

0. Introduction to experiences related to death

There exist three types of experiences related to death:

- 1) An **After-Death Communication (ADC)** occurs when bereaved persons perceive contacts or communications apparently initiated by their deceased loved ones;
- 2) A **Near-Death Experience (NDE)** can occur when persons are close to death, clinically dead, in a coma, or, more rarely, exposed to a heavy trauma or an intense dread without any physical impairment (in this last case, we talk of *Fear-Death Experiences*).
- 3) A **Deathbed vision** occurs when dying persons perceive deceased loved ones very shortly before dying and communicate telepathically with them.

I invite you to discover an introduction to these three types of experiences, all of which have a crucial role to play at a critical moment in the life of the person experiencing them.

1. After-Death Communications (ADCs)

1.1. What are ADCs?

The expression "After-Death Communication, or ADC" refers to contacts or communications apparently initiated by the deceased with respect to their family members or friends.

ADCs occur **spontaneously**, with no intention on the part of the person having the experience (the recipient) or any apparent external cause. For the purposes of writing my book *Quand les défunts viennent à nous*, I decided to use the term "recipient" to refer to persons who have an ADC, without wanting to prejudge the *source* of these experiences.

ADCs are **direct** contacts that occur without the intervention of a medium (*channel*) and without the use of automatic writing, instrumental transcommunication or other methods. Contacts established on the initiative of the bereaved by means of a medium are not ADCs, because they are neither spontaneous nor direct.

An ADC is always linked to a death, recent or more remote in time. The majority of experiences occur in the year following the demise, with a high concentration in the first 24 hours and up to 7 days after death. Other contacts occur at a decreasing frequency of two to five years after death. Contacts that take place between five and more than thirty or forty years after death are much rarer and often occur in a crisis situation. These "ADCs for protection" serve to warn recipients of an imminent, potentially fatal, danger.

1.2. How do ADCs manifest themselves?

Different types of ADCs have been identified that can be perceived by four of the five sensory organs: **hearing, touch, smell and vision** (the sense of taste is not concerned).

Mourners may experience, shortly after death or over a longer period, different types of ADCs perceived as being initiated by the same deceased, or the same type of contact may be

repeated. Very often, several sensory organs are involved simultaneously, for example we can hear a deceased tell us that he is fine and happy, while smelling the after-shave he used to use. Contact is very short, lasting a few seconds, or a few minutes at most, but the impact on the recipients is deep and lasting.

These contacts manifest themselves in a multitude of forms and situations. **ADCs of “sensing a presence”** are very common. The recipient feels the familiar presence of the deceased, but he cannot see, feel, or hear him. The presence seems to have a certain density, almost physical though invisible, and the recipient knows exactly where the deceased is located in space. The identity and personality of the deceased family member or friend clearly emanate from this presence and allow for immediate identification.

ADCs occurring during sleep or drowsiness are also very common. They occur when people are sleeping or about to fall asleep or wake up. These contacts are sharp, coherent, memorable and perceived as real and do not assume the complex, symbolic and fragmented nature of dreams which are quickly forgotten upon awakening. Although recipients often cannot tell whether they were awakened or not during the experience, they systematically specify *“It was completely different from a dream, it was much more real.”*

Visual ADCs – or apparitions – come in a variety of forms. The deceased may be perceived either partially (the head and the bust) or in their entirety, with a gradation of sharpness. Descriptions range from the vision of a vaporous, semi-transparent silhouette that reveals the objects behind it to the perception of a perfectly solid body, and all the intermediate stages. Sometimes there is a dynamic evolution in perception: a misty form is first perceived which solidifies as it passes through the silhouette stage and eventually takes the form of a solid person who seems alive. This type of contact is particularly striking, especially when a telepathic dialogue takes place with the apparition.

ADCs of unexplained physical phenomena are very common. Recipients interpret these events as a nod of their deceased loved ones. Frequent manifestations are lights that turn on, off or blink for no apparent reason, televisions sets or mechanical objects that switch on spontaneously, or music devices that start playing pieces that are significant to the recipient. Many stories are reported of watches and clocks which have stopped at the time of death. Objects such as photos or images are returned, found on the floor or moved. Unidentified and recurring sounds at night are often reported.

