Giving up the ghost. Healers' perceptions of the perimortal process: a phenomenological study

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Giving up the Ghost.

Healers' Perceptions of the Perimortal Process:

A Phenomenological Study

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Thesis Declaration

I certify that the work presented in this thesis is, to the best of my knowledge and belief, original, except as acknowledged in the text, and that the material has not been submitted, either in whole or in part, for a degree at this or any other university. I acknowledge that I have read and understood the University’s rules, requirements, procedures and policy relating to my higher degree research award and to my thesis. I certify that I have complied with the rules, requirements, procedures and policy of the University (as they may be from time to time).

Name: Kathryn P. Jackson

Signed ......................................

Date ...............................................

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Abstract

Dying and death is a universal human experience and is possibly the most influential and relevant experience of each person's life. The aim of this study was to explore the perceptions of healers, as they assist people who are dying. The objectives were to provide a deeper insight into the process of both dying and death, so that health professionals and carers may provide more appropriate assistance and support for the dying, and individuals within our culture will have the opportunity to experience their own dying process more consciously and with less fear. The research question was: What are the healers' subtle perceptions of perimortality, reflected in the transitional stages of "nearing death," "death" and "after death?"

By exploring the perceptions of healers during their ministrations to the dying, as well as their experience of death, this study provided an alternative picture of death and dying. Consequently, the literature chosen for review reflected both the mainstream and the alternative views of death and dying, in relation to the physical, psychological and sociological aspects of dying and death. The review of literature also included the spiritual and transpersonal aspects of perimortality, the theories allied to consciousness and subtle energies, and the research related to healing.

van Manen’s phenomenology was applied to the data collection and analysis methods. After gaining ethical clearance to undertake the study, 16 participants were recruited by purposive sampling and snowball technique. Face to face semi-structured interviews were undertaken with 13 participants and the phone interviews were undertaken with three participants, who were living interstate or overseas. After immersion in the transcribed data of the participants' in-depth experiential accounts, a phenomenological analysis revealed the phenomenon as Gathering-up, Giving-up and Enduring Consciousness.

The insights gained from the research have implications for health professionals and carers providing appropriate assistance and support for the dying; and for individuals with whom the phenomenon resonates. The limitations in using hermeneutic phenomenology to explicate the phenomenon were acknowledged and discussed and suggestions for further research were outlined.
Dedication

For Pip

(23.5.1948 - 6.1.2011)
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Trustworthiness
Credibility
Fittingness
Auditability
Confirmability

Summary

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CHAPTER ONE

INTRODUCTION

Where I am it’s still dark and raining. We have a fine night for it.
There’s something I want to show you...
It’s in a room not far from here – in fact it’s as close as the next page.
King (Buhner, 2010, p.127)

The source of the study title: ‘Giving up the Ghost’, comes from the Wycliffe translation of the Bible, written in 1380 as the St James version of the Bible. “And when Jesus had taken the vinegar, he said “It is ended.” And when his head was bowed down, he gave up the ghost.” John, 19:30

Dying and death is a universal human experience and is possibly the most influential and relevant experience of each person’s life. These phenomena and the posthumous survival of consciousness have captured the concern, attention and imagination of all societies throughout the millennia. The interpretation of these events has been represented in each culture’s art, music, funeral rites and mythologies (Aries 2008; Grof, 2006; Illich, 1975).

The manner in which a society manages death and attends to the needs of the sick and dying, known as a ‘death system’, describes the way they “live their dying” (Morgan, 1995). A death system is reflective of a society’s values, beliefs and historical evolution. These attitudes are also influenced by the types of deaths encountered, the institutional structures present and the technological sophistication that is available to a particular culture (Benoliel & Degner, 1995; Illich, 1975; Kastenbaum & Aisenberg, 1976).

Attitudes towards dying and death are significant indicators of the psychological maturity of a society and by inference, its individual citizens. Illich (1975) believes that a society’s dominant image of death demonstrates its prevalent concept of health. He states that the “society’s image of death reveals the level of independence of its people, their personal relatedness, self reliance and aliveness” (p.122).
The following comparative description of thanatological beliefs and an overview of Western society’s attitudinal changes towards death and dying, aim to set the context for this study.

Ancient, preindustrial Western and Eastern cultures hold a common belief that biological death is not the cessation of conscious existence, but an important transition of the soul to another invisible, spiritual, domain. The eschatological mythologies of these cultures offer detailed descriptions of afterlife states and realms. Grof (1980) asserts that these mythologies also provide “precise cartographies to guide the dying through the sequential changes of consciousness that occur during the critical period of transition” (p.6). These belief systems also diminish the fear of death and promote an understanding that death is an integral part of life (Grof, 2006). Some of the most significant of these cartographies are represented in what is collectively known as the “Books of the Dead”. The most famous of these include Tibetan Bardo Thodol, The Egyptian Pert Em Hru, The Aztec Codex Borgia, The Mayan Ceramic Codex and the European Ars Moriendi.

Thanatological scholars propose that from the early mediaeval period to contemporary times, Western cultural attitudes towards death and dying have undergone gradual, but distinctive changes (Aries 1974, 2008; DeSpelder & Strickland 2002; Grof 1980, 1994, 2006; Illich, 1975; Kearl 1989; Wood & Williamson 2003). The French historian, Philippe Aries (1974, 2008), asserted that these cultural attitudes can be reduced into four basic postures or orientations towards death. He described these as, “tame death,” “the death of the self,” “the death of the other” and “death denied.”

‘Tame death’ was in Aries’ view, the oldest type of death in human history, as it was experienced by most cultures throughout time, including Western culture, until the late Middle Ages. Death was familiar, frequent and public and the processes and rituals designed for this type of transition were well defined for both the dying person and their witnesses. As a testament to their familiarity with and acceptance of death, most people in the Middle Ages intuitively knew when they were approaching the end of their life and articulated these portentions to their friends or family. This capacity to be deeply in touch with one’s life as it draws to a close is contrary to contemporary experience, where the dying person is often the last to know of their approaching death. Aries (2008), in recognition that this aptitude would be considered as an exceptional experience in modern times, comments on this phenomenon.

This miraculous quality, the legacy of times when there was no clear boundary between the natural and the supernatural, has prevented romantic observers
from seeing the positive quality of the premonition of death and the way it is deeply rooted in daily life. The fact that death made itself known in advance was a natural phenomenon (p.8).

According to Aries, between the 12th and the 15th Centuries, the traditional familiarity with death and a collective sense of destiny experienced in the early Middle Ages, gave way to a growth of individuality and a belief in personal destiny. This brought a commensurate shift in death awareness to “death of the self” or one’s individual death. Morgan (1995) states that during this period, “death was perceived as the last act of private, unique drama. It was the dying person’s duty to be the master over his or her death and to create an appropriate scene” (p.33).

The genre of death literature known as the Ars Moriendi, or “The Art of Dying”, was generated and flourished during this period. Some of these texts described the formal instructions and processes to be undertaken to assist the dying person with their transition. Other aspects of this literature described the non–ordinary states of consciousness and other psycho–spiritual phenomena, commonly experienced by the dying person prior to death (Grof, 2006).

In the 19th Century, the nuclear family replaced the traditional community of earlier times, and the individual sense of self destiny of the late middle ages. Aries (1974, 2008) asserts that this structural change in the community led to a different mode in relating to others. Death became a more private experience, and the fear of death was transferred from self to other, “the loved one.” A pattern was instituted of “protecting” the person with a fatal illness from knowledge of their pending death by withholding both the diagnosis and prognosis. This replaced the traditional religious obligation of informing the dying person of their state, thus allowing them to undertake and complete necessary psycho–spiritual and administrative processes prior to their death (Benoliel and Degner, 1995).

As the scientific revolution gathered pace during the 19th Century, death was perceived as a natural, as distinct from a supernatural, phenomenon. This new definition implied that it was now possible for death to be overcome by human ingenuity. Improved diet and public hygiene, as well as the implementation of inoculation and immunisation programs during this period, resulted in a decrease in infant mortality and advances in life expectancy. This major shift in Western society’s life experience and expectation of increased longevity, also led to a lessening of the individual and public encounter with the dying and the dead, as they were increasingly being removed from view (Wood & Williamson, 2003).
“Denial of death” or “invisible death” is the final category in Aries’ classification of death systems, and Aries (1974) argues that the characteristic attitudes of this system are displayed within contemporary society. These deaths are distinguished by their privacy, individuality, and social isolation. During the 20th Century, science contributed to the current death system by developing technology that diagnosed and managed disease. Its proponents also applied reductionist physical science principles, to develop a biomedical model of disease and dying. This Century was characterized by a biomedicization of life and one where the scientific and medical community directed its efforts towards “conquering death” (Wood & Williamson, 2003). The ascendance of this new model resulted in the patient’s voice becoming less relevant than it had been in previous times, where a patient’s story was considered central to his or her diagnosis and subsequent treatment. Seale (1998) argues that,

the perception of disease as an entity separate from a patient’s biographical situation in anatomo-clinical medicine, though, meant that the patient’s words came to be, at best, an indicator of underlying signs whose true existence could only be established by looking and seeing, at worst an irrelevant distraction (p.95).

An emerging interest in the study of death and dying commenced in the 1950’s, in recognition of the frequent dehumanizing and depersonalised care of the terminally ill within medical institutions. The genesis for this new scholarly interest and research was commenced with the publication of Herman Feifel’s (1959) edited multidisciplinary book, ‘The Meaning of Death’. This was followed by Cicely Saunder’s (1959) pioneering book ‘Care of the Dying’, initiating the development of hospice care. A decade later, Elizabeth Kubler-Ross (1969) published her first book titled, ‘On Death and Dying’. This work brought the subject of death and dying into the public domain and became the first book on this subject to become an international best seller.

Kubler-Ross’ stage theory of the psychology of dying has often been misunderstood in its application by health professionals, and criticised by some scholars, who assert that the theory is too approximate, was more the product of clinical insight rather than objective measurement, and may impede individualisation (Corr, 1993; Kastenbaum, 1998, 2004, Kearl, 1989). These criticisms were primarily based on lack of validating evidence for Kubler-Ross’ model. Seale (1998) defends Kubler-Ross by acknowledging that as she was most critical of technocratic strategies necessary to harvest the appropriate empirical evidence, she was highly unlikely to test her model in this manner. In spite of her critics, one of her defining achievements was that she encouraged health care professionals to assist the dying through compassionate
listening, thus re-focusing them on the human rather than biomedical aspect of dying (DeSpelder & Strickland, 2002; Doka, 2003; McNamara, 2000; Samarel, 1995; Seale, 1998).

Another significant contribution to emerging thanatological concepts was Glaser and Strauss' (1965a) publication of their field study on 'Awareness Concepts', a term used to describe the communication patterns of dying patients. Glaser and Strauss identified four awareness contexts: 'closed awareness', 'suspected awareness', 'mutual pretence', and 'open awareness'. They argued that it was imperative to understand which particular awareness context was being adopted during an interaction, in order to provide effective support for the dying person (Corr, Doka & Kastenbaum, 1999; Samarel 1995; Seale, 1998).

Glaser and Strauss (1965b, 1968) and Benoliel (1987) also studied dying as a temporal process and described dying in a variety of trajectories. These trajectories were described as taking a particular shape through time. The trajectories identified were: 'the lingering trajectory', 'the expected quick trajectory', and 'the unexpected quick trajectory'. This manner of correlating certainty and time to prognosticate the course of illness was significant in improving health care for the terminally ill. Samarel (1995) states that “the way in which patients, families and health care providers perceive dying trajectories may have a profound impact on the ways in which patients live their lives and on the care that they receive” (p.92).


In parallel with this shift in death awareness and management of the terminally ill, a variety of alternative healing practices, including energy healing, emerged during this time. This form of healing is believed to be one of the oldest healing practices known to humans. Therapeutic Touch, Reiki, External Qigong, and Pranic Healing are some of the many methods used by contemporary healers. The underlying tenets regarding the nature of human energy fields share a commonality within Chinese and Ayurvedic medicine, as well as ancient Shamanic traditions (Leskowitz, 2000).
One of these contemporary healing techniques, known as Therapeutic Touch, was instituted in the 1970s by Dolores Krieger, Professor of Nursing, and Dora Kunz, a clairvoyant healer. This technique was initially designed for graduate nurses and the teaching program was accepted into the curriculum of the Master of Nursing Program at New York University. In response to its demonstrated effectiveness and popularity, training in Therapeutic Touch has become available to other health professionals through continuing education programs. It is now used extensively by health professionals including doctors, physiotherapists, chiropractors and occupational therapists (Anderson, 2009; Benor, 2006; Krieger, 1992). This modality is commonly used by health care professionals as part of their therapeutic repertoire when treating the terminally ill. Therapeutic Touch has been identified as one of the most effective means to assist people during the terminal stages of life, because of its capacity to improve relaxation, reduce pain and anxiety and enhance mood (Giasson, & Bouchard, 1998; Samarel, 1992).

