

## **Description and Impact of Encounters with Deceased Partners or Spouses**

### **Abstract**

This study investigates perceived interactions with the deceased, a phenomenon reported across societies, with 30-34% of individuals likely experiencing at least one ADC in their lifetime. Despite this prevalence, studies examining the impact of ADCs on those who have lost partners are limited. We present data from 70 individuals reporting partner ADCs via an online survey. Forty percent reported accelerated recovery and 42.9% confirm the ADCs' significant influence in their grieving, with 61% expressing a desire for continued contact. ADCs, interestingly, didn't worsen their pain. The influence on grief-related sadness varied: 41% noted no change, while 40% reported reduced sadness. Forty-seven percent acknowledged ADCs eased their loss acceptance. The data highlight ADCs' substantial, potentially therapeutic role in grief and healing, despite varying effects on sadness and recovery. This study underscores the ADCs' possible positive influence on bereaved partners, advocating for a deeper understanding of this phenomenon in the grieving process.

Key words: After-death communication, deceased partner, bereavement, grief, spirituality

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### **Background**

The death of a partner or spouse can be a significant and distressing event, and the following grieving process can be challenging and complex. Although no widely recognized source provides precise annual worldwide data on the number of individuals who experience the death of a partner or spouse, it appears evident that the COVID-19 pandemic has significantly impacted mortality rates worldwide. A study published in 2021 by "The Lancet" indicated that for every COVID-19 death, there are an estimated nine newly bereaved family members, which would frequently include spouses. Therefore, by inference, the pandemic has increased the number of individuals globally who have lost partners or spouses. In fact, a recent Pew Research Center report found that 53% of US adults say they been visited by a dead family member in a dream or some other form at some point in their life, and 44% of them reported at least one of these experiences in the past year (Pew Research Center, 2023). A report from the Office of National Statistics in the UK found that married or civil partnered remained the most common legal partnership status in 2020, accounting for just over half (50.6%) of the population aged 16 years and over in England and Wales. The proportion of the married population aged 70 years and over (18.5%) is five times the proportion aged under 30 years (3.7%) in 2020, reflecting an ageing married population. In 2021, three million people were widows or widowers (adult females 9% and adult males 3%). Although the precise scale remains uncertain, the number of individuals who lost spouses or partners has grown in recent years.

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Addressing the emotional needs of those who grieve the death of partners or spouses is an important goal.

Coping with the loss of a partner or spouse can be an enormous stress and may include a variety of emotions and experiences associated with grief, such as sadness and isolation, as well as after-death communication (ADC) (Streit-Horn, 2011). An after-death communication (ADC) is the perception of direct contact with a deceased loved one or pet, and is an experience reported by approximately one-third of the population with even higher reports (80-85%) among those who report recent deaths of loved ones in their lives (Beischel, 2014; Botkin, 2000; Holden, 2017; Streit-Horn, 2011). ADCs are reported among people of all ages, states of health, belief systems (religious/spiritual, non-religious/non-spiritual), ethnicities, nationalities, socioeconomic classes, education levels, and across time.

An ADC may occur in several forms, which include a sense of presence without specific sensory content, sensory experiences (visual, auditory, tactile, olfactory), symbolic experiences (song on radio, appears of butterflies, birds, etc.; flower blooming out of season, etc.), or electronic experiences (telephone call, Facebook “like,” or e-mail from the deceased, computer anomalies, etc.). Among the most common forms of ADC are those that occur during sleep. Sleep ADCs are differentiated from dreams in that they are described as qualitatively different than dreams, more real than dreams, and are recalled even many years after the experience, unlike dreams which are quick to fade (Holden, 2017; LaGrand, 2005; Streit-Horn, 2011).