ADCs at the moment of death are particularly striking because the recipient is informed of the death of a family member or friend *by the person himself*. In a state of waking or awakening at night, the recipient hears or sees his family member or friend who announces his death with serenity, sometimes with joy (*“I came to say good bye, I’m leaving now”*). Let us note in passing that they often use the verb *to leave*, as if they were preparing to undertake a journey. These experiences, which occur at the exact time of the death which takes place at a distance, *precede* the announcement of death (by the hospital, the family, etc.). In some cases, these deaths were not predictable because the person was not ill and died, for example, during an accident. The *expectation* of the imminent death of a very ill or elderly loved one may thus act as a trigger for ADCs only in certain cases.

ADCs for protection occur in a situation of crisis or imminent danger and have the consequence of avoiding a drama such as an accident, a fire, an aggression, a drowning, a suicide attempt, etc. The recipient is warned of the imminent danger and can intervene in time to remove it. Cases of young children at risk are reported who could be saved *in extremis* thanks to a warning transmitted by different types of ADCs. These experiences don't serve to *manage* a crisis situation but rather *to become aware of it*. Unlike other ADCs, these experiences often happen years, even ten, twenty, or even forty years after the demise.

The framework of this website does not allow me to describe all types of ADCs, but in my book *Quand les défunts viennent à nous*, I present, illustrate and comment 14 different types of contacts.

1.3. Messages received during ADCs

What do the departed "say"? What do they communicate to their loved ones?

Each message is obviously unique because it is addressed to a particular person and shaped by a common past and a common history. However, the contents can be schematized because, in essence, they are relatively homogeneous. The very fact that they seem to be able to communicate with the living implies that the deceased continue an existence - elsewhere - whose nature surpasses our understanding. The strongest impact probably stems from this apparent ability to establish a contact, which is a revelation for some, and a confirmation of a pre-existing conviction for others (a form of consciousness survives physical death). Messages are usually impregnated with love (I love you, I will always be by your side, I watch over you) and reassuring (I'm fine, don't worry about me). They encourage the bereaved to come out of their mourning (Don't be sad, go on with your life) but also not to hold them back (Please let me go, I am happy), sometimes they mention a future reunion (we will be together again one day). When the relations between the recipient and the deceased were conflicting or painful, contacts are used as requests for forgiveness, sometimes as justification (I hurt you, I beg your pardon, this is what led me to act the way I did ...).

It should be emphasized that the messages contain no information on the new form of existence of the departed and reveal nothing about their "new home". Only the state of mind of the deceased family member or friend is summarily described (I'm fine, I'm happy, finally I'm home).

1.4. Frequency of ADCs

Direct and spontaneous after-death communications are very common but almost non-existent in the media discourse. Millions of people have experienced ADCs and yet this phenomenon has hardly been documented. There is very clearly a discrepancy between the

experience of many people and its taking into account by the media, or by sociologists, because at this frequency, **ADCs are a major social reality.**

Very little scientific research has been performed on ADCs to date and there is a lack of recent statistics. Interesting figures, however, emerge from a large *European survey of human values* carried out in its first version between 1980 and 1983 in thirteen countries.

In this survey, psychic experiences were analyzed in the fields of telepathy, clairvoyance and contacts with the deceased. For the latter, the question "*Did you ever have the impression of having really been in contact with a deceased person?*" was asked of the individuals surveyed. Large national differences were noted ranging from **9% to 41%**. Iceland took the lead with 41% responding positively to the question, followed Italy with 34%, West Germany with 28%, Great Britain with 26%, France with 24%, Belgium with 18%, Ireland and Spain with 16%, Finland and Sweden with 14%, Holland with 12%, Denmark with 10% and Norway with 9%. To sum up, it resulted from the survey that **one quarter of Europeans** reported direct contacts with a deceased loved one (ref. <http://www.europeanvaluesstudy.eu/>).

For the United States, even higher estimates of ADC occurrences are advanced. Bill and Judy Guggenheim estimate that between 60 and 120 million Americans have experienced one or more contacts with the deceased, i.e. 20% to 40% of the total population of the United States and Professor *emeritus* Louis LaGrand estimates that 70 million or 44% of Americans would have experienced an ADC (ref. Guggenheim <http://www.after-death.com> ; LaGrand <http://www.extraordinarygriefexperiences.com/>).

Those who have lost their spouses or partners appear to experience a particularly high proportion of ADCs. A British study concludes that **50% of widowers and 46% of widows** surveyed had experienced contacts with their deceased spouse or partner (Ref. Rees, W. D. The hallucinations of widowhood. IN: *British Medical Journal*, 1971, 4, p. 3741).

What do these statistics mean? They indicate that ADCs, whatever their type, are clearly not a marginal phenomenon. Many people experience these experiences on a day-to-day basis all over the world and do not know how to name them or situate them in their conception of reality. It is important and even urgent to make them known to the general public.

