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### COMING SOON:

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## THE DARKNESS OF GOD: MY NDE TRIGGERS "NIRVANA"

JOHN WREN-LEWIS

SUMMARY. In 1983, I almost died after eating a drug-laced toffee. I woke, and saw that the hospital room was shining. I recalled a near-death experience (NDE) - a blissful, "alive", shining, utter darkness. The experience has continued ever since, and has radically changed my attitude to life and death (but not my lifestyle). I have spent a lifetime studying religions; but only now do I really understand what mystics and saints (ancient and modern) meant by "Nirvana" and "enlightenment". I am committed to scientifically documenting my new "God or cosmic consciousness".

Over the decade since American physician Raymond Moody published "Life After Life" (1), many stories have appeared about the strange experiences of people almost dying in accident or illness. The accounts range from sensational, to the serious scientific studies by surgeon Michael Sabom (2) and psychologist Kenneth Ring (3). I do not want just to add another story. My near-death experience (NDE) in Thailand in November 1983 was less dramatic than many in the literature. I had no clairvoyant perception of my body in the hospital bed; no visions of supernatural beings or deceased relatives; not even of white light or heavenly music. Yet, remarkably, my experience was that it has remained with me ever since: not just as a vivid memory, nor just as a new attitude to life and death - but as a radical change of consciousness which puts me in touch with "eternal life" right now.



## NEAR-DEATH

I was poisoned by a would-be thief on a long-distance bus travelling from Surat Thani on the east coast of southern Thailand, to Phuket on the west coast. I now know (and this has been reported in the Australian press) that thieves regularly work Thai buses and trains with drugged sweets for tourists, who have woken up to find belongings stolen. The Thais do not publicise this; and I had discounted the few rumours I had heard as tales about hippies who had eaten too many magic mushrooms.

I was not suspicious of the nice man who helped us with our luggage and offered us Cadbury's toffees on a public vehicle in broad daylight. My wife, Ann Faraday, was so put off by the musty bitter taste that she spat hers out. I sucked the toffee out of politeness. When the thief saw that Ann was not eating hers, he hastily left the bus at the next stop - just as I began to feel drowsy. My head dropped onto my chest and I began to drool. Ann grasped that the sweets must be drugged - but thought she would let me sleep it off. After a while, Ann noticed with alarm that I was blue around the lips and had no detectable pulse. With difficulty, she persuaded the driver to stop (he thought I was drunk). She managed to get us a ride back to Surat Thani hospital in a van. The doctors were not hopeful of saving me, although they assumed that my lack of response to tests for pain was due to the drug (they suspected morphine) rather than imminent death. They plied me with antidotes, oxygen and intravenous drip. I revived about seven hours later.

## NDE RECALLED

It was some hours later before I really surfaced. I heard a voice ask if I wanted supper. For some time after, I was solely occupied with getting in touch with where I was. I began to wonder why the shabby hospital room seemed transcendently beautiful. My first thought was: "Hey, is this why people get hooked on opium or

morphine?". But second thoughts told me that after so many hours the drug effect should have worn off (a conclusion later confirmed by leading drug experts I consulted in Australia). What is more, I had taken part in psychedelic drug research in England in the late 1960s, and had some extraordinary experiences, including the transcendental experience of blissful white light under LSD (4). But the experience at Surat Thani was altogether calmer, yet at the same time more impressive. Also: drug effects that persist or return (months later in the case of LSD) are off-on events that do not produce the almost continuous "enlightenment" I now experience.

I began to wonder if I had had some kind of NDE while I was "out". So I tried a technique Ann and I sometimes find useful when we wake up knowing we have had a remarkable dream just before waking, but cannot remember it. I lay on the bed, relaxed, and began to take myself back in imagination, in a series of steps, to the point of awakening. What came flooding back on this occasion was nothing like a remembered dream: it was an experience that in some extraordinary way is still with me.

## THE DARKNESS

It was as if I had come out of the deepest darkness I had ever known - and somehow it was still there right behind my eyes. One woman told Ring that her NDE had left her enveloped in "a very peaceful blackness ... a soft, velvet blackness". I now know what she meant - except that I want to say more than that. I am reminded of Carl Jung's belief (5) that alchemy was concerned more with psychological or spiritual changes than chemical ones. One alchemical text states that there occurs a crucial point in the transformation where the operator "falls into the black sun" and experiences "a palpable absence of light" (an interesting psychological anticipation of "black holes"?).

Most NDE literature emphasises exper-

iences of light rather than darkness. If darkness is mentioned at all, it is usually a dark valley or tunnel through which the person hurtles towards a bright light or heavenly landscape beyond. One man reported to Moody, however, a more "positive" darkness that "was so deep and impenetrable that I could see absolutely nothing, but this was the most wonderful, worry-free experience you can imagine". I, too, felt utterly secure in my darkness. I had "come home" to a state beyond all danger, where I no longer needed or wanted to see anything, because everything I could possibly need was already mine. I want to use the paradoxical expression "deep but dazzling darkness", which the mystical poet Henry Vaughan applied to God. I am reminded of Psalm 139: "Surely the darkness shall cover me ... the night shineth as the day".

## MYSTICS CONFIRMED

I am not drawing any theological or metaphysical conclusions when I use the word "God" here. On the contrary, my previous readings in theology and metaphysics never conjured up in my mind anything remotely like my experience. I am simply asserting that, since the experience, a host of statements by mystics in all religions suddenly seem to make sense as partial attempts to describe the extraordinary state I found myself in: for instance, Mohammed's statement that he experienced "the night of power", or the assertion by St. John of the Cross that he encountered God as "a dark cloud illumining the night".

That shining darkness seemed to contain everything that ever was or could be, and all space and all time. Yet it contained nothing at all, because "thing" implies separate entities, whereas what I experienced was a simple "being-ness" without any kind of separation of one thing from another - the essence of "aliveness" prior to any individual living entities. Another paradoxical expression, this time from Eastern mysticism, is the only one that is remotely adequate - "the living void" - an idea echoed by the Christian mystic Jacob Boehme when he called God "a suprasensual abyss".

Another Moody subject reported "just floating and tumbling through space" and "I was so taken up with

this void that I just didn't think of anything else". The idea of a void being interesting would have seemed nonsense to me before, but now it makes total sense. In fact, the state I am trying to describe seems to defy all ordinary canons of logic. My deepest resonance is to Buddha's classic description of Nirvana, which simply piles one contradiction upon another:

"Monks, there exists that condition wherein is neither earth nor water nor fire nor air; wherein is neither the sphere of infinite space nor of infinite consciousness nor of nothingness nor of neither-consciousness-nor-unconsciousness; where there is neither this world nor a world beyond nor both together nor moon-and-sun. Thence, monks, I declare there is no coming to birth; thither is no going; therein is no duration; thence is no falling; there is no arising. It is not something fixed; it moves not on; it is not based on anything. That indeed is the end of Ill (6)".