Streit-Horn published a systematic review of 35 ADC research studies conducted between 1894 and 2009, which involved over 50,000 participants from 24 countries (Streit-Horn, 2011). Streit-Horn estimated that 30-34% of individuals in the general population would

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report experiencing at least one ADC in their lifetime. Incidence is significantly higher within the first year of bereavement, where it is estimated that 80-85% of bereaved individuals are likely to experience at least one ADC. According to Keen et al. (2013), up to 90% of bereaved spouses in some cultures that support such beliefs, such as Japanese, Chinese, and Mexican-American cultures, experience the presence of the deceased, but the prevalence varies considerably. A more recent study by Kamp et al. (2023) conducted with 310 widowed individuals in Denmark indicated that 41.9% of participants reported an ADC 6-10 months after the loss of a partner:

*“Interestingly, the present prevalence is closer to the estimates in larger studies (>150) with longer time since loss (c.50%; Kamp et al., 2019; Rees, 1971) rather than small studies (<50) within the first two months of the loss.” (Grimby, 1998; Lindstrom, 1995). (p. 115)*

The authors posit that this may be indicative of a decrease in prevalence of ADC over time or may suggest that if experiences occur soon after loss they are not recalled after more time has passed (Kamp et al., 2023).

Of those 35 studies examined by Streit-Horn (2011), only eight studies included marital status as a variable, and four studies indicated a higher prevalence of ADCs reported among those who lost their partner or spouse than in the general population (though Streit-Horn did not indicate which of the four studies in Table 1 included this comparison). The tables below summarize the prevalence and incidence data for “widows” and “widowers” in the studies examined by Streit-Horn. Prevalence is the proportion of a population who have reported an

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ADC in a certain period and the incidence is the number of new reports of ADCs in a specific period.

**Table 1**

*Prevalence of ADC Reported Among Widows and Widowers (Streit-Horn, 2011)*

| Author(s)               | Year | Country              | N       | Prevalence |
|-------------------------|------|----------------------|---------|------------|
| Marris, P.              | 1958 | United Kingdom       | n = 72  | 50%        |
| Olson, P. et al.        | 1985 | U.S. (Asheville, NC) | n = 52  | 63%        |
| Simon-Buller, S. et al. | 1988 | U.S. (Arizona)       | n = 294 | 50%        |
| Rees, W.                | 1971 | Wales                | n = 293 | 47%        |
| Hobson, C.              | 1964 | England              | n = 40  | 80%        |

**Table 2**

*Incidence of ADC Reported Among Widows and Widowers (Streit-Horn, 2011)*

| Author(s)           | Year          | Country          | N      | Incidence                                       |
|---------------------|---------------|------------------|--------|---|
| Grimby, A.          | 1993 and 1998 | Goteborg, Sweden | n = 50 | 82% at 1 mo.<br>71% at 3 mos.<br>52% at 12 mos. |
| Parkes, C.          | 1970          | London, England  | n = 22 | 73% at 1 mo.<br>55% at 12 mos.                  |
| Yamamoto, J. et al. | 1969          | Tokyo, Japan     | n = 20 | 90%   |
| Lindstrom, T.       | 1995          | Norway           | n = 39 | 74% at 4-6wks.<br>67% 12 mos. later             |

Recent research in this area is sparse that sometimes indicates a focused exploration of ADCs in those who have lost their partner or spouse. Parker, J. S. (2005) expanded on Rees' (1971) work, examining both widows and widowers and found that the experience of ADCs had a generally positive impact on the bereavement process, often providing comfort and a sense of continued connection to the deceased partner. According to Keen et al. (2013), up to 90% of

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bereaved spouses in some cultures experience the presence of the deceased, but prevalence varies considerably. A more recent longitudinal study conducted by Kamp et al. (2023) in Denmark examined data from 310 widowed individual related to ADC, which the authors referred to as “sensory or quasi-sensory experiences of the deceased” (p. 104). Data were gathered 6-10 months and 18-20 months after the loss of the participants’ partners. Of the 310 participants, 130 (41.9%) reported having more than one type of ADC experience. The most common type of experience reported was a sense of presence (68.5%) followed by auditory ADC (60.8%). Less common were tactile (29.8%), olfactory (23.8%), and visual (22.3%) (Kamp, et al., 2023).

The findings of Kamp et al. (2023) were consistent with an earlier study in which Silverman and colleagues (2014) found that 60% of widowers reported at least one ADC experience, mostly with sensing the presence of the deceased, feeling their touch or physical sensation, and hearing their voice. Castelnovo and colleagues (2015) reported a high prevalence (30-60%) of the ADC among widows and widowers. However, a recent study by Thoma and colleagues (2021) has found a similar prevalence rate of the ADC experiences in widows and widowers, with 57% reporting at least one ADC experience.