The evolution of Western cultural attitudes towards death and the care of the dying have shifted from one where there was an experience of familiarity with death, which Aries (1974) describes as “halfway between passive resignation and mystical trust” (p.103), to our current experience where death and dying are perceived and managed through the prism of technological prowess and where the dying person spends his or her final days often fearful and emotionally isolated and with inadequate symptom management (Wood, 2003). The hospice movement and palliative care have aimed to redress this situation by focusing on helping the terminally ill person to live as fully as possible until their death. Attention is focused on alleviating adverse symptoms and controlling pain, as well as addressing the physical, psychological, spiritual and existential needs of the dying person.

As health care professionals are given the opportunity to attend more deeply to the needs of their dying patients, many of them observe and experience the more subtle psycho-spiritual and energetic phenomena, which are evident as the dissolution in life form occurs. This growing awareness of the profound process of this transition gives rise to the possibility that “one day death will bring each of us into depth” and “if, when the moment is ripe, we choose to go willingly into this new gravity, a new way may surprisingly open up to us” (Kearney, 1996, p.62).
Aim, Objectives and Research Question

The aim of this study was to explore the perceptions of healers, as they assist people who are dying. The objectives were to provide a richer insight into the process of both dying and death, so that:

- Health professionals and carers may provide more appropriate assistance and support for the dying; and
- Individuals within our culture will have the opportunity to experience their own dying process more consciously and with less fear.

The research question was: What are the healers' subtle perceptions of perimortality, reflected in the transitional stages of “nearing death”, “death” and “after death”?

Significance

By explicating this aspect of human experience, the study will add to the body of knowledge and will encourage debate into this aspect of death and dying, thus contributing to the improvement of health care practice during dying and death. It will enhance the understanding of this phenomenon and help influence attitudinal change. The rationale for anticipating the significance of this study is that my review of the literature has revealed that although there has been a considerable amount of both quantitative (Glasson & Bouchard, 1998; Field & Filanosky, 2010; Ross, 1997; Schrader, Nelson & Eidsness, 2009) and qualitative research (Downey, 2009; Olver & Jaklin, 2010; Pevey, Jones & Yarber, 2008; Valentine, 2007; Waldrop & Rinfrette, 2009), conducted into the physical and psycho-social aspects of death and dying, there is a dearth of secular literature and research addressing the changes in the energy field during these significant events.

My optimism regarding this project’s significance is reinforced by Kathleen Dowling Singh (1999), who states that “just as there is a growing insight in our culture into the holistic nature of life and the meaning of healing, some current thinking on the nature of death is beginning to undermine our death phobia” (p.170). DeSpelder and Strickland (2002) state, “considered broadly, death education encompasses formal instruction as well as informal discussion of dying, death and related topics. Informal death education occurs in the context of ‘teachable moments’ that arise out of events in daily life” (p.35). Hence, this research is significant in adding to the existing body of knowledge, encouraging debate, contributing to the improvement of health care practice, and providing rich “teachable moments” about dying and death.
Research Methodology

Within the context of this research project, methodology means the theoretical assumptions underpinning the generation and validation of knowledge, which support a particular choice of methods (Taylor, 2006a). To find a congruent fit between my research question and a particular methodology, it was important to examine differing theoretical assumptions underlying the major qualitative methodologies, to become familiar with their intentions and then revisit my intentions for my research question.

Research inquiry can be broadly categorized as human science or natural (physical) science. This classification of science distinguishes the differing approaches and an operation to explore, generate and validate knowledge, and was attributed to Wilhelm Dilthey (Sharkey, 2001; van Manen, 1999). Dilthey proposed that the appropriate subject matter for the natural or physical sciences (Naturwissenschaften) was to study “objects of nature”, “things” and “the way that objects behave.” The suitable subject matter for human science, or Geisteswissenschaften, “is the world characterized by Geist - mind, thoughts, consciousness, values, feelings, emotions, actions, and purposes” (van Manen, 1990, p.3).

van Manen states that, in broad terms, the differences between natural science and human science is in what each studies: “natural science studies “objects of nature,” “things,” “natural events” and “the way that objects behave.” Human science, in contrast, studies “persons,” or beings who have “consciousness” and who act “purposefully” in and on the world by creating objects of “meaning” that are “expressions” of how human beings exist in the world” (van Manen 1990, p.3).

My research aim was to explicate healers’ subtle perceptions of phenomena which manifests before, during and after a person dies. As the knowledge that it intends to generate will not be absolute, but will by its very nature, be relative, unique and context dependent, a qualitative methodology fits best with this study. Phenomenology aims “to construct an animating, evocative description (text) of human actions, behaviors, intentions, and experiences as we meet them in the lifeworld” (van Manen 1990, p.19). Similarly, “anything that presents itself to consciousness is potentially of interest to phenomenology, whether the object is real or imagined, empirically measured or subjectively felt” (p.9). As my research question resonates both with phenomenological interests and my research aim, I have chosen this methodology for my study.
Background

"We cannot arbitrarily invent projects for ourselves: they have to be written in our past as requirements"

Simone de Beauvoir

(Cited in Miller, 2005, p.1)

When I reflect on my reasons for choosing this topic I realize that there is no single defining moment that has brought me to this point. However, the process and politics of dying have been of growing interest and concern for me, both professionally and personally, throughout my adult life. I started my career as a resident physiotherapist in one of the largest public hospitals in Sydney and consolidated this experience in equally large and busy hospitals in the Northern Hemisphere. My experience of dying prior to my professional training was virtually nonexistent, with the exception of the often sudden and traumatic loss of much loved pets. In contrast to these deeply felt and connecting experiences of my childhood and young adulthood with pets, my professional observation of dying and death in my workplaces, was often both perfunctory and detached.

In some instances, the people who died in these large teaching institutions were seen as potentially suitable organ transplant donors. Their deaths were characterized by a strict set of protocols, which to my mind ‘commodified’ these patients, thus diminishing the personal significance of their deaths. In other instances, death was sometimes a precipitous and harrowing event, as a sequel to a person’s cardiopulmonary arrest. The sudden arrival of the ‘crash team’ heralded these unravelling dramas, which were terminated by the medical staff’s valiant, but unsuccessful intervention. These particular deaths left a pall over the ward. The participating staff were disappointed and perplexed, as they perceived these deaths were a testament to their failure as clinicians. Curtains were quickly drawn following the event to shield non-medical onlookers from a view of a corpse, which was then discreetly removed to the morgue. I perceived that the awkward management of such events invariably left witnessing staff and patients feeling traumatised.

My unsatisfactory experience as a health practitioner in large institutions was somewhat tempered during my employment in a domiciliary care setting in Adelaide. The mandate of this organization was to assist people to live and die in the environment of their choice, which was usually their home. As a member of a multi-disciplinary team, I often collaborated with palliative care staff in providing the necessary resources to assist a terminally ill client and their loved ones through this final transition. In stark contrast to the depersonalized experience of hospital deaths, I found community based work with the dying, both poignant and challenging, as it
provided no shelter from the intensity of emotion felt by all those who participated in these events. Similarly, because of the authenticity of these experiences, I gained a greater degree of professional and personal satisfaction than I had previously found.

It was my acquaintance with loss and grief in my professional work, as well as other more personal experience, which rekindled my interest in my spirituality. I commenced this exploration by participating in a Transcendental Meditation course, followed later by undertaking a study in the Christian oriented, ‘A Course in Miracles’ (1985), by The Foundation for Inner Peace. I was then drawn to the philosophies and practices of Buddhist, Hindu and Advaita Vedanta spiritual traditions. The works of Paramahansa Yogananda (1972, 1975), Ramana Maharshi (1994, 1996), Sri Nisargadatta Maharaj (1984), Krishnamurti (1975), as well as battered copies of the Bhagavad-Gita (1965) and The Ten Principal Upanishads (1937) that my brother gave me, were particularly influential at the beginning of this explorative journey. The writings of American Buddhists including Stephen Levine (1986, 1987, 1991), Jack Kornfield and Joseph Goldstein (1987), Pema Chodron (1991, 1997, 2001) and Tsultrim Allione (1986) also enriched my understanding of this tradition.

My interest in Buddhism continued to evolve with reading the works of Zen Buddhist masters, such as Thich Nhat Hanh (1990, 1993) and Shunryu Suzuki (1988), followed by Tibetan Buddhist masters, such as Sogyal Rinpoche (1992), Chogyam Trungpa (1991), Kalu Rinpoche (1997) and Patrul Rinpoche (1998). My participation in retreats conducted by Advaita Master Gangaji, meditation workshops with Balinese psychiatrist and shaman Luh Ketut Suryani, and Vipassana retreats also deepened my experiential understanding of the traditions. The central issue, which defines and informs the spiritual practices within these traditions, is the in-depth exploration of the nature of dying and death. Consequently, my exploration deepened my own understanding of the nature of this human experience.

In 1986, I undertook professional training in the Feldenkrais Method. This mode of teaching human movement, developed by Russian-Israeli physicist, Moshe Feldenkrais (1979, 1981, 1984, 1985) holds as one of its core tenets, the multidimensional nature of human beings, who have physical, emotional, intellectual and spiritual characteristics that are interactive and inseparable. It was the very focused and gentle nature of this work, which increased the development of sensitivity of my hands, which, in tandem with the commencement of a practice of Qigong, led to my ability to feel the human energy field, while working with my clients. It is the combination of these experiences, as well as the development of my skills as an energy healer, that have had a profound effect on the formulation of my research question.
Since the commencement of this study, I have participated in the terminal illness and deaths of five close relatives (including my parents and sister), as well as two close friends. Kathleen Dowling Singh (1999) states “death is a mirror in which all of life is reflected. When we look into this ‘mirror’ of death and dying, we get a clearer image of ourselves, a clearer image of the inherent possibilities of human consciousness” (p.5). I have “[looked] into this mirror,” while witnessing and participating in these deeply personal transitions. Each has informed my understanding of the multifaceted experience of dying and death. However, the transitions of my mother and sister, two of the most significant women in my life, have particularly deepened my understanding of this phenomenon and affirmed my belief in the potential significance of this study.

For the raindrop, joy is in entering the river-
Unbearable pain becomes its own cure
Ghalib
(Mitchell, 1989, p.102)

Following news that my 89 year old mother was gravely ill, I hurriedly made travel arrangements and took leave from work, to be with her. When I arrived at her hospital bedside, many hours later, she was propped up in a hospital bed looking very ill. She seemed palpably relieved to see her five beloved children and their children assembling around her bed. Following a thorough examination by her cardiologist, Mum was moved to a two-bedroom ward, which had a vacant bed. With the encouragement of the nursing staff, I moved in next to her.

Prior to her death, Mum and I had a very close relationship, spoke daily on the phone and had often discussed dying, death and posthumous survival. These discussions focused on relatives, who had already died and Mum’s forthcoming departure, whenever that was going to be. As we settled into our new abode, she laughingly told me that she had had a ‘heart attack’, but it was “nothing fatal.” As I had just consulted with her cardiologist, who felt that she had multiple fatal pathologies, including kidney failure, I gently suggested to her that this may indeed be her time. Mum paused briefly, following my forthright response and then said, “If it is, then that’s alright, too.”

Mum and I spent the next three days and nights in each other’s company; in constant, exhausting, vigilance on my behalf, as Mum became more restless and confused, but also with much mutual tenderness and gratitude. During the final 24 hours of her life, Mum became comatose. My siblings joined me on her last day, surrounding her with love. As my mother was a deeply spiritual person, who translated her sense of the numinous, through the lens of her Catholic faith, we sat around her bed and commenced saying the rosary for her. My siblings and I are all middle aged and most
of us had moved away from this foundational spiritual tradition. Before we started the rosary, and with some moments of muffled amusement, we collectively recalled and pieced together the structure of this ancient meditation. We chose the glorious mysteries (the most celebratory of the rosary’s meditational themes), as a reflective farewell for our much loved and respected mother. In the middle of the ritual, I felt a shift in energy in the room and spontaneously started to cry. I opened my eyes and looked over towards my sister-in-law, sitting opposite, and noticed that tears had started to course down her cheeks. Moving to Mum’s side to observe her more closely, I found that she was no longer breathing. After informing those present of her passing, there was a collective sense of relief and celebration, of our beloved matriarch’s magnificent life and death.

Ruth Cracknell (2001), in her memoir of her husband’s death, eloquently captures my experience, when she describes her own, during the moments following her husband’s death:

I remember sinking back into my chair and I am smiling and that, mixed with everything else, there is such happiness, but no, happiness is not my state – such a state, then, as I have not before experienced. The four of us are alone; he has no more struggling to do; it is wonderful for him. I am smiling for, and at him – not at the figure in the bed, necessarily, but at him, there, everywhere within this blessed space. Blessed, because undisputedly he is sharing this moment with us. No question. No question. It is the most precious moment I have known; it is the most surprising moment because entirely unexpected. And if this moment I can keep, then nothing more do I need, now or ever (p.245).

My experience of my sister’s dying was very dissimilar. So,

“With my burned hand, I write about the nature of fire”
(Bachmann, 1990, p.58).