And even "the end of Ill" has to be contradicted, too, if I am to do justice to my experience, for it was in no way merely negative. It was certainly "a very peaceful blackness", but there was nothing passive or lifeless about it. It was "the peace of God that passeth understanding". Words like "bliss" or "joy" are equally inadequate, for they are far too limited, which I think must be why one of the oldest religious documents known to mankind, the Katha Upanishad, says that when its young hero Nachiketa went to the kingdom of death, he discovered a new kind of self, the Universal Self (Brahman), who is "effulgent Being, joy beyond joy".

## ENTERING AND LEAVING NIRVANA

I have no recollection of the transition from ordinary into Nirvanic consciousness. I cannot positively deny having any sensation of leaving my body or passing through a tunnel. I just do not remember anything after feeling drowsy on the bus. In the shining darkness there was no feeling of having gone anywhere; it was more like everywhere being present to me. Yet there was a sense of having ceased to be the ordinary me, which is my reason for thinking that my experience was, like Nachiketa's, a trip into the "kingdom of death" rather than the hyping up of the brain by the drug.

My feeling is of being beyond death (though I do not mean surviving death). The Self which I had become was so much greater than my ordinary self that I had little recollection of, or interest



in, my personal history. Yet I did not lose my past or the people I have known in ordinary life. Although my NDE did not contain a "life review" (like many other NDEs), I still sensed that my whole life was completely present, and could have been reviewed if I had wanted - just as I could have met my deceased relatives or "angels, arch-angels and the whole company of heaven". But in that "deep and dazzling darkness" I felt no need.

It is almost impossible to describe how I came back from Nirvana. The very phrase "came back" is wrong, for two reasons. Firstly (as stated earlier): the Nirvanic state did not become just a memory; when I clicked back to it using dream-recall, I found it was still right there with me. Secondly: it is illogical to talk about moving out of a state in which time has ceased to exist. This is a problem all great religions have wrestled with in their various doctrines of creation. If God is everything, how can anything else exist? And if God is eternal, "when" can time possibly come into being? I used to think these were abstract metaphysical issues and meaningless word-juggling. I feel sure now that those old creation stories were attempts to express precisely my experience.

In the Taittiriya Upanishad it is said that Brahman changed from the pure Unmanifest to the Manifest (5A). In the Jewish Cabbalah, it is said that the en sof (the Limitless) created a space within itself, so that limited being can also exist (5A). To coin my own phrase, for me it was as if the personal "I" budded out from that eternity of shining dark, without my ceasing to be that shining dark. This must be what Hindu theology is trying to express by the statement that the Atman (the individual self) is identical with Brahman.

#### THE BLISS OF CREATION

The whole experience was blissful, which is another marked contrast to many NDEs. There was no sense of regret at coming back from a heavenly "place" into the narrow world of physical existence. I resonate to those wonderful words attributed to God in the Book of Job: "Where wast thou when I laid the foundations of the earth, when the morning stars sang together and all the sons of God shouted for joy?". I feel I know exactly why the Bible says that God looked upon the creation

and saw that it was good. Before my NDE, the idea of God creating the world always conjured up images of a super-potter or builder at work. The "feel" of my creation experience was more like Aristotle's idea of created things being drawn into existence by the sheer radiance of divine beauty. The bud that was me opened out in response to that black sun (which was also, paradoxically, my-Self). I was alpha and omega - the beginning and end of the creation process.

#### NIRVANA STILL WITH ME

The most astonishing thing about my NDE is that it is all still here: both the shining black void, and the experience of myself coming into being out of (yet somehow in response to) that radiant darkness. My whole consciousness (of myself, and of everything else) has changed. I feel as if the back of my head has been sawn off, so that it is no longer 60-year-old John who looks out at the world, but the shining dark infinite void which in some extraordinary way is also "I". My eyes and other senses perceive a whole world that seems to be coming into existence, fresh-minted, moment by moment. I am constantly up against a paradox when I try to describe the experience. In one sense, I feel infinitely far back in sensing the world, yet at the same time I feel the very opposite - as if my consciousness is no longer inside my head at all, but out there in the things I am experiencing. I often sense that when I perceive, say, a tree, that I am the tree perceiving itself.

I hasten to add that my consciousness is like this on average only about 50% of the time (the proportion varies from week to week). I wish it were there all the time. I constantly drift back into my old way of experiencing myself and the world. At first, in Thailand, I caught myself thinking "Oh God, it's gone". But I soon realised that "gone" was the wrong way of putting it. Plotinus wrote that the Supreme is always with us, but we do not always look at it (I now know what that strange statement meant). I can - and constantly do - forget that the shining darkness is there. Then, suddenly, I realise that something is wrong - and it all comes flooding back - the shining black void, with every moment a new

creation! I now know why the Christian mystics insisted that it is we who turn away from God, not God from us.

#### ADJUSTING TO THE NEW CONSCIOUSNESS

Week after week, as I drifted in and out of "God consciousness", I came to feel that this state was not really extraordinary at all. It was like coming home to something I had always known deep down. I suppose this is what Plotinus meant when he said that the Supreme is not "other"; it is we in our so-called normal consciousness who are "other", estranged from the true ordinariness of reality. Practically, I found that I had no urge to make any drastic changes in my lifestyle. The new consciousness did not take away my taste for meat, wine or humour, or increase my desire for sitting in meditation. (I had always enjoyed half-hour spells of meditation without finding the process any big thing. Now, I enjoy meditation more, but it is no different from my increased pleasure of other things.) I now understand what the modern mystic Da Free John means by "divine ordinariness", which he illustrates on one of his tapes (7) by saying that after his final experience of God realisation, he went home with his wife and watched TV! An old Chinese saying is: "before enlightenment, hew wood and draw water; after enlightenment, hew wood and draw water".

Nevertheless, the new consciousness has brought about a subtle yet radical change in my attitude to life in general. This corresponds so closely with the traditional definitions of enlightenment that I use the word without apology. Foremost: I no longer fear dying. This is a well-known result of NDEs, and often goes hand in hand with greater joy of living. But for me it would be false to attribute my changes in attitude to a metaphysical conviction that "death is not the end" or that there is a "world beyond". My changed feeling about death is simply part of a more general, all-embracing experience for which the most apt term is the Buddhist notion of non-attachment. It is the practical coun-

terpart of the paradox (already mentioned) that Nirvanic consciousness is totally complete in itself yet still takes delight in "manifesting". I no longer have any urgent desire for good things in the way I used to have (Buddhists would call it "craving"). The shining dark consciousness is all the happiness I could possibly want.

Although I get more pleasure than before from "good" experiences like sunsets, bird song, great art, pleasant people or delicious food, I also get as much pleasure from things which in my old state I would have called unpleasant: for example, the Surat Thani hospital room, or a very wet day, or a heavy cold. This last discovery - that I could positively enjoy a cold (not merely wallow in the indulgence of a day in bed, but really get a kick from the unusual sensations in my nose and throat) - was a big surprise.