Vähäkangas and colleagues (2022) conducted interviews with ten individuals who had recently loss their spouse and reported that many of the interviewees experienced ADCs with their deceased spouses. These included both everyday communication and “spiritual experiences” (p. 53). The authors noted that their results are consistent with prior research that suggests ADCs help with “reconstructing meaning,” (p. 53) and providing new understanding of the experience of loss. In fact, for participants who identified as nonspiritual as well as those

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who endorsed being spiritual prior to the ADCs, the “ADC included meaning-making in existential or spiritual terms,” (p. 53).

Both studies that reported data from those who reported the death of a spouse or partner and those that reported data from the general population inclusive of those who lost a spouse or partner, found the ADCs were mostly reported as beneficial and healing experiences (Baethge, 2002; Botkin, 2000; Holden, 2017; Streit-Horn, 2011). Streit-Horn (2011) described the beneficial impacts of the ADCs in relation to grief as reported in her review of 35 studies:

*“People usually find ADC to be beneficial, using descriptive words like pleasant, positive, mystical, serene, elating, helpful, comforting, healing, spiritual, and a good experience. Most ADCrs report that, as a result of the ADC, they feel reassured and comforted that the deceased continues to exist—and in a state of wellbeing and happiness, and the relational bond of love between the ADCr and the deceased continues—albeit in a different form.”* (pp. 73-74)

Beischel and colleagues (2014) emphasize the consistent and profound impact, which the ADC experiencers reported on grief stating, “both spontaneous and induced ADCs have been repeatedly demonstrated to diminish or even entirely alleviate grief” (p. 189). Although these studies included ADCs with a partner, spouse, or other loved one, they found results were the same regardless of the relationship to the deceased. Results from Kamp and colleagues (2023) indicated that most of the participants reported their experience was positive (38.5%, N=50) or very positive (37.7%, N=49).

Accounts of distress related to the ADC experiences were a minority of the experiences noted in the research and were most often due to a lack of information or misinformation

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about the ADC rather than related to the ADC experience directly (Streit-Horn, 2011). For example, only 4.6% (N=6) of widowed individuals surveyed by Kamp et al. (2023) considered the ADC experience to be negative. However, the ADC experiencers noted fear of being pathologized by others if they disclosed their ADC experiences (Streit-Horn, 2011).

Overall, ADCs involving a deceased spouse or partner appear to be common and are generally received positively by those who experience them. However, further research is needed to understand better the psychological impact of the ADC experiences on bereaved partners or spouses. We aim to describe the phenomenology and impact of having an ADC from a deceased partner or spouse, and to add to the knowledge base in this area.

## **Methods**

### **Procedures**

This research analyzes data collected through online surveys between February 2018 and January 2020 in English, French, and Spanish in several European and Latin American countries and the United States. The research project recruited adults only and received ethical approval from the University of Northampton and was pre-registered with the Unit Study registry. Institutional approval has also been secured from the University of Virginia to analyze of this subset of data focusing on widows and widowers.

For the original study, the survey landing page reminded participants of the nature of the study and of what participation would entail, including that data were volunteered could be withdrawn if desired. Respondents had to consent in writing in order to proceed to the questionnaire.

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Participants were recruited using a purposive snowball sampling method by advertising the survey during public talks and through social media forums specializing in ADCs and related phenomena. Interested parties were referred to the Principal Investigator's web page that gave them further information about the project and provided them a link to the survey site where participants were oriented to the project, consented, and were invited to answer a one-time online survey about the ADCs they had experienced. Each survey version was made 'live' for pre-specified periods— the English version from 9 August 2018 – 31 January 2019, the French version from 15 September 2018 – 31 March 2019, and the Spanish version from 21 October 2018 – 30 April 2019.