When my sister, Pip, was diagnosed with an aggressive breast cancer seven years ago, I became acquainted with a visceral sense of disbelief, shock and foreboding that such diagnoses bring. Coincidently, I was searching for the ‘right question’ for my PhD and it was in the process of trying to integrate the intellectual, emotional and spiritual implications of Pip’s news, that my research question was generated. Pip’s illness, dying and death had a strong congruence with the generation and exploration of this study. Ironically, the nature and content of my study was never openly discussed by Pip or her immediate family, throughout her long illness and opportunities for us to explore issues around death and dying were studiously avoided by her.
During the early part of her seven year illness, Pip became much more interested in her spiritual life. This was a courageous departure from her family’s default position on matters spiritual, as her husband and children were committed to secular materialism as a means of understanding the world and their place in it. In spite of what seemed like a barren ground for my sister’s nascent spiritual explorations, she made a pilgrimage to NZ to visit the Brazilian healer, Joao de Deus, where she requested of him, not that her body, but that her heart, would be healed. Upon her return home, she continued a daily practice of meditation and prayer.

Throughout the span of her illness, Pip had a number of breathtaking crises, including metastases in her brain and subsequently, bones, bowel and liver. In spite of these frightening, painful and exhausting episodes, Pip remained inspiring upbeatt. She travelled to Asia and Europe 3-4 times during this period, in between her ongoing three-weekly chemo sessions, and voraciously devoured every new experience in case it was her last. During the last four months of her life, she was extremely ill and was hospitalized with a metastatic tumour obstructing her gastrointestinal tract, and multiple lesions in her bowel, liver and bones. Her decline was miserable. She suffered from unrelenting nausea and vomiting and towards the end, and in spite of her health taking a rapid, downward spiralling trajectory, her oncologist remained committed to the narrative that this was a minor glitch, she would soon feel better, and when she could tolerate it, he would try further chemotherapy. She was encouraged to continue to try to eat and exercise, even though both these strategies added to her physical suffering and exhaustion. Any attempt to modify or challenge the veracity of this management plan was dismissed.

During a window of opportunity when her consulting oncologist took brief leave, she was finally told by a locum oncologist, that she would probably die within days. My sister stated that she was relieved and grateful that this doctor respected her enough to tell her the truth. However, due to the ‘eleventh hour’ nature of this disclosure, she and her immediate family did not have sufficient time to prepare for this dreaded event. On the eve of her death, Pip’s room lacked the tranquil ambience that ideally, would be commensurate with such a profound event. Instead, the room and her death-bed were suffused with a disruptive, spiky energy, which was a manifestation of her family’s fear and shock. In their anguish, her family exhibited anger and hostility towards all ‘outsiders’, be they family members, who travelled long distances to farewell their beloved sister, or nursing staff, popping into her room as they finished their shifts, to express love and say their goodbyes. This defensive behaviour added to the sense of agitation surrounding Pip’s passing.
On reflection, I believe that Pip’s transition represented what has been described in the literature as a typical 19th Century experience of dying and death. However, it is one that too frequently occurs in the 21st Century. In these past scenarios, according to Aries (1974, 2008), the doctor dissembled about the terminal stage of a patient’s illness and family members colluded in this patronising deceit, for fear that the truth may alarm or depress their loved one. Because of her medical specialist’s unrelenting decision to keep the truth of her condition from my sister and her family’s ignorance and fear surrounding her transition and its prelude, the management of the terminal stages of her life, from my vantage point, was less than optimal. Towards the end, her symptoms were poorly managed and consequently, her physical and emotional suffering was unnecessarily prolonged. Her dying was an intensely sorrowful, anguished experience for Pip and her immediate family. It was also an occasion where her cherished friends and siblings felt alienated and excluded. This was an unworthy transition for such an intelligent, loving, generous and perceptive woman.

Tolstoy’s (1981) 19th Century novel, *The Death of Ivan Illich*, depicts the metaphysical angst that was an unnecessary part of his hero’s death-bed experience. In his novel, Tolstoy commented on the consequences of the deceptive behaviours of his hero’s medical practitioner and loved ones in the following manner: “This lie that was being told on the eve of his death, this lie that degraded the awesome, solemn act of his dying” (Tolstoy, 1981, p.103). Tolstoy’s words reflected my experience of Pip’s dying and death.

The events and emotions that characterized my sister’s death are common. Mary Delahunty (2010) provided further evidence of this, when she wrote in her memoir *Public Life Private Grief*, “When I asked the blunt question, ‘Is he dying?’ one clearly disconcerted nurse replied, ‘Well, he is demising.’ In response to her experience of her husband’s death, Delahunty further reflects, “A society that demands ‘everything be done’ to avoid death imposes an impossible burden on the dying and those who tend them. And it magnifies the grief, loss and bewilderment of those left behind (p.175). This insight aptly describes my sister’s predicament during her final days. It is because the “formidable and solemn act” of death can still be degraded in the 21st Century that explicating the phenomena of dying and death is important and significant.

**Explanation of Key Terms**

Some key terms are defined within the text. The following terms, which are central to understanding this thesis, are documented here in alphabetical order:
Apparition (Ghost) - surviving aspect of a person – sometimes perceived by those still living (Benor, 2001).

Aura – also known as ‘the energy field’, is a subtle energy sheath or kosha, which surrounds and interpenetrates the physical body and interacts with the external environment. The four auric layers emanating from the physical body are known as the etheric, emotional (or astral), mental and the causal body or ‘body of Bliss’. Each sheath has a specific function and is of a different energetic frequency. The constantly changing colours of an aura reflect the states of physical, emotional, mental and spiritual relationships of a person and are visible to some people (Bruyere, 1994; Lambillion, 2001; Maheshwarananda, 2002).

Chakra - Sanskrit word meaning wheel, refers to the many energetic vortices that penetrate the aura and the physical body. There are seven major chakras, as well as 21 minor and numerous lesser chakras within the human energy system. Chakras are associated with the energizing and balancing of our psychic, spiritual, physical and emotional functioning (Davies, 2000).

Clairvoyance - literally meaning “clear seeing” is psychic perception that is perceived as mental imagery (Benor 2004).

Clairaudience - hearing subtle perceptions beyond the limitations of the physical senses (Bragdon, 2002).

Clairsentience – a generic term denoting the ability to know about a physical object without reference to the five senses of sight, sound, taste, smell and touch. This ability includes clairaudience, clairvoyance and telesomatic reactions (Benor, 2004).

Clinical/Biological Death - defined as irreversible cessation of total brain functioning with a flat EEG and the cessation of brain stem reflexes (Swanson, 2005).

Consciousness – Western neuroscience asserts that consciousness is an epiphenomenon of matter. Consequently, as it is a product of the physiological processes of the brain, it is critically dependent on the body for its existence. Within the Eastern philosophical traditions, namely, Advaita Vedanta, Samkhya Yoga and Buddhism, a distinction is made between mind and consciousness. Mind is considered a subtle form of matter, and consciousness is regarded to be completely non corporal. The mind is the interfacing instrumentality; a conduit between the external world at one end and consciousness at the other end. This thesis assumes that the brain and nervous system do not produce consciousness, but are instruments of perception,
whereby consciousness becomes available to humans. Consciousness is unified and nonlocal and transcends time and space (Rao, 2002).

Distant Healing - healing that takes place through the agency of one or more healers not in the physical presence of the recipient (Bragdon, 2002).

Eschatology - the study of the end of things, whether the end of an individual life, the end of the age, or the end of the present world. Within the study of mysticism, the word refers metaphorically to the study of the end of ordinary reality and reunion with the Divine (Retrieved February 24th 2011, http://en.wikipedia.org/wiki/Eschatology).

Energy Healers - are practitioners, who aim to stimulate and support the innate healing mechanism within an individual by manipulating his or her energy field, with the intention of bringing it into balance.

Entity - a Spirit, which has formerly had a body, but now exists in a spiritual realm and is invisible to most human beings (Bragdon, 2002).

Healing - a systematic, purposeful intervention by one or more persons, aiming to help another living being (person, animal, plant or other living system), by means of focused intention, hand contact, or passes to improve their condition (Benor, 2001).

Holism – an approach to healing based on the understanding that a person is not made of isolated parts rather, but that all parts are interconnected. This includes the person’s body, mind, emotions and spirit, as well as the family, social and work environments. The goal of holistic healing is to assist the person to return to wholeness, so that all aspects are healed and in harmony (Benor, 2001).

Human Energy Field - an electromagnetic field, which surrounds, interpenetrates and sustains the human body (Dowling Singh, 1999).

Hermeneutics - is the theory and practice of interpretation (van Manen, 1997a).

Hermeneutic Phenomenology - aims to reflect both aspects of its methodology by being both descriptive and interpretative. To allay any contradictions, there is an acknowledgement that “(phenomenological) ‘facts’ of lived experience are always already meaningfully (hermeneutically) experienced” (van Manen 1997a, p.180).

Nonlocality – the state of being unconfined and unrestricted to a particular place. Nonlocal events are unconstrained by light speed and have three defining
characteristics; they are unmediated (by any known form of physical signals), unmitigated (the degree of correlation does not diminish with increasing spatial separation), and immediate (Dossey, 2003, p.A11).

Ontology – is concerned with the study of being or existence.

Life world – the world as it is lived, rather than as an abstracted or theorised construct.

Parapsychology - the scientific study of anomalous interactions between organisms and their environment, and between organisms with other organisms (Krippner, 2003).

Perimortality – a term referring to the phases around death, including the transition from dying, death, immediately after death and any time after death (Taylor, 2005).

Perennial Philosophy - a term coined by Aldous Huxley, to describe the unifying threads between Eastern and Western spiritual thought (Targ & Katra, 1999).

Phenomenology - the study of how phenomena show themselves in lived experience. This methodology sets itself apart from other qualitative methodologies, in that it attempts to make a distinction between appearance and essence (van Manen, 1997).

Psychic Phenomena - events related to acquiring knowledge without cues from the external senses. Psi phenomena include mental telepathy, healing at a distance, channelling, clairsentience, clairvoyance, clairaudience and psychokinesis (Bragdon, 2002).

psi – a name derived from the letter of the Greek alphabet, used as a neutral term to denote all ESP and psychokinetic phenomena (Radin, 2006).

Psychokinesis (PK) – direct mental interaction with animate or inanimate matter without the mediation of any known physical energy (Tart, 1997a).

Soul - that part of a person, which survives death and is the integration of aspects of the person’s most recent personality with their eternal self (Benor, 2004).

Spirit - that part of the person, which survives death and retains aspects of the person’s personality. It may be perceived by the living (Benor, 2004).

Spiritual - any process, which places the self, no matter how briefly, in a larger power and sufficiency (James, 1982).
Subtle Domains - potential cognitive domains of the universe, beyond the domain of human physical cognition, or present physical instrumentation. These domains can be perceived by some people, but are unavailable to most of the population. They are categorised as the etheric, astral or emotional, mind, spirit and divine domains (Tiller, 1997).

Subtle Energies – energies that exit in the universe, other than those known to contemporary science. These energies are beyond the physical band of consciousness (Tiller, 1997).

Subtle Perception - the ability to perceive the variety of phenomena pertaining to the subtle energy field or domains.

Spiritual Healing - differs from remote viewing and psychic or energy healing, in that it entails a belief in a unifying force in the universe that transcends the healers (or any other individual’s separate identity (Targ & Katra, 1999).

Spiritualism – a religious movement that is focused on communication between human beings and discarnate spirits.

Shamanism – the oldest healing tradition, dating back at least 50,000 year. It is an integral part of every Indigenous culture.

Telesomatic Reaction - a phenomenon, where the sensations experienced by a subject are mirrored in the body of a psychic person (Bragdon, 2004).

Telepathy - information exchanged between two or more minds without the use of the ordinary senses (Radin, 2006).

Transition (of Consciousness) - occurs when the consciousness principal departs the physical body. It is purported to take up to four days after clinical death, as aspects of energy bodies disengage from physical body (Foos-Graber, 1989).

Explanation of Style

Terms used to refer to participants and myself as the researcher: Phenomenology is by its nature, collaborative research and van Manen (1990, p.32) states that it “requires of the researcher that he or she stands in the fullness of life, in the midst of the world of living relations and shared situations.” In acknowledgement of these pre-requisites, I
have used the first person, when referring to myself in this paper. “Subjects’ or ‘individuals’ are common research terms to refer to persons involved in a study. Likewise, the person doing the research refers to him or herself as ‘the researcher’, or the ‘author’. In arguing for reference terms more compatible with phenomenology, van Manen recollects that W.H Auden made a distinction between the terms ‘individual’ and ‘person’, stating that ‘individual’ is primarily a biological term, used to classify a member of a species, whereas the term ‘person’ is used to denote “the uniqueness of each human being” (van Manen 1990). Auden states, “As persons, we are incomparable, unclassifiable, uncountable, and irreplaceable” (in van Manen, 1997, p.6). To honour the spirit of phenomenological research, people involved in this study will be referred to as ‘participants’, their patients will be referred to as ‘person/s’ and I will refer to myself in the first person as ‘I’.

Single inverted commas have been used to denote colloquialisms, and to highlight expressions or words.

Double inverted commas are used to denote spoken words, short quotations, as well as words or expressions used by philosophers or scholars. Longer quotations are indented.

Italics are used throughout the thesis to represent conversations between the participant and the researcher during the interview.

Pauses expressed by the participant in the interview transcript are denoted thus ‘…’

The referencing format is from the American Psychological Association (6th edition).