Although I knew from the very first that my fear of death was gone, I had no such assurance about pain. Right from the first night, I speculated that the contrast between my experience of "coming back" and the feelings of regret reported by so many NDEers, might be because my NDE was caused by a pain-killing drug (most people come back to very painful bodies). Indeed, over the next few weeks I found a headache or travel sickness did distract me from the new consciousness quite powerfully, so that I was forced to wait until it had passed for "enlightenment" to take possession of me again.

#### "ENLIGHTENMENT" SPREADS

At first I resigned myself to the idea that my "enlightenment" must be of an inferior kind, since I lacked immunity to suffering (characteristic of the enlightened person in Eastern thought). Then I began to notice changes. The feeling of being "open to the void" at the back of my head had spread, without my noticing, down my spine to the middle of my back. Around that time, I found that the tinatus (hissing in the ears) from which I have suffered for



some years, had changed from being a mild annoyance (which I could at best manage to forget at times) to a positively delightful sound which I welcomed as an old friend whenever it forced itself on my attention. I also actually started to enjoy tiredness and the many minor pains that afflict a 60-year-old body: a startling verification of Freud's contention that pleasure and pain are often a matter of how we perceive precisely the same sensation (8). Then came my first post-NDE cold: a hitherto unexpected potential for pleasure. Around that time, I found the feeling of "openness" had spread still further down my back, right into my buttocks: a kind of upside-down version of the Hindu Kundalini flowing up the spine.

#### CHALLENGING RESEARCH PROJECT

My entry into Nirvana has not transformed me into "Instant Hero" or "Saint". I still get annoyed when I think people are trying to push me around, and I still keep aspirin in the house in case I get pain I cannot enjoy. Yet, it does seem to have plunged me into an adventure of consciousness wherein I have no idea what the next surprise will be. I would be dizzying if it were not so fascinating. I often feel as if I have been born again into a new life. I am like an infant still learning my way around. My old life is a distant memory: not actually forgotten or blurred, but somehow cut off, so that recalling it requires the same effort as remembering the lines of a play once known by heart but not performed for years. This feeling is a common result of NDEs (9).

My new life seems to be the fulfilment of the old one in ways I had never dreamed of before. This adventure of consciousness gives me a research project more challenging and exciting than anything that came my way in my earlier career as a scientist. My interest in dreams and altered states of consciousness since I left physical science seems just a preparation for the work I now have to do in exploring this new

state. I find myself sharing with NDE-ers and mystics of all ages an immense sense of gratitude for this gift. This is perhaps the most important paradox I have come to understand: the mystical sense of the utter goodness of the universe in no way lessens my desire to contribute to the world. On the contrary, that desire is an integral part of the mystical consciousness, an overflowing of thanks for the sheer joy of being.

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[John Wren-Lewis, a mathematical physicist, is a former senior research executive of one of the world's largest industrial companies. He retired early to marry and share in the work of dream psychologist Dr Ann Faraday, author of *Dream Power* (Berkley Medallion 1973) and *The Dream Game* (Perennial 1976). He has been visiting professor of religion at several universities in Britain and the U.S., and he was founder of the British Association for Humanistic Psychology. His NDE occurred while he and Ann were holidaying after a year investigating the dream psychology of the Senoi tribe of Malaysia (10). They are researching a book on this investigation].

#### NOTES

- (1) Moody R (1975). *Life After Life*. Bantam, New York.
- (2) Sabom M.B (1982). *Recollections of Death*. Corgi, London.
- (3) Ring K (1980). *Life at Death*. Quill, New York.
- (4) Wren-Lewis J (1971). *What Shall We tell the Children?* (p152-153). Constable, London.
- (5) Jung C.G (1968). *Psychology and Alchemy* (2nd edition). *Collected Works, Volume 12*. Routledge, London.
- (5A) The literature always puts such events in the past tense, meaning "once upon a time". The present tense would be better: I now see it as a continuous process.
- (6) Udana. In *"The Minor Anthologies of the Pali Canon"* (F.L. Woodward, translator) (1942-8?). Oxford Univ. Press. [A later edition is published by the Pali Text Society, Henley-on-Thames, Oxon.]
- (7) See also Da Free John (1983). *Easy Death*. Dawn Horse Press, Clear Lake, California.
- (8) Freud S (1905/77). *Three Essays in Sexuality*. Freud Pelican Library, Harmondsworth, Middlesex.
- (9) Survey reported in *Vital Signs*, Fall 1984. Publisher: International Association for Near Death Studies, Box U-20, University of Connecticut, Storrs CT 06268.
- (10) *Omega Science Digest*, November 1984: 48-51 & 69.

## SOCIOLOGICAL REASONS FOR THE RECENT INTEREST IN NEAR-DEATH EXPERIENCES

ALLAN KELLEHEAR

Near-death experiences (NDEs) have been studied by psychical researchers for nearly a century, and yet in the last 10 years this interest has sky-rocketed (1). Many observers have asked: "What is it about NDEs that attracts such interest?". But the basic features of NDEs have remained fundamentally unaltered since their earliest recognition. It is more appropriate and insightful to ask: "What has happened to our society that has recently made us so responsive and fascinated by the latest round of discussions about NDEs?". This paper tries to answer this question.

Numerous popular and academic works recount the now well-known common features of the NDE: the close brush with death which results in the sensation of travelling down a dark tunnel; out of body experiences; the meeting of a personal bright light and/or deceased relatives; ending with a reluctant return to one's own body. This is the "core" experience, with many respondents experiencing one or more of these central features.

In sociological terms, there have been four major changes in our society which have led up to the recent explosion of interest in the NDE. These are:

- (a) Technical and demographic changes underlying our experience with death;
- (b) Our resultant changing view of death and dying;
- (c) The changing role of religion;
- (d) Our changing relationship with institutions.

These changes are not the only ones our society has recently experienced, but they are the ones that might be seen as more directly relevant to understanding the recent interest in NDEs.

#### TECHNICAL AND DEMOGRAPHIC CHANGES

One of the major reasons why the NDE has been receiving more attention in the last decade has been because more people are experiencing it. Improved medical technology and techniques in the area of resuscitation have meant more people are recovering from close brushes with death. A shift from acute to chronic types of disablement associated with increased life expectancy this century has meant that most people who die will be old and most of these will die in institutions (2). The principal institutions are the nursing home and the hospital, which because of the preponderance of medically trained personnel, increase the possibility of resuscitation.

The historical shift of workers towards white collar occupations this century - from farmer to labourer to clerk - has had a further impact on illness trends. The mass collection of white collar workers in cities and their association with increased migration, over-work, increased drug and alcohol consumption and sedentary leisure activities has caused the incidence of cardio-vascular diseases to rise dramatically (3). Heart attacks and motor-vehicle and industrial accidents have become commonplace and widespread, leading to more resuscitation attempts, and more NDEs. Because the NDE is no longer a rare occurrence, it fascinates us because it is more likely to occur to ourselves or to someone we know.