Participants completed the 194-item survey in their own time and the questionnaire could be completed over several sessions. The main themes of the questionnaires were: circumstances of occurrence of the ADC, type of ADC, message conveyed in the ADC, emotions associated with ADC, the sense of reality related to the experience, impact and implications for the grieving process, profile of the recipient, and profile of the deceased person perceived (including cause of death). The questionnaires also included demographic and socioeconomic information.

### **Analysis**

Non-English-speaking participants were not included in the data set, which reduced the data set from 991 to 412 participants. However, participants were included in the data set if they endorsed receiving an ADC from a spouse, partner, soulmate or similar individual. The final sample included 70 English-speaking participants who endorsed receiving ADCs from spouses, partners, soulmates or similar. Data was cleaned and analyzed via Power BI reporting software.

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Power BI grouping functions were used to populate prevalence and outcomes tables. Chi-Square Goodness of Fit analysis was used to compare self-reported changes over time.

### Results

The study participants were overwhelmingly female, and the majority were 50 years of age or older and currently still widowed. Interestingly, 40% of participants identified as Christians, and 30% as having no religious affiliation. We did not collect data on the strength of their religious beliefs. Full demographic data can be found in Table 3.

**Table 3**

*Participant Demographics*

| Characteristic | Descriptor                | N  | Frequency |
|----------------|---------------------------|----|-----------|
| Age            | 49 or younger             | 8  | 11.4%     |
|                | 50 to 59                  | 16 | 22.9%     |
|                | 60-69                     | 29 | 41.4%     |
|                | 70 or more                | 16 | 22.9%     |
|                | No response               | 1  | 1.4%      |
| Gender         | Male                      | 19 | 27.1%     |
|                | Female                    | 50 | 71.4%     |
|                | Other                     | 1  | 1.4%      |
| Marital Status | Married                   | 12 | 17.1%     |
|                | Living with partner       | 0  | 0%        |
|                | Registered partnership    | 1  | 1.4%      |
|                | Single                    | 5  | 7.1%      |
|                | Separated                 | 0  | 0%        |
|                | Divorced                  | 6  | 8.6%      |
|                | Widowed                   | 46 | 65.7%     |
| Children       | Yes                       | 52 | 74.3%     |
|                | No                        | 15 | 21.4%     |
|                | Other (yes, but deceased) | 3  | 4.3%      |
| Education      | University                | 28 | 40.0%     |
|                | College or equivalent     | 24 | 34.3%     |
|                | Intermediate              | 8  | 11.4%     |
|                | Secondary school          | 10 | 14.3%     |

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| Characteristic | Descriptor   | N  | Frequency |
|----------------|--|----|-----------|
| Employment     | Part-time or hourly work                           | 6  | 8.6%      |
|                | Full-time work                                     | 16 | 22.9%     |
|                | Looking for work                                   | 1  | 1.4%      |
|                | In school  | 0  | 0.0%      |
|                | In university                                      | 1  | 1.4%      |
|                | In retraining                                      | 1  | 1.4%      |
|                | On temporary leave                                 | 0  | 0.0%      |
|                | In military / community / voluntary social service | 1  | 1.4%      |
|                | Exclusively housewife / house man                  | 4  | 5.7%      |
|                | In age-related retirement                          | 27 | 38.6%     |
|                | In early retirement                                | 9  | 12.9%     |
|                | None of the above apply                            | 4  | 5.7%      |
| Religion       | No Response  | 8  | 11%       |
|                | Christian  | 28 | 40%       |
|                | Jewish   | 2  | 3%        |
|                | None   | 21 | 30%       |
|                | Other  | 11 | 16%       |

The majority (81%) of the participants reported that the perceived ADC brought them comfort or emotional healing, signifying the potential therapeutic nature of these experiences. Additionally, 84% of the participants considered the ADC important in their bereavement process. When asked if the ADC made the physical absence of the deceased more painful, 61% of the participants responded negatively, suggesting that ADCs may not exacerbate grief-related distress. Furthermore, 63% of the participants reported that their relationship with the deceased deepened following the ADC, while 22% stated that the ADC allowed the relationship to continue.

