are not. (Williams, Francis & Robbins, 2007). Indeed, fear and distrust of the outside world, particularly in young people with neurotic characteristics, may be linked to anxiety over not being in control of one's life, and being the subject of forces beyond one's control. Anxiety in connection to PBs seems to stem from a sense of a heightened relationship to the world (Sjöberg & Af Wahlberg, 2002), marked by a more intuitive and emotional intelligence and a less analytical cognitive approach (Aarnio & Lindeman, 2005). In fact, emotional intelligence may be a cognitive faculty which is further activated when a person is distressed by a situation of logical stress, a cognitive situation beyond their control (Gianotti, Mohr, Pizzagalli, Lehmann & Brugger, 2001). In this system of experiential thought, events and the ensuing reactions are seen as self-evident: seeing is believing. This is crucial to the paranormal experience (King & Drigotas, 2007).

In addition, adolescence is a crucial stage in the formation of a person's identity (Erikson, 1972), and what young people experience and do during this period may affect them in the long-term. These experiences can be meaningful insofar as they offer young people new perspectives on their own identity and allow them to regain self-esteem (Bee, 1997; Berk, 1994). They may also be marginalising or painful, especially since adolescents are marked by a feeling of invulnerability, a kind of "magical" way of thinking about danger (Klacznski, 1997 in Bee & Boyd, 2003), which rarely protects young people from "extreme" experiences. As such, 20% of young people have had paranormal experiences (Le Vallois & Aulenbacher, 2006). During this kind of experience, the young person approaches the world based on their subjective experience (Irwin, 1993), whether real or imagined (Houran, Kumar, Thalbourne & Lavertue, 2002), attracted by, among other things, the thrill seeking more specifically linked to psi beliefs and spiritualism (Tobacyk & Milford, 1983, Groth-Marnat & Pegden, 1998).

In this context, the paranormal may be defined as that which cannot be explained scientifically or which calls into question established scientific principles, and which is incompatible with normative perceptions, beliefs and expectations about reality (Tobacyk & Milford, 1983). Furthermore, PBs can still be understood as the belief in a phenomenon, whether physical, biological or even psychological, which is given ontological attributes that belong to one of two other categories (e.g. the house lives and knows its own history) (Lindeman, Cederström, Simola, Simola, Ollikainen & Rieki, 2008).

It should be noted that attraction to the paranormal is not the same in all cultures, as those which embrace animism (such as African culture) are based on belief in the daily presence and action of spirits. This research therefore concerns young people in post-modern Western cultures. Finally, it should be remembered that, in our opinion, the role of psychological science is not to prove or disprove paranormal phenomena, but instead to examine what they engender, enable or prevent for people who believe in them (Cardena, Lynn & Krippner, 2004; Mathijssen, 2009).

Research Project

This research aims (a) to delve into the interest of adolescents and young people in paranormal experiences. Paranormal beliefs are studied routinely, but paranormal experiences remain the poor relative as it were. Moreover, it is difficult to discuss the paranormal in general terms, since it is a generic, multifactorial term and each dimension covers a reality of objects and experiences which renders comparisons and cross references if not impossible, then at least dangerous. It is difficult to compare belief in the Bigfoot with the practice of black magic, for example. Initially, we shall leave the door open to what the people concerned by this type of belief and practice call paranormal themselves. A qualitative biography of the attraction of young people to occultism and the paranormal may address the structures underlying the experiences of young people in this area.

(b) A further objective is to better identify the links and structures between paranormal experiences, anxiety and cognition in young people. A greater understanding of the emotional impact of PE on young people is particularly important given that they are more vulnerable to extreme emotions, such as anxiety, which can be very destructuring (Muris, Merckelbach & Peeters, 2003).

Method and Procedure

This study lent itself to an inductive approach. Although less common, the development of hypotheses from field observations meets the goals of the research project more effectively, since it is a matter not of verifying but of identifying the functions and structures of the experiences. This approach was chosen in order to gain a better understanding of the young people's experiences.

