

Higher Paranormal Beliefs are Predictive of Poorer Mental Health

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Introduction

This study examines the relationship between overall mental health and belief in the paranormal within a more diverse sample than previous research. There is disagreement in the literature over this relationship (Dag, 1997; Peltzer, 2002; Schumaker, 1987); although, few have examined specific aspects of belief and paranormal experience in association with mental health (Schofield & Claridge, 2007). Additionally, age, biological sex, and religiosity have been shown to be related to increased paranormal belief (King et al., 2012; Shumaker, 1987; Saide, 2013), and as such will be accounted for as covariates in analyses.

Study Hypothesis:

Researchers expected that lower levels of mental health would be associated with increased paranormal beliefs and experiences, controlling for age, biological sex, and religiosity.

Method

Participants

In order to examine these hypotheses, questionnaire data was gathered from two populations. The first group were TAM attendees, with a total of 175 completed the survey. The second group consisted of undergraduate students at a mid-size university in the United States; 347 of them participated, for a total of 522 participants in the study overall.

Measures

Each participant completed the same packet of survey questionnaires, which began by asking about demographic data. They then answered questions on:

- Paranormal belief/skepticism (Paranormal Belief Scale – Revised; PBS-R)
- Experience of odd events (Anomalous Experience Inventory; AEI)
- Religious belief (Santa Clara Strength of Religious Faith Questionnaire; SCSRFAQ)
- Level of theism (Dawkin's Belief Scale; DBS)
- Overall mental health (Behavioral Health Screening Measure; BHSM).

Procedure

In order to examine study hypotheses, questionnaire data was gathered from two populations. First, attendees at The Amazing Meeting (TAM), an annual conference sponsored by the James Randi Educational Foundation focused on science, skepticism, and critical thinking, were recruited. For their effort, they received a \$10 gift card. The second group consisted of undergraduate students at a mid-size university in the central United States. They participated to obtain part of their required course credit. Both completed the questionnaires via an online interface using Qualtrics.

Results

As hypothesized, correlational analyses revealed a strong positive association between paranormal belief and mental health.

Specifically, endorsement of more symptoms on the Behavioral Health Screening Measure was positively related with:

- Higher belief in the paranormal ($r = .309$, $p < .001$)
- More paranormal/odd experiences ($r = .529$, $p < .001$)

Consistent with prior research, age, sex, and religiosity were all also strongly related to paranormal belief. Those with increased belief in the paranormal were generally:

- Younger ($r = -.627$, $p < .001$)
- Female ($r = .315$, $p < .001$)
- More Religious ($r = .578$, $p < .001$)

Next, the predictive nature of paranormal experiences variables (AEI) were explored using a multiple hierarchical regression with the BHSM score as the criterion.

- On Step one, age, sex, and religiosity were entered to control for their influence. These controls accounted for 4% of variance in mental health, adjusted $R^2 = .039$, $F(4, 512) = 6.23$, $p < .0001$.
- Secondly, the AEI paranormal experiences subscale was entered as a predictor, revealing that increased paranormal experiences predicted more mental-health problems, R^2 change = $.21$, $F(1, 511) = 35.174$, $p < .0001$.
- Fear of paranormal experiences was entered in the third step, and also predicted more mental-health problems, R^2 change = $.024$, $F(1, 510) = 32.994$, $p < .0001$.
- On step four, the use of drugs and alcohol was entered and reliably predicted poorer mental health, R^2 change = $.022$, $F(1, 509) = 31.347$, $p < .0001$.
- Finally, paranormal ability reliably predicted more mental-health problems, R^2 change = $.009$, change in $F(1, 508) = 28.550$, $p = .011$.

The overall model was significant, adjusted $R^2 = .299$, $F(1, 508) = 28.550$, $p = .011$.



Discussion

Data indicate that higher levels of paranormal experiences were strongly predictive of worse overall mental health, even when controlling for biological sex and religiosity. The total model accounted for approximately 30% of the variance, with self-reported paranormal experiences being the most predictive of decreased mental health.

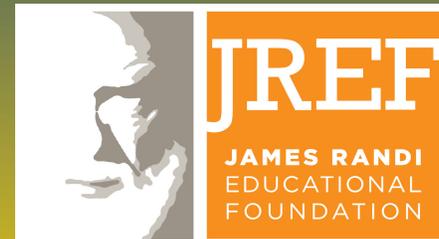
Demographic variables are also a significant aspects of this outcome, especially age. Specifically, believers in the paranormal are more likely to be younger than more skeptical individuals. Further data collection that allows for a broader age range of paranormal believers will be very useful in examining additional potential age effects.

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