The majority (64%) also wished for more contact with the deceased, while only 18% felt the existing connection was sufficient. This indicates a strong desire for ongoing communication

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among individuals who have experienced ADCs. Responses were mixed regarding the ADC's impact on grief-related sadness. Approximately the same number of the participants reported that sadness remained the same (41.4%) as those who reported a reduction in sadness (40%). However, only a minor portion reported an increase in sadness (1.4%), and an equal fraction of the participants found their sadness removed entirely (1.4%).

The ADC seemed to ease acceptance of loss for 49%, while it did not affect 28% of the participants. The remaining participants were uncertain. The data also suggest that the perceived ADCs facilitate a return to normal life and expedite recovery. While 42% of the participants confirmed an accelerated recovery due to the ADC, 34% saw no impact. Again, a significant portion of participants said they were unsure or gave us no response (24%).

Finally, when questioned about how the bereavement process might have differed without the ADC, the majority (63%) believed it would have been different, while only 19% thought it would have been the same. This points towards the perceived unique and significant role of the ADC in grieving and healing. Tabulated results for the specific questions of interest can be found in Tables 4 and 5.

**Table 4**

### *Relationship with the Deceased*

| Label                | Descriptor                 | N  | Frequency |
|----------------------|----------------------------|----|-----------|
| Emotional Connection | Extremely close and loving | 64 | 91.4%     |
|                      | Very close                 | 4  | 5.7%      |
|                      | Quite close                | 2  | 2.9%      |
|                      | Quite distant              | 0  | 0.0%      |
|                      | Distant                    | 0  | 0.0%      |
|                      | Confrontational            | 0  | 0.0%      |
|                      | Extremely difficult        | 0  | 0.0%      |
|                      | Deceased was unknown to me | 0  | 0.0%      |

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|                     |              |    |       |
|---------------------|--------------|----|-------|
|                     | I'm not sure | 0  | 0.0%  |
| Unresolved conflict | Yes          | 17 | 24.3% |
|                     | No           | 48 | 68.6% |
|                     | I'm not sure | 4  | 5.7%  |
|                     | No response  | 1  | 1.4%  |

**Table 5**

*Impact of ADC on Grief*

| Item                              | Measure                      | N  | Frequency |
|-----------------------------------|------------------------------|----|-----------|
| ADC made absence more painful     | Yes                          | 20 | 28.6%     |
|                                   | No                           | 43 | 61.4%     |
|                                   | I'm not sure                 | 5  | 7.1%      |
|                                   | No response                  | 2  | 2.9%      |
| ADC important to bereavement      | Yes                          | 57 | 81.4%     |
|                                   | No                           | 4  | 5.7%      |
|                                   | I'm not sure                 | 7  | 10.0%     |
|                                   | No response                  | 2  | 2.9%      |
| ADC influence on bereavement path | The same                     | 13 | 18.6%     |
|                                   | Different                    | 43 | 61.4%     |
|                                   | I'm not sure                 | 12 | 17.1%     |
|                                   | No response                  | 2  | 2.9%      |
| ADC brought comfort               | Yes                          | 57 | 81.4%     |
|                                   | No                           | 3  | 4.3%      |
|                                   | I'm not sure                 | 9  | 12.9%     |
|                                   | Not applicable               | 1  | 1.4%      |
| ADC made it easier to accept loss | Yes                          | 33 | 47.1%     |
|                                   | No                           | 19 | 27.1%     |
|                                   | I'm not sure                 | 16 | 22.9%     |
|                                   | No response                  | 2  | 2.9%      |
| Feelings about ADC                | I treasure it                | 59 | 84.3%     |
|                                   | Very glad                    | 8  | 11.4%     |
|                                   | I don't mind                 | 0  | 0.0%      |
|                                   | Very unhappy                 | 0  | 0.0%      |
|                                   | I wish it had never happened | 2  | 2.9%      |
|                                   | I'm not sure                 | 1  | 1.4%      |
| Frightened                        | Yes                          | 4  | 5.7%      |
|                                   | No                           | 64 | 91.4%     |
|                                   | I'm not sure                 | 2  | 2.9%      |
| Influence grieving                | Yes                          | 30 | 42.9%     |

