Trait-level paranoia shapes inter-subject synchrony in brain activity during an

ambiguous social narrative

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ABSTRACT

Individuals often interpret the same event in different ways. How do personality traits modulate

patterns of brain activity evoked by a complex stimulus? Participants listened to a narrative

during functional MRI describing a deliberately ambiguous social scenario, designed such that

some individuals would find it highly suspicious, while others less so. Using inter-subject

correlation analysis, we identified several brain areas that were differentially synchronized

during listening between participants with high- and low trait-level paranoia, including theory-

of-mind regions. Event-related analysis indicated that while superior temporal cortex responded

reliably to mentalizing events in all participants, anterior temporal and medial prefrontal cortex

responded to such events only in high-paranoia individuals. Analyzing participants' speech as

they freely recalled the narrative revealed semantic and syntactic features that also scaled with

paranoia. Results indicate that trait paranoia acts as an intrinsic 'prime', producing different

neural and behavioral responses to the same stimulus across individuals.

That two individuals may see the same event in different ways is a truism of human
nature. Examples are found at many scales, from low-level perceptual judgments to
interpretations of complex, extended scenarios. This latter phenomenon is known as the
"Rashomon effect"[1] after a 1950 Japanese film in which four eyewitnesses give contradictory
accounts of a crime and its aftermath, raising the point that for multifaceted, emotionally charged
events, there may be no single version of the truth.

What accounts for these individual differences in interpretation? Assuming everyone has
access to the same perceptual information, personality traits may bias different individuals
toward one interpretation or another. Paranoia is one such trait, in that individuals with strong
paranoid tendencies may be more likely to assign a nefarious interpretation to otherwise neutral
events. While paranoia in its extreme is a hallmark symptom of schizophrenia and other
psychoses, trait-level paranoia, like many experiences and behaviors associated with psychiatric
illness, exists as a continuum rather than a dichotomy[2,3]. On a behavioral level, up to 30 percent
of people report experiencing certain types of paranoid thoughts (e.g., 'I need to be on my guard
against others') on a regular basis[4] and trait-level paranoia in the population follows an
exponential, rather than bimodal, distribution[5].

Few neuroimaging studies have investigated paranoia as a continuum between normality
and pathology; the majority simply contrast healthy controls and patients suffering from clinical
delusions. However, a handful of reports from subclinical populations describe patterns of brain
activity that scale parametrically with tendency toward paranoid or delusional ideation. For
example, it has been reported that higher-paranoia individuals show less activity in the medial
temporal lobe during memory retrieval and less activity in the cerebellum during sentence
completion[6], less activity in temporal regions during social reflection[7] and auditory oddball
detection[8], but higher activity in the insula and medial prefrontal cortex during self-referential
processing[9] and differential patterns of activity in these regions as well as the amygdala while
viewing emotional pictures[10].

Such highly controlled paradigms enable precise inferences about evoked brain activity,
but potentially at the expense of real-world validity. For example, brain response to social threat
is often assessed with decontextualized static photographs of unfamiliar faces presented rapidly
in series (see [11] for a review). Compare this to threat detection in the real world, which involves
perceiving and interacting with both familiar and unfamiliar faces in a rich, dynamic social

context. Paranoid thoughts that eventually reach clinical significance usually have a slow,

insidious onset, involving complex interplay between a person's intrinsic tendencies and his or

her experiences in the world. In studying paranoia and other trait-level individual differences,

then, is important to complement highly controlled paradigms with more naturalistic stimuli.

Narrative is an attractive paradigm for several reasons. First, narrative is an ecologically

valid way to study belief formation in action. Theories of fiction posit that readers model

narratives in a Bayesian framework in much the same way as real-world information[12], and story

comprehension and theory-of-mind processes share overlapping neural resources[13]. Second, a

standardized narrative stimulus provides identical input, so any variation in interpretation reflects

individuals' intrinsic biases in how they assign salience, learn and form beliefs. Third, from a

neuroimaging perspective, narrative listening is a continuous, engaging task that involves much

of the brain[14] and yields data lending itself to innovative, data-driven analyses such as inter-

subject correlation[15,16].

Previous work has shown that experimenters can manipulate patterns of brain activity

during naturalistic stimuli by explicitly instructing participants to focus on different aspects of

the stimulus. For example, Cooper et al. showed that activity patterns in temporal and frontal

regions varied according to whether listeners were told to pay attention to action-, space- or time-

related features of short stories[17]. Lahnakoski et al. showed participants the same movie twice,

asking them to adopt different perspectives each time, and found differences in neural synchrony

depending on which perspective had been taken; results were primarily in parahippocampal,

parietal and occipital regions[18]. Most recently, Yeshurun et al. presented participants with a

highly ambiguous story with at least two plausible—but very different—interpretations, and used

explicit primes to strongly bias each participant toward one interpretation or the other. Responses

in higher-order brain areas, including default mode, were more similar among participants who

had received the same prime, indicating that shared beliefs have a powerful effect on how

individuals perceive an identical stimulus[19]. However, while informative, these studies have all

relied on an explicit prime or instruction; they cannot explain why individuals often

spontaneously arrive at different interpretations of the same stimulus.

In this work, we use participants' intrinsic personality traits as an implicit prime, relating

individual differences in trait-level paranoia to brain activity during a naturalistic task in which

participants are faced with complex, ambiguous social circumstances. Using a novel narrative

90 stimulus, we show that while much of the brain is synchronized across all participants during

91 story listening, stratifying participants based on trait-level paranoia reveals an additional set of

92 regions showing stereotyped activity specifically among high-paranoia individuals; many of

93 these are regions involved in theory-of-mind and mentalizing. An encoding model of the task

94 suggests that these regions, including the temporal pole and medial prefrontal cortex, are

95 particularly sensitive to "mentalizing events" when the main character is experiencing an

96 ambiguous social interaction or explicitly reasoning about other characters' intentions. Finally,

97 we measured participants' behavioral reactions to the narrative by analyzing their speech as they

98 freely recalled the story, and identified semantic and syntactic features that vary parametrically

99 with trait-level paranoia. Together, results indicate that trait-level paranoia modulates both neural

100 and behavioral responses to a single stimulus across individuals.

103 **RESULTS**

105 **Behavioral data and task performance**

106  We created an original, fictional narrative to serve as the stimulus for this study. The

107 narrative described a main character faced with a complex social scenario that was deliberately

108 ambiguous with respect to the intentions of certain characters; it was designed such that different

109 individuals would interpret the events as more nefarious and others as less so. A synopsis of the

110 story is given in Box 1.