Thus, two qualitative analysis projects were carried out in 2008 and 2009. The first phase of the study comprised thirteen ($n = 13$) non-directive "life story" interviews with young people aged between 16 and 25 ($M = 21$, $SD = 2.6$) who had had PEs (in the broadest sense, rather than pre-defined) mostly when they were aged between 15 and 18. The aim of such a qualitative approach is to analyse the content of the interviews both sequentially, in order to generate a structure of the experience, and narratively, in order to gain an understanding of the young person's experience. Indeed, a spontaneous life story, insofar as it avoids self-censorship, enables a better understanding of some mechanisms within the experience (Streib, 1999). In fact, young people regularly try to justify to themselves as rationally as possible an experience that, above all, seems beyond reason and evokes much emotion. Recruitment was carried out through advertising and the young people thus knew the overall theme of the interview and were paid for their participation. The interviews took place at the psychology faculty and were recorded, with the agreement of the interviewees, for transcription. Their names were changed and participants were able to talk about their PE freely. After a brief introduction to the terms and conditions of the interview, the young person being interviewed is asked to describe their socio-demographic circumstances. The story itself is then introduced with as broad an open question as possible, such as "Tell me about your experience." The social cohesion of the young person is then discussed by inviting them to position themselves at a chessboard and to describe their normal social life using the pieces, ignoring their meaning within the game. Only the young people's experiences were analysed. Of the 13 non-directive interviews on the paranormal in general, seven refer spontaneously to spiritualism, four to abnormal sensory phenomena (voices, visions, paralysis) and two to witchcraft.

The second project concerned the analysis of 36 semi-directive interviews led by Salsa Bertin (2000) with young people aged between 12 and 18 ($M = 15$, $SD = 1.3$) about spiritualism. This survey was published in *Presses de la Renaissance* under the title: "Et si on parlait du spiritisme. Des jeunes témoignent" [Let's talk about spiritualism. Young people share their stories]. With the agreement of the author, these short semi-directive interviews were taken and analysed in detail. Since they had already been published, the names of the young people were retained. Practically all the young people interviewed (83%) lived in an urban environment and were the children of executives and professionals (2/3) or workers and artisans (1/3). Of the 34 interviews selected, five young people confused, sometimes intentionally, spiritualism and witchcraft. Two accounts were excluded, as the young people involved had no direct

experience of their own of the subject. Together, the two surveys analysed a total of 18 boys and 29 girls ($n = 37$).

Analysis and Results

The categorical analysis *a posteriori* of the interviews and the selection and definition of units of meaning were carried out in two stages. After casting a glance over the interviews, two dimensions emerged spontaneously: experience and emotions. Indeed, all the interviews reported a particularly affecting experience, charged with emotions of brief excitement and long-term anxiety. Two codebooks were then established, working from the words and units of meaning that appeared in both the qualitative interviews and the semi-directive interviews. The qualitative interviews revealed three types of paranormal experience: spiritualism (more than half of the young people), witchcraft and abnormal sensory perceptions. Several broad categories of perception emerged from the semi-directive interviews concerning the young people's experiences of spiritualism, corresponding to five themes:

- a) the contextualisation: Who does what, with whom (possible role of adults), where, when and how?
- b) experimentation: ritual, perception/physical manifestation, contact with what?
- c) cognition: doubt/denial, belief/conviction, explanations, contradictions
- d) emotion: benefit or danger, coping; and
- e) socialisation/marginalisation: in- and out-groups, witchcraft practices and Satanism.

In addition, the sequential analysis showed a structure of experience that seems to be a recurring pattern in most of the life stories. Through the narrative of a PE (mainly spiritualism), the majority of subjects seem to undergo an emotional and cognitive journey that can comprise four stages. This pattern of cognitive stages appears constant, since this structure is found in six out of seven experiences of spiritualism in the qualitative interviews, and to more or less the same level in 18 out of 22 of the semi-directive interviews that mention fear or malaise, regardless of the PE involved.

The sequential analysis of the two samples reveals a structure to the development of PEs in general, and spiritualism in particular. We see the young people go through stages marked by emotions that correspond to cognitive acceptance

or rejection (Piaget, 1975) of what they are perceiving. Indeed, it is as if the young people's paradigmatic structure, that is to say the occasions of discourse and levels of knowledge that shape their thought, has been undermined. Therefore, the young people, sometimes going back and forth between arguments, try to maintain this structure before accepting or rejecting a change to it. This experience is marked by the appearance of anxiety.