Theme Fonts - Body of the thesis: Arial pt. 11; Indented quotations Arial, pt. 11, Poetic quotations: Comic sans pt.9; Reflective Journal excerpts: Bookman Old Style, pt.10; Participants’ dialogue: Arial Italics, pt. 11.

**Overview of the Thesis Chapters**

Chapter One describes an introduction, background and the influences which contributed to the generation of this research project. It includes a description of the aim, objectives, research question and significance of the study. The research methodology is discussed in relation to choosing to use van Manen’s phenomenology. The writing style is explained and key words in the thesis are defined. This chapter concludes with an overview of thesis chapters and a summary.
Chapter Two is the first of three chapters that reviews the literature relevant to the topic: *Healer’s Perceptions of the Perimortal Process*. Following the introduction, the search process is described, identifying the databases and keywords used. The selected categories of literature for critical review are identified. Each category is discussed in light of its relevance to understanding the thesis topic. The literature review, which is covered in three chapters, is structured on philosopher, Ken Wilber’s (1990) claim that there are three realms of being and three methods of accessing these realms. The first of these, the physical, sensory realm is covered in Chapter Two. This chapter highlights the dominant thinking and arguments reflected in the literature related to the physical, psychological and sociological aspects of dying and death and aims to explore dying as it is experienced by the majority of community, in the various roles of the terminally ill person, caregiver or witness. It also presents the arguments concerning the biomedical determination and definition of death and its consequences for the dying person and his or her caregivers.

Chapter Three reviews the literature related to the transcendental and spiritual realm. An account of the major spiritual traditions, central beliefs about death, the various aspects of dying and death are discussed. Near death experiences are examined, in light of their relevance as phenomena, to provide valuable insights into the dying process, and the questions this phenomenon raises regarding the nature and location of consciousness. The literature concerning end of life experiences, possible mechanisms for these and the effects that they have on the dying person and other witnesses experiencing these phenomena, are presented. In this chapter and Chapter Four, less well known phenomena are described.

Chapter Four concludes the review of the literature related to the transcendental or spiritual realm. It discusses the theories and crosscultural understanding related to consciousness and post-mortem survival. It describes the constituents of the human energy field, and investigates the literature underpinning the contemporary understanding of subtle energies, and their theoretical relationship to consciousness and healing. The chapter concludes with an examination of the literature associated with different types of healing research and some of the difficulties encountered by researchers in this field.

Chapter Five defines and examines the nature of phenomenological methodology and describes the different phenomenological approaches. It presents the most influential phenomenologists’ philosophical precepts and their contribution to the methodology. In particular, van Manen’s understanding of phenomenology is explored, as it informs the theoretical framework for this study.
Chapter Six describes the research method. It introduces the participants and describes the research processes and procedures, which underpin the study, including ethical clearance, participant recruitment, data collection and analysis. This chapter also discusses the processes employed to demonstrate the trustworthiness of the study.

Chapter Seven provides an account of the analysis and interpretation of the individual participants' interview transcriptions. This chapter describes each healer's perceptions of the perimortal process and identifies the subthemes identified in their interviews. Each participant is introduced and their stories summarized by combining my voice with theirs. These synopses aim to contextualize the healers’ experiences and illuminate the themes (designated as subthemes in this chapter), which were embedded in their stories.

Chapter Eight refines this phenomenological practice further, by retrieving and explicating the essential themes perceived by the participants that best illuminate the process of perimortality. Poetry, particularly the Japanese Haiku form, is used to reflect the embedded meanings in many accounts provided by the participants.

Chapter Nine concludes the thesis with an overview of the preceding chapters and a summary of the aspects of the phenomena explicated during the course of the study. The implications for health care professionals, carers and the general community are discussed. The study's limitations and the possibilities for further research are explored. The chapter closes with a reflection of the research process and a review of the research objectives.

Summary

This chapter provided an overview of the evolution of Western attitudes to dying and death to contextualize how these attitudes have affected the care of the terminally ill. It described the personal and professional influences that have contributed to the generation of this research project. The aim, objectives, research question and significance of this study were articulated and the rationale behind my choice of research methodology was argued. The writing style was explained and key words in the thesis were defined to facilitate ease of reading. Finally, a summary of the main inclusions in each chapter of the thesis was given to provide an easy reference and to offer an overview of the structure of the thesis.
CHAPTER TWO
LITERATURE REVIEW: SECULAR PERSPECTIVES

The scientist, unable to see the light as anything other than a purely physical phenomenon, is blind to the light.
Masanobu Fukuoka
(Buhner, 2004, p.49)

According to the philosopher Ken Wilber (1990), there are three realms of being and three methods of accessing these realms. The physical, sensory realm is accessed by the *eye of the flesh*; the mental realm of ideas, thoughts and images is accessed through the *eye of the mind*, and the transcendental or spiritual realm is perceived through the *eye of the spirit*. To access the complete picture of reality one must see through all three eyes or risk making ‘category errors’ (Braud, 1997). In order to contextualize the three realms that humans experience, I have included a discussion of the literature pertaining to each realm, as these relate to dying, death and after death. These inclusions are the physical, psychological and sociological aspects of dying and death, which are related to the physical and mental realms (Chapter Two: Secular Perspectives), and the spiritual and transpersonal aspects of perimortality, which pertain to the transcendental/spiritual realm (Chapter Three: Dying as Transformation and Chapter Four: Consciousness and Subtle Energies).

I have deviated from the tradition in some sections of these literature review chapters, by describing the phenomena in more detail than usual. My rationale for being descriptive is that this will facilitate a clearer understanding of the less well known phenomena in this project and contextualize the participants’ experiences, described in later chapters.

An extensive search was conducted for the content areas of the three literature review chapters. Peer reviewed literature was retrieved by searching online databases including CINAHL, PsychLIT, Google Scholar, Proquest. The SCU library search engine OneSearch was used, which provided access to print items in the library and scholarly journal articles from databases including ProQuest, EBSCO, Science Direct, Wiley Online Library, Expanded Academic, JSTOR, InfoRMIT, and Emerald.

Foundational scholarly literature of a parapsychical nature, or relating to consciousness studies was retrieved from organisations, such as The International Society for Subtle
Energies and Energy Medicine (ISSSEEM), The Institute for Noetic Sciences (IONS), The Society for Psychical Research (SPR) and the Society for Scientific Exploration (SSE), by personal subscription, thus gaining access to the online libraries or alternatively, by seeking assistance from the organisations’ librarians to retrieve archived articles. Similarly, Southern Cross University librarians provided an invaluable service by accessing foundational texts, related to each area of the literature review as well as conference proceedings and peer reviewed articles that were not available online or on library shelves.

Unpublished theses and dissertations in the areas of healing, phenomenology and near-death phenomena were searched for and retrieved through databases such as TROVE, ProQuest dissertations and theses, British library thesis collection and NDLTD digital library of theses and dissertations, or alternatively via the Southern Cross University document supply resource. Many of the foundational texts pertaining to healing, subtle energies, consciousness and spirituality were sourced from my private collection.

Prior to undertaking a general search for literature using the above mentioned electronic and manual resources, I familiarized myself with the major scholars of a particular genre by reading well respected foundational thanatology texts, sourced from either the University library or my private collection. I then became familiar with scholars cited within these texts, who held varying philosophical positions or arguments regarding the particular theme that I was exploring. Similarly, these cited authors either enriched my understanding of the argument or took it in a different direction, thus giving me further clues of how to widen my search. Although my preference was to search for literature by author-name rather than conducting a general search, both types of literature search were undertaken in all genres of my literature review.

When conducting a general search, terms varied according to the particular aspect of the literature being reviewed. In Chapter Two, keywords included were, ‘dying’, ‘death’, ‘definition of death’, ‘modern death’, ‘brain death’, ‘death criteria’. These terms elicited an enormous number of hits (for instance, 150,752 responses for brain death), of which a relatively small number were useful. Following a quick perusal of the abstracts of potentially interesting articles, full PDF copies of articles were acquired, or alternatively these references were discarded. Searches were refined by utilizing search engine filters such as ‘authors’, ‘databases’, ‘title’ and ‘popularity’ filters. Serendipitously, other useful articles were often suggested and retrieved in the process of refining these searches.

This chapter discusses the secular aspects of death and dying. The physical aspects of dying and the biomedical determination of biological death are included in the chapter, with the aim of examining all aspects of this most important transition of human experience. Furthermore, this chapter aims to explore dying, as it is experienced by most of the community, in the various roles of the terminally ill person, caregiver or witness. The biomedical understanding of death, as perceived through the dominant lens of its physical manifestations, influences all other aspects of death and dying and consequently the quality of care given to the dying person.

The inclusion of this aspect of thanatology literature in the chapter contextualizes the relationship between the physical and energetic changes as the consciousness principle (as it is understood by healers and researchers, discussed in Chapters Three and Four), prepares to depart and ultimately detaches from the physical body. Therefore, these physical changes are described and the biomedical definition and determination of biological death are identified in this chapter, as precursors to discussions in Chapters Three and Four. The sociological, psychological and transpersonal aspects of dying are also included to give credence to the notion that the human person is multifaceted and comprised of physical, intellectual, psychological, emotional and spiritual elements, which are equally significant when facing the end of one’s biological life or when caring for the dying person.
Physical Dying and Biomedical Determination of Biological Death

Bruno, Ledoux & Laureys (2009) echo Wittgenstein’s (1961) claim that “death is not part of life but its limit” (p.51). This statement aptly summarises the Western secular perspective that as consciousness consists of neural properties residing in the brain, all consciousness ceases at death. Therefore, death is commensurate with nonexistence. This secular position has profound implications for the manner in which terminally ill people are treated by their relatives and the biomedical professions.

Prior to the middle of the 20th Century, death was relatively straightforward to determine by the layperson and medical practitioner outside the auspices of a medical institution, as described in the following passages by a physician and philosopher respectively:

Nuland (1994) argues that

The appearance of a newly lifeless face cannot be mistaken for unconsciousness. Within a minute after the heart stops beating, the face begins to take on the grey white pallor of death; in an uncanny way, the features very soon appear corpse like, even to those who have never seen a dead body (p.122).

Similarly, Simone de Beauvoir reflects in her memoir, A very easy death, the unequivocal recognition of her dead mother.

We went up the stairs. It was so expected and so unimaginable, that dead body lying on the bed in Maman’s place. Her hand was cold; so was her forehead. It was still Maman, and it was her absence forever (de Beauvoir, 1969, p.76).

However, the Western biomedical determination of death has evolved into a much more complex, less certain endeavour and for medical practitioners and the general public alike; it has become a contentious and perplexing venture. This evolution has occurred over centuries. However, the most radical change has taken place since the middle of the 20th Century. Although the changes in cultural, religious, philosophical and ethical views of the community have influenced this evolution, the greatest impacts on the determination and definition of biological death have been the relatively recent technological and biomedical developments within Western culture (Knudsen, 2009; Veatch, 2009).

For most of the community, death is conceptualised as an incident occurring in a specific moment in time. Cassel (1974) succinctly reflects this view by stating that “for
all its mysteries and ultimate questions, death is a concrete event, mostly smelly and mean, preceded and followed by pain” (p.162). According to Shewmon (2004), until recently, there has been no need to nuance the notion of death. Therefore, English speaking, Western society has a “univocal” understanding of the temporal aspect of death as an event, rather than a process, determined by our linguistic representation of this phenomenon. This single word to denote death is also applied to many other languages. Shewmon (2004) claims that, “linguistically, death can be understood only as an event” and that “our death vocabulary should expand to reflect multiple events along the process from sickness to decomposition” (p.277). He argues that this linguistic constraint is responsible for logical inconsistencies within the death definition debate, because “people use the same word to express different concepts, not quite realizing, precisely because of the single word, that the concepts are different” (p.279). Furthermore, he reminds us that distinctions in language derive from distinctions in reality and vice versa.

Before the influence of biomedicine, there was an ancient and enduring link between the cessation of breath with death and its connection with the spirit or soul. Shewmon (2004) gives the examples in the Christian tradition in the scriptures (Mark 15:37; Luke 23:46; John 19:30), which describe Jesus’ final exhalation, when he “cried with a loud voice, and gave up the ghost” (Mark: 15:37). The Jewish tradition has a Yiddish expression, oyshoykhn di neshome, meaning to die. The literal meaning of oyshoykhn is to “breathe out one’s final breath” and neshome means ‘soul’. The modern English word “expires”, meaning to die, is an etymological derivation of the Latin exspirare, to breathe out. The words animate or animation are Latin derivatives of ‘soul’ or ‘spirit’. Correspondingly, the Ancient Greek noun, pneuma means breathe, spirit and mind as a noun, and as a verb, it means to blow, to breathe out (p.282). Therefore, it is consistent that death was traditionally determined by such signs as cessation of respiration and physical movement. In time, determination of death was refined to the observation of the physical signs of livor, rigor, pallor and algor mortis; more commonly known as discoloration, stiffness, paleness and coldness of the body following death. Death was ultimately corroborated when these physical manifestations proceeded to putrefaction (Bruno, Ledoux & Laureys, 2009; Kellehear, 2008; Knudsen, 2009; Truog, 2007).