111  Twenty-two healthy participants listened to a pre-recorded audio version of the narrative

112 (total duration = 21:50 min:sec, divided into three parts) during fMRI scanning. Following each

113 of the three parts, participants answered three challenging multiple-choice comprehension

114 questions to ensure they had been paying attention. Performance was very accurate (15 of the 22

115 subjects answered 9/9 [100%] questions correctly, while five answered 8/9 [89%] correctly and

116 two answered 7/9 [78%] correctly). Self-report data indicated that subjects generally found the

117 narrative engaging and easy to pay attention to (engagement rating on a scale of 1 to 5: mean =

118 3.8, s.d. = 0.96, median = 4, median absolute deviation [m.a.d.] = 0.72; attention rating: mean =

119 4.1, s.d. = 0.87, median = 4, m.a.d. = 0.66).

During a separate behavioral visit one week prior to the scan, participants completed
several self-report questionnaires and behavioral tasks to assess personality traits and cognitive
abilities (see Fig. 1a for a schematic of the experimental protocol). Our primary measure of
interest was subscale A from the Green et al. Paranoid Thoughts Scale[20] (GPTS-A). We
administered this scale on a different day, and placed it amongst other tasks unrelated to
paranoia, to minimize any priming effects or demand characteristics that might influence
participants' eventual reactions to the narrative. Possible scores on the GPTS-A range from 16 to
80; higher scores are generally observed only in clinical populations[20]. In our healthy sample, we
observed a right-skewed distribution that nonetheless had some variance (range = 16-40, mean =
20.6, s.d. = 6.3; median = 18.5, m.a.d. = 4.0; see Fig. 1b for a histogram of the distribution). This
is consistent with observations from much larger sample sizes that paranoia follows an
exponential, rather than normal, distribution in the healthy population[4,5,20].

Story listening evokes widespread neural synchrony

Our primary approach for analyzing the fMRI data was inter-subject correlation (ISC),
which is a model-free way to identify brain regions responding reliably to a naturalistic stimulus
across subjects[15,16]. In this approach, the timecourse from each voxel in one subject's brain
across the duration of the stimulus is correlated with the timecourse of the same voxel in a
second subject's brain. Voxels that show high correlations in their timecourses across subjects
are considered to have a stereotyped functional role in processing the stimulus. The advantage of
this approach is that it does not require the investigator to have an *a priori* model of the task, nor
to assume any fixed hemodynamic response function.

In a first-pass analysis, we calculated ISC at each voxel across the whole sample of n =
22 participants, using a recently developed statistical approach that relies on a linear mixed-
effects model with crossed random effects to appropriately account for the correlation structure
embedded in the data[21]. Results are shown in Fig. 2. As expected given the audio-linguistic
nature of the stimulus, ISC was highest in primary auditory cortex and language regions along
the superior temporal lobe, but we also observed widespread ISC in other parts of association
cortex, including frontal, parietal, midline and temporal areas, as well as the posterior
cerebellum. These results replicate previous reports that complex naturalistic stimuli induce

stereotyped responses across participants in not only the relevant primary cortex, but also higher-

order brain regions[14,15,22].

Also as expected, ISC was generally lower or absent in primary motor and somatosensory

cortex, although we did observe significant ISC in parts of primary visual cortex, despite the fact

that there was no timecourse of visual input during the story. (To encourage imagery and

engagement, we had participants fixate on a static photograph that was thematically relevant to

the story during listening, so the observed ISC in visual cortex may reflect similarities in the

timecourse of internally generated visualization across participants.)

Trait-level paranoia modulates neural response to the narrative

Having established that story listening evokes widespread neural synchrony across the

entire sample, we next sought to determine if there were brain regions whose degree of ISC was

modulated by trait-level paranoia. Using a median split of GPTS-A scores, we stratified our

sample into a low-paranoia (GPTS-A $\leq$ 18, n = 11) and high-paranoia (GPTS-A $\geq$ 19, n = 11)

group (Fig. 1b). We then used the same linear mixed-effects model described above formulated

as a two-group contrast to reveal areas that are differentially synchronized across paranoia

groups.

We were primarily interested in two contrasts. First, which voxels show greater ISC

among pairs of high-paranoia participants versus low-paranoia participants, or vice versa? This

contrast reveals regions that have a stereotyped response in one group but not the other,

suggesting a more prominent role for that region in processing the stimulus. Second, which

voxels show greater ISC among pairs of participants within the same paranoia group (i.e., high-

high and low-low) than across groups (high-low)? This contrast reveals regions that have equally

stereotyped responses within each group, but whose response timecourses are qualitatively

different across groups, suggesting that such regions may be responding to different events

within the stimulus depending on paranoia level. These contrasts are schematized in Fig. 1c.

Results from both contrasts are shown in Fig. 3. In the first contrast, several regions

emerged as being more synchronized in the high-paranoia group relative to the low-paranoia

group. Significant clusters were found in the left temporal pole (Talairach coordinates for center

of mass: [+46.7, -10.0, -26.2]), left precuneus ([+10.8, +71.0, +35.9]), and two regions of the

right medial prefrontal cortex (mPFC; one anterior [-8.1, -46.9, +16.3] and one dorsal [+2.9, -

14.8, +45.1]). Searches for these coordinates on Neurosynth, an automatic fMRI results
synthesizer for mapping between neural and cognitive states[23], indicated that for the left temporal
pole and right anterior mPFC clusters, top meta-analysis terms included "mentalizing", "mental
states", "intentions", and "theory mind". There were no regions showing a statistically
significant difference in the reverse direction (low-paranoia > high-paranoia).

In the second contrast, a set of regions also emerged as being more synchronized *within*
paranoia groups than *across* paranoia groups. These were the left middle occipital gyrus
(Talairach coordinates for center of mass: [+31.3, +86.1, +14.0], Neurosynth: "objects", "scene",
"encoding") and the right angular gyrus ([-44.8, +57.9, +37.9], Neurosynth: "beliefs"). There
were no regions showing a statistically significant difference in the reverse direction (across
groups > within groups), reinforcing the biological validity of stratifying based on trait-level
paranoia.