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| Item                       | Measure  | <i>N</i> | Frequency |
|----------------------------|--|----------|-----------|
|                            | No   | 27       | 38.6%     |
|                            | I'm not sure   | 11       | 15.7%     |
|                            | No response  | 2        | 2.9%      |
| Recovery accelerated       | Yes  | 28       | 40.0%     |
|                            | No   | 23       | 32.9%     |
|                            | I'm not sure   | 16       | 22.9%     |
|                            | No response  | 3        | 4.3%      |
| Wish for more contact      | Really wish for new contact                                  | 43       | 61.4%     |
|                            | Contact sufficient for me                                    | 12       | 17.1%     |
|                            | I'm not sure / other   | 12       | 17.1%     |
|                            | No response  | 3        | 4.3%      |
|                            | Relationship ended with death                                | 1        | 1.4%      |
|                            | Thought relationship ended but ADC showed the bond continues | 15       | 21.4%     |
| Relationship with deceased | Believed bond continued and ADC deepened connection          | 47       | 67.1%     |
|                            | I'm not sure   | 3        | 4.3%      |
|                            | Other  | 1        | 1.4%      |

Of particular note was the reported shift in participants' grief-related sadness after experiencing an ADC with their deceased partner or spouse. In the days and weeks before the ADC, half of the participants reported feeling extremely sad or being in deep mourning and almost a fourth (24.3%) of the participants reported moderate sadness and mourning. After the ADC, 40% of the participants reported a reduction in their grief-related sadness and one reported complete alleviation. Although slightly more (41.4%) participants reported no change in their grief-related sadness, only one participant reported increased grief-related sadness. Several participants (11.4%) could not clearly say whether their sadness related to grief was impacted by their ADC. Results are presented in Table 6. This suggests that the ADCs have the potential to provide some benefit to bereaved individuals who lost a partner or spouse.

**Table 6**

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### *Impact of ADC on Grief-Related Sadness*

| Item   | Measure                                      | N  | Frequency (%) |
|--|--|----|---------------|
| Experience of grief-related sadness prior to ADC | Extremely sad / deep mourning                | 35 | 50.0%         |
|  | Moderately sad and mourning                  | 17 | 24.3%         |
|  | Little sad but had overcome pain of mourning | 9  | 12.9%         |
|  | Not sad and not mourning                     | 2  | 2.9%          |
|  | Never in mourning                            | 3  | 4.3%          |
|  | No response                                  | 4  | 5.7%          |
| Impact of ADC on grief-related sadness           | Sadness is reduced                           | 28 | 40.0%         |
|  | Sadness is removed                           | 1  | 1.4%          |
|  | Sadness remains the same                     | 29 | 41.4%         |
|  | Sadness is increased                         | 1  | 1.4%          |
|  | I'm not sure / other                         | 8  | 11.4%         |
|  | No response                                  | 3  | 4.3%          |

We used a Chi-Square Goodness of Fit Test to determine whether the proportion of respondents who strongly agreed, agreed, were neutral, disagreed or strongly disagreed they were religious or spiritual differed before to after the ADC. We used the following questions:

- Before question:

Before experiencing the perceived ADC, did you consider yourself a [religious] / [spiritual] person?

- After question:

Today, do you consider yourself a [religious] / [spiritual] person?

We assumed if the ADC had no impact, responses would be identical from before to after the ADC. That is someone who strongly agreed they were religious before the ADC would strongly agree they were religious after the ADC. We, therefore, used the “before question” as our expected and the “after question” as our observed response values. Using this methodology, we found responses to the spirituality [ $\chi^2 (4, N=70) = 32.55, p < .001$ ] but not the religiosity [ $\chi^2$

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(4, N=70) = 14.78,  $p = .080$ ) question varied significantly from the before to the after question.

That is, spirituality changed while religiosity did not. The number of participants who “Strongly

Agreed” that they were religious before the ADC, 11.4%, increased to 14.5% after the ADC.

Another 14.3% and 21.7%, respectively, “Agreed” they were religious or spiritual before the

ADC. In all: 25.7% strongly agreed or agreed they were religious before and 36.2% after the

ADC; 68.6% strongly agreed or agreed they were spiritual before and 92.5% after the ADC.