Cardiorespiratory criteria, determined by the absence of pulse and breathing, were the dominant means of determining death from the 18th Century to the early 20th Century. The absence of heart beat or breathing as a means of determining death was
challenged in the 1960’s, although these cardinal signs still provide the means for determining death in a non-hospital setting (Kellehear, 2008).

Although the concept of brain death had its origins in the 12th Century when Rabbi and physician Moses Maimonides claimed that the jerking movements that were observed following decapitation, lacked central control and were not indicative of life, brain death gained favour in 1959, with the identification of a deep and ostensibly irreversible coma (coma depasse) by French neurologists, Mollaret and Goulon (Hughes, 2010, Kellehear, 2008, Laureys, 2005).

Contemporary Definitions of Death

The impulse to shift from a cardiorespiratory centred definition of death to a neurocentric one was due to technological advances in mechanical ventilation, improvements in CPR techniques and the institution of intensive care units during this period. These biomedical advances rendered cardiovascular criterion for death less plausible, as the cessation of respiration and heart function could be restored and maintained following arrest. This shift in definition also coalesced with the beginnings of organ transplant technology. Prior to these technological developments, deep coma was not experienced, as people died instantly from apnoea (Bruno, Ledoux & Laureys, 2009; Kellehear, 2008; Knudsen, 2009).

During the late 1960’s the Ad Hoc Committee of the Harvard Medical School was established to develop criteria for death, which would be congruent with the technological advances and the newly developing interest in human organ transplants. The committee recommended using brain death as a definitive method of determining death (Bruno, Ledoux & Laureys, 2009; Hughes, 2010; Knudsen, 2009; Veatch, 2009). Brain death refers to human death, which is determined by neurological criteria. There are three formulas for brain death: whole brain, brainstem and neocortical death. Although “differing in their anatomical interpretations,” both whole brain and brainstem death are defined as “the irreversible cessation of the organism as whole.” Conversely, neocortical death is founded on a different (and earlier) concept, which defines death as “the irreversible loss of capacity for consciousness and social interaction.” This definition makes it possible for persons in a permanent vegetative state, as well as anencephalic infants, to be defined as dead (Laureys, 2005, p.900).

There has been some controversy surrounding the establishment of brain death as the definitive means of defining death, with researchers (Evans, 2007; Kerridge, Saul,
Lowe, McPhee & Williams, 2002; Shewmon 2001, Truog 2007) asserting that transplant lobbies exerted considerable pressure on the Harvard committee’s adoption of ‘brain death’ as the default definition of death. An alternative view of the underlying motivations for its adoption is taken by other authors (Belkin, 2003; Machado et.al., 2007; Truog, 2007; Zamperetti, Bellomo, Defanti, & Latronico, 2004), who contend that the primary motivation underlying the implementation of this definition was the consideration of long term management of patients, who met the brain dead criteria. A definition of death was essential to fulfil the criteria for the withdrawal of medical support, because prior to 1968, withdrawal of ventilation from a patient was unlawful (Kellehear, 2008; Knudsen, 2009).

Since that time there has been a gradual, but widespread acceptance throughout the world, of the definition of brain death as a means of determining death. However, various countries have differing confirmation requirements. The Canadian requirements match those of the USA, although confirmatory requirements vary in some American states. Australia and New Zealand have accepted whole brain criteria (Wijdicks, 2002). Following Finland’s lead, all European Union (EU) countries have accepted the brain death concept since 1971. However, although the required clinical signs for brain death are uniform within the EU, the technical confirmatory tests are required in less than half of the member countries. Confirmatory tests are not mandatory requirements in many third world countries, due to the absence of technical resources. In Asia, neurological criteria have not been uniformly accepted and there are widespread differences in regulation. India has used the UK criteria for brain death and Japan has accepted the concept of brain death, but has ambivalent community support for its implementation. China has no legal criteria (Laureys, 2005, 2009).

The gold standard criteria used by the American Academy of Neurology and adopted by other countries as guidelines to determine brain death is:

1. Demonstration of coma,
2. Evidence for the cause of coma,
3. Absence of confounding factors, including hypothermia, drugs, electrolyte and endocrine disturbances,
4. Absence of brain stem reflexes,
5. Absence of motor responses,
6. Apnoea.

A repeat evaluation in six hours is advised, however, “the time for re-evaluation is considered arbitrary” (Bruno, Ledoux & Laureys, 2009, p.56).
One of the most compelling arguments against the brain death definition, according to Laureys (2005), is the one proffered by Alan Shewmon (2001), who argues that the brain as an organ has no special status in defining death, because as an organ its functions in terms of integrating homeostatic bodily functions are qualitatively no different from the spinal cord. Shewmon (2001) states that “most integrative functions of the body are not brain-mediated.” Furthermore, the integrative unity of such a complex organism as the human body “is an inherently no localizable, holistic feature involving the mutual interaction among all other parts” (p.457).


After four decades of discussion the definition of death debate has become ever more complex than the relatively simple choice, which was initially presented between the cardio-vascular definition and the whole-brain-based definition of death. Rather than coming to any sort of resolution in their differing positions, stakeholders have even more disparate views, than when the definition of death issue arose. Veatch (2009) claims that,

in fact, the debate is no longer between just two or three options. Even within the heart, whole brain and higher brain camp, there are countless nuanced positions ... Innumerable variations on the definition incorporate philosophical and religious positions, many of which are not obviously wrong (p.17-18).

According to Bruno, Ledoux & Laureys (2009), the most acceptable definition of death is the one generated by Bernat (1998), which claimed that death “is the permanent cessation of the critical functions of the organism as a whole” (p.53). Restated, this means that death occurs when there is a cessation of the critical functions controlling respiration and circulation, neuroendocrine, homeostatic regulation, and consciousness. Gert (2006) concurred by defining death as “the permanent cessation of all observable natural functioning of the organism as a whole and the permanent absence of consciousness in the organism as a whole and in any part of that organism” (p.4).
Opponents of the Brain Centred Definition of Death

Karakatsanis & Tsanakas (2002) summarize the disquiet that many opponents of the brain-death model express, asserting that “since the concepts of ‘brain-death’ was introduced in medical terminology, enough evidence has come to light to show that the concept is based on an unclear and incoherent theory” (p.127). Lock (2002) also expresses the dilemma of many medical practitioners, who are called upon to make the diagnosis of brain death, by claiming that,

professionals working with brain-dead patients draw on a Cartesian split between mind and body in order to allow themselves to count such patients as dead; this maneuver is justified because the minds of brain-dead patients no longer function, although their bodies clearly remain very much alive. Without the legal fiction of brain death the transplant world would be severely hampered (p.2002).

Kellehear (2008) claimed that the incompleteness and controversy surrounding the current brain death definition is the consequence of biomedical and bioethical researchers overlooking death as a social relationship. Giacomini (1997) stated that “the 1968 definition did not produce a more “accurate” description of death as much as mark new delineations between the living and the dead … In the redefinition process, the irreversibly comatose body became the territory over which sometimes competing, sometimes cooperating technological interests negotiated their claims” (p.1478).

In an attempt to make a bridge between the mind centrist (higher-brain-death definition) proponents and the body-centrist proponents, Shewmon (2010) proposed a paradigm change where the terms ‘passing away’ (a civil end) and ‘deanimation’ (a metaphysical end) are used to describe the differing distinctions made to mark the end of life. This twofold distinction is placed within a temporal domain and it relates to permanence versus irreversibility. In his view, permanence denotes “when someone exits life” and irreversibility signifies when a person “can be no longer revived” (p.276). He uses the mirror analogy of the terms ‘conception’ and ‘birth’, which distinguish the beginning of life as the “coming to be as an new organism” and “the entry into society as a new person”, to link his concepts regarding his new descriptors. ‘Passing away’ is used to denote the moment of death as it is most commonly understood and is defined as “the permanent cessation of the organism as a whole. It occurs at the moment of onset of the cessation (not when permanence is declared)” (p.278). The criterion used to determine ‘passing away’ would be permanent absence of both consciousness and circulation of oxygen, at least up to the time of deanimation.
According to Shewmon (2004), deanimation (literally meaning separation of the soul from the body) is relevant to ontology and spiritual traditions. He states that deanimation “marks the annihilation of the organism as such ... or expressed in hylomorphic terms, the cessation of the soul “informing” and unifying the body as its “animating principal.” He defines it as irreversible cessation of the organism as a whole, where irreversible means that “it is impossible to reverse by any natural means” (p.282). The criterion for the determination of ‘deanimation’ would be irreversible entropic exchange of substances with the environment.

Within the argument about how death should be determined there has been an ongoing discussion about whether death is an event or a process. Laureys (2005) regards death as a discontinuous event (linguistically, it can only be understood as an event) that separates the continuous process of dying from the subsequent disintegration (p.900). Shewmon (2004) states that we should abandon the search for criteria for the universally “true” moment of death, as there is no single, context-dependent, “true” moment of death. Rather, there are various moments of state discontinuity, not all of which necessarily occur in a given case, and not all of which are equally striking to the senses and intellect of an observer. All of these state discontinuities are equally “real” and “valid” phenomena in themselves, and “there is no a priori reason that one of them must be singled out for the designation of death, while the others slip into conceptual obscurity for want of a word” (p.291).

Laureys (2005) argues that “death is a biological phenomenon for which we have constructed pragmatic, medical, moral and legal policies on the basis of their social acceptance. The decision over whether a patient can live or die is a value judgment over which physicians can exert no specialized professional claim” (p.907). Rodaborough (2003) summarises many of the above authors’ insights regarding what is driving the definition-of-death debate within the biomedical community, by stating that “no matter which way the legal line between life and death moves, the intent will be to protect not only the lives of the dying persons but the lives of those who may benefit from their deaths” (p.290).

This debate over definition of biological death with its underlying motives, reflected in claim and counter claim by numerous authors from various disciplines, including medicine, philosophy and ethics, reveals the radical cultural attitudinal change towards dying and death in Western Society. This ongoing debate provides a lens into the dissonant views and motives, which affect care for the dying and our understanding of and response to death.
The Process of Dying

As one of the main objectives of this study was to provide richer insights into the process of both dying and death, so that individuals will have the opportunity to experience their own dying process more consciously and with less fear, it is appropriate to explore definitions and concepts underpinning the notion of dying, as well as the literature informing this aspect of transition.

According to Scarre (2009), rather than being the opposite of living, as death is the opposite of life, dying is “a form or phase of living” in which there are still many issues with which to attend, not least of which is an opportunity to critique the narrative of one’s life. The relationship between dying and death are complex and he outlines three paradoxes:

1. While death is universal, dying is not (death can be sudden and unanticipated).
2. Dying need not end in death (e.g. circumvention of dying while drowning).
3. Dying can happen to a person more than once (remission or cure from serious illness to then die many years later) (p.148-149).

Cassell (1974) and Ashby (2009) maintain that to say when the process of dying begins is both difficult and arbitrary. Cassell (1974) states that in order to understand “death as a real event,” we first must explore what is meant by dying. When “lay people” from non medical backgrounds are asked to define dying, the response is sought from their personal experience and the temporal relationship between dying and death is considered a short one. From this perspective, the act of dying is recognised when the terminally ill person is exhibiting “obvious and great functional loss” (p.16).

Cassell maintains that “the physician on the other hand bases his [sic] definition on the prognosis of the disease from which someone is dying,” hereby defining the state of dying from the a technological/medical knowledge perspective of whether, or the degree to which, medical intervention (singularly or collectively) can be effective. He illustrates these distinctions with an anecdote that in response to the question of definition, a surgeon said “a dying patient is one that I can’t help” (p.176).

From a physiological and functional perspective, the process of dying has significant physiological markers, which curiously are synchronous with the lay person’s intuitive perceptions perception of dying. The Karnofsky performance status scale is a measurement tool that was developed originally to measure the progressive impairment of people with non cancer end-stage disease. However, it has become a useful guide to assist in the assessment of people's physical well being during all
terminal illnesses. The scale ranges in points between 0-100 percent. A person with full, healthy physiological function earns a score of 100 percent. Dowling Singh (1998) explains that “at Karnofsky reading of 20 percent the disease is causing dramatic decline and physical existence is heading for its end. A Karnofsky scale level of 10 percent is characterised as moribund. Fatal processes are progressing rapidly. At a Karnofsky level of 0 percent the person is dead.” Dowling Singh (1998) states that “it is safe to say that at a Karnofsky scale level of 20 percent or less, one has entered a phase called active dying” (p.242).

In contrast to the secular perspective, Tibetan Buddhist scholar and teacher, Sogyal Rinpoche (1992), also remarks on the process of dying and synthesises multiple aspects of it, by stating that:

the process of dying is a complex and interdependent in which groups of related aspects of our body and mind disintegrate simultaneously ... The energy centres collapse, and without their supporting winds the elements dissolve in sequence from the grossest to the subtlest. The result is that each stage of dissolution has its physical and psychological effect on the dying person, and is reflected by external, physical signs as well as inner experiences (p.250).