Establishing specificity to paranoia: control analyses

We conducted several control analyses to rule out the possibility that the observed group
differences were driven by a factor other than trait-level paranoia. (For all analyses in this
section, we checked for both categorical and continuous relationships with paranoia; full results
are reported in Table 1.)

For example, if the high-paranoia participants have better overall attentional and
cognitive abilities, they might simply be paying closer attention to the story, inflating ISC values
but not necessarily because of selective attention to ambiguous or suspicious details. However,
there were no differences between high- and low-paranoia participants on any of the cognitive
tasks we administered (verbal IQ, vocabulary, fluid intelligence or working memory), making it
unlikely that observed differences are due to trait-level differences in attention or cognition. As
for state-level attention during the story, there was no relationship between paranoia and number
of comprehension questions answered correctly, total word count during the recall task, or self-
report measures of engagement and attention. We also explored potential imaging-based
confounds, and found that paranoia was not related to amount of head motion during the scan (as
measured by mean framewise displacement), number of censored frames, or temporal signal-to-
noise ratio (tSNR). In terms of demographics, paranoia groups did not differ in age or sex

breakdown. Thus we are reasonably confident that the observed effects are driven by true trait-
level differences in paranoia between individuals.

Probing response to mentalizing events using an encoding model of the task

Results of the first contrast from the two-group ISC analysis indicated that certain brain
regions showed a more stereotyped response in high-paranoia versus low-paranoia individuals.
What features of the narrative were driving activity in these regions? In theory, ISC allows for
reverse correlation, in which peaks of activation in a given region's timecourse are used to
recover the stimulus events that evoked them[15]. In practice, this is often difficult. Especially with
narrative stimuli, in which structure is built up over relatively long timescales[14], it is challenging
to pinpoint exactly which event—word, phrase, sentence—triggered an increase in BOLD
activity.

Rather than rely on reverse correlation, which is a purely data-driven *decoding* approach,
we took an *encoding* approach: we created a model of the task based on events that we
hypothesized would stimulate differing interpretations across individuals, and evaluated the
degree to which certain regions of interest (ROIs) responded to such events, using a standard
general linear model (GLM) analysis. Specifically, we labeled sentences in the story when the
main character was experiencing an ambiguous (i.e., possibly suspicious) social interaction,
and/or sentences when she was explicitly reasoning about the intentions of other characters. For
brevity, we refer to these timepoints as "mentalizing events." In creating the regressor, all events
were time-locked to the end of the last word of the labeled sentences, when participants are
presumably evaluating information they just heard and integrating it into their situation model of
the story.

We hypothesized that the two ROIs from the previous analysis known to be involved in
theory-of-mind and mentalizing, specifically the left temporal pole and right medial PFC, would
show higher evoked activity to mentalizing events in individuals with higher trait-level paranoia.
We included two additional ROIs, the left posterior superior temporal sulcus and left Heschl's
gyrus, as a positive and negative control, respectively. We selected the left posterior superior
temporal sulcus as a positive control because of its well-established role in theory-of-mind and
mentalizing processes, and the fact that it emerged as highly synchronized across all participants
(cf. Fig. 2) but did not show a group difference (cf. Fig. 3); thus we hypothesized that this region

should respond to mentalizing events in all participants, regardless of paranoia score.
Conversely, left Heschl's gyrus (primary auditory cortex) should only respond to low-level
acoustic properties of the stimulus and not show preferential activation to mentalizing events in
either group or the sample as a whole.

For each participant, we regressed the timecourse of each of these four ROIs against the
mentalizing-events regressor and compared the resulting regression coefficients between groups
(Fig. 4b). Compared to low-paranoia individuals, high-paranoia individuals showed stronger
responses in both the left temporal pole (two-sample $t(20) = 2.71$, $p_{adj} = 0.014$) and right medial
PFC ($t(20) = 3.36$, $p_{adj} = 0.007$). As hypothesized, responses in the left PSTS were strong across
the whole sample (one-sample $t(21) = 8.73$, $p < 0.0001$), but there was no significant difference
between groups in this ROI ($t(20) = 0.67$, $p_{adj} = 0.34$). Also as hypothesized, the sample as a
whole did not show a significant response to these events in primary auditory cortex (one-sample
$t(21) = 0.44$, $p = 0.66$), and there was no group difference ($t(20) = 0.47$, $p_{adj} = 0.34$).

To confirm that these results hold if paranoia is treated as a continuous variable, we also
calculated the rank correlation between paranoia score and beta coefficient for all four ROIs
(Fig. 4c). As expected, response to suspicious events was significantly related to trait-level
paranoia in the left temporal pole ($r_s = 0.57$, $p = 0.005$) and right medial PFC ($r_s = 0.64$, $p =
0.001$), but not in the left posterior STS ($r_s = -0.04$, $p = 0.86$) or left Heschl's gyrus ($r_s = 0.02$, $p =
0.95$).

As an additional control, to check that this effect was specific to mentalizing events and
not just any sentence offset, we created an inverse regressor comprising all *non*-mentalizing
events (i.e., by flipping the binary labels from the mentalizing-events regressor, such that all
sentences were labeled *except* those containing an ambiguous social interaction or explicit
mentalizing as described above). As expected, there were no differences between paranoia
groups in any of the four ROIs in response to non-mentalizing sentences (Fig. 4d), and no
continuous relationships between regression coefficient and paranoia (Fig. 4e). This suggests that
trait-level paranoia is associated with differential sensitivity of the left temporal pole and right
medial PFC to not just any type of information, but specifically to socially ambiguous
information that presumably triggers theory-of-mind processes.

Paranoia modulates behavioral response to the narrative: Speech analysis

Having established that paranoia levels modulate individual participants' brain responses to an ambiguous narrative, we next sought to determine if this trait also modulates behavioral responses to the narrative. In other words, does trait-level (intrinsic) paranoia bear upon state-related (stimulus-evoked) paranoia? If the observed differences in neural activity propagate up to conscious perception and interpretation of the stimulus, then participants' subjective experiences of the narrative should also bear a signature of trait-level paranoia.

Immediately following the scan, participants completed a post-narrative battery that consisted of free-speech prompts followed by multiple-choice items to characterize their beliefs and feelings about the story. For the first item, participants were asked to retell the story in as much detail as they could remember, and their speech was recorded. Participants were allowed to speak for as long as they wished on whatever aspects of the story they chose. Without guidance from the experimenter, participants recalled the story in rich detail, speaking an average of 1,081 words (range = 399-3,185, s.d. = 610).