#### OUR CHANGING VIEWS OF DEATH AND DYING

For 30 years or so before the 1960s, death was a taboo topic (4) - even discussion of death in medical circles was "bad taste". Then, seemingly, all of a sudden, people in the social sciences, and also journalists, began writing about many "taboo" subjects.



Sex, drugs, rock and roll, revolution, astral travel, parapsychology, anti-psychiatry and death all became popular topics of public and professional discussion. There was a general disenchantment with orthodox institutions and public cries for reform and renewal. All through the 60s and 70s that reform would come: desegregation; the recall of troops from Vietnam; Vatican II and the Christian Ecumenical Movement; and an explosion of literature and institutional reforms regarding sexuality, madness and death. In the late 50s, there had been almost no significant social science literature dealing with death and dying. By 1976 there were over 750 books, hundreds of journal articles, and over 200 films and audio-visual aids (5). This did not take into account TV interviews with Elizabeth Kubler-Ross and other popular scholars and clinicians. Now, the literature continues its dramatic rise and will continue to do so.

Research into NDEs has been part of this general search for knowledge about death - a taboo area mystified and hidden by inflexible social institutions such as medicine and religion. Interest in NDE can here be seen as part of the wider and heightened general interest in death and dying observed in the last 20 years.

#### THE CHANGING ROLE OF RELIGION

There has been a widespread disenchantment with religion this century, although its intellectual roots go much further back. This has not led to less believers but rather to more non-believers (6). The reasons for this are many. Among the notable sociological reasons are:

- (a) The rise of a large, educated, socially mobile, middle class;
- (b) The intellectual critiques of Feuerbach, Marx, Freud and Nietzsche;
- (c) The failure of religious institutions to adapt and remain relevant to the changing social values of its membership;
- (d) A further failure of religious authorities to credibly reply to social and intellectual critics.

This lead to widespread rejection of

traditional simplistic images of God and the afterlife. For those with greater spiritual and intellectual vision, these problems led to a revision in philosophical and theological ideas. In short, the ancient and medieval world picture simply collapsed for Western religions and from these ruins emerged challenging new ideas of the afterlife (7) and creation (8) and a new philosophical round of arguments for the existence of God (9).

This tumultuous religious atmosphere and drama this century has created a favourable social climate for interest in NDE in three major ways. Firstly, and most provocatively, images in NDEs may be viewed as an alternative to religious ideas altogether, or at least to popular Western religious ideas. Secondly, NDEs may be viewed as an alternative to the ancient medieval picture of the afterlife, but within conventional present day religious interpretations. Within the self-searching revisionism of contemporary Christianity, NDEs might be integrated into the new theological discussions of how God might be revealing Himself to us in the twentieth century. Finally, the association of NDEs with conceptions of an afterlife has attracted interest from anti-religious groups, many of whom believe that conceptions of any afterlife to be an illusion merely serving to distract people from real problems and thoughts about their material solution. Their interest in NDEs (basically humanist) naturally rises and falls with the general interest in the phenomenon.

Whether positive (the revisionist face of religion) or negative (the rejection of religious ideas), the contemporary religious crisis of the West provides, ipso facto, a basis for our continued interest and fascination for NDEs.

#### OUR CHANGING RELATIONSHIP WITH INSTITUTIONS

The social attitude now on the ascendent is the "self-serve, self-help" view of the world. This is part of what social forecasters have called

the "post-industrial information society" (10). There is a growing feeling of optimism in all sectors of our society that we, rather than just institutions, know what is best for us. Just some of the social indicators of the trend towards self-reliance in service, goods and information include: 8000 speciality magazines (in the USA alone); births, deaths and marriages at home; the self-sufficiency movement; alternative and preventative medicine; food and welfare co-operatives; community crime watches; and consumer protection societies. Our former trust in institutional help and advice has become conditional.

The new cynicism towards authority which stems from the public awareness of competing views and factions within all institutions, means that people will now accept such judgements cautiously. Medical, scientific and religious authorities have not been able to dismiss the NDE so easily. The only sure method of obtaining public support or rejection for any idea, including the NDE, is to provide copious amounts of information, discussion and debate. The de facto scholarly attitude in contemporary society means that social judgements are cautious and subject to change. Public opinion is more fickle than ever. It also means a better than ever climate for discussion of any controversial subject whether this be uranium mining or the NDE. Such an open social climate can only be seen as favourable and more critical than one of mere acceptance or rejection.

#### CONCLUSION

To take a sociological view of recent lay and professional interest in NDE is not to explain that interest. Rather, it seeks to explain the current social conditions under which such interest might proliferate (or wither). Increased public interest in NDEs should not be explained away as simply another rise in the human desire for immortality, i.e. "pie in the sky". We cannot account for the forest by discussing only the biology of a single tree. Interest in all sorts of subjects,

including NDEs, will depend on their public contexts. Understanding those contexts helps us gain insight into our private responses to NDEs. This, in turn, may help us identify and evaluate biases in our own discussions and those of others.

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[Allan is completing his PhD thesis in the area of the sociology of death.]

#### NOTES

- (1) KELLEHEAR A. (1983). Research into near-death experiences. *New Doctor*, no 27: 29-32.
- (2) CHARNAZ K. (1980). *The Social Reality of Death*. Addison-Wesley, Mass.
- (3) EYER J. (1977). Prosperity as a cause of death. *International Journal of Health Sciences* vol 7, no 1: 125-150.
- (4) WILLIAMS M. (1966). Changing attitudes to death: A survey of contributions in psychological abstracts over a thirty year period. *Human Relations*, vol 19, no 4: 405-423.
- FAUNCE W.A. & FULTON R.L. (1958). Sociology of death: A neglected area of research. *Social Forces*, vol 36, no 3: 205-209.
- (5) SIMPSON M.A. (1979). *Dying, Death and Grief: A Critically Annotated Bibliography and Sourcebook of Thanatology and Terminal Care*. Plenum, London.
- (6) HEIMANN R. (1984). Thank God for atheism. *Access Magazine*, no 17: 20-27.
- (7) HICK J. (1979). *Death and the Eternal Life*. Collins, London.
- (8) TEILHARD de CHARDIN P. (1974). *The Phenomenon of Man*. Collins, London.
- (9) KUNG H. (1980). *Does God Exist?* Collins, London.
- (10) NAISBITT J. (1984). *Megatrends*. Macdonald, London.

#### ERRATA

APOLOGY. A steep cost increase (and time constraints) prevent a move to 4 issues per year at present (Bulletin 4). We remain at 3 issues/year: January; May; September.

