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## The Trauma from Unspoken Out-of-Body Experiences during Childhood

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## Description

Out-of-Body Experiences (OBEs) have long captivated the interest of researchers and the general public alike, often described as moments in which individuals perceive themselves as being detached from their physical bodies [1]. While much of the discourse surrounding OBEs focuses on their metaphysical implications or their thrill as a unique psychological phenomenon, my research over the years has unveiled a more troubling aspect: The potential for these experiences to be frightening and even traumatizing. This complexity is particularly pronounced in individuals who encounter OBEs during childhood, where the lack of interpretive frameworks can leave lasting emotional scars.

Recently, I discovered that my 8-year-old son has been experiencing several sleep-related phenomena, including OBE and sleep paralysis, which may explain his challenging behavior at bedtime. Although he is a healthy, happy, and fearless child, he struggles with a deep fear of sleeping alone, often leading to a nightly battle to postpone bedtime. He frequently wakes in the middle of the night, terrified and seeks comfort by coming to my room. Despite my chronic fatigue and irritation from being awakened, I strive to reassure him, either guiding him back to his bed or occasionally allowing him to sleep with me. I initially attributed his frequent awakenings to nightmares, though I sensed that such extreme fear might stem from a deeper issue beyond typical childhood fears.

Through my recent research, I have engaged with numerous individuals who reported having OBEs during their childhood, often without understanding the phenomenon at the time. It was only years later, in adulthood, that they were able to articulate and label these profound experiences. During my interviews, many participants reported feelings of helplessness associated with their childhood OBEs. Some interpreted their OBEs at the time as abductions or two beings wanting to take them from their parents (one interviewee mentioned asking her dad to build a fence around her bed to hold onto it 'when she was leaving' to prevent being 'taken.') Many reported being scared to share the experience with others due to not knowing how to interpret what was happening, or fearing that something was wrong with them. As a result, some individuals continued to carry a burden of unresolved fear, significantly impacting their overall psychological well-being.

OBEs are, most of the time, remarkable events and, even for an adult, they are difficult to make sense of. The phenomenon of ego dissolution that occurs during an OBE, well-known in research with psychedelic compounds, often generates profound psychological impacts, requiring cognitive accommodation and often a reorganization of our interpretation of the world [2-4]. Not infrequently, adults who experience an OBE come to believe in life after death, as they experience the sensation of existence outside of a physical body.

This sensation is challenging to grasp, given that our notion of existence is intrinsically and constantly linked to our bodily sensations. Our physical bodies are essential to how we see ourselves and how others see us; they are fundamental to our identities [5]. We simply don't know what it's like to exist without a physical body, at least until we have an OBE. Parenthetically, another phenomenon that can happen at bedtime, often related to OBEs, is sleep paralysis [1,6]. Sleep paralysis occurs during sleep onset or offset when voluntary muscle movement is inhibited, yet ocular movements remain intact [7]. During this time, the person is fully conscious and aware of their surroundings. Although it usually lasts only a few minutes, it can be very frightening and often produces negative emotions such as anxiety [8,9].

Now imagine a child, who is still forming their notion of the world and embodiment, having this type of experience during the night; OBEs can be a source of confusion, fear and anxiety. The disorienting and sometimes unsettling nature of these experiences can be overwhelming for young individuals who may not have the cognitive and emotional maturity to process them effectively. Without proper guidance and support, children may struggle to make sense of their OBEs, potentially leading to feelings of isolation, vulnerability, or even a distorted sense of 3 reality. Unfortunately, as my interviews showed, these experiences are not usually shared with parents, who may also be unaware of this type of phenomenon.

The idea to ask my son if he was having any scary experiences during night time only occurred to me after many conversations with individuals who had OBEs during their childhood and they shared with me the trauma these experiences had caused them. 'Have you ever woken up with the feeling that you couldn't move your body?' With wide eyes, my son answered 'Yes.' He described how terrifying it was not being able to move his arms and legs, even when 'his brain was sending signals for them to

move.' Next, I asked, 'And have you ever woken up at night with the feeling that you were flying or floating in your room?' Again, with wide eyes, he answered affirmatively. Like him, I was also surprised. He described the sensation of a wave of electricity coursing through his body, and then he found himself floating just above his physical body.

He detailed the position in which he saw his sleeping body, all the impressions he had of the room, and said the experience seemed very real as if he had woken up-a 'classic' OBE, as researchers would informally call it. Talking through his experience, I told him that these experiences were relatively common and invited him to share them with me if they happened again. At that moment, I observed a palpable sense of relief wash over him. The once daunting experience now appeared to have lost much of its terrors, likely a result of our open discussion and exchange of perspectives. It was evident that the dialogue we had shared had played a pivotal role in assuaging his concerns and reframing his perception of his experiences. While it is too early to assess the long-term impact of our recent conversations on my son's ability to navigate his experiences, existing research underscores the critical role of parentchild communication regarding potentially traumatic events. Studies indicate that such dialogues generally foster a child's emotional wellbeing and contribute to the development of a robust 'emotional selfconcept' [10,11].

Conversely, a lack of engagement in discussions about negative emotional experiences can leave children's memories vulnerable, particularly concerning trauma, leading to less coherent narrative formations [12,13].

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