Audio recordings of participants' speech were transcribed and submitted to the language analysis software Linguistic Inquiry and Word Count (LIWC; [24]. The output of LIWC is one vector per participant describing the percentage of speech falling into various semantic and syntactic categories. Example semantic categories are positive emotion ('love', 'nice'), money ('cash', 'owe'), and body ('hands', 'face'), while syntactic categories correspond to parts of speech such as pronouns, adjectives and prepositions; there are 67 categories in total.

Using partial least-squares regression, we searched for relationships between speech features and trait-level paranoia. A first-pass analysis revealed that more than 72 percent of the variance in paranoia score could be accounted for by the first component of speech features; the loadings of semantic and syntactic categories for this component are visualized in Fig. 5a. The feature with the highest positive loading—indicating a positive relationship with paranoia—was affiliation, a category including words describing social and familial relationships (e.g., 'ally', 'friend', 'social'). Also associated with high trait-level paranoia were frequent use of adjectives as well as anxiety- and risk-related words (e.g., 'bad', 'crisis'); drives, a meta-category that includes words concerning affiliation, achievement, power, reward and risk; and health-related words (e.g., 'clinic', 'fever', 'infected'; recall that the story featured a doctor treating patients in a remote village; cf. Box 1). Features with strongly negative loadings—indicating an inverse relationship with paranoia—included male references (e.g., 'him', 'his', 'man', 'father'); anger-

related words ('yell', 'annoyed'); function words ('it', 'from', 'so', 'with'); and conjunctions
('and', 'but', 'until'). See Fig. 5b for specific examples for selected categories from participants'
speech transcripts.

After the free-speech prompts, participants answered a series of multiple-choice
questions. First, they were asked to rate the degree to which they were experiencing various
emotions (suspicion, paranoia, sadness, happiness, confusion, anxiety, etc; 16 in total) on a scale
from 1 to 5. Most of ratings skewed low—for example, the highest paranoia rating was 3, and
only six subjects rated their paranoia level higher than 1. Interestingly, there was no significant
correlation between trait-level paranoia score and self-reported paranoia (r_s = -0.02, p_{uncorr} =
0.91) or suspicion (r_s = 0.11, p_{uncorr} = 0.62) following the story. Neither were any of the other
emotion ratings significantly correlated with trait-level paranoia (all uncorrected p > 0.12; see
Fig. 5c).

Next, participants were asked to rate the three central characters on six personality
dimensions (trustworthy, impulsive, considerate, intelligent, likeable, naïve). None of these
personality ratings were significantly correlated with trait-level paranoia (all uncorrected p >
0.09; data not shown).

Finally, participants were asked to rate the likelihood of each of six scenarios. There was
a trend such that individuals with higher trait-level paranoia were more likely to disagree with
one of these scenarios ("Juan and the other villagers had not known anything about the disease
before Carmen arrived"; r_s = -0.50, p_{uncorr} = 0.02), but this did not survive correction for multiple
comparisons. None of the other scenario likelihood ratings significantly correlated with trait-
level paranoia (all uncorrected p > 0.19; see Fig. 5d).

Overall, then, participants' free speech was much more sensitive to individual differences
in trait-level paranoia than their answers on the multiple-choice questionnaire. Self-report is a
coarse measure that may suffer from response bias; behavior provides a richer feature set that
allows for the discovery of more subtle associations. In studying nuanced individual differences,
then, these results highlight the desirability of capturing behavior in naturalistic ways.

DISCUSSION

Here, we have shown that trait-level paranoia acts as a lens through which individuals

perceive an ambiguous stimulus, yielding a spectrum of responses across participants at both the

neural and behavioral levels. While our in-scanner narrative listening task evoked widespread

inter-subject correlations in brain activity across all participants (Fig. 2), stratifying participants

according to paranoia revealed differential inter-subject synchrony in various brain regions.

Specifically, high-paranoia participants showed greater ISC in the left temporal pole, left

precuneus, and two regions in the right medial prefrontal cortex (Fig. 3a). Participants more

similar on trait-level paranoia—whether high or low—tended to have more similar activity

patterns in left middle occipital gyrus and right angular gyrus (Fig. 3b). A follow-up event

related analysis showed that the left temporal pole and right medial prefrontal cortex selectively

responded to mentalizing events in high-paranoia participants, but not in low-paranoia

participants (Fig. 4). Finally, analyzing participants' speech as they freely recalled the narrative

revealed semantic and syntactic features that also scaled with trait-level paranoia (Fig. 5).

The fundamental advance of the present work is to show that an intrinsic personality trait

can act as an "implicit prime" that colors how individuals perceive and interpret complex events.

Previous work using naturalistic tasks has shown that brain activity and behavioral responses are

sensitive to experimenter instructions, i.e., an explicit prime[18,19], or to the nature of the stimulus

itself, i.e., whether it is more or less compelling or entertaining[25-27]. The present study extends

these results in an important new direction, suggesting that in addition to such explicit

modulations, there is substantial implicit variation in neural response to a naturalistic stimulus

that stems from trait-level individual differences.

Our results have implications for the neural basis of both trait- and state-related paranoia.

The relative hyperactivity of theory-of-mind regions in high-paranoia individuals fits with the

conception of paranoia as "over-mentalizing", or the tendency to excessively attribute

(malevolent) intentions to other people's actions[28]. In high-paranoia individuals, the story's

ambiguous or mentalizing events triggered a response across more of the brain, activating not

only the posterior superior temporal cortex as in low-paranoia individuals, but also an extended

set of regions including the temporal pole and medial prefrontal cortex. Both of these regions are

sometimes, but not always, reported in theory-of-mind tasks broadly construed; individual

differences may at least partially explain the inconsistencies in the literature[29]. While their

precise roles in such tasks remain unclear, it has been suggested that the medial PFC is

specifically involved in meta-cognitive processes of reflecting on feelings and intentions[30], and
that the temporal pole is responsible for binding complex stimuli to emotional responses[31]. It is
conceivable that both of these processes are more active in individuals with higher trait-level
paranoia.

While the present study included only healthy controls with subclinical paranoia, it may
provide a useful starting point for the study of paranoid or persecutory delusions in schizophrenia
and related illnesses. Delusions with a persecutory theme account for roughly 70-80 percent of
all delusions. This high prevalence is stable across time[32] and geo-cultural factors[33-36], suggesting
a strong biological component. Persecutory delusions are also the type most strongly associated
with anger and most likely to be acted upon, especially in a violent manner[37]. Thus,
understanding the neurobiological basis of paranoid delusions is a critical problem in psychiatry.