To clarify these stages, some extracts of the life stories are presented here. The first three, Suzanne, Michaël and Claire (names have been changed), are taken from the qualitative interviews, the fourth, Paco, is taken from the semi-directive interviews. The first three reports show the cognitive stages that are key to understanding what young people are going through when having a paranormal experience. Paco's story, discussed in the comments, complements this as it shows how this young person is trying to re-conquer the cognitive stages that he has gone through too young and which have left them traumatised.

Suzanne

Suzanne is 17 and in her first year of studying biology at university. She enjoys her studies, has a boyfriend and a large circle of friends. Although her parents are divorced, she has a good relationship with both of them and is close to her brother and sisters. When she was 16, Suzanne had an experience that affected her for a long time when she spent the weekend at her father's house with her sister. She says:

I go to sleep as normal and everything is fine. About 2:30 am, I wake up and go to the toilet, as normal. My sister wakes up at the same time and lets me go first... I arrive at the toilet, put my hand on the handle, and I see someone in the armchair. But subconsciously, I tell myself 'No, no, it's nothing.' Some part of me said 'It's nothing, it's not possible! It's just your mind playing tricks on you, or whatever.' I went to the toilet and then went back into the bathroom. I brushed my teeth and washed myself completely all over again, as I really wanted to make myself really believe that nothing had happened. I went back to my bedroom, my sister went to the toilet as normal too and we went back to sleep.

Suzanne finds herself confronted with a situation that disturbs her. She sees or believes she is seeing something that is totally beyond what her mind can admit. At this stage, she cannot understand or accept what she has seen. So she tries to ignore it: "I told myself: 'No, no, it's nothing.' Some part of me said: 'It's nothing, it's not possible! It's just your mind playing tricks on you'".

Suzanne enters a sort of cognitive fight to try to realign what she has seen with what she can reasonably admit, or rather, what she can admit without calling into question the stability of her knowledge and thought structure, her paradigmatic structure. She even goes to the lengths of washing herself to try to pull herself together, to “make myself really feel like nothing had happened”.

She continues:

And in the morning I say to my father, ‘Hey Dad, I saw someone in the armchair, over there.’ But I was saying that as a bit of a joke—in the morning you say these things. And then my sister says, ‘Hey, me too!’ Then we look at each other and Dad takes us to one side individually and asks each of us to explain what we had seen. We had both seen a girl, well, an old woman, in the armchair, watching the television as if it were switched on—but neither of us had seen the television on—with her hands on her knees. An old lady with her hair behind her ears, staring completely motionless, and we both described her and how she was dressed exactly the same way. So we saw the same person. If I had been alone in having seen her, I would say to myself ‘No, go on, it’s just my imagination’ . . . So here I am, not believing this before but now I am sure and certain (voice chokes up slightly).

After the stage of cognitive disturbance (first stage), Suzanne tries to protect her paradigmatic plan with denial: “I tell myself ‘No, no, it’s nothing.’” which translates as a doubt that she is going to try to maintain at any price, in order to protect her existing conceptions of reality: “If it had just been me, I would say to myself ‘No, it’s not serious’”. Most of the young people interviewed experienced this fight for cognitive control (second stage) as a sort of internal debate of arguments and counter-arguments. However, once her sister said she had seen the same phenomena, the barrier of doubt or self-persuasion crumbled. A little later in her story, Suzanne explains: “But it is really the fact that my sister had exactly the same description as me that really convinced and shocked me.” From that moment, the paradigmatic information with which Suzanne understands and interacts with reality was called into question: “So here I am, not believing this before but now I am sure and certain”. This is a cognitive disruption (third stage).

