

# The false fame illusion in people with memories about a previous life

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## Abstract

The present study examined whether individuals with full-blown memories of highly implausible events are prone to commit source monitoring errors. Participants reporting previous-life memories and those without such memories completed a false fame task. This task provides an index of source monitoring errors (i.e., misclassifying familiar non-famous names as famous names). Participants with previous-life memories had a greater tendency to judge the names of previously presented non-famous people as famous than control participants. The two groups did not differ in terms of correct recognition of new non-famous names and famous names. Although dissociation, cognitive failures, sleep-related experiences, depressive symptoms, and signs of psychological distress were all significantly higher in participants with previous-life memories than in controls, these variables did not predict the false fame illusion.

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## 1. Introduction

A plethora of research has demonstrated that adults can create autobiographical memories for events that never occurred (e.g., Clancy, McNally, Schacter, Lenzenweger, & Pitman, 2002; Loftus & Pickrell, 1995; Mazzoni, Loftus, & Kirsch, 2001). According to Hyman and Kleinknecht (1999), the development of such false memories is dependent on different cognitive processes, which can interact with each other. For example, whether false memories occur is partly dependent on the plausibility of the suggested event (e.g., Pezdek, Finger, & Hodge, 1997; Scoboria, Mazzoni, Kirsch, & Relyea, 2004; Smeets, Merckelbach, Horselenberg, & Jelicic, 2005). Once an event is perceived as plausible, individuals may start to believe that the event has happened to them. Another process in the road to a false memory is repetition or recognition of an assertion/plausible event which can increase the confidence in the truth of this assertion/event (known as “Illusion of Truth,” e.g., Bacon, 1979; Hasher, Goldstein, & Toppino, 1977; Hertwig, Gigerenzer, & Hoffrage,

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1997). A next possible step is that they interpret their thoughts and fantasies about the fictitious event as real memories (Mazzoni et al., 2001; see also Scoboria et al., 2004; Smeets et al., 2005). In the pathway to a false memory, source monitoring errors (i.e., failure to attribute the correct source to information) are a determinant factor and can creep in anywhere along the way (e.g., Johnson, Hashtroudi, & Lindsay, 1993).

Using well-researched laboratory paradigms to elicit false recall of e.g., words (the Deese/Roediger-McDermott task; see below), several studies have shown that women reporting recovered memories of childhood sexual abuse are more prone to memory distortions than control participants (e.g., Clancy, Schacter, McNally, & Pitman, 2000; Geraerts, Smeets, Jelicic, Heerden van, & Merckelbach, 2005). However, in studying these populations, it is very difficult to establish the ground truth, i.e., to determine whether the recovered memories in these samples are genuine or false. Thus, one can never be certain that their susceptibility to memory distortions is a function of cognitive impairments related to a history of abuse or the manifestation of a trait-like tendency to develop false memories (see also Clancy et al., 2002). For this reason, researchers have tried to find specific groups of people who report memories of events that seem very implausible to have happened. A case in point is a series of studies by Clancy and co-workers (2002; see also McNally et al., 2004; McNally and Clancy, 2005), who examined whether people claiming to be abducted by aliens are more susceptible to commit source monitoring errors than people without such memories. Participants with alien abduction experiences and control participants were given a variant of the Deese/Roediger-McDermott paradigm (DRM paradigm; Deese, 1959; Roediger & McDermott, 1995) to examine their propensity to falsely recall and recognize lure words that have never been presented. Briefly, in the DRM paradigm participants are given lists of semantically related words (e.g., bed, pajama) that refer to non-presented lure words (e.g., sleep). In subsequent memory tests, some participants claim to remember the non-presented lure words. The most likely explanation for this is that they mistake internally generated associations for memories of real words. Thus, the DRM task taps source monitoring errors. Clancy and colleagues (2002) found that participants reporting memories of alien abduction or the belief that they had been abducted exhibit a greater tendency to falsely recall and recognize non-presented critical lure words in the DRM paradigm than control participants. Specific cognitive characteristics like hypnotic suggestibility, depressive symptoms, and schizotypic features were found to be significant predictors of false recall and false recognition. Thus, there is reason to believe that people with this particular type of implausible autobiographical memories have source monitoring problems.