As a transpersonal psychologist, with many years experience in palliative care, Dowling Singh (1999) developed a model to describe the psycho-spiritual aspects of dying. She incorporated Kubler-Ross’ psychological stages of dying stages into the 1st stage of her model. The following Table is a summary of Dowling Singh’s psycho-spiritual stages of dying juxtaposed with the Karnofsky Scale:

The understanding of dying as a complex, carefully orchestrated, integrated process, described by Sogyal Rinpoche, reflected in Dowling Singh’s model, and espoused by other authors (Bailey, 1934, 1953; Foos-Graber, 1989; Levine, 1986, 1987; Rinbochay & Hopkins, 1981; Varella, 1997), in which the physical aspect of dying, although dominant in many minds, plays only one of multiple roles in the transition process. The multidimensional complexity of dying is also understood and articulated by palliative care clinicians and authors (Ashby, 2009; Coberly, 2002; Dowling Singh, 1998; Foos-Graber, 1984; Kearney, 1996; Kubler-Ross, 1975, 1999; Levine, 1986, 1987; Saunders, 1978; Wilber, 2000a).
<table>
<thead>
<tr>
<th>Stage</th>
<th>Qualities</th>
<th>Karnofsky Scale %</th>
<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chaos</td>
<td>Denial, anger, bargaining, depression, acceptance, alienation, anxiety despair, “letting go” dread of engulfment</td>
<td>100%-50%</td>
<td>No evidence of disease – requires considerable assistance &amp; frequent medical care</td>
</tr>
<tr>
<td>Surrender</td>
<td>A profound phase – essentially psychospiritual rather than purely psychological – “one opens to reality – to one’s deeper being”</td>
<td>50% and below</td>
<td>Considerable assistance &amp; frequent medical care - dead</td>
</tr>
<tr>
<td>Transcendence</td>
<td>Expanded, “enveloping states of consciousness” corresponding with the expansion of consciousness – “regeneration in spirit”</td>
<td>50% and below</td>
<td>Considerable assistance &amp; frequent medical care - dead</td>
</tr>
</tbody>
</table>

Table 2.1 Comparison of Psycho-spiritual and Physical Aspects of Dying

Kastenbaum (1999a, p.284) states that since its inception, the death awareness movement has focused its research “much more on grief than the dying process, and much more on the dying process than the moment of death and its meaning.” Furthermore, he notes how remarkable it is that the final moments of life and “death itself” have received so little attention (p.285). The following review of thanatology literature, for the most part, is a testament to Kastenbaum’s statement, which also validates my choice of research topic, as a means of redressing the imbalance in literature in this genre.

Social and Psychological Aspects of Dying

As discussed in Chapter One, the death awareness movement emerged during the middle decades of the 20th Century. The emergence of thanatological literature and the public discussion of death and dying instigated by such scholars as Hinton (1967), Aries (1974), Kubler-Ross (1975); Glaser & Strauss (1968, 1971), Fox (1959) and Saunders (1978), and the publication of the first peer reviewed ‘death journal’, Omega in the early 1970’s, provided a forum for the discussion of clinical, research and educational aspects of mortality, such as dying, death, grief and suicide. The journal Omega was followed by an increasing number of publications, including: Mortality, Death Studies, Palliative Medicine, Journal of Palliative Care, Journal of Personal and Interpersonal Loss, Journal of Death and Dying, Illness Crisis and Loss; all supporting peer reviewed discussion in most aspects of thanatology. Consequently, there is an abundance of literature relating to the social and psychological aspects of dying and death (Kearl, 1989; Kellehear, 2009). As a result, over 1,000 articles on death were
published by the mid 1990’s (Neimeyer & van Brunt, 1995). This plethora of literary material has led some scholars to systematize their research or literary critiques, by categorising death literature in various ways. For instance, French historian Michel Vovelle (1983) used three categories of death literature to organise his research; firstly, ‘la Mort subie’ (death undergone), relating to demographics; secondly, ‘la mort vecue’ (death lived or experienced) and thirdly, ‘discours sur la mort’, which refers to what is written or theorized about death (Ashby, 2009; Kselman, 2004). Sociologist, Allan Kellehear, identified seven themes that dominate the literature on dying behaviour.

In order to give a comprehensive account of the literature pertaining to the social and psychological aspects of dying and death, Kellehear’s (2009) themes will guide the structure of this aspect of the literature review and each theme will be addressed. Table 2.2 summarizes these themes and their dominant features, which structure the discussion of the social and psychological literature in this chapter pertaining to dying. However, as more emphasis is needed for the final theme, transcendence, because it is particularly pertinent to the concerns of this study, it will be discussed in detail in Chapter Three.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Description</th>
<th>Features</th>
</tr>
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<tbody>
<tr>
<td>Agency</td>
<td>Dying as personal control of destiny</td>
<td>The ‘good death’ as exemplified by control of mode and timing of death</td>
</tr>
<tr>
<td>Linearity</td>
<td>Dying as a journey</td>
<td>Social and psychological theories that present dying as a linear process as a means of orientation for carers</td>
</tr>
<tr>
<td>Fluctuation</td>
<td>Dying as oscillation</td>
<td>Frequent oscillation between decline and improvement – e.g. chronic illness in old age</td>
</tr>
<tr>
<td>Disengagement</td>
<td>Dying as withdrawal</td>
<td>Theories of disengagement. Slow withdrawal of bodily energies and social engagement and interest</td>
</tr>
<tr>
<td>Disintegration</td>
<td>Dying as collapse</td>
<td>Medical &amp; sociological studies portraying the body as a failing disintegrating machine</td>
</tr>
<tr>
<td>Indeterminacy</td>
<td>Disenfranchised dying</td>
<td>Modern dying particularly “non-illness” dying marginalised and hidden and stigmatized</td>
</tr>
<tr>
<td>Transcendence</td>
<td>Dying as transformation</td>
<td>Mystical experience altering consciousness &amp; social interaction during dying or following “a brush with death”</td>
</tr>
</tbody>
</table>

Table 2.2 Prevalent Social and Psychological Themes Explored in Thanatology Literature (Adapted from Kellehear, 2009, pp.2-15)
Agency

The theme of agency explores the common view in the literature of the ‘good death’, a common phrase alluding to the concept of agency, or personal control of one’s dying process. A good death has been described as one, which: is as pain free as possible; there is open acknowledgement of imminent death; personal conflicts and unfinished business have been resolved; one dies in the presence, and with the support of loved ones; and death occurs in one’s place of choice (Ashby, 2009; Clark, 2002; Corr, Doka & Kastenbaum, 1999; Gott, Small, Barnes, Payne & Seamark, 2008; Hirai, Miyasshita, Morita, Sanjo, Uchitomi, 2006; Kellehear 2009; Kubler Ross, 1975; Long, 2004; McNamara, 2004; Seale, 2004). Kearl (1996) argues that there various perspectives on what constitutes a good death, which depend on personality type, age, ethnicity, social class and culture. He argues that “deaths become good when they serve not only the needs of the dying, but also those of their survivors and of the broader social orders” and for many people a good death is one where the person is allowed to die “in character, at their own pace, in their own style” (p.345).

Researchers (Clark, 2002; Falkum & Forde, 2001; Kellehear, 2009; Kearl, 1996; McNamara, 2001, 2004; Seale, Addington-Hall & McCarthy, 1997; Stanton Chapple, 2010; van Kleffens & van Leeuwen 2005) have explored the notion of personal control, by emphasising the maintenance of identity by those who are dying. This can be expressed by the person’s capacity to actively negotiate with medical staff regarding their care, pursuit of advanced interventions, informal wills, in planning one’s death, funeral planning for care of family members following their death, and or using advanced directives (Kellehear, 2009).

McNamara (2004) contends that this evolution of control has some negative consequences and states that “as dying patients are increasingly encouraged to make their own choices, palliative care practitioners find fewer opportunities to lead their patients through a journey towards a good death.” Within this milieu, postmodern deaths “typify a fragmentation of ideas and behaviours: a multimodality of responses, and ultimately, an existential uncertainty” (p.936). Furthermore, she argues that in spite of a palliative care philosophy, which “gives credence to a multiplicity of communication patterns evident in the collective of dying patients,” care given to dying patients is “organised in a scientific reductionist way,” which gives symptom management priority over other aspects of care, because “management of physical symptoms ‘offers’ a routinised and more certain response to the uncertainty of dying than psychological, social and spiritual counselling needed to help facilitate a good death” (p.36).
Ashby (2009) observes that the “good death” literature has set holistic goals for palliative care. However, he cautions that even though agency and control are considered to be of paramount importance in Western countries, (particularly by the middle class), there are no stages within the life cycle where our wishes determine the desired outcome. Furthermore, he argues this situation applies even more so at a time of great dependency and vulnerability such as death.

Howarth (2009) asserts that there is a popular perception amongst researchers and clinicians that the process of dying is polarized between developed and developing countries, with Western cultures tending to experience longer lives and prolonged deaths from chronic illness and, hence, longer lead up times in which to prepare for death. According to this notion, people in developing countries are more likely to die of infectious diseases and, therefore, have fewer agencies over their dying processes.

In contrast with this view, Howarth (2009) argues that whereas many members of developing communities live in poverty and die as a consequence of infectious diseases, many others within these communities live long lives and die of diseases of old age, similar to their ‘developed’ neighbours. This group have an advantage in that they live in small, connected, supportive, communities, all of whom are familiar with dying trajectories and thus can exert considerable agency over their spiritual and emotional needs towards the end of their lives. In contrast, their wealthier neighbours, who live in technologically advanced societies, experience their dying as institutionalized, medicalized and professionally managed. This model often diminishes the sense of control that a person may have over his or her dying process (Aries, 1974, 2008; Howarth, 2009; Illich, 1975; Kellehear, 2000a, 2005, 2007, 2008, 2009).

In post-industrial societies, dying is an individual process where the type of disease, educational background, religion and social class influences shapes the constructions of various scenarios. Kearl (1989) summarizes his belief in the importance in experiencing a ‘good death’ by stating that, like the closing moments of all human projects be it the finale of a musical piece, or the denouement in a literary work or drama, the final minutes of a football game, “or the conclusion of human biographies – “bad endings” can destroy otherwise good social performances, and “good endings” can potentially save otherwise mediocre ones ... the quality and meaningfulness of all life stages can ultimately depend on how the final one is handled” (p.345). McNamara (2004) has also stated that within our postmodern era, there are tensions between the tendency within modern medicine to ‘over treat’ and the palliative care staff’s understanding of what constitutes a good death, which is one of acceptance and
readiness. This later understanding is often at variance with the dying patient’s understanding and wishes. A realistic compromise may be for palliative care staff to settle for a ‘good enough’ death. According to Ashby (2009), this form of death has integrity and “is consistent with the life that the person has lived” (p.82).

Linearity - Dying as a Journey

According to Kellehear (2009a), social and psychological theories present dying as a linear process, as a means of orientation for carers. The idea of dying as a journey is an old and enduring one in anthropological and sociological literature. He asserts that by theorizing dying as a linear process, with carers undertaking an interactive assessment to observe aspects of dying, the intention was to assist them with the uncertainty of the circumstances. This was also the researchers’ purpose for construing death as a ‘journey’ or ‘passage’ through the various stages of physical, emotional and social deterioration. Consequently, the outcome of the evaluations used in response to these theories was relevant to the carer, rather than the person who was dying.

For example, Glaser and Strauss (1968) perceived dying as a journey with linear dimensions that included the involvement of staff and relatives. These authors referred to dying as a ‘status passage’ and considered the temporal aspects of dying in their exploration of the various trajectories, which are experienced by people who are gravely ill (1965, 1968). Continual assessment of the dying person’s physical and psychological decline, as well as the temporal features (‘shape’ and duration) of this deterioration, were considered to be significant and important, “so as to establish where the person is when in passage, when the next transition might occur, where the next transition will take him [sic], and how the occupant is to act and be treated by others at various points in the passage” (Glaser & Strauss, 1965, p.48).

Kellehear (2009a) argues that that the social research regarding dying is predominantly focused on the carers’ experience and concerns, as well as the social, psychological and medical problems of dying and health service delivery issues. He supports this argument in his critique of Glaser and Strauss’s work, by stating that “viewing dying as a narrow passageway that leads individuals from ‘living person’ to ‘dead person’ was an important social device for care management by family and health care staff” (p.5).

Seale (1998) argues that Glaser and Strauss’s book: A Time for Dying, is not about making time to accompany dying people (as its title might suggest), but about the prediction of dying trajectories, and the disruptive consequences for both the
‘sentimental order’ of the ward and the emotional equilibrium of staff and relatives when expectations regarding these trajectories are not realised. Glaser and Strauss’s (1968) observation attests to the validity of Seale’s (1998) argument, when they warn their readers that “if relations appear at the bedside of a dying family member during the last days, their presence can pose serious problems for the doctors and nursing staff of the hospital, and can even reduce efficiency of patient care” (p.151). Seale also states the representation of contexts “was not designed to depict an inner psychological process, rather to show how interactions between staff, families and patients could be arranged around a typology grounded in observational data” (p.100).