These results are comparable to results found in the literature for individuals who reported

ADCs and for the larger database from which the current data have been drawn (Penberthy, et

al., 2023; Woollacott, et al. 2022). Results are provided in Table 7.

**Table 7**

### *Changes in Religiosity and Spirituality*

| Item         | Measure           | Before ADC |       | After ADC |       |
|--------------|-------------------|------------|-------|-----------|-------|
| Religiosity  | Strongly agree    | 8          | 11.4% | 10        | 14.5% |
|              | Agree             | 10         | 14.3% | 15        | 21.7% |
|              | Neutral           | 28         | 40.0% | 18        | 26.1% |
|              | Disagree          | 11         | 15.7% | 14        | 20.3% |
|              | Strongly disagree | 13         | 18.6% | 12        | 17.4% |
| Spirituality | Strongly agree    | 21         | 30.0% | 41        | 58.6% |
|              | Agree             | 27         | 38.6% | 24        | 34.3% |
|              | Neutral           | 16         | 22.9% | 4         | 5.7%  |
|              | Disagree          | 3          | 4.3%  | 1         | 1.4%  |
|              | Strongly disagree | 3          | 4.3%  | 0         | 0.00% |

## Discussion and Future Directions

The present data set explores the impact of perceived After-Death Communication (ADC) on the bereavement process, emotional healing, and acceptance of loss. The participants for this study consisted of 70 individuals who reported experiencing at least one ADC,

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specifically encountering their deceased partner or spouse. Our current results contribute to the existing literature on after-death communications (ADCs), a phenomenon that has been largely under-researched in mainstream psychology until recent years.

The majority of the participants (81%) reported that the perceived ADC brought them comfort or emotional healing and aided them in the bereavement process (84%). With regard to continuing bonds with the deceased, 22% of participants reported that the ADC allowed their relationship with their partner to continue and 63% reported that their relationship with their partner deepened following the ADC. With regard to the impact on the bereavement process, 63% of participants believed their bereavement process would have been different had they not experienced an ADC. Results were closely matched regarding grief-related sadness with 41.4% of participants reporting no change in sadness and 40% reporting a reduction in sadness. This may be indicative of participants finding meaning in their ADC that helped them interpret or cope with their sadness in a different way. Forty-nine percent of participants reported that the ADC seemed to ease acceptance of the loss. With regard to return to functioning, 42% reported that their recovery and return to normal life following the loss was expedited. Finally, there was an impressive increase in participants agreeing or strongly agreeing that they were more spiritual after the ADC experience (92.5%) compared to before the ADC (68.6%). Overall, 59% of participants identified as being religious, either Christian, Jewish, or other. It is of interest that in a recent Pew Research Center Poll (2023), Americans with medium levels of religious commitment were more likely than those with higher religious commitment to say they've felt the presence of a family member who is dead, told a dead family member about events in their life, and felt a dead relative communicate with them in the past year. The Pew

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Research Center Poll (2023) authors also reported that some of the most traditionally religious groups (such as evangelical Christians), as well as the least religious (such as atheists) are less likely to report having interactions with deceased family members. This may be due, in part, to reduced cultural expectations of survival after death in those groups. Although, we did not ask the degree of religiosity, we did find that 59% of our participants endorsed being religious, and this may account for the rates of reported ADCs that we find in our sample.

These results reiterate and add evidence that the majority of individuals experiencing ADCs report these experiences as comforting, healing, and helpful in the bereavement process. Moreover, these findings suggest that ADCs may play an integral role in the healing process after the loss of a spouse or partner, not just as occasional occurrences but as key aspects of the process of acceptance and recovery.

This study raises some important implications. Firstly, the research underlines that ADCs are a more common and meaningful aspect of bereavement than what has traditionally been acknowledged in grief and loss studies. For many individuals, these experiences form a crucial part of their journey towards healing and acceptance. While ADCs have been recognized in bereavement counseling, the phenomenon needs to be more widely understood by healthcare professionals or the public, often leading to reluctance in discussing these experiences due to concerns about perceived sanity or credibility (Daggett, 2005).