Another class of autobiographical memories that are highly implausible are hypnotically induced memories about previous-lives. Although spontaneous previous-life memories are in some countries part of a broad culture (e.g., Sri Lanka; Haraldsson, 2003), in modern Western societies such memories are often elicited under hypnosis (e.g., Spanos, Menary, Gabora, DuBreuil, & Dewhirst, 1991).

The current study aimed at a conceptual replication of Clancy et al.'s (2002) findings. Focussing on a different type of implausible memory and relying on a different type of source monitoring task (see below), we tried to replicate the basic findings of Clancy et al. (2002) that reports of implausible memories are associated with a tendency to commit source monitoring errors. To this end, we examined source monitoring errors in people reporting hypnotically induced previous-life memories and control participants. The paradigm we employed was the false fame paradigm (Jacoby, Kelley, Brown, & Jasechko, 1989). In this paradigm, participants are first asked to read out aloud a series of non-famous names. The next day, participants receive a list of names, consisting of the old non-famous names, new non-famous names, and also names referring to famous people (e.g., actors, writers, and politicians). Participants are instructed to make fame judgments for each presented name. A standard finding in this paradigm is that participants falsely identify previously studied (old) non-famous names as famous names (Jacoby et al., 1989). This illusion stems from participants' tendency to mistake the familiarity of an old non-famous name as an indication that the person must be famous.

A subsidiary aim of our study was to explore to what extent certain personality traits predict the false fame illusion. Previous research has shown that traits like absorption (Clancy et al., 2002), fantasy proneness (e.g., Spanos et al., 1991), dissociation (Eisen & Lynn, 2001), and sleep disruptions (McNally & Clancy, 2005) are more pronounced in people who are susceptible to false memories. To explore the relationship between these traits and source monitoring errors in participants with previous-life memories, we administered measures of dissociation, fantasy proneness, cognitive failures, sleep experiences, and general psychopathology to our sample.

## 2. Materials and methods

### 2.1. Participants

Previous-life participants were recruited through contacts with six reincarnation therapists in the Maastricht area, which is the most southern part of the Netherlands. Thirteen clients (2 men) claiming previous-life memories volunteered to participate in our study. Mean age of these participants was 44.70 years ( $SD = 9.70$ ; Range = 29), with mean years of education being 14 years ( $SD = 1.40$ ). The control group, which was recruited through advertisement in local newspapers, consisted of 11 women and 2 men, matched as much as possible on age (mean age = 44.90,  $SD = 9.20$ , Range = 30) and years of education ( $M = 14.20$ ,  $SD = 1.40$ ) [all  $t$ 's(24) < 1.0]. Before participants completed the questionnaires and the false fame task (see below), both groups were given a set of questions concerning their beliefs in previous lives and reincarnation therapy. In the previous-life group, reincarnation therapy comprised of hypnosis-like sessions, in which the patients were asked to lay down and concentrate on their inner feelings. On average, previous-life participants had had 20.1 regression therapy sessions (range 4–95 sessions). Sixty-nine percent of those previous-life participants had clear, detailed, and vivid memories of their previous lives, with all of the previous-life participants believing that previous lives do exist. None of these participants had, prior to therapy, any memory about their previous lives. The previous-life participants recovered at least five distinct previous lives. Sixty-one percent of the previous-life accounts were highly aversive and pertained to negative events (e.g., murder, torture, and war). In contrast to the previous-life participants, none of the control participants believed in the existence of previous-life experiences or had been subjected to reincarnation therapy.

### 2.2. Materials and procedure

The experiment was approved by the standing ethical committee of the Faculty of Psychology, Maastricht University. Participants were tested individually in a quiet laboratory room. Upon arrival, participants were asked to sign an informed consent form. Instructions, manipulations, and stimulus materials were given on paper, except for the false fame paradigm, which was presented via a computer. Participants completed the Dissociative Experiences Scale (DES; Cronbach's  $\alpha = .90$ ; Bernstein & Putnam, 1986), Creative Experiences Questionnaire (CEQ; Cronbach's  $\alpha = .81$ ; Merckelbach, Horselenberg, & Muris, 2001), Cognitive Failures Questionnaire (CFQ; Cronbach's  $\alpha = .90$ ; Broadbent, Cooper, Fitzgerald, & Parkes, 1982), Iowa Sleep Experiences Scale (ISES; Cronbach's  $\alpha = .85$ ; Watson, 2001), and the Symptom Check List-90 (SCL-90; Derogatis, Richels, & Rock, 1976; Cronbach's  $\alpha = .87$ ). Participants also underwent an adapted version of the false fame task (Jacoby et al., 1989). To control for order and fatigue effects, questionnaires and false fame task were counterbalanced across participants.