Kubler-Ross’ (1975) staging theory is another example of how this notion of linearity, within the context of the ‘dying journey’, provides a compass for carers to orientate to the stage that the terminally ill person is at in the process of dying. The overall benefit for carers in both these theories is in the provision of a sense of control. As discussed in the previous chapter, Kubler-Ross’ staging has been criticised since its inception. However, Corr, Doka and Kastenbaum (1999) assert that Kubler-Ross’ stage theory was “not always the most carefully understood work” (p.245). These authors argue that while Kubler-Ross postulated her sequence of five psychological “stages” in response to awareness of pending death, she emphasised that hope was the one thing that persisted throughout these stages. She also noted that any of the five psychological responses could occur simultaneously as well as out of sequence.

In his effort to formulate an understanding of dying, Pattison (as cited in Corr et.al.1999) described the “living-dying interval,” which extended from the “crisis knowledge of death” to “the point of death.” He proffered a three phased clinical trajectory: 1) the ‘acute crisis phase’, where the person first becomes aware that death is probable or imminent; 2) the chronic ‘living-dying phase’, which describes the period of clinical crises and resolutions, varying in duration and predictability, which are coped with by the dying person in more or less adaptive ways. Thirdly, he suggested the terminal phase, in which death approaches and eventually arrives. Corr et al. (1999), assert that Pattison provides his analysis of the living dying interval to offer a comprehensive framework within which the “wide variations in the processes of illness, challenges, concerns and coping can be properly appreciated” (p.245).

Kellehear (2009a) argues that the abiding “obsession” with the idea of both living and dying as journeys, serve a community function, to provide guidance regarding the questions: “When is it the right time to leave, go somewhere else or become something else? What are the ‘signs’ that we, or they should look for, in making the decision or decisions about what to do next?” (p.5-6). Social and psychological
theories that emphasize control, in Kellehear’s view, denote “a selective vision” of the
observers.

The notion and related theories describing the dying as a linear process have been
criticized by scholars as overly simplistic, because expectations founded on them
regarding the dying process often differ from reality (Barbato, 2009; Benoliel & Degner,
1995; DeSpelder & Strickland, 2002; Kean, 1989; Kellehear, 2009, Lynn, 2005; Lloyd,
2004). This theme points to the ever abiding issue of an attempt to control and simplify
the dying process. Lloyd (2004) states that “a perspective on the end-of-life brings our
own mortality into sharp focus and disturbs our senses of purpose and order in life”
(p.253). These theories may be constructed by well meaning scholars, as a means of
alleviating what is often extreme fear in the dying person, the relatives, and possibility
to a lesser extent, the staff in whose care the dying person is entrusted.

Fluctuation - Dying as Oscillation

In the post-industrial era, a significant increase in lifespan has occurred. The major
causes of death in the Western world, according to Lynn (2005), have shifted from
childbirth, or illnesses that result in acute symptoms and rapid death, to chronic
degenerative conditions, such as cancer and dementia. These chronic conditions are
usually associated with prolonged illness, which leads eventually to death. Lynn (2005)
summarises this situation by stating that “not long ago people generally “got sick and
died” – all in one sentence and all in a few days or weeks” (p.14). This demographic
shift can be attributed to the success of modern medicine, which has transformed acute
causes of death into chronic illnesses.

The characteristics of terminal decline in old people in Western society are cycles of
health and illness. This is well described by Lynn (2005), who states that “many elderly
people are inching toward oblivion with small loses every few weeks or months” (p.14).
Old people in Western society predominantly die from chronic conditions, such as
dementia, heart disease, diabetes and chronic obstructive airways disease. Organ
failure, particularly the kidneys, liver or heart, is also a major cause of death (Ashby,
2009; Hall, 2002; Lynn, 2005). Lynn (2005) has identified three trajectories to death in
the aged within Western Society; (1) fatal cancers peaking at approximately age 65, (2)
fatal chronic organ failure occurring in the 75 year age group, and 3) frailty and
dementia effecting the majority of people, who live past 85 and she recommends
distinct and differing approaches to manage these health concerns.
In old age, multiple organ failures provide a relatively confident identification of when a person has commenced the dying process, as well as a determination of proximity to death. However, the ‘miraculous’ capacity of modern medicine to reverse critical incidents by bringing people ‘back from the brink’, has also increased prognostic uncertainty. This convoluted picture of dying is also prevalent with those dying of HIV/AIDS, as antiviral drugs extend the period of dying. A similar situation is experienced in some instances by those people suffering from cancer (Ashby, 2009; Costain & Shou, 1993; Howarth, 2009; Kellehear, 2009; Lloyd, 2004).

Lloyd (2004) asserts that the fact that there are different perceptions of death and dying in old age, as distinct from more premature terminal illness, is reflected in support services available to either group. Younger people are more likely to receive specialist services as well as psychological support, than the aged. This is due to a connection within Western culture between old age and death, which results in “an assumption that old people know how to die” (p.237). This perception leaves many older people with prolonged terminal illnesses inadequately supported. Lynn (2005) summarizes this dilemma when she argues that because of this shift towards trajectories of lengthy terminal illness and protracted dying, many people live “not in hospice care, but in the indistinct zone of “chronic illness” that has no specific is delivery system” (p.15).

Lynn (2005) contends that there are serious implications regarding the shift in the demographics related to appropriate care for those people affected. One of these is the lack of social understanding of the complexities. This is reflected in the language that is used to conceptualize the types of reforms necessary to support this new illness and dying trajectory. This language is more reflective of “decision–making and law” such as “the right to choose” and “the right to die,” rather than “that of spiritual journey and psychological meaning” (p.14).

Kellehear’s (2009) ideas about dying as ‘fluctuation’ identify the characteristics of contemporary dying as one where “there is not always an interrupted trajectory of decline.” The theme of ‘oscillation’ can be distinguished from the former themes of ‘agency’ and ‘linearity’ in that they are “shaped and distorted by multiple disease causation, economic marginalisation and stigma” (p.8).

Disengagement - Dying as Withdrawal

Human social bonds, considered as a one of the highest human motives, are severed at death and the disruption of this bond often occurs during the dying process (Elias, 1985). Whether people die slowly and incrementally, as with ageing, or more rapidly,
their often characteristic withdrawal from world and community affairs, as well as family and friends, has been defined and theorized as disengagement. The original disengagement theory was posited by Cumming and Henry (1961), who developed their theory to explain patterns of withdrawal behaviours of the aged. According to Achenbaum & Bengtson (1994), “disengagement is an inevitable process in which many relationships between the aging person and other members of society are severed, and those remaining are altered in quality” (p.758). This theory has since been applied to the notion of ‘social death’, a term used to describe the experience of isolation and withdrawal experienced by many people who are dying (Betts Adams, 2001; Kellehear, 2009; Lawton, 2000; Mulkay, 1993; Seale, 1995, 1998). One of these theorists, Kalish, (1972, 1989), in support of Maslow’s ‘hierarchy of needs’ theory, states that “when needs lower down on the hierarchy are not satisfied, those higher will also be frustrated” (1989, p.143). He argues that disengagement is a valid and often necessary description of coping strategies of the aged and dying, who re-direct their dwindling physical energies from social engagement to mere survival.

Old or dying people who employ this strategy often experience a social death. Social death occurs when a dying person is evaluated by his or her social network as ceasing to have a meaningful future. Within the medical domain, it also occurs when their disease has progressed to the stage where their condition ceases to be of diagnostic interest. The devaluing term ‘as good as dead’ is often used by medical staff or relatives to describe a person who meets these criteria (Stanton Chapple, 2010).

The dying person’s relatives often withdraw, partially because of the stigmatising effects of the disease and the knowledge that the person is going to die. Withdrawal also occurs, because the “social and temporal perceptions have ceased to be enmeshed” between the dying person, family members and health care workers (Lawton, 2000 p.148). Social death, experienced by many institutionalised older people, as well the terminally ill, leads to feelings of hopelessness and withdrawal, and can potentiate psychological and physical death (Kalish, 1989).

Kellehear (2009) declares that even with optimal support, “few dying people can or have the desire to sustain an active social involvement and at some point in the dying process there often comes a time when it is important for the dying person to pay attention to what comes next after all seems to be said and done” (p.11). He has an important insight that disengagement as it is observed in the old and the ill may epitomize agency and control rather than solely representing a response to social rejection.
Dowling Singh (1999) states that this time of isolation from previously enjoyed activities and enjoyments with family and friends and subsequent emotional withdrawal, or “dying to the world,” initially can be a period of great psychological and emotional suffering. Nevertheless, this state is necessary for and can facilitate psycho-spiritual transformation. She maintains that by stepping out of the membership of our culture in this manner, we “begin to have a more direct and present centered, less mediated experience of reality” and that “shutting out the world in isolation and withdrawal, leads to revelation of mystery” (p.131).

Disintegration - Dying as Collapse

Kellehear (2007, 2009) states that illness based studies of dying dominate the thanatological literature and that researchers “commonly find death irksome, obsessively documenting the negative characteristics of dying” (2009, p.9), with an emphasis on “decline, sickness, decay and withdrawal” (2009, p.18). The theme of disintegration refers to the sociological and medical literature, which depicts the human body as a failing machine, whose decline is observed helplessly, by the dying person and his or her relatives.

A good example of this viewpoint comes from Nuland (1994), who, when undertaking to “demythologise the process of dying ... [and] to present it in its biological and clinical reality”, states that dying with dignity is a truly rare occurrence. It is “not to be expected by any but a very few people.” Furthermore, he argues that a dignified death occurs in rare and lucky circumstances and only to those who are endowed with a “unique personality.” He believes that “the quest for true dignity fails when our bodies fail” (p.xvii).

The literature which contextualizes this theme of physical collapse within a socioeconomic framework comes from epidemiological researchers. Numerous authors have written about changing epidemiological patterns in illness and dying in developing countries and within post industrial countries, to explore the association between demographic change, mortality decline and socio-economic progress (Armelagos, Brown & Turner, 2005; Benoliel & Degner, 1995; Howarth, 2009; Kellehear, 2007b, 2009; Moniruzzaman & Andersson, 2005; Omran, 1971, 2005; Seale, 1997, 2000; Smallman–Raynor & Phillips, 1999).

Omran (1971, 2005) proposed a three stage model of epidemiological transition, which attempts to demonstrate the correlation between changing demographics in illness patterns and mortality in postmodern societies with socio-economic progress. The first
stage, the age of pestilence and famine, is associated with pre-industrial societies, and early death. The second stage marks the age of receding pandemics, resulting from increased sanitation and public health policies, medical technology, and improved standards of living. This stage is characterised by an increase in life span from 30-50 years. The third stage, known as the age of degeneration and man-made [sic] disease, is associated with contemporary industrial societies and is characterised by longevity.

Seale (2000) states that the increasing life expectancy of developed countries brings some negative consequences. There is now a higher burden of disability and a prevalence of symptoms, such as age-related mental confusion, depression and incontinence. As death from cancer and vascular diseases, such as stroke and heart disease, has surpassed epidemic infectious diseases, such as typhoid, cholera, measles and smallpox and non epidemic infectious diseases, such as tuberculosis, pneumonia and enteritis, dying is more prolonged and more people with chronic diseases are experiencing distressing symptoms and often significant suffering during the last year of their life. People with cancer experience symptoms, such as pain, nausea, vomiting, difficulty swallowing, constipation and pressure sores, while those with heart disease experience breathlessness, whereas people who have had a stroke often experience mental confusion and incontinence.

However, while a longer dying trajectory is assumed in those suffering from degenerative diseases in developed countries, the prevalence of AIDS and tuberculosis in developing countries, such as Africa and Asia, also result in long periods of dependency, debilitation and the distressing symptoms experienced by those suffering from chronic diseases. Hence, many millions of people in developing countries experience the prolonged symptoms that typify illness and dying patterns in more affluent cultures with an equally devastating effect for the individual, family and community resources (Howarth, 2009; Seale, 2001).

In her chapter subtitled Sequestration of the unbounded body and ‘dirty dying,’ Lawton (2000) argues that hospices are “becoming enclaves in which a particular type of bodily deterioration and decay is set apart from mainstream society. The outcome of this form of ‘quarantine’ by hospices and similar institutions is that it enable[s] certain ideas about ‘living’ personhood and the physically bounded body to be symbolically enforced and maintained” (p.124).

Lawton (2000) suggests that ‘dirty dying’, in its worst sense, is often witnessed in aged care institutions. Physical collapse often manifesting as falls, related injuries, severe deconditioning, dehydration, pressure areas, bowel and/or bladder incontinence,
physical impairment and immobility, are often manifest as a forerunner to a picture of protracted dying in the aged. These conditions in old people are often accompanied by confusional states, or are the result of end-stage dementia (ESD). Old people with ESD or others with multiple complex health issues are often admitted to, or are already in, residential aged care settings. With often inadequately trained staff, these institutions place staff needs above those of the residents and, therefore, dying people frequently experience a high level of physical and psychological suffering from depersonalisation and the inappropriate management of their symptoms.

In spite of consensus within the health care area, that people with ESD require well coordinated palliative care services, it is very often unavailable in aged care institutions (Aminoff & Adunsky, 2004; Chang, et al. 2005; Kellehear, 2009b; Kuhn & Forrest, 2012, Seal, 2000). In contrast to passive neglect, the suffering that accompanies protracted dying in institutional care can be increased with “aggressive approaches [which] may include the use of resuscitation measures, active medical treatment, wide use of antibiotics, and feeding tubes” (Aminoff & Adunsky, 2004, p.243). In these instances, the psychological and spiritual needs of the person are ignored and s/he is perceived only in the context of a disintegrating body.

