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# Aphantasia

## Aphantasia and Hyperphantasia - The Continuum of Visual Imagination

The terms “aphantasia<sup>1)</sup>” and “hyperphantasia<sup>2)</sup>” describe the absence and abundance of visual imagery. At their far ends, these conditions affect about 1% for aphantasia and 3% for hyperphantasia, often displaying familial inheritance. These variations in conscious experience manifest across various contexts and likely encompass subcategories awaiting detailed definition.

While individuals with extreme imagery often experience effects on other forms of imagery like dreams and spatial visualization, aphantasia typically leaves autobiographical memory and facial recognition intact, albeit diminished. Aphantasia may have links with autism but could potentially confer protection against certain mental health conditions. Recent research has primarily focused on aphantasia, shedding light on its position along the vividness spectrum([Adam Zeman, March 27, 2024](#)).

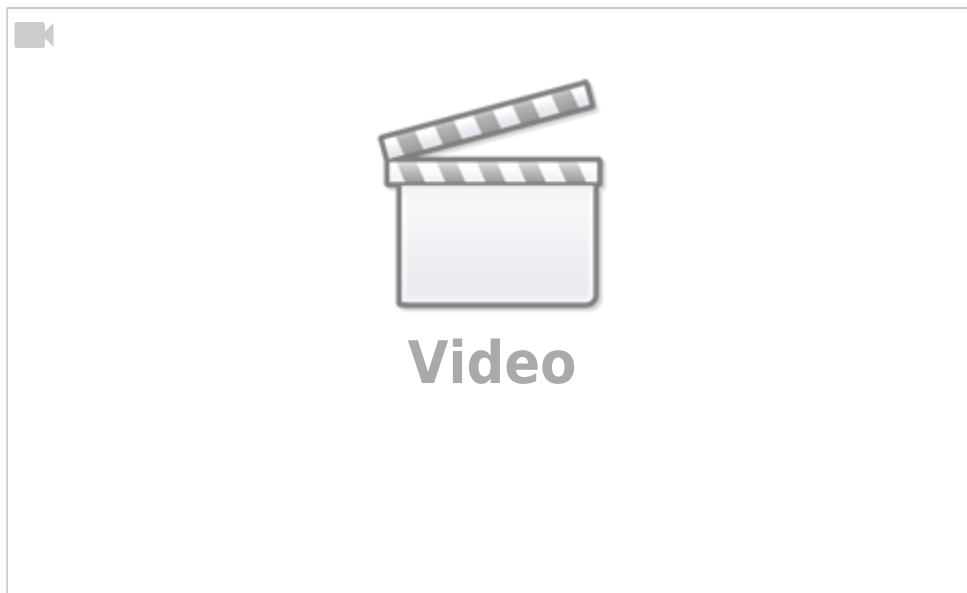
Aphantasia and hyperphantasia can be seen as facets of neurodiversity — natural variations in cognitive, personality, and behavioral traits. A recent study concluded that aphantasia does not significantly disrupt daily activities or mental well-being enough to warrant classification as a mental disorder([Merlin Monzel, Annabel Vetterlein, Martin Reuter, 04 December 2022](#)). Both conditions likely offer their own set of advantages and disadvantages. They are part of a group of comparable differences in experience and behavior, alongside congenital synesthesia<sup>3)</sup> and prosopagnosia<sup>4)</sup>, which are often not noticed.

The focus of scientific research in this area is looking into the relationships between imagery, perception, memory, neurodevelopment, and mental well-being.

Two significant conclusions have emerged from the scientific study of aphantasia. Firstly, conscious sensory imagery is not a prerequisite for human cognition, challenging Aristotle's notion that “the soul never thinks without a phantasma.” Secondly, creative accomplishments among individuals with aphantasia suggest that sensory imagery is not indispensable for creative imagination, underscoring the ability to represent, reshape, and conceive ideas even in its absence.

The marked differences in subjective experience caused by imagery extremes can be expected to have major behavioural effects, e.g. Aphantasia is over-represented among people working in mathematical, computational, and scientific roles, whereas people with hyperphantasia are more likely to work in traditionally 'creative' industries and around 40% of people with aphantasia describe difficulty with face recognition, twice as much as normal ([Adam Zeman, September 2020, Pages 426-440](#)).

For a more in depth explanation and reference please refer to the cited Publication ([Adam Zeman, March 27, 2024](#))



## IEMT and Aphantasia

In a short survey with practitioners <sup>5)</sup> the experiences with aphantasia differ.

Personal view: I've met quite a few "aphantasics" recently. Most of them were walking excuse machines; this is just another pseudo-diagnosis they can add to their repertoire. I'm denying that people's ability to visualise is on a spectrum, and some will meet the clinical criteria, but none I've met have any of them. For them, it's just the latest bandwagon to jump on. If a client contacts me and tells me they are aphantasic, I'm most likely to decline their request for an appointment.

*Andrew T. Austin*

I have had some people say they couldn't visualize but after the work they started to "see" /describe aspects of the memory.. This was after the emotional loading was reduced *Lori Heinzman Donnelly*

Don't ask them to visualise. Just let them talk about the memory or the thought. "Just concentrate on that thought/memory..." I have family members who can't visualise. They access memories in their own way. *Mavis Kerrigan*

Regarding that sensory imagery is not indispensable for creative imagination, underscoring the ability to represent, reshape, and conceive ideas even in its absence it seems that for IEMT the takeaway points at the moment are

- \* Visualizing is not a necessary requisite for doing IEMT.
- \* Use the frame "memory" instead of "visualize".
- \* Dependence on the emotional content - K Pattern / reevaluate.
- \* It can be a pointer to a detrimental mindset of the client to this kind of intervention

<sup>1)</sup> [aphantasia](#) [Wikipedia](#)

<sup>2)</sup> [hyperphantasia](#) [Wikipedia](#)

<sup>3)</sup> [synesthesia](#) [Wikipedia](#)

<sup>4)</sup> [prosopagnosia](#) [Wikipedia](#)

<sup>5)</sup> Facebook survey on aphantasia and IEMT [Facebook](#)

1. ^ <sup>a b</sup> Adam Zeman, March 27, 2024. [Aphantasia and hyperphantasia: exploring imagery vividness extremes](#). Trends in cognitive sciences.

2. ^ Merlin Monzel, Annabel Vetterlein, Martin Reuter, 04 December 2022. [No general pathological significance of aphantasia: An evaluation based on criteria for mental disorders](#). Scandinavian Journal of Psychology.

3. ^ Adam Zeman, September 2020, Pages 426-440. [Phantasia-The psychological significance of lifelong visual imagery vividness extremes](#). Cortex.

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