1.5. The profile of the recipient

Who can potentially experience an ADC? Is there a profile of recipients? What circumstances must be met in order to have the probability of having this experience? What characteristics should one have to make this experience? In the current state of research the answer is simple: **everyone can experience an ADC!**

The recipient is usually a bereaved person except for ADCs at the moment of death when the recipient is not yet mourning and ADCs for protection that can occur tens of years after the demise when the recipient is not bereaved anymore or has never been bereaved (the case of a recipient who was a young child at the time of the death of the family member or friend).

No specific profile of recipients has been identified. Gender, age, socio-economic status, education, religion and nationality are not determinants of the occurrence of the experience or of its content.

Being a believer, an agnostic or an atheist does not influence the nature of the experience nor the probability of having it. The *interpretation* of the experience, however, is individual, linked to the belief system and to the specific life experience of the recipient.

Children can have ADCs just like adults. Unfortunately, they are often not taken seriously by parents and are left to themselves to make sense of this experience.

Recipients almost always knew the perceived deceased. In the vast majority of cases it is a member of the family (spouse / partner, parent, relative) or a friend who the recipient identifies instantly and without hesitation. A strong emotional attachment had generally linked them. Sometimes an unknown deceased is perceived.

1.6. Difficulty in reporting the ADC

The first impulse of exaltation and the certainty that the ADC is real can be painfully shaken if the entourage reacts negatively to the evocation of the experience. Some recipients are afraid of ridicule and prefer not to disclose their experience, sometimes for many years. Some may start to doubt their perception and even their mental health. The fear of being "taken for a disturbed person" is very strong and can plunge them into great confusion. The dichotomy between their subjective certainty and the mainstream representation of "reality" makes them think that they have experienced something that "is not possible," that "cannot happen".

To speak about the after-death communication means taking the risk of not being believed, of having to justify oneself, or even of being considered confused or depressed. Joy can quickly turn into distress if one seeks a validation of one's experience and if one wants at all costs to convince one's interlocutor of the authenticity of the experience. Like other experiences related to death - such as near-death experiences - the sharing of these subtle, intimate experiences, which are so important to the people who have experienced them, is often very problematic.

1.7. Impact of ADCs on recipients

In their vast majority, recipients experience the ADC as a natural and happy event, without fear and with gratitude. In some cases, ADCs, especially apparitions, can scare some recipients. While being aware that the departed want only the best for them, the strangeness of the event can cause them to leave the room running to escape the apparition. Later, they often regret their unreflective reaction and ardently desire a new contact.

The effects of ADCs can be analysed from three angles:

- ***The intimate conviction that the experience is real***

Given the lack of spirituality in our Western materialistic societies which is still the norm, and given the scepticism, even the refusal to even imagine the *possibility* of a spiritual reality, how is it possible that an after-death communication is immediately perceived by the recipients as a deeply moving but happy experience and that they do not doubt its authenticity for a second? Whether these contacts are the answer to an intimate desire or happen completely unexpectedly, their impact is such that the recipients don't consider for a moment that they could have been the victim of an illusion or even of a hallucination. Overall, these experiences are considered a gift. In a second phase and after reflection, some may question how such an event is possible, as it is in complete contradiction with the dominant thought and perhaps with their own previous convictions, and be astonished to have welcomed the experience with so much naturalness and happiness.

- ***The importance accorded to ADCs and the comfort felt by recipients***

ADCs bring comfort, happiness, and strength to recipients to continue their life without their loved one. After-death communications are considered an important and significant event. On a more personal level, the recipients seem to continue to be loved, the deceased family member or friend appears to watch over them from another dimension, love seems to have survived death. These elements constitute a powerful source of consolation. In other cases, painful or conflicting relational problems that had remained unresolved at the hour of death appear to be resolved during these contacts.

The essential and homogeneous message of ADCs is clear: some form of consciousness and love survive the death of the body. The deceased reassure their loved ones: they are well and are serene and happy in their new form of existence, of which they reveal nothing. They invite them to continue their lives without lingering too much in a mourning that is unnecessary since a future reunion is certain. The comforting impact of such messages is evident. Sadness due to the absence of the loved one persists, of course, but the message of hope is powerful.

- ***The conviction that the deceased loved one continues to exist and the implication for the belief system***

The bereaved have seen their deceased loved one, they have heard him, have felt her presence or his hand on their arm, for them it's certain – he is alive! Where and how, they do not know, of course, the mystery remains entire, but the conviction is strong: she has not dissolved into nothingness, but continues her existence ... elsewhere.