But because delusions typically have a slow, insidious onset, it is nearly impossible to
retrospectively recover specific triggering events in individual patients. A related challenge is
that while thematically similar, each patient's delusion is unique in its details. Thus it is difficult
to devise material that will evoke comparable responses across patients. One solution is to craft a
model context using a stimulus that is ambiguous yet controlled—i.e., identical across
participants, permitting meaningful comparisons of time-locked evoked activity— such as the
one used in this work. Future work should study patient populations using paradigms such as this
one, as they may shed light on mechanisms of delusion formation and/or provide eventual
diagnostic or prognostic value.

While there is little work investigating how brain activity is altered during a naturalistic
stimulus in psychiatric populations, a handful of studies have used such paradigms in autism,
finding that ISC is lower among autistic individuals than typically developing controls while
watching movies of social interactions[38-40]. Notably, the degree of asynchrony scales with
autism-like phenotype severity in both the patient and control groups[39]. It is interesting to
juxtapose these reports with the present results, in which individuals with a stronger paranoia
phenotype were *more* synchronized during exposure to socially relevant material; ultimately, this
fits with the notion of autism and psychosis as opposite ends of the same spectrum, involving
hypo- and hyper-mentalization, respectively[41,42]. Eventually, it may be possible to combine a
naturalistic stimulus with an ISC-based analysis that cuts across diagnostic labels to examine
how the synchrony of neural response varies across both healthy and impaired populations.

From a methodological perspective, much of the research using fMRI to study individual
differences has shifted focus in recent years from activation measured in task-based conditions to
functional connectivity measured predominantly at rest[43-47]. Both suffer from limitations:
traditional tasks are tightly controlled paradigms that often lack ecological validity; resting-state
scans, on the other hand, are entirely unconstrained, making it difficult to separate signal from
noise. Furthermore, very few resting-state scans use behavioral monitoring, so while they may
detect individual or group differences, it is usually impossible to recover the nature of the mental
events that give rise to such differences. Naturalistic tasks may be a happy medium for studying
both group-level functional brain organization as well as individual differences[48,49]. We and
others have argued that such tasks could serve as a "stress test" to draw out individual variation
in brain and behaviors of interest[50-53], enhancing the signal-to-noise ratio in the search for
neuroimaging-based biomarkers and permitting more precise inferences about the sources of
individual differences in neural activity.

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Author contributions

E.S.F, P.R.C and R.T.C conceived the study. E.S.F. developed experimental materials and

performed data collection. E.S.F. and G.C. analyzed the data. E.S.F., P.R.C., P.A.B. and R.T.C

interpreted results. E.S.F. wrote the manuscript with comments from all other authors.

Competing financial interests

The authors have no competing financial interests to declare.

Carmen is a young American doctor who journeys to the Amazon to work in a small village health clinic. There, she meets Juan, a village leader, and Alba, a young girl whom she befriends. Soon after arriving, Carmen sees a series of patients with a very serious—and seemingly highly contagious—fever. At times it seems that Juan and the villagers are fully open and forthcoming with Carmen, while at other times their behavior is harder to interpret and it seems as if they may be hiding something. Carmen begins to wonder if the villagers had known about the disease before she arrived, and if she had somehow been deliberately lured to the remote location. The story ends abruptly, when Carmen discovers that Alba herself is sick, and that unbeknownst to her, Alba is Juan's daughter. Carmen fears she may have already been infected, and wonders what to do next.

Box 1. Synopsis of fictional narrative used as a stimulus.

Figure 1. Experimental protocol, distribution of trait-level paranoia and inter-subject correlation analysis. a) Schematic of experimental protocol. Participants came to the laboratory for an initial behavioral visit, during which they completed several computerized cognitive tasks as well as self-report psychological scales, one of which was the Green et al. Paranoid Thoughts Scale(GPTS). To minimize demand characteristics and/or priming effects, the fMRI scan visit took place approximately one week later. During this visit, subjects listened to an ambiguous social narrative in the scanner and then completed an extensive post-narrative battery consisting of both free-speech prompts and multiple-choice items to characterize their recollections, feelings and beliefs toward the story. b) Distribution of scores on the GPTS-A subscale across n = 22 participants, and median split used to stratify participants into low (≤ 18, blue) and high (≥ 19, orange) trait-level paranoia. c) Schematic of inter-subject correlation (ISC) analysis. Following normalization to a standard template, the inter-subject correlation of activation timecourse during narrative listening was computed for each voxel (v, yellow square; enlarged relative to true voxel size for visualization purposes) for each pair of subjects (i,j), resulting in a matrix of pairwise correlation coefficients (r values). These values were then compared across paranoia groups using voxelwise linear mixed-effects models with crossed random effects to account for the non-independent structure of the correlation matrix[21].

Figure 2. Narrative listening evokes widespread inter-subject correlation across the whole sample. Voxels showing significant inter-subject correlation (ISC) across the timecourse of narrative listening in all participants (n = 22). As expected, the highest ISC values were observed in auditory cortex, but several regions of association cortex in the temporal, parietal, frontal and cingulate lobes as well as the cerebellum also showed high synchrony. Also included are three representative axial slices from the cerebellum. Results are displayed at a voxelwise false-discovery rate (FDR) threshold of q < 0.001)

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Figure 3. Trait-level paranoia modulates patterns of inter-subject correlation during narrative listening. a) Results from a whole-brain, voxelwise contrast revealing brain regions that are more synchronized between pairs of high-paranoia participants than pairs of low-paranoia participants (contrast schematized in top panel, cf. Fig. 1C). Significant clusters were detected in the left temporal pole, two regions in the right medial prefrontal cortex (one anterior and one dorsal and posterior), and the left precuneus. No clusters were detected in the opposite direction (low > high). b) Results from a whole-brain, voxelwise contrast revealing brain regions that are more synchronized within paranoia groups (i.e., high-high and low-low pairs) than across paranoia groups (i.e., high-low pairs; contrast schematized in top panel, cf. Fig 1C). Clusters were detected in the right angular gyrus and left lateral occipital cortex. For both contrasts, results are shown at an initial threshold of $p < 0.002$ with cluster correction corresponding to $p < 0.05$.