GLENN FALKENSTEIN (Bulletin 1, page 8). Sources tell us that Falkenstein is a well-known magician in California. Thus GF's ability to read the number of a banknote over a telephone line is probably a conjuring trick, rather than evidence for [sub]vocalisation, as postulated by R.L. Rosenberg.



## THE CAUSE OF NEAR-DEATH EXPERIENCES: A REVIEW

KEITH BASTERFIELD

In recent years there has been an explosion of interest in near-death experiences (NDEs), and many books have been published (e.g., 6, 14, 19, 21, 22, 23, 27). Although Moody in 1975 stimulated recent interest (14), reports go far back into history (17, 31, 32). As long ago as 1892, Swiss geologist Heim studied 30 NDEs, mostly from Alpine climbers (32). Many collections of cases now exist (3, 4, 12, 16, 17, 18, 23, 27, 32).

### CHARACTERISTICS

Raymond Moody was one of the first to offer a composite picture of the NDE, based on more than 100 personal accounts. His definition is still valid:

"A man is dying and, as he reaches the point of greatest physical distress, he hears himself pronounced dead by the doctor. He begins to hear ... a loud ringing or buzzing, and at the same time feels himself moving very rapidly through a long dark tunnel ... he sees his own body from a distance, as though he is a spectator. He watches the resuscitation attempts from this unusual vantage point ... He glimpses the spirits of relatives and friends who have already died, and a loving, warm spirit of a kind he has never encountered before (a being of light) appears before him. This being asks a question, nonverbally, to make him evaluate his life and helps him along by showing him a panoramic instantaneous playback of the major events of his life ... he finds himself approaching some sort of barrier ... apparently representing the limit between earthly life and the next life. Yet ... the time for his own death has not yet come ... he resists ... [he] does not want to return. He is overwhelmed by intense feelings of joy, love and peace ... he somehow reunites with his physical body and lives. Later, he tries to tell others ... he can find no human words adequate to describe these unearthly episodes ... The experience affects his life profoundly, especially his views about death and its relationship to life." (14, p21-23).

Any explanation for NDEs must account for the "established facts". Greyson (10) outlines these as:

- (1) A strong positive effect;
- (2) The conviction one has died;
- (3) An out-of-body experience;
- (4) The tunnel experience;
- (5) Encountering unearthly beings and realms;
- (6) The life review.

Subjective impressions include distortion of space and time (slowing of time, a sense of detachment), speeded-up thoughts, and a lack of emotion. Great difficulty occurs in putting the experience into words. Note that Moody's "perfect case" is a composite: no one case has yielded all the components.

The following categories of explanations have been advanced: (A) mundane; (B) religious; (C) pharmacological; (D) physiological; (E) neurological; (F) psychological; and (G) the parapsychological holographic model of Ring.

### (A) THE MUNDANE

In reply to Moody, Vaisrub (33) reminds us that as recently as 1968 the standard experience of patients resuscitated after cardiac arrest was very simple. He states:

"At the onset of cardiac arrest most patients experience a pleasant feeling as though they were entering a peaceful sleep. There was no fear or anxiety. They become unconscious and were completely unaware of the activities around them ... With resuscitation before serious cerebral damage had occurred, consciousness was regained after variable periods of time ... Many patients felt pleasant again and were pleased to know they were still alive" (33, quoting 2).

Vaisrub urged more careful investigation of the complex and emotional recent accounts of NDEs. He did not want to cast doubt on the veracity of the witnesses. "Their hearts may have stopped beating for a minute or more, but their brains remained alive. There is nothing extraordinary, let alone supernatural, in seeing dream-like visions, as consciousness returns to normal" (33).

Cardiologist Michael Sabom (27) admitted that upon first reading Moody's book, he felt the accounts were either fabrications - or embellishments by Moody. He later recanted. Sabom, however, did explore the possibility of subconscious fabrication, a desire to overcome the threat of death by inventing a NDE. If this were true, then persons who experienced multiple near-death crises should experience a NDE on each occasion. Interviews, however, revealed that many of these subjects could recall only one NDE. Where persons did encounter multiple NDEs in separate near-death crises, the NDEs took completely different patterns of "ego survival". This was inconsistent with subconscious fabrication.

### (B) RELIGIOUS EXPLANATIONS

The NDE sometimes includes a report of having encountered a "being of light". This being may radiate incredible feelings of love, warmth and light. Some persons have identified the being as "Christ" (14, 21, 27). Dead relatives are often met in an environment described in "heavenly terms". Indeed, it has been suggested that only those with strong religious beliefs would experience and report a NDE (7).

Rawlings (22) examined accounts from India and the USA (19). He pointed out that religious background influenced identification of any "being" encountered. No Christian saw a Hindu deity, and no Hindu saw Jesus. Ring (23) confirms that NDEs were independent of religiousness, but that religious beliefs do influence interpretations.

### (C) PHARMACOLOGICAL HYPOTHESES

Schnaper (28) is convinced that all NDEs can be explained in terms of altered states of consciousness, e.g. drug-taking. However Moody (14) states that hallucinations under anesthetics differ from NDE accounts in being generally more vague, and lacking in consistency from account to account. Sabom (27) agrees that hallucinations from medicinal drugs are more variable and idiosyncratic in terms of both content and structure. Rawlings (22)

content and structure. Rawlings (22) notes that drug hallucinations usually involved personal details rather than afterlife visions. Rawlings (22) and Ring (23) state that persons taking hallucinatory drugs were in fact less likely to have a NDE than those on no drugs. Sabom (28) cites persons who have encountered both drug-induced hallucinations and a NDE; they were able to distinguish the two. Moreover, persons who have had no anesthetics or drugs also report NDEs.

### (D) NEUROLOGICAL MODELS

Neurology is the diagnosis and treatment of disorders of the nervous system, including the brain. Are NDEs hallucinations produced by temporal-lobe seizures? Dr Wilder Penfield reported hallucinations, distorted perception of the environment, and feelings of detachment, fear, sadness and loneliness when he electrically stimulated the temporal lobes of patients (20A, 25). The electrical stimulation can call back a sequence of past experiences (sights, sounds and thoughts) in great detail; yet the patient is still conscious of the present. The recall stops suddenly when the electric current ceases (25; 27, p 237-8). The mental content experienced during the seizure depends on the fears, hopes and neurotic preoccupation of the person (26).

NDEs and temporal lobe stimulation (TLS) are indeed similar; but Sabom (27) lists several differences:

- (1) During NDEs, the immediate environment is undisturbed (although viewed perhaps from an unusual angle such as near the ceiling); it is distorted by TLS.
- (2) TLS produces a replay of a single piece of memory (complete with audio and visual modes), in real time. The NDE has a panoramic memory review, i.e. a rapid succession of life's highlights (a "life review").
- (3) With the TLS, smell and taste sensations accompany the visual and auditory modes. Smell and taste is absent from NDEs.
- (4) NDEs generate calmness, joy and warmth. The TLS causes sadness, fear and loneliness.
- (5) Forced thinking occurs during the TLS and not during NDEs.