ADCs are of critical importance to recipients because of the link that seems to continue with the deceased family member or friend who is perceived as pursuing an existence in an inconceivable elsewhere. We can assume that this strong experience impacts their belief system and the conception they hold of their own future death and this is indeed the case.

The fact that the departed loved one can manifest himself and come into contact with them can either consolidate a pre-existing belief in the survival of consciousness or initiate it. Although the level of impact of ADCs is individual and may vary according to the type of contact experienced, the common and decisive element is the subjective confirmation or the discovery that a link seems to subsist beyond death.

The hope of a future reunion is underlying and can be a paramount factor in the reconstruction phase after the loss of the loved one. ADCs are often the starting point for a re-assessment of the recipients' former certainties and may lead them to adopt a new worldview. They may see their fear of death diminish, some become more spiritual.

Post-mortem contacts offer subjective answers to fundamental questions such as the meaning of life and the difficulty of human existence which is sown with losses and ultimately confronted with its own finitude. ADCs open up a new perspective on the human condition.

1.8. Consequences of ADCs on the bereavement process

After-death communications are happy experiences, filled with love and solicitude, which mitigate the grief of the bereaved. They consider the event as real, adjust their belief system accordingly and, at best, find new meaning in life and death. They interpret the ADC as the subjective proof that death is only a passage and should not be feared and their fear of their own death can be alleviated. The advice of the deceased not to grieve for a too long period of time and to continue their lives while waiting to be reunited one day are of utmost importance for the grieving process. In this respect, ADCs are therapeutic in nature because they respond to the needs of the bereaved.

However, it is important to emphasize that ADCs do not spare the recipients from going through the grieving process – this long and painful journey which passes in disorder and disarray through denial, anger, depression and guilt to finally reach the acceptance of the definitive departure of the loved one. Once the irrevocability of the physical departure of the deceased is understood and accepted, the time has come to create a new inner bond with him, a new relationship that will last and that nothing will ever break. These contacts are highly beneficial and therapeutic providing that the bereaved succeed in making a clear distinction between the definitive physical departure of the loved one - which oblige them to reorganize their lives accordingly - and this new internal relationship which needs to be created and in which ADCs fit perfectly.

Let us add that, although ADCs are a frequent phenomenon, it is certain that at least half of the mourners did not have the joy of living a last contact with their deceased loved one. No one knows why some people experience an after-death communication and others do not. This is one of the mysteries that govern our lives and we must accept it as such.

2. Deathbed visions

2.1. What are deathbed visions?

Deathbed visions may be considered as a *particular type of visual ADCs* as **dying persons** perceive deceased loved ones shortly before dying and telepathically communicate with them, while the visual ADCs presented above are experienced by **healthy persons**.

The objective of these two types of ADCs is not the same: ADCs of persons in good health serve to comfort them, to help them accept the departure of the loved one and to better cope with their grief, while visual ADCs of dying persons serve to free them from the fear of death, to help them accept the imminence of their death, and the role of the perceived deceased seems to consist in escorting them into the “spiritual world”.

Like ADCs of the healthy, deathbed visions portray deceased spouses/partners, family members or friends of the dying with whom they had strong emotional connections during their lifetime. The apparition may be perceived as being surrounded by a halo of light. The dying persons always perceive *deceased* loved ones, never living persons. At first sight, it seems obvious that a person so close to death would be expected to see his deceased partner, mother or best friend, but these visions do not seem to correspond to a wish of the dying persons, since in some cases they see a deceased loved one *whose death had been concealed from them* to avoid them further emotions.

Sometimes visions of **paradisiacal environments** are reported, described as sublimated terrestrial landscapes, and, much more rarely, **religious or mystical entities** are perceived.

While experiencing the vision, the dying seem to benefit from a "double vision". They seem to have access at the same time to the physical reality and to a spiritual dimension which they see in parallel and consider as real as the other. They know that the persons in the room cannot see or hear the apparitions, which means they are in a different state of consciousness than the healthy. They know precisely who they are talking to and conduct parallel conversations, while reporting the words of the deceased to those present.

Deathbed visions are short, lasting only for a few seconds, a few minutes at the most. We note the parallel with ADCs of the healthy which are also of very short duration.

Apparitions are usually perceived in the minutes or hours before demise. Frequently, their mention or description constitutes the last words of the dying. However, apparitions are sometimes recurrent and accompany the dying throughout the process of dying, during the hours or days preceding death.