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Figure 4. Response to mentalizing events is stronger in high- compared to low-paranoia
individuals. a) Regions of interest (ROIs) for the event-related analysis. b) Comparison of beta
coefficients for each ROI for the mentalizing-events regressor between paranoia groups (low,
blue; high, orange). Each dot represents a subject. Boxes represent the median and $25^{th}/75^{th}$
percentiles, and whiskers represent the minimum and maximum. *p = 0.01; **p < 0.007; n.s., not
significant (p-values adjusted for four comparisons). c) Beta coefficients for the mentalizing-
events regressor plotted against paranoia score treated as a continuous variable (coefficients are
the same as in (b)). Top panel: the two ROIs in which beta coefficient was hypothesized to scale
with trait-level paranoia (left temporal pole and right medial PFC). Bottom panel: the two control
ROIs (left posterior superior temporal sulcus and left Heschl's gyrus). Continuous relationships
between these two variables were assessed with rank (Spearman) correlation, r_s. d) Comparison
of beta coefficients for each ROI for the non-mentalizing-events regressor (the inverse of the
mentalizing-events regressor shown in (b)). Each dot represents a subject. Boxes represent the
median and $25^{th}/75^{th}$ percentiles, and whiskers represent the minimum and maximum. e) Beta
coefficients for the non-mentalizing-events regressor plotted against paranoia score treated as a
continuous variable (coefficients are the same as in (c)). Left and right panels as in (c).
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Figure 5. Speech analysis reveals a signature of trait-level paranoia in behavioral response
to the narrative. a) Loadings of all semantic and syntactic categories for the first component
from a partial least squares regression relating features of speech during narrative recall to trait-
level paranoia score, sorted by strength and direction of association with paranoia (those
positively related to paranoia at top in orange; those inversely related at bottom in blue). b)
Example sentences from participant speech transcripts containing words falling into the three of
the top positive categories (affiliation, health and anxiety) and one of the top negative categories
(anger). c) Rank correlations between participants' trait-level paranoia and their self-report
measures of 16 emotions following the narrative (self-report was based on a Likert scale from 1
to 5). Dotted lines represent approximate threshold for a significant correlation a $p < 0.05$
(uncorrected). Gray shaded area indicates non-significance. d) Rank correlations between
participants' trait-level paranoia and their likelihood ratings of various potential scenarios
following the narrative (based on a Likert scale from 1 to 5). Likelihood rating for one scenario
(denoted with †) was significant at $p < 0.05$ but this did not survive correction for multiple
comparisons.

		Categorical (low vs. high)		Continuous	
		t	p	Spearman r	p
Demographics	Age	0.81	0.43	-0.11	0.62
	Sex*	1.64	0.20	–	–
	Education (yrs)	-0.24	0.81	-0.15	0.49
Cognitive ability	Working memory: Letter n-back (precision)	-0.45	0.66	0.16	0.47
	Fluid intelligence: Raven's matrices (total correct of 9 items)	0.00	1.00	-0.03	0.89
	Vocabulary: WRAT Word Reading (total correct of 42 items)	-1.42	0.17	0.31	0.16
	Verbal IQ: Penn logical reasoning test (total correct of 8 items)	0.23	0.82	-0.01	0.96
	Words of 6+ letters (free recall)	-1.03	0.32	0.04	0.85
	Words per sentence (free recall)	0.31	0.76	-0.18	0.43
fMRI data quality	Head motion (mean FD; mm)	0.94	0.36	0.01	0.96
	No. frames censored	-0.70	0.49	-0.08	0.74
	Average tSNR	-1.12	0.28	0.23	0.30
Attention to stimulus	No. comprehension questions correct	-0.31	0.76	0.08	0.72
	Total word count, free recall	1.00	0.33	-0.26	0.24
	Self-reported attention	0.48	0.63	-0.02	0.95
	Self-reported engagement	0.89	0.39	-0.10	0.65

Table 1. Trait paranoia was unrelated to potential confounding variables. There were no significant differences between high- and low-paranoia participants in terms of demographics, cognitive abilities, fMRI data quality or attention to the stimulus. Categorical comparisons were carried out using Student's t-tests between the low and high paranoia groups as determined by median split (degrees of freedom for all t-tests = 20). Continuous comparisons were carried out using Spearman (rank) correlation between raw paranoia score and the variable of interest. All p-values are raw (uncorrected). *Measured with a chi-squared test. FD, framewise displacement; tSNR, temporal signal-to-noise ratio; WRAT, Wide Range Achievement Test.

METHODS

Participants

A total of 23 healthy volunteers participated in this study. Data from one participant was excluded due to excessive head motion and self-reported falling asleep during the last third of the narrative. Thus, the final data set used for analysis contained 22 participants (11 females; age range = 19-35 years, mean = 27, s.d. = 4.4). All participants were right-handed, native speakers of English, with no history of neurological disease or injury, and were not on psychoactive medication at the time of scanning. All participants provided written informed consent in accordance with the Institutional Review Board of Yale University. The experiment took place over two visits to the laboratory. Participants were paid $25 upon completion of the first visit (behavioral assessments) and $75 upon completion of the second visit (MRI scan); all participants completed both visits.

Stimulus

An original narrative was written to serve as the stimulus for this experiment. For a synopsis of the story, see Box 1. To mitigate confounds associated with education level or verbal IQ, we wrote the narrative text to be easy to comprehend, with a readability level of 78.1/100 and a grade 5.5 reading level as calculated by the Flesch-Kinkaid Formula.

Audio recording. A male native speaker of English read the story aloud and his speech was recorded using high-quality equipment at Haskins Laboratories (New Haven, Conn.). The speaker was instructed to read in a natural, conversational tone, but without excess emotion. The final length of the audio recording was 21:50.

Experimental protocol

Session 1: Behavior. Approximately one week prior to the scan visit, participants came to the laboratory to complete a battery of self-report and behavioral tasks. While our primary measure of interest was the Green et al. Paranoid Thoughts Scale (GPTS)[20], we also administered several other psychological scales and cognitive assessments, in part to help reduce any demand characteristics that would allow participants to intuit the purpose of the study. We chose the

GPTS because it provides a meaningful assessment of trait-level paranoia in clinical, but
crucially, also subclinical and healthy populations. In a previous study, score on this scale best
predicted feelings of persecution following immersion in a virtual-reality environment[54]. The full
GPTS contains two subscales, A and B, which pertain to ideas of social reference and ideas of
persecution, respectively. We focused on subscale A, as it produces a wider range of scores in
subclinical populations[20].