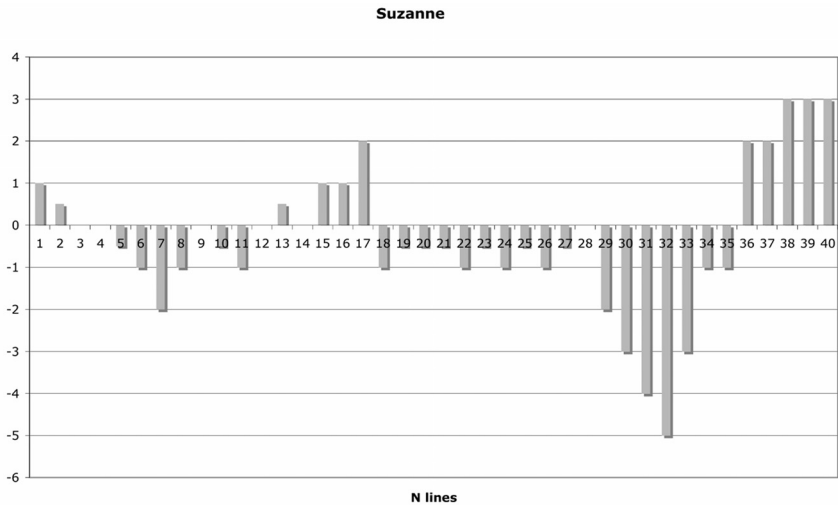
This cognitive disruption (CD) leads to anxiety: “But there I was, really scared, and I didn’t know how to react at all.” This fear arises when Suzanne must admit that the abnormality appears to be real in her eyes and could therefore be a sort of “normality”. From this moment on, all the certitudes, all the stability of her paradigmatic structure is in doubt. However, a paradigm shift implies a profound questioning of all knowledge and the manifestation of a fundamental uncertainty which may cause fear: “I was really panicking

inside and asking myself if I had seen that, what might be next?” At this third stage, like the hermit crab which outgrows its first shell and leaves it for a larger one, Suzanne abandons her previous paradigmatic structure to broaden her cognitive horizons and, like the crustacean, she is very vulnerable at that moment, as she says: “What might be next?” Management of the anxiety linked to a paradigm shift (or inability to manage it) pushes the young person to make a choice; either pure and simple denial, or integration of the abnormality into a new cognitive model, restoring the paradigms of reality by moving the existing limits. Suzanne is choosing paradigmatic growth: “And now, ever since that happened, I tell myself, ‘Yes, that could happen. It could really be there, something like that really could exist. Whereas before I was really totally against it.”

This is the fourth stage that brings some internal stability.

By taking the story of Suzanne chronologically, phrase by phrase, and allocating a positive or negative valence coefficient, we can visualise the four stages of her experience: stage 1: lines 1-17; stage 2: 18-28; stage 3: 29-35 and stage 4: 36-40. Despite the allocation of coefficients by agreement between raters, these remain a compromise between subjective judgements. These charts are therefore only a representation of overall emotional trends during the stages of PE (Table 1).

Table 1. The Four Stages of Paradigm Shift



Michaël

Michaël, who is 22 and in his final year of studying psychology, has been through similar emotional and cognitive stages. His case highlights further the fight for cognitive control. Indeed, Michaël goes to participate in several spiritualist séances with a friend and his parents. But, in contrast with Suzanne, he harbours long-lasting doubts, denial in fact, despite the occurrence of phenomena which he deems “impressive” three times before a definitive CD:

(...) It's true that the glass moved on its own, and that in itself is impressive. At the start, I thought that someone was pushing it, but when you really see that the finger sometimes came off the glass, it was really moving on its own. That in itself is impressive, but I don't know, I was really questioning it. (Graph: lines 13-16).

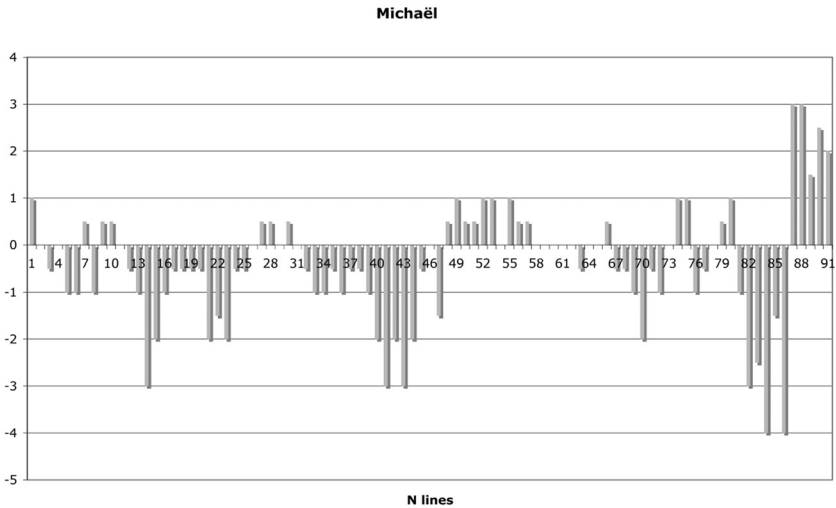
As in the case of Suzanne, the maintenance of his structure of knowledge and thought (second stage) passes as denial: “Me, I didn't believe any of that, I kept in mind that it was bullshit. So, for me, it was the woman that had... moved the glass, who had ‘cheated’ to try to make me swallow it. I did not see her interest but... well, I didn't believe any of that.” Michaël goes on to witness two more feats (lines 21-23 and 40-44) which he cannot explain and which he deems “super bizarre”, but still refuses to challenge his paradigms and continues the denial.