2.2. Impact of deathbed visions on the dying

Deathbed visions:

- Portray a deceased loved one whose mission seems to consist in escorting the dying to the spiritual world
- Are immediately perceived as real by the dying
- Provide instant comfort
- Free the dying at once from the fear of dying
- Bring serenity and acceptance of the imminent death

- Seem to offer information on what awaits the dying that rejoice them and puts them at peace

As for ADCs of the healthy, the dying do not question the reality of these apparitions. Despite their diversity, their personal belief system, their individual history, they accord them a surprisingly homogeneous meaning. According to them, the role of apparitions consists in welcoming them on the threshold of death and guiding them to the invisible world. With naturalness and happiness, they welcome these apparitions and describe them to those around them, aware that they alone can perceive them. They are neither astonished nor afraid that a deceased appears to them and speaks to them and they explain the intention of the apparition in all simplicity ("*Francis is here, he came to fetch me!*").

Deathbed visions have a spiritual dimension that goes far beyond the mere fugitive apparition of a departed family member or friend. They generate essential comfort and certainty that sweep away within a few seconds the apprehensions that may have been present throughout a lifetime. A transfer of knowledge seems to occur during these visions which free the dying person immediately and entirely from the fear of dying. The anguish and agitation often present in the process of dying instantly disappear. Serenity, and even an anticipated joy, seizes the dying which would have been unthinkable a few seconds before. The impact of deathbed visions is extremely powerful, immediate and liberating. It is a deep psychic transformation. After having perceived the apparition, the persons are ready to die.

2.3. Nearing-Death Awareness (NDA)

Deathbed visions are part of a broader phenomenon called *Nearing-Death Awareness (NDA)*, of which they constitute one of the main elements.

Nearing-Death Awareness is defined as a specific state of consciousness triggered by the proximity of death, during which dying persons benefit from a particular knowledge which, within certain limits, seems to allow them to control the process of dying.

A first major scientific study of deathbed visions was conducted by Sir William Barrett of the Royal College of Science in Dublin (Barrett, 1926), followed by several surveys in the United States and India in the 1970s by Latvian psychologist Karlis Osis and Icelandic professor *emeritus* of Social Sciences Erlendur Haraldsson.

The American nurses Maggie Callanan and Patricia Kelley have broadened the phenomenon of deathbed visions to other manifestations consubstantial to an enlarged state of consciousness inherent to the proximity of death, and have grouped them under the expression "Nearing-Death Awareness" (Callanan and Kelley, 1997).

Palliative care professionals are well aware of this phenomenon, especially deathbed visions, which they describe as "very common". Research is not advanced and difficult to conduct because people die shortly after having a vision.

Nearing-Death Awareness includes the following elements:

- Visions of **deceased loved ones**, sometimes of **paradisical environments**, constitute the main element of the Nearing-Death Awareness. More rarely, visions of **religious or mystical entities** are reported.
- The **need for reconciliation** is another component of this enlarged state of consciousness. The needs of the dying are essentially relational. They realize they need to solve the relational problems that affect them, make them feel guilty, and make all the parties involved suffer.
- **Conditions for dying in peace** are also part of this specific state of consciousness associated with the proximity of death. *Dialogue* is paramount in this phase of preparation for death. As long as the subject that is omnipresent – the imminence of death – is avoided, the dying remain in their isolation, in their agitation, alone with their questions, perhaps with their fears. Once the reality of the proximity of death is clearly expressed and shared with family and friends, even if the subject is painful and difficult, the dying feel less alone and can share with their loved ones the last intense and important exchanges in a rediscovered complicity.
- **Awareness of the proximity of death** allows the dying to instinctively know that their death is near, even if their state of health does not predict an imminent demise. This certainty seizes them about in the last 72 hours. They seem to have a certain margin to control the process of dying, for example while waiting for a relative who arrives from abroad, by passing away the day before the so much feared move to a home for elderly, or by choosing to die when family members or friends have just left the hospital room for a short time.
The dying often use *symbolic language* to announce their forthcoming death. They use metaphors referring to an impending trip and the need to find their passport, book a plane ticket, take the boat, the bus, etc. Too often these words are unfortunately mistaken for a state of confusion (which may indeed be part of the process of dying) and are not taken seriously or understood.

3. Near-Death Experiences (NDE)

3.1. In which circumstances do NDEs occur?

The near-death experience (NDE) can occur spontaneously when a person is close to death, clinically dead, in a coma, or, more rarely, exposed to a heavy trauma or an intense dread without any physical impairment (in this last case, we talk of *Fear-Death Experiences*).