Session 2: MRI scan. The full audio recording was divided into three segments of length 8:46,
7:32, and 5:32, respectively; each of these segments was delivered in a continuous functional run
while participants were in the scanner. To ensure attention, after each run, subjects answered
three challenging multiple-choice comprehension questions regarding the content of the part they
had just heard, for a total of nine questions. Immediately upon exiting the scanner, participants
completed a post-narrative questionnaire that consisted of open-ended prompts to elicit free
speech, followed by multiple-choice items.

MRI data acquisition and preprocessing

Scans were performed on a 3T Siemens TimTrio system at the Yale Magnetic Resonance
Research Center. After an initial localizing scan, a high-resolution 3D volume was collected
using a magnetization prepared rapid gradient echo (MPRAGE) sequence (208 contiguous
sagittal slices, slice thickness = 1 mm, matrix size 256 × 256, field of view = 256 mm, TR =
2400 ms, TE = 1.9 ms, flip angle = 8°). Functional images were acquired using a multiband T2*-
sensitive gradient-recalled single shot echo-planar imaging pulse sequence (TR = 1000 ms, TE =
30 ms, voxel size = 2.0mm^3, flip angle = 60°, bandwidth = 1976 Hz/pixel, matrix size = 110 ×
110, field of view = 220 mm × 220 mm, multiband factor = 4).

We acquired the following functional scans: 1) an initial eyes-open resting-state run
(6:00/360 TRs in duration) during which subjects were instructed to relax and think of nothing in
particular; 2) a movie-watching run using Inscapes [55] (7:00/420 TRs); 3) three narrative-listening
runs corresponding to parts I, II and III of the story (21:50/1310 TRs in total); and 4) a post-
narrative, eyes-open resting-state run (6:00/360 TRs) during which subjects were instructed to
reflect on the story they had just heard. The present work focuses exclusively on data acquired
during narrative listening. The narrative stimulus was delivered through MRI-compatible audio

headphones and a short "volume check" scan was conducted just prior to the first narrative run to
ensure that participants could adequately hear the stimulus above the scanner noise. To promote
engagement, during the three narrative runs, participants were asked to fixate on a static image of
a jungle settlement and to actively imagine the story events as they unfolded.

Following conversion of the original DICOM images to NIFTI format, AFNI (Cox 1996)
was used to preprocess MRI data. The functional time series went through the following
preprocessing steps: despiking, head motion correction, affine alignment with anatomy,
nonlinear alignment to a Talairach template (TT_N27), and smoothing with an isotropic FWHM
of 5 mm. A ventricle mask was defined on the template and intersected with the subject's
cerebrospinal fluid (CSF) mask to make a subject-specific ventricle mask. Regressors were
created from the first three principal components of the ventricles, and fast ANATICOR (Jo et al
2010) was implemented to provide local white matter regressors. Additionally, the subject's 6
motion time series, their derivatives and linear polynomial baselines for each of the functional
runs were included as regressors. Censoring of time points was performed whenever the per-time
motion (Euclidean norm of the motion derivatives) was ≥ 0.3 or when $\geq 10\%$ of the brain voxels
were outliers. Censored time points were set to zero rather than removed altogether (this is the
conventional way to do censoring, but especially important for inter-subject correlation analyses,
to preserve the temporal structure across participants). The final output of this preprocessing
pipeline was a single functional run concatenating data from the three story runs (total duration =
21:50, 1310 TRs). All analyses were conducted in volume space and projected to the surface for
visualization purposes.

We used mean framewise displacement (MFD), a per-participant summary metric, to
assess the amount of head motion in the sample. MFD was overall relatively low (after
censoring: mean = 0.075 mm, s.d. = 0.026, range = 0.035-0.14). Number of censored time points
during the story was overall low but followed a right-skewed distribution (range = 0-135, median
= 4, median absolute deviation = 25). All 22 participants in the final analysis retained at least 89
percent of the total time points in the story, so missing data was not a substantial concern. Still,
we performed additional control analyses to ensure that number of censored timepoints and
amount of head motion were not associated with paranoia score in any way that would confound
interpretation of the results (see Table 1).

Inter-subject correlation

Following preprocessing, inter-subject correlation (ISC) during the story was computed

across all possible pairs of subjects (*i,j*) using AFNI's 3dTcorrelate function, resulting in 231

($n*(n-1)/2$, where $n = 22$) unique ISC maps, where the value at each voxel represents the

Pearson's correlation between that voxel's timecourse in subject *i* and its timecourse in subject *j*.

To identify voxels demonstrating statistically significant ISC across all 231 subject pairs,

we performed inference at the single-group level using a recently developed linear mixed-effects

(LME) model with a crossed random-effects formulation to accurately account for the correlation

structure embedded in the ISC data [21]. This approach has been characterized extensively,

including a comparison to non-parametric approaches, and found to demonstrate proper control

for false positives and good power attainment [21]. The resulting map was corrected for multiple

comparisons and thresholded for visualization using a voxelwise false discovery rate threshold of

$q < 0.001$ (Fig. 2).

In a second analysis, we stratified participants according to a median split of scores on

the GPTS-A subscale. We used these groups to identify voxels that had higher ISC values within

one paranoia group or the other, or higher ISC values within rather than across paranoia groups.

To this end, we used a two-group formulation of the LME model. This model gives the following

outputs: voxelwise population ISC values within group 1 (G_{11}); voxelwise population ISC values

within group 2 (G_{22}); voxelwise population ISC values between the two groups that reflect the

ISC effect between any pair of subjects with each belonging to different groups (G_{12}). These

outputs can be compared to obtain several possible contrasts. Here, we were primarily interested

in two of these contrasts: 1) G_{11} versus G_{22}; and 2) $G_{11}G_{22}$ versus G_{12}. The maps resulting from

each of these contrasts were thresholded using an initial voxelwise threshold of $p < 0.002$ and

controlled for family-wise error (FWE) using a cluster size threshold of 50 voxels, corresponding

to a corrected *p*-value of 0.05. We opted for a particularly stringent initial p-threshold in light of

recent concerns about false positives arising from performing cluster correction on maps with

more lenient initial thresholds [56].