Results also accentuate the need for culturally sensitive research and practice around this topic. The after-death communications are conceptualized in various ways depending on the training and worldview of the researchers or clinicians. An ADC may be pathologized as mental illness, complicated grief, or hallucination (Exline, 2021; Hayes and Steffen, 2023; Kamp,

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et al., 2019); viewed as a natural part of the grieving process in relation to attachment and continuing bonds (Beischel, Mosher, & Boccuzzi, 2018; Hayes and Steffen, 2023; Steffen & Coyle, 2010); treated as a psychological experience in which the sources are less important than the meaning made by the client (Exline, 2021); or explored as a spiritual or supernatural phenomenon (Exline, 2021; Steffen & Coyle, 2010). Regardless of the perceptions of the authors of the research, there is overwhelming evidence that ADC provides multiple benefits to grieving individuals, including surviving partners and spouses (Elsaesser, et al., 2020). The experience has been found to yield psychological benefits, promoting personal and/or spiritual growth, reducing existential fear, and instigating new perspectives on life (Beischel, Mosher, & Boccuzzi, 2014; Sormanti & August, 1997).

### **Important Implications.**

Participants in the ADC studies have found the experiences to be comforting and meaningful (Daggett, 2005), underscoring the importance of awareness and understanding of ADCs as a natural phenomenon within the grief process (Devers & Robertson, 2002). This finding suggests that clinicians, therapists, and support groups should be educated about the potential significance of ADCs and consider incorporating them into the frameworks used for understanding and aiding the bereavement process. This is especially pertinent in light of the challenges that mental health professionals face, both personally and professionally, in opening up the therapeutic space to the consideration of ADCs and other anomalous experiences (Roe, 2020; Evenden, Cooper & Mitchell, 2013; Roxburgh & Evenden, 2016; Taylor, 2005).

Secondly, the finding that the ADCs may accelerate recovery and return to life's enjoyment might indicate a valuable therapeutic direction. Future research could further

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investigate how the positive effects of the ADCs could be harnessed or facilitated, or how to sensitively navigate the ADCs with individuals for whom the experiences are more distressing.

Finally, this study highlights the importance of understanding the psychological impact of the ADCs within a broader cultural context. The continued bonds with the deceased and post-death existence vary considerably across different cultures, which undoubtedly influence how the ADCs are experienced and interpreted. Cultural sensitivity and awareness are thus vital when researching this topic and applying the findings in clinical or support settings.

### **Limitations**

This study has some limitations. First, the design of the study was not initially intended for the analysis conducted, resulting in a small sample size (low N). This could limit the generalizability of the findings. Second, the data used are a subset of a larger dataset, and it does not contain all the desired questions specifically tailored for widows/widowers or those who lost a partner. This could lead to a lack of depth or nuance in understanding their experiences. Finally, After-Death Communications (ADCs) are controversial and lack wide acceptance within the scientific community. Critics argue that these experiences may be better explained through psychological or cultural lenses rather than authentic interactions with the deceased.

Despite these criticisms and limitations, there are reported positive effects of the ADCs on the grieving process for some individuals (Hayes & Leudar, 2016; Klass & Steffen, 2018; Steffen & Coyle, 2012; Steffen & Coyle, 2011). Thus, regardless of the underlying cause of the ADCs, they might serve a critical role in bereavement support for specific individuals.

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These limitations underscore the need for further studies to investigate the ADCs phenomenon, ideally with larger or more representative samples and more detailed questions suited to the population of interest.

### **Conclusion**

This study explored the impact of perceived After-Death Communication (ADC) on bereavement, involving 70 individuals who experienced ADCs with deceased partners or spouses. The majority found the ADCs comforting (81%) and helpful in their bereavement (84%). The experiences often deepened relationships with the deceased and facilitated acceptance of loss. Despite variations in interpreting ADCs, ranging from pathological to spiritual perspectives, they universally benefitted grieving individuals, promoting personal growth and reducing existential fear. Findings highlight the ubiquity and therapeutic potential of ADCs in grief, emphasizing the need for cultural sensitivity and broader acceptance in therapeutic settings, given the positive psychological impact observed in participants.

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