A specific feature of some NDEs is the out-of-body experience. The person says



they have viewed their body from a distance, as a third party would. The neurological analog is the "autoscopy hallucination", where a person sees a "double" of himself projected in his own visual field. The "double" exhibits identical movements and behaviour as the percipient (5A). However, Moody (14) notes that, unlike NDEs, autoscopy images are often wispy, transparent, colorless, and seen only from the chest or neck up.

NDEs commonly produce a feeling of peace, calm, and removal of pain. Is relief of pain during NDEs an effect of B-endorphin? This newly tested chemical, when injected into volunteers with intractable cancer pain, produced complete relief of pain for periods of 20-70 hours (20). By contrast, calm and peace is experienced only during the NDE; physical pain returns immediately at the end of the NDE (27).

Thus TLS, autoscopy images and B-endorphin all explain some aspects of NDEs but not all. However, psychologist Ronald Siegel (29,30) suggests that a combination of factors cause NDEs. He argues that imagery in NDEs and hallucinations (bright lights, colors and tunnels) are alike, and are probably caused by phosphenes - the visual sensations arising from discharge of neurons in the eye. The more complex imagery is determined by expectations, attitudes and the physical and psychological environment. Ineffability characterises peak and mystical experiences. Hearing of voices is much like patients recovering from anesthesia after an operation who recall auditory stimuli during surgery. The meeting of others in afterlife accounts is similar to the "guides" of hallucinatory states, and "imaginary companions" of lonely sailors and young children. Siegel's arguments have not yet been countered point by point. Sabom ignores Siegel.

#### (E) PHYSIOLOGICAL

Dying is a gradual process; a healthy heart can produce electrical activity for 20 minutes after respiration

ceases. The final mechanism of death is anoxia (lack of oxygen): neurons die without oxygen. When neuron activity ceases, the EEG becomes isoelectric (electrically neutral). An early effect of anoxia is an increased feeling of well-being and a sense of power. Then there is decline and loss of critical judgement, delusions and unconsciousness (26). Are NDEs these delusions?

Stevenson (31) points out that NDEs produce clarity of thought, in contrast to the mental obfuscation of the psychosis of anoxia. According to Ring (24), NDEs can occur in the absence of cerebral anoxia. Sabom (27) argues that the content of NDEs differs from that expected in toxic psychosis. Some NDE percipients report watching (while out-of-the-body) attempts at resuscitation, at times providing remarkably accurate detail, even of events out of the line of vision. Could these accurate reports be visual reconstructions of auditory perceptions by a semi-conscious individual recovering from anoxia? Sabom thinks not: some OBEs occurred at times of certain unconsciousness. Also: not all medical procedures would be talked about in detail in moments of emergency.

#### (F) PSYCHOLOGICAL

Are NDEs dreams? Most persons, upon waking, readily distinguish dreams from reality. Indeed, during lucid dreams, the person is consciously aware of this during the actual dream. Moody states that NDE reports come from well-balanced persons capable of distinguishing dream fantasy from reality (14, p85). Ring and Sabom agree. Perhaps, then, a NDE can be generated because of a longing for death to be a pleasant, peaceful journey? However, Ring (23) argues against such wishful thinking because, rarely, unknown information (e.g. a deceased relative, whose death is not known to the percipient) appears in the NDE. Also: the NDE follows a persistent pattern across many accounts; and persons attempting suicide would be wishing a quick rather than a complicated journey.

The model of Greyson (10) is based on state-dependent reactivation of birth memories (Grof & Halifax, 11). Perhaps the hyperaroused state induced by threat of death evokes long-suppressed memories of some similar intense state of arousal, e.g. the birth experience. This could lead to an explanation for the journey down a tunnel (birth canal), and the brilliant light and unusual environment populated by beings (the hospital delivery room). Becker, however, states that the nervous system of newborn babies is physiologically incapable of perceiving and storing the birth process in sufficient detail; and that the birth process does not contain all the same kinds of details as the NDE (1). Grof himself has disavowed implications that birth memories are mystical states. Rather, he believes, the birth process assists a person to obtain access to archetypal experiences such as the NDE (10).

Greyson (10) also suggests a regression model. Perhaps a confrontation with death distances the individual and returns them to earlier levels of functioning as an infant. This model predicts the profound personality changes found after the NDE.

#### DEPERSONALISATION

In 1930 Pfister proposed that a NDE was a defense against the threat of death. When faced with the real possibility of death, the mind replaces this reality with pleasurable fantasies. Noyes & Kletti (17,18) expanded this psychological model to include depersonalisation, which - like fear - is an almost universal response to life-threatening danger. It develops instantly upon recognition of danger and vanishes just as quickly when the threat to life is past (18, p381-2). They analysed 114 NDEs from 104 patients, and found altered attention and time perception, lack of emotion, feelings of unreality, detachment, loss of control and ineffability (17, p20). These subjective phenomena were the same as noted in depersonalisation accompanying a variety of altered states of consciousness and mental disorders. However, NDEs differ in their heightening of perception, speeding up of mental processes, and revival of memories.

Ring (24) outlines three problems. Some elements of depersonalisation do not match NDEs. It cannot handle the

rare perception of a dead relative not known to be dead by the dying person. It fails to consider the possibility that stress near death might open up a door to a higher consciousness, rather than a denial-of-death fantasy. Sabom (27) also outlines problems. Noyes (16) argued that the NDEer must foresee imminent death; but this is not met by some of Sabom's cases. Also: Noyes dealt with persons psychologically near death, and Sabom with those physically near death - two different populations.

Greyson (10) sums up psychological models by listing aspects of NDEs often thought inexplicable in such models:

- (1) The consistency or universality of NDEs;
- (2) Their apparent paranormal component;
- (3) Their positive transformative effect on the individual.

He points out that depersonalisation and regression apply to all cultures, and that the paranormal output may ultimately be shown to be related to satisfaction of psychological needs. As regards positive effects, he cites the long-used idea of psychiatry that mental dysfunction (disturbance of normal functioning) may lead to positive personality transformations.

(G) PARAPSYCHOLOGICAL HOLOGRAPHIC MODEL  
After a critical review of the other models, Ring proposed his own. The feelings of peace, painlessness, and of being out-of-the-body, results from a disembodied consciousness (23, p 221), typical of the OBE reported in the psychic literature (13,15). The tunnel indicated a move to a higher level of consciousness. The light represented the energy level of this new state, associated with a "being of light" (oneself; total self). The realm ventured into is created by the mind, much as a laser creates a holograph.

Ring's model has been little discussed. It is difficult to prove or disprove. Ehrenwald (5) would argue against the OBE phase. He suggests that the OBE derives from the quest for immortality, taking the debate nicely back to that of Pfister in 1930.