Event-related analysis

Creating the regressor. One of the authors (E.S.F.) manually labeled sentences

containing either an ambiguous social interaction or an instance of the main character

mentalizing about other characters' intentions using a binary scoring system (1 = ambiguous

social interaction or mentalizing present in sentence, 0 = neither ambiguous social interaction nor

mentalizing present). Four additional, independent raters previously naïve to the narrative

listened to the same version that was played to participants in the scanner. They were then given

a written version of the narrative broken down by sentence and asked to label each sentence as

described above. Sentences that were labeled by at least three of the five raters were included in

the final set of events, which were timestamped based on the offset of the last word of the

sentence. These timestamps were convolved with a canonical hemodynamic response function

(HRF) to create the mentalizing-events regressor.

As a control analysis, we also created a regressor that was the inverse of the above

regressor, by flipping the binary labels (0 or 1) for all sentences and convolving the

corresponding sentences offset timestamps with the HRF; we refer to this as the non-

mentalizing-events regressor.

ROI definition and GLM. For the left temporal pole and right medial PFC, ROIs were

defined based on the cluster-corrected group-comparison map for the contrast $ISC_{high} > ISC_{low}$

(cf. Fig. 3a). For the left posterior superior temporal sulcus and left Heschl's gyrus, spherical

ROIs were created by placing a sphere with radius 4 mm around a central coordinate. In the case

of the left pSTS, this was the peak voxel in this region identified by the whole-sample ISC

analysis (cf. Fig. 2; Talairach *xyz*, [+53, +55, +18]). In the case of left Heschl's gyrus, this was

selected anatomically (Talairach *xyz*, [-41, -24, +9]; as in [57]).

Timecourses for each ROI were extracted from each participant's preprocessed functional

data using AFNI's 3dmaskave function and regressed against both the mentalizing- and non-

mentalizing-events regressors to obtain a regression coefficient for each participant for each

ROI. These regression coefficients were then compared across groups using two-sample t-tests

corrected for four multiple comparisons. In the case of the two control ROIs (left pSTS and

Heschl's gyrus) for the mentalizing-events regressor, these coefficients were also pooled across

both groups and submitted to a one-sample t-test to test for a significant deviation from zero.

Analysis of speech features

Audio recordings of participants' retelling of the story were professionally transcribed by

a third-party company. We submitted the resulting transcripts to Linguistic Inquiry and Word

Count LIWC; [24, liwc.net], a software program that takes as input a given text and counts the

percentage of words falling into different syntactic and semantic categories. Because LIWC was

developed by researchers with interests in social, clinical, health, and cognitive psychology, the

language categories were created to capture people's social and psychological states.

We restricted LIWC output to the 67 linguistic (syntactic and semantic) categories,

excluding categories relating to metadata (e.g., percentage of words found in the LIWC

dictionary), as well as categories irrelevant to spoken language (e.g., punctuation). Thus, our

final LIWC output was a 22x67 matrix where each row corresponds to a participant and each

column to a category.

These categories can be scaled very differently from one another. For example, words in

the syntactic category "pronoun" accounted for between 10.3-20.5 percent of speech transcripts,

while words in the semantic category "leisure" accounted for only 0-1.09 percent. To give

approximately equal weight to all categories, we standardized each category (to have zero mean

unit variance) across participants before performing partial least squares regression (PLSR) as

described in the next section. This ensures that the resulting PLS components are not simply

dominated by variance in categories that are represented heavily in all human speech.

Relating speech features to paranoia

To determine which speech features were most related to trait-level paranoia, we

submitted the data to a partial least squares regression (PLSR) with the z-scored speech features

as X (predictors) and GPTS-A score as Y (response), implemented in Matlab as *plsregress*.

PLSR is a latent variable approach to modeling the covariance structure between two matrices,

which seeks to find the direction in X space that explains the maximum variance in Y space. It is

well suited to the current problem, because it can handle a predictor matrix with more variables

than observations, as well as multi-collinearity among the predictors.

In a first-pass analysis, we ran a model with 10 components to determine the number of

components needed to explain most of the variance in trait-level paranoia. Results of this

analysis indicated that the first component was sufficient to explain 72.3 percent of the total

variance in GPTS-A score, so we selected just this component for visualization and

interpretation. Predictor loadings for this component are visualized in Fig. 5a.

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831

0   0.16

r value

a

Contrast:
ISC{high, high} > ISC{low, low}

{L,L}

{L,H}   {H,H}

Lateral view

Medial view

L   R

Occipital view

-0.08   0.08

b

Contrast:
ISC{within-group} > ISC{across-group}

{L,L}

{L,H}   {H,H}

Lateral view

Occipital view

-0.02   0.02

a

affiliation
adjectives
health
drives
anxiety
pers. pron: 1st plural
female references
family
see
prepositions
insight
achievement
articles
perceptual processes
comparisons
biological processes
positive emotion
reward
verbs
risk
affective processes
pers. pron.: 1st singular
interrogatives
present focus
leisure
negative emotion
discrepancy
numbers
social processes
space
work
differentiation
past focus
death
hear
friends
motion
pers. pron: 3rd singular
tentative
relativity
feel
money
time
auxiliary verbs
pers. pron: 2nd
personal pron.
cognitive processes
future focus
adverbs
body
power
sadness
sexual
relig
negations
ingestion
home
pronouns
impersonal pron.
certainty
causation
quantifiers
pers. pron: 3rd plural
conjunctions
function
anger
male references

b

Affiliation

"…but they become **friends** once she gets to know her better."

Health

"…there were a series of **patients** that had a **fever** accompanied by a **rash**…"

Anxiety

"…she almost **panicked**…"

Anger

"…and she **yells** at him…"

c

$p < 0.05$ $p < 0.05$

excited
amused
hopeful
happy
inspired
confused
paranoid
disturbed
threatened
suspicious
surprised
calm
anxious
sad
frustrated
uncomfortable

Correlation wtih paranoia (r_s)

d

$p < 0.05$ $p < 0.05$

The village people had not known anything about the disease before Carmen arrived.   †

Juan and the other village leaders thought that having Carmen come and (potentially) get sick was the only way to get the medical help they needed.

Juan was being honest about why he needed to borrow Carmen's cell phone, and he had been planning to return it.

The village people didn't tell Carmen everything they knew about the disease because they thought it would scare her away.

Juan sent his daughter, Alba, to help cook and clean for Carmen so that he could spy/keep tabs on her.

Juan and other village leaders deliberately lured Carmen into a situation where they knew it was likely she would get sick.

Correlation wtih paranoia (r_s)