#### 2.2.1. Dissociative experiences scale

The dissociative experiences scale (DES) is a 28 item self-report measuring dissociative phenomena like feelings of depersonalization, derealization, and psychogenic amnesia. Participants are asked to indicate on 100 mm visual-analog scales (VAS; anchors: 0 = *not at all*; 100 = *very much*) to what extent they experience these phenomena on a daily basis. A total DES score is derived by averaging the scores across individual items (range 0–100), with higher total DES scores indicating stronger dissociative tendencies.

#### 2.2.2. Creative experiences questionnaire

The creative experiences questionnaire (CEQ) consists of 25 true/false items. CEQ items were derived from the extensive case descriptions of fantasy proneness provided by Wilson and Barber (1982). An illustrative item is "My fantasies are so vivid that they are like a good movie." A total score (range 0–25) is obtained by summing the true-answers, with higher scores indicating higher levels of fantasy proneness.

#### 2.2.3. Cognitive failures questionnaire

The cognitive failures questionnaire (CFQ) consists of 25 items measuring the frequency of everyday failures of memory, attention, action, and perception. Participants have to indicate on a 5-point scale how often

they experience particular cognitive lapses and blunders (e.g., forgetting appointments; anchors: 0 = *never*; 4 = *very often*). Scores are summed to obtain a total CFQ score, with higher scores indicating a higher frequency of self-reported cognitive failures.

#### 2.2.4. Iowa sleep experiences scale

The Iowa sleep experiences scale (ISES) is an 18-item questionnaire that asks participants to rate the frequency of various sleep- and dream-related experiences (e.g., nightmares, etc.) on a 7-point scale (anchors: 1 = *never*; 7 = *several times a week*). A mean score can be obtained by summing across all items.

#### 2.2.5. Symptom check list-90

A Dutch version of the symptom check list-90 (SCL-90) was used. This scale comprises 90 items and is a self-report measure of current psychological symptoms. Each item taps one of 9 clinical domains (e.g., anxiety, depression, somatization, insufficiency, etc.). Items describe symptoms and participants rate on a 5-point scale, to what extent they have experienced the symptoms in the last week (anchors: 1 = *not at all*; 5 = *extremely*). A total SCL-90 score can be derived by summing across items. This total SCL-90 score is an index of general psychopathology.

#### 2.2.6. False fame task

An adapted version of the [Jacoby et al. \(1989\)](#) false fame task was used. In extensive studies in our lab, we documented that this version elicits the false fame illusion in a non-trivial minority of healthy participants ([Horselenberg, Merckelbach, Wessel, Verhoeven, & Zeles, 2006](#)). In our version of the task, participants are given the second phase of the false fame paradigm 2 h after the study phase (see below) rather than 24 h after the study phase as was the case in the original experiment.

Participants were informed that they would participate in a pronunciation test. Next, they went through the study phase of the task, during which they were asked to read a series of 40 non-famous names (hereafter referred to as old non-famous names), speaking aloud in a microphone placed in front of them. During this phase, no responses were recorded. Selection of names was based on extensive pilot work. In total, a set of 160 names was selected. Half of them referred to non-famous persons, while the other half referred to moderately famous Dutch persons. Both name types were matched on length of first and family name and on gender. Names were presented on a Dell computer running Experimental Run Time System (ERTS; [Beringer, 1996](#)) on a Philips Brilliance 17" screen. Names were presented for 2 s in lowercase letters with the initial letters of the first and family name in capitals. This was followed by a 2 s interstimulus interval. The second phase was a test phase (famous/non-famous discrimination task) and took place 2 h after the study phase. Participants were explicitly instructed that old non-famous names would be presented along with new non-famous names and famous names. Participants were told that they did not have to provide a reason for their subjective fame-judgments. After 16 practice trials, they were exposed to a series of 160 names: 40 old non-famous names, 40 new non-famous names, and 80 famous names. By pressing either the right or left shift key of the keyboard, participants indicated for each name whether it was a famous or non-famous name. An individual name (first name and family name) was selected quasi-randomly from the pool of 160 names, which was contingent upon participants, pushing one of the shift keys. The name disappeared from the screen as soon as the participant responded. This was followed by a 1 s blank screen before the next name appeared. The computer recorded each fame judgment. Within the previous-life and control group, shift keys (i.e., left vs. right) and sequence of the three types of names were counterbalanced. We calculated proportions of old and new non-famous names that participants misclassified as famous (i.e., dividing the number of non-famous names judged as famous by 40).