#### CONCLUSION

This review reveals many, at times incompatible, models for the cause of NDEs. I believe there may be a



methodological error in research to date. All models seem to fail because they are unable to explain all aspects of NDEs. However, the "perfect" NDE has never been reported. It is a mental artifact; a composite. Analysis of individual reports may well produce explanations in terms of models in this paper. The individual approach is long overdue.

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[Keith is an investigator of anomalies, particularly imagery. He has written a book "UFOs - The Image Hypothesis" (1981), Reed, Sydney.]

#### SOURCES

- (1) BECKER C (1982). Why birth models cannot explain near death phenomena. *Anabiosis* 2: 102-109.
- (2) BIRCH G.E, DE PASQUALE N.P & PHILLIPES J (1968). What death is like. *Amer. Heart J.* 76: 438-439.
- (3) DOBSON M, TATTERSFIELD A.E et al (1971). Attitudes and long term adjustment of patients surviving cardiac arrest. *Brit. Medical J.* 3: 207.
- (4) DRUSS R.G & KORNFIELD D.S (1967). The survivors of cardiac arrest: a psychiatric study. *JAMA (J. Amer. Medical Assoc.)* 201: 291-296.
- (5) EHRENWALD J (1974). Out-of-the-body experiences and the denial of death. *J. Nerv. Mental Disease* 159: 227-233.
- (5A) FAGUET R.A (1979). With the eyes of the mind: Autoscopy phenomena in the hospital setting. *General Hospital Psychiatry* 10: 311-314.
- (6) FIONE C & LANDSBURG A (1979). *Death Encounters*. Bantam, New York.
- (7) GABBARD G.O, TWENLOW S.W & JONES F.C (1981). Do near-death experiences occur only near death? *J. Nerv. Mental Disease* 169: 374-377.
- (8) GREYSON B & STEVENSON I (1980). The phenomenology of near-death experiences. *Amer. J. Psychiatry* 137: 1193-1196.
- (9) GREYSON B (1981). Near death experiences and attempted suicide. *Suicide & Life Threatening Behavior* 11: 10-16.
- (10) GREYSON B (1983). The psychodynamics of near death experiences. *J. Nerv. Mental Disease* 171: 376-381.
- (11) GROF S & HALIFAX J (1977). *The Human Encounter With Death*. Dutton, New York.
- (12) KALISH R (1969). In "Death and Bereavement" (A.H. Kuchner, ed): 84-96. C.C Thomas, Springfield, Ill.
- (13) MONROE R.A (1974). *Journeys Out of the Body*. Corgi, London.
- (14) MOODY R (1975). *Life After Life*. Bantam, New York.
- (15) MULDOON S & CARRINGTON H (1968). *The Projection of the Astral Body*. Hutchinson, London.
- (16) NOYES R, Jr (1972). *The experience of dying*.

*Psychiatry* 35: 174-184.

- (17) NOYES R, Jr & KLETTI R (1976). Depersonalisation in the face of life-threatening danger: a description. *Psychiatry* 39: 19-27.
- (18) NOYES R, Jr & KLETTI R (1977). Depersonalisation in response to life-threatening danger. *Comprehensive Psychiatry* 18: 375-384.
- (19) OSIS K & HARALDSON E (1977). *At the Hour of Death*. Avon, New York.
- (20) OYAMA T, JI T & YAMAYA R (1980). Profound analgesic effects of B-endorphin in Man. *Lancet*, no 8160: 122-124.
- (20A) PENFIELD W & PEROT P (1963). The brain's record of auditory and visual experience. *Brain* 86: 595-696.
- (21) RAWLINGS M (1979). *Beyond Death's Door*. Bantam, New York.
- (22) RAWLINGS M (1980). *Before Death Comes*. Sheldon, London.
- (23) RING K (1980a). *Life At Death*. Quill, New York.
- (24) RING K (1980b). Commentary on "The Reality of death experiences: A personal perspective" by E.A. Rodin. *J. Nerv. Mental Disease* 168: 273-274.
- (25) ROBERTS L (1961). Activation and interference of cortical functions. In "Electrical Stimulation of the Brain" (D.E. Sheer, ed): 534-553. Univ. Texas Press, Austin.
- (26) RODIN E.A (1980). The reality of death experiences: A personal perspective. *J. Nerv. Mental Disease* 168: 259-263.
- (27) SABOM M.B (1982). *Recollections of Death*. Corgi, London.
- (28) SCHNAPER N (1980). Comments germane to the paper entitled "The reality of death experiences" by Ernest Rodin. *J. Nerv. Mental Disease* 168: 268-270.
- (29) SIEGEL R.K (1980). The psychology of life after death. *Amer. Psychol.* 35: 911-931.
- (30) SIEGEL R.K (1981). Accounting for afterlife experiences. *Psychology Today*, Jan: 65-75.
- (31) STEVENSON I (1977). Research into the evidence of man's survival after death. *J. Nerv. Mental Disease* 165: 152-170.
- (32) STEVENSON I & GREYSON B (1979). Near death experiences. *JAMA (J. Amer. Medical Assoc.)* 242: 265-267.
- (33) VAISRUB S (1977). Afterthoughts on afterlife. *Arch. Internal Medicine* 137: 150.

REVIEWERS COMMENT: Although this paper is a thorough and accurate review, I am disappointed that it does not emphasize that the NDE is an altered state of consciousness. The central theoretical and methodological problem is to distinguish this state from others which resemble it. Many of the models that Keith discusses would then not be relevant since they would no longer be competing explanations, but explanations of other things/states. - Allan Kellehear.

## RECOMMENDED READING LIST

The books listed below are recommended as the best available either for the layperson or as a refresher for the professional investigator. Investigators should, of course, in addition scan the professional journals to keep abreast of the latest research data. Most of the books adopt an objective approach — but an attempt has also been made to cover a diverse range of viewpoints. The books are classified on a 1-5 scale, as follows: 1 = excessively credulous; 3 = neutral/objective; 5 = excessively critical. This selection is subject to continual revision. An updated list will be sent to any AIPR member upon request. The AIPR can also assist with locating hard-to-get and out-of-print books.

See Bulletin's 3 & 4 for full list.

ARBMAN E (1963/8/70). *Ecstasy or Religious Trance: The Experience of the Ecstasies and from the Psychological Point of View*. Vol 1 (Vision and Ecstasy). Vol 2 (Essence and Forms of Ecstasy). Vol 3 (Ecstasy and Psychopathological States). Svenska Bokforlaget, Norstedts, Sweden. (3) [Monumental 1700-page work.] [2 - ASCs; 27 - Religion].

BUCKE R.M (1901/69). *Cosmic Consciousness*. Dutton, New York. (2-3?) [A personal mystical experience in 1872 leads this Canadian psychiatrist to study it in others.] [2 - ASCs].