However, his paradigmatic plan shifts when he has an experience which sweeps away the protective doubt through CD (stage 3):

The thing which made me truly believe in spiritualism was one day when I started asking what I was going to get for my birthday... knowing that I had already received a present from my parents. I wanted to set a trap, to see if it was true or not. (...) And the glass moved five times... finally, the number 5. So, that didn't really mean anything. To us, that zapped the question (...) But what made me believe was that on my birthday, I received an envelope containing money from my parents, when I wasn't supposed to get anything. (...) and inside were five notes of five. And there you have it: Wow! At the time it gave me a strange thrill (voice breaks up). It truly filled me with real fear! (82-86).

Here also, as in the case of Suzanne, the cognitive disruption and paradigm shift is accompanied by fear. A “real fear” that Michaël explains further: “Because I did not believe it and then finally, bam! In fact, I had gone from ‘I don't think so’ to ‘I believe’. I believe in spiritualism. I believe there must be something in the afterlife.” This is paradigmatic remodelling, the fourth stage (87-91) (see Table 2).

Table 2. Several Episodes of Denial before Cognitive Disruption

*Claire*

This third case illustrates how serious the anxiety of stage 3 can become. Claire, who is 22 and studying theology, shared her experience of spiritualism, which she had aged 16 with a friend who was a fan of occultism. As in the other cases, she experienced something beyond her understanding when it seemed to her that the glass moved (stage 1): “But, wait, it’s impossible!”

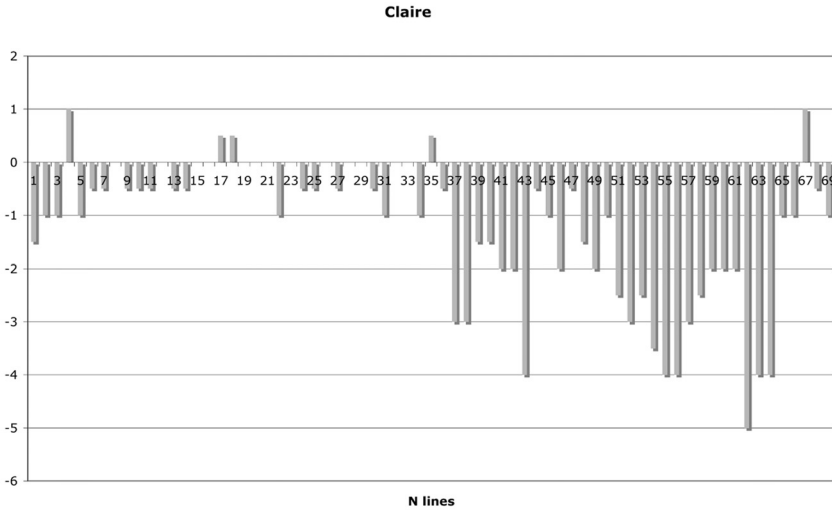
Claire then experiences a cognitive balancing act as she searches for a tentative explanation which “fits” with her existing paradigmatic information (stage 2):

If he touched the glass, he was going to have to move his finger and set it up in a certain way.” But without success: “However, we were both on top. Neither of us was touching the glass. I’m the one who set up the glass and the letters, there was nothing there, it was my room.... and this glass was moving. What the hell? It was completely...! (voice breaks).

And that is the cognitive disruption and paradigm shift which leads to anxiety (stage 3). In the case of Claire, this turns into a state of panic:

At that very moment, something started to jam up inside me. All the trouble started right there and then (...) I get up and go to the mirror. My eyes had totally exploded.