### 3. Results

Mean proportions of old and new non-famous names misclassified as famous in each group is shown in [Fig. 1](#). A 2 (group: previous-life vs. control)  $\times$  2 (false fame: old vs. new non-famous names) Analysis of Variance (ANOVA) with repeated measures on the last factor yielded a significant false fame effect [ $F(1, 24) = 9.70$ ;  $p = .005$ ;  $MSE = 17.16$ ;  $\eta^2 = .29$ ] and a borderline significant main effect of group

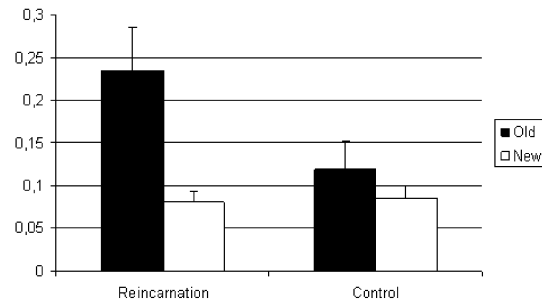


Fig. 1. Proportion of old and new non-famous names misclassified as famous for the previous-life memories group and the control group (SEM's are given in *t*-bars;  $N = 26$ ).

[ $F(1, 24) = 3.18, p = .08$ ;  $MSE = 23.99$ ;  $\eta^2 = .19$ ]. Most importantly, the critical group  $\times$  type of non-famous names interaction was significant [ $F(1, 24) = 5.03, p = .03$ ;  $MSE = 17.16$ ;  $\eta^2 = .17$ ], due to the fact that compared to controls, previous-life participants misinterpreted more old non-famous names as famous. Thus, our data show that the previous-life group displayed a stronger false fame illusion than the control group. Another way to approach this issue is by calculating a false fame index. This index can be obtained by subtracting the proportion of new non-famous names judged as famous from the proportion old non-famous names judged as famous (range:  $-.58$  to  $.10$ ; see Rybash, Rubenstein, & DeLuca, 1997). Again, the difference between the previous-life group and control group was significant:  $t(24) = -2.3, p = .034$ , Cohen's  $d = .82$ . Participants with previous-life experiences did not differ significantly from controls with regard to the proportion hits (famous names judged as famous), means being  $.86$  ( $SD = .09$ ) and  $.87$  ( $SD = .11$ ),  $t(24) < 1$ .

Table 1 shows mean scores on the self-report questionnaires. The previous-life group scored significantly higher on the DES [ $t(24) = 2.70, p < .01$ , two-tailed], CFQ [ $t(24) = 2.40, p = .02$ , two-tailed], ISES [ $t(24) = 3.15, p < .01$ , two-tailed], and total SCL-90 [ $t(24) = 3.50, p = .002$ , two-tailed]. Furthermore, previous-life participants scored significantly higher on all SCL-90 subscales (e.g., depression, anxiety, etc.; see Table 1) [all  $t$ 's(24)  $> 2, p < .05$ , two-tailed], except for hostility and sleeplessness [both  $t$ 's (24)  $< 1.0$ , both  $p$ 's  $> .05$ ]. As for the CEQ, previous-life participants had marginally higher scores than the control participants [ $t(24) = 1.70, p = .09$ ].