COUSINS N (1983/4). *The Healing Heart: Antidotes to Panic and Helplessness*. Avon, New York. (3) [Positive thinking and laughter helps a noted journalist recover from a heart attack, without surgery. The second time he has recovered from a fatal illness this way!] [14 - Healing].

DUMITRESCU I F1 & KENYON J. N (1983). *Electrographic Imaging in Medicine and Biology*. Spearman, Sudbury, Suffolk. (3) [Romanian doctor with an electronics degree finds Kirlian photos unusable. He pioneers 10-20 other unique electrographic methods of imaging the human body. Original, and very promising.] [7 - Auras].

FINUCANE R.C (1982). *Appearances of the Dead: A Cultural History of Ghosts*. Junction, London. (3-4) [Historian demonstrates how the type of ghost reported differs according to the religious/scientific beliefs of the age, e.g. in Classical Greece, medieval Europe, Victorian era.] [6 - Apparitions].

IRWIN H.J (1985). *Flight of Mind: A Psychological Study of the Out-of-Body Experience*. Scarecrow, Metuchen, N.J. (3) [Psychologist, University of New England, Armidale, NSW.] [20 - OOBs].

REID Janice (1983). *Sorcerers and Healing Spirits. Continuity and Change in an Aboriginal Medical System*. ANU Press, Canberra. (3) [Fieldwork at Yirrkala, Arnhem Land, demonstrates how Aboriginal healing systems have adapted to Western influence.] [5 - Anthropology].

THOMAS Keith (1971/8). *Religion and the Decline of Magic: Studies in Popular beliefs in 16th and 17th Century England*. Peregrine (Penguin), Harmondsworth, Middlesex. (3) [Readable 850-page survey of astrology, magical healing, etc., and how these beliefs declined with the rise of scientific thought.] [27 - Religion].

#### NEW BOOKS

CHESTER R. J (1982). *Hypnotism in East and West: 20 Hypnotic Methods* (23p). Octagon Books, 13 Marylebone Rd, London. ISBN 0-900-86098-7. [Fascinating non-critical survey of ways of inducing hypnosis.]

EVANS Hilary (1984). *Visions & Apparitions & Alien Visitors*. Aquarian, Wellingborough, Northants. [Useful, lengthy survey of "entity" visions, including hauntings; religious; demonic; UFO-type; "doppel-gangers"; imaginary childhood companions.]

GABBARD G.O & TWENLOW S.W (1984). *With Eyes of the Mind: An Empirical Analysis of Out-of-Body States*. Praeger, New York. ISBN 0-030-68926-0. [Psychiatric look at OBEs, autoscopy, schizophrenic body boundary disturbances, NDEs, etc., as a continuum from integrative/healthy to pathological. 339 subjects studied. EEG, psychoanalytic and psychotherapeutic data.]

HARDY Alister (1984). *Darwin and the Spirit of Man*. Collins, London. [Attempts to incorporate religious experiences into Darwin's theory of evolution.]

MCCUSKER Brian (1983). *The Quest for Quarks*. Cambridge Univ. Press, Cambridge. ISBN 0-521-24850-7. [Retired professor of physics, University of Sydney. In Chapter 6, he argues that matter is the lowest of several levels of consciousness (cf. Ken Wilber, 1977: *The Spectrum of Consciousness*; Quest, Wheaton, Ill)].

RING Kenneth (1984). *Heading Towards Omega: In Search of the Meaning of the Near-Death Experience*. Morrow, New York. [Psychologist, University of Connecticut. Sequel to his pioneering case study "Life at Death" (1980)].



# CASEBOOK

This column summarises some Australian spontaneous cases of psychic phenomena reported to the AIPR. The information is unevaluated and need not have a paranormal explanation. It gives an idea of the type of case that deserves investigation. Cases listed are often more bizarre or complex than the average case of its type. Number in brackets is AIPR file-number.

[047] POLTERGEIST Shoalwater Bay/Medina (WA). 1973.

This challenging case involved multiple witnesses on many occasions. Peter and Faye T and their 3 young children (one baby being 3 months old) lived in a flat at Shoalwater Bay. A neighbor (an ex-police officer), visiting, saw a glass fly through the air at him and shatter into pieces "in mid-air". Several other events were seen by him or others: e.g. a saucepan of boiling water allegedly crashed into a wall above the baby's cot. He called in Rev. Bill Hawker (a Methodist minister). Bill and Faye once saw pegs "fly" out of a bucket. Father Jones (an Anglican priest) baptised the baby in the flat. The bowl of water about to be consecrated "was swept from the table in full view of all assembled". On another day, Dennis Lingane (reporter, Sunday Independent) saw a china mug crash at his feet.

The family shifted to a flat at Medina. The spate of flying objects got worse. John Hudson (reporter, Channel 7, and minister of religion) and cameraman Brian Dunne, visited. As John was doing a "to-camera" piece, they heard a loud crash. John and Brian found a mess of buckets and rags strewn on the floor in another room. As John was checking out the flat, Brian felt a jar of vaseline "whizz" past his hip and hit the wall. Later, both men and Faye were in the kitchen. It is alleged Brian saw a cupboard open and a salt shaker "fly" out, tip upside down, spill salt in "figure-8" patterns, turn upright again, and return to the drawer. It is not clear what John and Faye saw.

No-one was hurt by the fast-flying objects. Nor did anyone(?) see the objects actually "take off". Faye was not seen to throw any object. Her location is not stated during some of the incidents. Faye was a lonely, distressed, too-young wife, with 3 young children to bring up. Her husband (who avoided interviews) was unemployed. Faye seemed afflicted by a deep trauma. [Howard-Wright: Eyewitness Australian Ghosts, 1980: 143-154].

[048] APPARITION. New Farm(Q). 12-84.

Mr & Mrs Fowler live in a flat above an old shop. About Dec. 13, at 11 P.M., Mrs F saw a faint apparition emerge from a wall of the stair well, cross a landing halfway up a staircase, and vanish through a street door. She saw it again 2 weeks later. On Jan 2 at 2.26 P.M. Mrs F was going to the toilet. A small female ghost was standing on the landing; it had a light grey glowing shroud. The face was in shadow. Mrs F's cat went berserk. Nell Brennan, 28, was suffocated to death in the shop in 1949. [(Adelaide) News 3/1/85].

[049] MULTIPLE PERSONALITY. Warwick(Q). 1984.

Solicitor Yvon Wigley was jailed for one year for stealing \$2 million from a trust account. She gave most of the money away. Psychologist Michael Weston described 4 other personalities: Kate (a flirt); Maria (a saintly nun); Jane (an aggressive schemer, who stole the money); and Mary (generous, who gave it away). All personalities, named after her dolls, had been with Yvon since childhood. Eleven other personalities possibly exist. Weston recommended therapy rather than prison, to prevent further disintegration of her personality [Weekend Australian 10-11 /11/84; Sunday Telegraph 11/11/84].