Table 3. Anxiety-inducing CD (Hermit Crab syndrome)



There was no more blue, no more white; my eyes were totally black. Everything was black, everywhere, totally black. And he comes up to me and says ‘I saw that your eyes were turning black, you went all pale, I started to panic and I broke’. It must have been a good 10 minutes before my eyes were back to normal.

This psycho-physiological panic attack is an extreme example of the state of anxiety that can result from the momentary loss of fundamental benchmarks that we have called ‘hermit crab syndrome’ (see above). This experience continues to affect Claire to this day: “The one thing that stays with me, even today, is that when I return to my room, I always have the impression that there’s something there” (stage 4) (see Table 3).

Discussion and Comments

The link between cognition and emotion has been studied for a long time (Janet, 1904; Piaget, 1975). What we observe confirms a process revealed by Bernard Rimé (2005). He recalls an aspect of theoretical *catastrophe theory* developed by Epstein (1980, 1991) and by Janoff-Bulman (1992, 1999). Seymour Epstein considers that a person forms a set of operational theories about the reality surrounding them *a priori*, which is constantly being adjusted as a result of daily experiences. A simple cognitive action enables this continual

adjustment for common and tangible objects (*concrete postulates*). In contrast, *abstract postulates*, defined by Miller, Galanter & Pribram (1960) as “a set of accumulated knowledge constituting the organised representation that the organism has of itself and the world” and which we call paradigms, are much less malleable and an unusual traumatic experience can disturb them. When an event experienced is discordant with the established paradigm, a feeling of ‘surprise’ occurs. This translates into a cognitive reaction linked to whatever is perceived to be a threat (Oatley, Keltner & Jenkins, 2006) or at odds with fundamental preconceptions. This feeling of discordance with the established paradigm—like the observation of an abnormal physical manifestation in our study—appears as a result of “surprise” and engenders a defensive cognitive reaction (Luminet, Bouts, Delie, Manstead & Rimé, 2000; Gendolla & Koller, 2001; Oatley, Keltner & Jenkins, 2006). The person tries to protect themselves using denial, which allows him to preserve his *a priori* conceptions of reality for as long as possible and gives him time to prepare for progressive transition (Janoff-Bulman and Timko, 1987; Janoff-Bulman, 1989). The individual will have to undertake cognitive restoration in order to banish the feeling of dissonance provoked by the experience. The adaptive response that the individual forms will either facilitate or obstruct the updating of their knowledge structure (Izard, Ackerman, Schoff & Fine, 2000).

From this perspective, our study highlights a recurring structure in the way in which young people react to paradigmatic discordance linked to PEs and particularly spiritualism. Young people who have a conclusive paranormal experience, that is to say a PE where they perceive or believe they are perceiving (French, 2003)—this subjectivity does not change the process—a phenomena beyond normal limits, experience these stages at a cognitive level. It seems then that these stages are intended to achieve a destabilisation of the paradigmatic structure, with varying levels of violence and drama, accompanied by anxiety. To escape from this, young people must either deny their experience or accept the experience as real and broaden or change their paradigmatic structure. In the case of denial, which can be effective in the short-term (Suls & Fletcher, 1985), doubts over an experience rooted in memory persist, and get weaker over time. In the case of acceptance of a perceived phenomenon, labelling it as paranormal helps to neutralise the ambiguity (Lange & Houran, 1999) and to integrate the new paradigmatic information.

The four stages can be summed up as follows:

- a) First stage: cognitive disturbance. This occurs when confronted with a disturbing situation. Perception (subjective or not) of something that is completely beyond what the mind can admit or understand.

- b) Second stage: the fight for cognitive control. An attempt, of varying duration, to maintain the paradigmatic information which enables an understanding of reality, either by denial, or by weighing up arguments and counter arguments.
- c) Third stage: cognitive disruption. The barrier of doubt or self-persuasion crumbles. Perception prevails over reason. The paradigmatic information with which reality is understood is called into question. This creates a paradigmatic void, a sudden instability in the knowledge structure, which leads to anxiety (hermit crab syndrome).
- d) Fourth stage: paradigmatic growth. The state of anxiety will be resolved either by rejecting the cognitive disruption and establishing permanent doubt (permanent second stage), or by accepting a paradigm shift that brings some stability to the internal structure.