Table 1

Mean scores and standard deviations of the individual differences measures for the previous-life and control group

Measure	Previous-life group		Control group	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Dissociative experiences scale	18.90	11.70	9.70	4.90
Creative experiences questionnaire	9.20	4.20	6.30	4.40
Cognitive failures questionnaire	41.60	12.60	30.50	10.60
Iowa sleep experiences scale	50.38	11.81	36.00	11.51
Total score SCL-90	141.90	37.80	101.90	19.60
SCL-90 agoraphobia	9.08	2.50	7.46	0.97
SCL-90 anxiety	17.69	6.91	11.77	2.52
SCL-90 depression	28.23	7.39	20.23	4.85
SCL-90 somatization	20.08	6.09	14.69	2.98
SCL-90 insufficiency	17.38	5.61	12.85	4.14
SCL-90 sensitivity	33.54	12.80	22.92	4.97
SCL-90 hostility	8.23	2.09	6.92	1.50
SCL-90 sleeplessness	7.61	4.07	5.31	2.78

Note. DES, dissociative experiences scale (Bernstein & Putnam, 1986; range: 43.32); CEQ, creative experiences questionnaire (Merckelbach et al., 2001; range: 16.00); CFQ, cognitive failures questionnaire (Broadbent et al., 1982; range: 50); ISES, Iowa sleep experiences scale (Watson, 2001; range: 44); SCL-90, symptom check list-90 (Derogatis et al., 1976; range: 177).

Table 2

Correlations between individual differences measures and false fame index and hit rates on famous names, collapsed across groups

Measures	False fame index		Hit rate famous	
	<i>r</i>	<i>p</i>	<i>r</i>	<i>p</i>
DES	.05	.80	-.03	.88
CEQ	.20	.32	.04	.83
CFQ	-.29	.15	-.15	.47
ISES	.37	.06	-.09	.65
SCL-90	.29	.14	-.09	.67

Note. DES, dissociative experiences scale; CEQ, creative experiences questionnaire; CFQ, cognitive failures questionnaire; ISES, Iowa sleep experiences scale; and SCL-90, symptom check list-90.

To explore the relationship between personality traits and the false fame index, Pearson product-moment correlations were calculated collapsed across groups and for both groups separate. As can be seen in Table 2, when the two groups were collapsed, only the Iowa Sleep Experiences Scale was marginally associated with the false fame index. None of the trait measures were significantly related to the hit rate (famous names as famous), all  $r_s < .40$ , all  $p_s > .05$ , two-tailed. When looking at each group separately, Pearson product-moment correlations between the false fame index and the different personality traits remained non-significant (all  $r_s < .40$ , all  $p_s > .05$ , two-tailed).<sup>1</sup> Similar non-significant correlations were found between the hit rate and the different personality traits.

#### 4. Discussion

The present study examined source monitoring in participants with highly implausible autobiographical memories and control participants. Our results show that participants with previous-life memories had a stronger tendency to judge names of previously presented non-famous people as famous than controls. In line with Clancy et al. (2002), we also found that memories of highly unlikely events are associated with elevated levels of depression (as measured by the SCL-90 depression subscale) and other signs of psychological distress. That is, participants with memories of previous lives reported heightened levels of dissociation, sleep disturbances, cognitive failures, and, to a lesser extent fantasy proneness. However, in contrast to Clancy et al. (2002), we found only sleep disturbances (ISES) to be related to the false fame index. In future research, it would be informative to explore whether the specific content of these previous-life memories (amount of detail, vividness of detail, etc.) or the confidence in these memories might be possible moderators in the relationship between the false fame effect and the different personality characteristics, which could possibly explain these differences in findings between our data and the results of Clancy et al. (2002). Since no detailed description of these factors was given by the previous-life participants, we can only speculate about this relation.