An NDE is characterized by the sensation of leaving the body, the impression of penetrating a transcendental reality and the perception of a being of light irradiating with love.

3.2. How does an NDE unfold?

The persons who undergo an NDE (near-death experiencers or NDErs) have the sensation of leaving their body (**out of body experience**). They view their bodies and the surroundings from an external vantage point at some distance above (scene of accident, resuscitation, hospital ward, and so on). Typically, NDErs memorize the ongoing events, words and gestures which can be subsequently corroborated. The NDErs immediately experiment a feeling of absolute joy, notice the absence of pain and lose interest in their bodies which they leave behind without any regret.

Testimonies typically agree on the lucidity which characterizes the NDE, quite different from a dream or a hallucination. At this stage, NDErs have the impression of being "sucked" into a dark **tunnel** and of moving at an extremely high speed toward a brilliant light beckoning at the end of the tunnel, still very far away. The NDErs approach this light, which attracts them like a magnet, at dazzling speed and finally enter the light in an explosion of joy and beatitude. Next comes the encounter with a **being of light**, which is described as the vision of a dazzlingly beautiful light, personifying total love and absolute understanding, more intense than any earthly light, yet not blinding. Many make the analogy with "coming home" or "having reached their destination".

Communication between the being of light and NDErs happens instantaneously and without words, like telepathy. The encounter with the being of light produces a feeling of absolute **bliss**, total **understanding** and profound **peace**. At this state, a **life review** might occur. NDErs witness a three-dimensional and atemporal review of their whole life, from the most significant to the most banal events. In the presence of the being of light, they relive the events from their own perspective but also from the point of view of the persons who were involved in the action which is analyzed. This NDE feature has a strong didactic connotation, as it allows the NDErs to feel simultaneously the emotions of all the participants of the scene which permits them to fully understand the significance and implications of their actions. Sometimes, they are informed of future events in their lives that actually occur years later.

According to numerous NDErs, **guides** and **guardian angels** were waiting for them at this stage of the experience in order to comfort and accompany them. They also encounter **deceased loved ones** which they identify more by recognition by spirit rather than by the perception of their bodies which are often described as translucent or fluid, with indistinguishable lines, or indeed totally absent. NDErs regularly report seeing a **limit or boundary**, symbolized in various ways, which, if crossed, would make returning to the body impossible. The near-death experience terminates with the **reintegration of the physical body**, more often imposed than requested, rarely described in a precise manner but frequently associated with the idea of a mission to fulfill on earth.

It should be noted that one rarely finds all the above-mentioned features in a single near-death experience.

Bruce Greyson, M.D., Professor of Psychiatry at the University of Virginia, proposes the following classification of the near-death experience:

A cognitive component: including time distortion, thought acceleration, life review, and sudden understanding;

An affective component: including feelings of peace, joy, and cosmic unity, emotional detachment; and an experience of a brilliant light personifying absolute love;

A paranormal component: including enhanced vision or hearing, apparent extrasensory perception, precognitive vision, and an out-of-body experience;

A transcendental component: including encounters with an apparently unearthly realm, a mystical being and visible spirits, and a barrier of "point of no return", that, had the NDEr crossed it, would have precluded his or her return to life.

3.3. What are the most significant specificities of the NDE?

Age, gender, education, socio-economic background, nationality or religion of a person do not determine the nature of their NDE, nor the probability of their occurrence, only their *interpretation* might be influenced by cultural factors, such as religious ones, but without shaping the experience (e.g. a practicing Catholic woman who said that nothing she was told by the Church during her whole life matched with what she experienced during her NDE). No difference has been noted between believers and non-believers as far as the frequency or the nature of NDEs are concerned.

The circumstances which bring a person at the threshold of death (accident, illness, cardiac arrest, suicide attempt) are not determinant factors.

Children, even very young ones, experience NDEs, even if they are told in a simpler way, with the words of children. Only the life review seems to be absent of these childhood NDEs.

A noteworthy study (Ring and Cooper, 1999) demonstrates that blind persons, even those blind from birth, can see during their NDE. The authors came to the conclusion that it is not a matter of normal visual perceptions but rather of a vision through the spirit or a state of omniscient consciousness.

Each near-death experience is unique in that it is linked to an individual, yet all NDEs share the same basic nature and produce the same effects. NDErs all describe a nearly identical NDE progression and undergo very similar emotions. We can therefore start with the assumption that these are data that apply to human beings in general and inform us of their reactions when at the extreme edge of existence.

Although the NDE itself remains unverifiable, based as it is on testimonies replete with subjective feelings, the same cannot be said for the deep transformations observed in those

who have undergone the experience. Here again, these transformations are characterized by great similarity, despite the diversity of the NDErs.