This anxiety-inducing cognitive disruption, as seen in the case of Claire, can be very serious. By managing this anxiety, or rather, due to their inability to manage it, young people may choose outright denial: "There was never anything there, I must have misperceived". This disbelief is intended to maintain the paradigms of the reality as they were before the experience. Conversely, the search for a new and sufficiently 'serious' abnormal manifestation may reflect a desire to escape a malaise linked to such a denial.

As such, the semi-directive interview with Paco, aged 16, is interesting. When he was very young, he watched programmes on the supernatural and was "*bloody petrified*". He had to sleep in his younger brother's bedroom and underwent therapy for six years before it "began to fade away". In his interview, he explains:

The fact that people die and then remain here... that there are people who communicate with them, that would really shock me... but it would also interest me... to really know whether it is true or whether they are just saying it to scare you. I don't want other children to go through what I have been through.

His desire to know "whether it is true" translates this need to fit his experience into what he conceives as "true", as being compatible with the reality that he knows, that he can understand. The programmes he watched with the cognitive faculties of a child and a reduced ability to distance himself from the situation were not consistent with the foundations of his perceptions of reality, and have been the source of his anguish. While the years of therapy have been able to soothe him, they apparently have not enabled him to fit his experiences into a paradigm of normality, since, aged 16, he still wants to know "whether it is true or whether they are just saying it to scare you."

The spiritualist séances he attempts correspond to his need to address the cognitive disruption he suffered in childhood. If the experience is not repeated, then “they are just saying it to scare you” and he can ‘close the case’ knowing that the paradigms of reality constructed when he was younger remain intact. Should the séances result in the perception of a manifestation, he will be able to try to overcome his anxiety by telling himself that changing the paradigms of reality no longer has to be a source of fear since it is “normal”, that is to say, it corresponds to a reality, new and disturbing perhaps, but a “reality” nonetheless.

Young people are clearly sometimes aware of CD: “Something happens inside... a kind of click” (Sonia, 15) and of the risk of anxiety when they wish to maintain the status quo, as summed up by the ambiguous words of Tiphaine, 18: “I don’t believe it but I don’t want to try because I tell myself that if anything ever happened, I would be a bit scared anyway”. To protect themselves, some people establish a cognitive barrier by clearly refusing any participation in this type of experience for scientific or religious reasons. Thus, Pierre, 16, says he is a believer and explains: “I am convinced that spiritualism, spirits and everything, really exist and really work (...) It was out of the question that I participate in that. I prayed that it wouldn’t work and it didn’t”. And Robin, 18: “I don’t think any of it exists. Nothing has been proven scientifically.”

Conclusions and Future Research

This study complements the many observations linking paranormal beliefs (PBs) and anxiety, bringing with it the new discovery of a mechanism underlying the link between anxiety and some aspects of not only paranormal beliefs but also the paranormal experiences (PEs) which can result in PBs. Thus, paranormal experiences would not function solely as a means of managing anxiety but would also be a cause for anxiety. Furthermore, these results enable the identification of specific aspects of paranormal experiences that contribute to anxiety, and thus avoid confusion relating to the general concept of the paranormal. This would then permit a more refined development of the types of anxiety and coping mechanisms that young people develop through some paranormal experiences to try to moderate their fears.

In addition, highlighting a multi-phase structure for a phenomenon that induces anxiety among young people enables a better understanding of the issues underlying paranormal beliefs and practices. The particular interest that young people have in spiritualism, witchcraft and extrasensory elements is not

trivial. The fear and, in some cases, knowledge, that young people can have of the risk of the onset of fear when experiencing some aspects of the paranormal, can help us to understand why these practices attract them, to comprehend their attraction to experiences which are scary, exhilarating or extreme (Groth-Marnat & Pegden, 1998). While bungee jumping or other extreme sports can also offer moments of fear, they do not challenge young people's initial paradigm. On the contrary, they form part of it. Furthermore, in extreme sports, fear is momentary while, according to our hypothesis, the anxiety which results from experiences like spiritualism stems from a destructuring and long-lasting paradigmatic transformation. Therefore the risks and damage would not be the same. This is one hypothesis to be confirmed by other studies on the subject.

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