Our finding that people with previous-life memories exhibit a relatively robust false-fame illusion is important because this may help to explain how these people come to accept their previous-life memories as genuine memories. When individuals with a tendency to make source monitoring errors are repeatedly asked to imagine events that supposedly took place during past lives, even highly implausible events suggested by the therapist may come to generate feelings of familiarity (as indicated in this experiment by the false fame effect; see Jacoby et al., 1989). This line of reasoning also fits nicely with what is known as the ‘*Illusion of Truth*,’ whereby reiterating of assertions make these assertions more believable (Arkes, Hackett, & Boehm, 1989; Bacon, 1979; Begg, Anas, & Farinacci, 1992; Hertwig et al., 1997). Research by Hasher et al. (1977) and Bacon (1979) demonstrated that repetition of an assertion and/or the recognition of this assertion as old, increases the confidence in its truth. This could increase confidence and is independent of the actual truth of the assertion. In a related vein, familiarity (which automatically increases with repetition; Begg et al., 1992) may erroneously be interpreted as a diagnostic sign of the truth status of the event. Indeed, Hyman and Kleinknecht (1999)

<sup>1</sup> Both correlation analyses (collapsing across groups and groups separately) were also carried out using non-parametric statistics (Spearman’s  $\rho$ ). All correlations between false fame index and personality traits remained non-significant, all  $r_{s,s} < .40$ , all  $p_s > .05$ .

argue that another possible cognitive process in the development of false memories is plausibility, which is of course closely related to familiarity. Even if it is highly unlikely, once an event is perceived as plausible, individuals can acquire the autobiographical belief that the event has happened to them (e.g., narrative). Another possible step would be the acceptance of their thoughts and fantasies about the event as genuine memories (Mazzoni et al., 2001; see also Scoboria et al., 2004; Smeets et al., 2005). One decisive factor in these cognitive processes is source monitoring (Johnson et al., 1993), because source confusion errors can lead to acceptance of internally generated events as externally perceived.

It is likely that false memories in the clinical context involve source monitoring errors (e.g., Hyman & Kleinknecht, 1999). It is also evident that the false fame effect is a pure laboratory manifestation of a source monitoring error (Multhaup, De Leonardis, & Johnson, 1999). Things are quite different with most autobiographical retrieval tasks (e.g., diary studies). Nevertheless, some authors have argued that small scale laboratory tasks tapping memory illusions can not be generalized to situations in which full-blown autobiographical false memories are implanted (Pezdek & Lam, 2006). There are two issues here that are relevant to the study of false memories. One issue is whether laboratory phenomena like false fame illusions tap a broad aspect of source monitoring integrity. We believe they do: it is not unlikely that people who mistake familiarity for fame also tend to confuse fantasies that feel familiar with memories of things that really happened. A second issue is that of causality. One causal scenario is that individuals with source monitoring difficulties are more sensitive to the memory corrupting effects of hypnosis and develop false memories of past lives along this route. Another causal scenario is that treatment techniques like hypnosis and memories of previous lives have led to a liberal style in making source monitoring decisions. Of course, our results are silent as to this causal issue.

Several limitations of the current study deserve some comment. First, like most studies on people with alien abductions, our study relied on a small sample. Yet, effect sizes indicate that our findings are quite robust. Second, unlike Clancy and her colleagues (e.g., Clancy et al., 2002), we did not differentiate between those who recovered or repressed their memories of previous lives. Another limitation is the lack of control for psychopathology in the previous-life and control group. The participants undergoing previous-life therapy suffered from several psychopathological symptoms. As their scores on the SCL-90 indicate, our control sample did not suffer from psychological distress. Thus, one could speculate that psychopathology is the driving force behind the source monitoring difficulties in the previous-life group. While the non-significant correlation between SCL-90 and false fame illusion seems to argue against this possibility, the point remains that lack of power may have contributed to our failure to detect a significant correlation between these two variables. In line with this, one could argue that this difference in psychopathology distress is inherent to our method of recruitment of the previous-life participants. It might well be that persons who undergo reincarnation therapy may be looking for an explanation for their current psychological distress. One possibility in trying to circumvent this problem would be to recruit previous-life participants in the general population or to match the control group based on presence of psychopathology. In future research, it would also be worthwhile to use three instead of two groups of participants; those who underwent reincarnation therapy and did or did not develop autobiographical memories of previous lives (similar to the recovered and repressed distinction by Clancy et al., 2002), and a control group with no reincarnation beliefs or memories. If both previous-life groups are matched on psychopathology scores, this could also take care of the lack of control for psychopathology that existed in our study. In more general terms, future studies should make an attempt to identify the causal antecedents of source monitoring problems typical for people with implausible memories.

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