The hypothesis triggered by the NDE that consciousness and memory continue to function during a state of clinical death intrigues, opens new perspectives and is the purpose of numerous scientific investigations.

3.4. What are the current statistics on NDEs?

It is commonly accepted that between 15% and 20% of persons who had a close brush with death under diverse circumstances had an NDE. According to these figures, one can extrapolate that approximately 20 million Europeans and 12 million North Americans would have experienced a near-death experience. For France, the number of persons who have experienced an NDE is estimated at about 2.5 million.

During 13 years, the Dutch cardiologist Pim van Lommel and colleagues undertook a prospective study, including 344 consecutive cardiac patients who were successfully resuscitated after cardiac arrest in ten Dutch hospitals. The result of this research study, (published in *The Lancet* in 2001), indicates that 62 patients (18%) reported NDE.

4 % to 5% of all NDEs are described as being negative or distressing.

These figures show that an impressive number of individuals have experienced this phenomenon. Since all the studies conducted have unequivocally shown the NDE to be universal, not linked to a specific geographical area or culture, but rather to the general human condition, we can assume that an equivalent percentage of NDEs may be found in other countries around the world.

3.5. What is the impact of NDEs on the life of NDErs?

Although NDEs have not (yet) been proven to be an objective reality, they are a reality of life for NDErs. This experience provokes a major crisis in their lives, a major questioning of their values and a new comprehension of the world. The abolition of the notion of time and space which occurred during the NDE, the experience of leaving their physical body and yet remaining themselves, with their personality, their biography, their emotions, their intellectual abilities - even heightened - constitute in themselves a major astonishment. The encounter with the being of light is equivalent for many to a revelation and represents without doubt the most deeply transformative stage of the experience. The emotional intensity of the near-death experience and the difficulty of putting it into words (some name it ineffability) isolate the NDErs from their family and friends. This feeling of isolation is even more accentuated by the difficulty of finding their place in a family and a community which values, aims and preoccupations they no longer share.

NDErs are made more fragile by the fact that, having come so close to death, they often find themselves in a critical physical state, as a result of the illness or accident that had led them to the brink of death.

In many cases, NDErs are unable to give a name to the event they have experienced, but are utterly convinced that it is of vital importance to them. This marks the beginning of a period of destabilization and an often painful return to daily life which suddenly seems dull and devoid of sense.

The integration of the NDE and the resulting transformations take place over years, even decades. Changes in values and attitudes are deep and lasting and intensify with the passage of time. The quest of a new way of living is often complicated by the necessity which the NDErs consider as imperative to give a meaning to their life and fulfill their "mission" which justified their return to the physical body. NDErs find peace only when they have understood and accepted the new path opening before them. They then harvest the fruits of their ceaseless efforts, of their obstinate quest, liberated of the fear of death, convinced that each event, joyful or painful, which they will live is infinitely just and reassured by the conviction that they will "go home" when the time will come to leave definitely their physical body.

3.6. Does the personality change after an NDE?

NDEs provoke a massive and fundamental questioning of values, of aims and the way to live one's life.

The major changes concern:

- **Social issues:** primacy of love, empathy, greater concern for interpersonal relationships, tolerance, caring for others;
- **Material issues:** diminution or renunciation of attachment to material possession, of professional and financial achievements, of social status;
- **Issues of self-conception:** transformation of value scale, increased self-acceptance and self-esteem, thirst for knowledge and understanding, aspiration for self-development, notion of a "mission" to accomplish;
- **Issues of conception of life:** increased joy of living, capacity of fully and intensely living the present time, meaning of life takes shape and deepens with the passage of time, spiritual awakening, diminution or disappearance of fear of death, conviction that consciousness survives bodily death, certainty of the existence of a spiritual reality.

3.7. Do NDEs induce psychic abilities?

A significant number of NDErs develop psychic abilities following their NDE. These newly-acquired abilities include telepathy, prophetic or precognitive visions, ability to see at distance, and to read the thoughts and emotional state of others. Some have the ability to diagnose diseases and even to cure some, discovering that "their hands heal".

During an NDE, it seems that an access to an enlarged state of consciousness has been opened in which a larger reality - which transcends time, space and matter - encompasses ordinary reality. And seemingly, this opening does not close up entirely after the experience. Some quotes illustrate these newly appeared psychic abilities:

- “After my NDE, I had several out-of-body experiences”;
- “My sensitivity is much more developed, I have telepathic abilities and a great facility for decorporation, I am also able to heal and help others”;
- “My sensitivity is heightened, I learn much quicker, I concentrate better, I have a better memory and some psychic abilities, but, overall, I try to incarnate myself and not leave my body anymore: it is in and through my body that life experience unfolds, and nowhere else!”

I believe that all human beings have the potential for these abilities, but they are dormant. All it needs to activate them is to have one’s consciousness widened, such as it occurs during a near-death experience.

4. Provisional conclusion

When one examines experiences related to death separately – NDEs, ADCs and deathbed visions – the mystery seems almost impenetrable and so many questions remain unanswered. However, when they are studied jointly by comparing their phenomenology and their effects, then there are striking similarities which suggest a *continuum* between these different manifestations which would be distinct expressions of the same reality.

To date, the important question of the *authenticity* of these experiences related to death is not solved on the scientific level. The *modus operandi* of these phenomena remains unknown, as is the *source* in which they seem to originate. Since these experiences cannot be induced and analysed in the laboratory – as is the case for psi phenomena (grouped under the two broad categories of extrasensory perception, ESP and psychokinesis, PK) – it is more difficult to establish their ontological status.

There are, however, indications – not evidence – that suggest that these are genuine experiences. The first indication stems from the *profound and lasting impact* they have on the lives of those who have experienced an NDE, an ADC, or a deathbed vision. The second indication results from the *frequency* of these experiences. These phenomena occur every day, at any moment, anywhere in the world. Science cannot judge the authenticity of these experiences, but they are clearly a reality for the people who have experienced them.

The **information transfer** is a common and undoubtedly essential element of experiences related to death.

During a *Near-Death Experience*, experiencers encountered a being of light, unknown guides and their deceased loved ones and exchanged telepathically with them. The persons who had an NDE were generally unconscious, under anaesthesia, in a coma or clinical dead, yet these exchanges took place, rich in content and emotion, and perfectly engraved in their memory as they returned to their usual state of consciousness.

The information received by the dying during Deathbed visions is powerful and convincing. The perceived deceased seem to convey information about the process of dying and beyond that puts them in peace with what awaits them. A transfer of knowledge seems to occur during these visions which frees the dying from the fear of death. There must be something in these visions that not only immediately suppresses all apprehension but rejoices the dying and puts them in a state of acceptance of their imminent death and even anticipated joy of what awaits them in this journey that is coming.

During an After-Death Communication, the perceived information is centred on the recipients, and therefore on the physical world, since they serve to comfort them, and sometimes to transmit to them concrete information that they very much need. Under the expression "Practical ADC" are grouped experiences during which the deceased transmit information to their family or friends of which they were previously not informed. This information can allow locating a family booklet, concealed savings, an insurance policy, stock-market investments or other documents that are urgently needed. During "ADCs for protection", information is transmitted in a situation of crisis or imminent danger that avoid a drama.

However, no information is transmitted on this "other dimension". The deceased usually communicate that they are well and that they are happy, thereby implying that the hereafter is a place of peace and well-being, but they do not describe their new environment or conditions of existence.

It should be noted that all these experiences take place in a very short time, a few seconds, sometimes a few minutes at the most, and yet a great amount of information has been perceived, as if these experiences took place outside of time, or in a time of a different nature.

For the three types of experiences related to death, information transfer take place, there is no doubt.

The **comfort** provided by these experiences is also a common and essential factor of the experiences related to death.

During an NDE, experiencers receive the information they need to understand what they are experiencing. The comfort of an NDE stems from the transfer of knowledge about the nature of the experience on the threshold of death. Loss of fear of death is the consequence. The encounter with the being of light personifying absolute love and knowledge was so awesome that experiencers are convinced that a luminous and happy existence awaits us all at the time of our physical death.

Deathbed visions free the dying from fear of death and help them accept their imminent demise. Whatever their pre-existing belief systems, whether they believed or not in the survival of consciousness, the deathbed vision changes everything in a second or two - the dying are reassured as to what awaits them, a feeling of profound peace seizes them, serenity settles in, they are ready to depart ...

ADCs comfort the bereaved, reassure them about the well-being of their deceased family member or friend, help them to accept the departure of the loved one and to better cope with their grief. An after-death communication is a source of great comfort and opens new perspectives on the survival of consciousness after physical death, and on our own finitude.

Experiences related to death occur at a critical time in people's lives, when they urgently need *information* and *comfort* to deal with a major crisis - the imminence of their death during a near-death experience, real death during a deathbed vision, and sorrow of mourning during an after-death communication.