The theme of dying as disintegration, as discussed in the literature, reflects how post-industrial Western societies often respond to and manage the physical aspects of dying. This literature discusses the implications of these attitudes and management strategies in terms of suffering and distress experienced by many people as their bodies fail them.

Indeterminacy - Disenfranchised Dying

The notion of disenfranchised dying has a number of connotations within thanatological literature. It has been related to a lack of public and private recognition that a person is dying, as well as to the hidden and taboo nature of institutionalised, medicalized death, which was described and criticized in the late 20th Century. Disenfranchised dying is also associated with medical staff, caregivers or relatives withholding information from the person regarding his or her life expectancy (Aries 1974, 2008; Kubler- Ross, 1975, Kellehear, 2009a; Mauksch, 1975; Seale, 1998; Watson, 1976).

This approach with its psychological consequences is well described in Glaser and Strauss’ (1964) first two awareness contexts. The first, ‘closed awareness’, is when the dying person has not been told of the prognosis and is consequently unaware of his or her pending death. In the second context of suspected awareness, the person is
suspicious that s/he is dying, but confirmation of the validity of these suspicions has
been withheld. Seale, Addington-Hall and McCarthy (1997) argue that these
awareness contexts are in stark contrast to the context where people dying in full
awareness are more able to plan important aspects of their dying. Moreover, people
who are fully aware that they are dying “are more satisfied over their place of death,
they are less likely to die alone, and are more likely to die in their own homes” (p.477).

The establishment of hospice and palliative care was a direct result of a general
recognition by researchers and clinicians of a longstanding inadequate medical
response to the terminally ill. Furthermore, the inception of these services has resulted
in a general improvement of care and communication with people who are dying. This
late 20th Century evolution in care of the dying, known collectively as ‘death revival’, is
focused on ‘illness-related’ dying, such as cancer. However, openness and
acceptance by the community and health professionals alike is limited to illness related
dying and there is a lack of acceptance to other forms of dying, including death that is
war related, or death at the hands of the state (execution or incarceration). Similarly,
those dying from socially stigmatised diseases, such as HIV/AIDS and people dying
from old age, (whether in an institution or at home), remain outside the umbrella of
social acceptance. Consequently, they are often ostracized (Kalish, 1989; Kellehear,
2007a, 2009a; Seale, 1998).

Lyckholm, Coyne, Kreutzer, Ramakrishnan and Smith (2010) state that
disenfranchisement is also manifest in people with cancer from ethnic minorities and
people who experience poverty. This includes people with low educational attainment,
poor health literacy, and diminished access to health care. The provision of good
palliative care, which they prescribe as appropriate symptom management, optimal
communication between patients, their families and health care providers, and
promotion of patients’ values and goals regarding end of life decisions, is often
unavailable or manifestly inadequate.

Seal (1995) states that the increasing age of a relative, particularly those without
spouses, is often seen as a burden by family members. The financial, physical and
emotional burden of caring for the elderly relative may lead to a form of social death,
because of the restrictions imposed on them in their caring role. Elderly women are
particularly vulnerable and are more likely to hasten their own death, than be perceived
or experienced as a burden. In some instances, a response to this stress has lead to
erlder abuse and in some instances involuntary euthanasia. Awareness of the potential
for the abuse of euthanasia legislation, led opponents such as Cicely Saunders (as
cited in Seale, 1995) to state “I do not think any legalized ‘right to die’ can fail to
become for many vulnerable people, a ‘duty to die’ or at best the only option offered” (p.590).

As stated in the previous theme, many elderly people in post-industrial countries are institutionalized towards the end of their lives and it is in these institutions that dying is hidden and the dying are disenfranchised (Aminoff & Adunsky, 2004; Chang et al., 2005; Howath, 2009; Kellehear, 2007a, 2009a, 2009b; Kuhn & Forrest, 2012; Mulkay 1993, Sweeting & Gilhooley, 1997). Furthermore, dying is often shameful for the elderly and ‘moderate’ to ‘excruciating’ daily pain, unstable medical conditions, pressure areas and malnutrition are a common experience (Aminof and Adunsky, 2004; Kellehear, 2007a, 2009a).

The concerns regarding the management of the dying in these institutions, hidden from community view, are that there is a lack of attention directed towards the physical needs of the dying, specifically in symptom control, and that terminally ill residents experience a loss of dignity and personal individuality. A lack of consideration towards the psychosocial aspects of care is of particular concern and is marked by poor disclosure of information and communication, with the dying patient not given the opportunity to make treatment decisions for themselves (Caprio et al. 2008; Costello, 2001; Hall, Schroder and Weaver, 2002; Kellehear, 2007a, 2009a; Watson, 1976).

Many people suffering from dementia are institutionalized in long term care facilities during the end stage of their disease. As dementia becomes increasingly possible in old age, this form of disenfranchised dying is becoming of increasing concern to researchers and clinicians (Caprio, et al., 2008; Chang et al. 2005; Costello, 2001; Hall, et al., 2002; Kellehear, 2007a, 2009a, 2009b; Lawton, 2000). Dementia is an irreversible progressive organic disorder, which has multiple causes. It involves progressive loss of cognitive abilities, self care and adaption. One of the major reasons proffered for inadequate end of life care for people with end stage dementia (ESD) is that although it is a major cause of death in Western societies, this disorder is under diagnosed and there is a lack of recognition that dementia is a terminal disease. Hence, those people suffering from dementia often receive inadequate terminal care. Terminally ill people with dementia often suffer from multiple co-morbidities (91%), and although it is a widely acknowledged that people suffering from EDS require care that reflects palliative care principles, this level of care is often unavailable to these people and their families (Chang et al, 2005).

The unacceptable and uncivilized outcome for elderly people with end stage dementia is that they often spend the last period of their lives with symptoms, such as poorly
controlled pain and dyspnoea. Furthermore, family members and staff caregivers also report high incidences of nursing home residents experiencing anxiety, depression and loneliness during the final days of their lives (Caprio, et al., 2008; Costello, 2001; Hall, 2002). Sweeting & Gilhooley (1997) assert that inadequate and inappropriate treatment of the people suffering from end stage dementia within our society could only be possible if the recipient of this care was believed to be “as good as dead.” Kitwood & Bredin, (as cited in Sweeting & Gilhooley, 1997) state that “dementia care need not be a relatively passive attendance upon an elderly man or woman's psychological undoing. Rather, it may become an exemplary model of interpersonal life, an epitome of how to be human” (p.113). This statement could be extrapolated to encompass all those who are vulnerable to disenfranchisement in one way or another during the most significant period of their life; their dying.

Researchers (Ashby, 2009, Chang et.al, 2005; Kellehear, 2007a) state that the debate about the unnecessary level of suffering experienced by the terminally ill elderly in Western society has prevailed in the literature for the past 30 or more years, with an acknowledgement that both health care professionals and family carers require improved education regarding the palliative needs of the elderly in general and those suffering from dementia in particular. This should occur so that the “difficulties of recognition and acknowledgement of the dying process,” which results in “a lack of prognostic clarity” by medical staff, will be improved and lead to appropriate care for the dying (Ashby, 2009, p.77).

The relatively small advances in quality of care for this age group not only diminishes and demeans Western civilisation, but also leaves the surviving family members and many professional care givers with an enduring legacy of grief and guilt (Howarth, 2009; Kellehear, 2009b; Strange, 2009). Kellehear (2009a) states the “social picture [of dying] is consistently carer oriented, ambivalent, threatened, and stereotypically medical, state defined and frequently negative.” Furthermore he claims that this is not coincidental for “our social and behavioural studies persistently demonstrate the obsessions, anxieties and bias of the researchers behind them – celebrating and highlighting control, order and professional care but exhibiting ambivalence and fear towards examples of decay, withdrawal and contagion” (p.18).

Summary

Chapter Two has explored the literature related to the physical, psychological and sociological aspects of dying and death. It has presented the arguments concerning
the biomedical determination and definition of death and it consequences for the dying person and his or her caregivers. The inadequacies and inherent dangers of perceiving death strictly as a biological phenomenon has been given. The aim has been to highlight the dominant thinking and arguments as they are reflected in the major themes of thanatology literature. The societal and professional understanding of what constitutes ‘a good death’ has been presented within the theme of ‘dying as agency’. The evolving understanding of what ‘a good death’ means to the dying person and health care providers has resulted in the formulation of holistic goals for palliative care, which includes giving the dying person a greater level of choice and control over their transition. However, in reality, the care provided often continues to reflect a scientific, reductionist model, which prioritizes symptom management over other aspects of care, for this form of physical management provides more certainty and tangibility for care givers, than addressing the social, psychological and spiritual needs of the dying person.

The evolution of social and psychological theories that treat dying as a linear process or ‘journey’ has been examined. The purpose of such theories has been proposed, which is often to represent the interests of caregivers or medical staff, by providing them with a sense of certainty and control rather than fulfilling the deeper needs of the dying person.

Within the theme of ‘dying as fluctuation,’ the consequences of biomedical technical development has been examined and it has been argued that some of the unforeseen consequences of technical prowess includes a health care system which fails to identify and appropriately meet the needs of the frail-aged and chronically ill and members of the community who face prolonged terminal illnesses, which are characterised by frequent periods of decline and improvement. The discussion has particularly focused on the vulnerability of the aged and those suffering from dementia, who often experience marginalisation, stigmatisation, and patently inadequate symptom management. The failure of postmodern society as a whole and the health care system in particular to understand and respond to the needs of people who are now living longer, with a greater burden of chronic ill health or with protracted terminal illnesses, demeans us as a society and calls into question what it means to be civilized.

The strategy that old or dying people employ to adapt to the experience of stigmatization was addressed in the theme ‘disengagement’. Multiple theories have been proffered to address this issue, including ones that suggest that disengagement from social relationship is a means of managing diminishing physical and emotional resources. Therefore at its core, disengagement is a survival strategy.
Conversely, social withdrawal during a time of physical and emotional vulnerability may be a means of maintaining a sense of agency and control. Alternatively, withdrawal from the minutiae of the everyday world and its inhabitants is also considered a prerequisite for psychospiritual transformation and, therefore, this strategy is reflective of a psycho-spiritual deepening at the end of life. As the experiences of the aged and terminally ill are complex and variable, each of these proposals and others provide a valuable insight into a behaviour, which has previously been considered pathological.

The theme of ‘disintegration’ has also been discussed in this chapter as the literature associated with this theme, dominates medical and sociological literature and is replete with descriptions of the negative aspects of dying (Kellehear 2007a, 2009a). The theme of collapse and disintegration is central to the modern secular view, which emphasises the physical elements of dying, namely the failure of biological systems leading to bodily destruction. The domination of this aspect of dying within thanatology literature, reflects and maintains a fear and revulsion of dying and death and leads to the negative consequences that are discussed in the final theme of this chapter; the disenfranchising aspects of dying. This theme examines the literature, particularly in relationship to ‘the dirty dying’ witnessed in institutional care. This literature also examines the disenfranchisement of the terminally ill person, whose prognosis is deliberately withheld from him or her by their relatives, carers, or medical staff. The consequences of this breach of trust are also discussed in terms of the potential for the dying person to experience a ‘good death’.

The majority of thanatological literature is associated with illness related concerns, such as public health management, symptom control and the social issues concerning the terminally ill and their families. In recognition of this trend, Kellehear (2009a), maintains that “there is very little description and understanding about positive aspects of dying” (p.19) and this is evidenced in an examination of literature in this chapter. Consequently a fuller, richer and more hopeful account of death is inaccessible to both health professionals and the public. Ironically, if our understanding of death, as a community becomes less medicalized and more all-encompassing, the often traumatic experience of dying and witnessing death could become transforming. Chapter Three reviews the more positive aspects of death and dying as they are reflected in Kellehear’s final theme of ‘dying as transcendence’.
This chapter continues the descriptive and analytical review of literature, structured according to Wilber’s (1990) realms of being. The previous chapter included the physical, psychological and sociological aspects of dying and death related to the mental realm (Chapter Two: Secular Perspectives). Chapter Three begins the spiritual and transpersonal aspects of perimortality, which pertain to the transcendental and spiritual realm, by describing the understandings of death by spiritual traditions. Following this contextual introduction, Kellehear’s (2009a) last theme in the thanatological literature; ‘dying as transformation’ is discussed.

Spiritual Traditions: Understandings of Death

According to Rodabough (2003), the departure of the soul is one of the oldest ways of determining the moment of death. This notion has been the source of controversy and debate between centralist theory, which “focuses on the individual’s vital force, the breath and blood of the individual, and where it resides” and the decentralist theory, which asserts “that life is present throughout all organs, tissues and cells of the body” (p.285). The latter group attributes the loss of soul as the major determiner of death, rather than other biological phenomena such as cessation of bodily fluids.

It is relevant to this thesis to explore how the major spiritual traditions define death, as the majority of the human population worldwide have theological beliefs that influence their concepts of dying and death. A summary follows of the beliefs of major spiritual traditions in relationship to death and survival following biological death.
The Christian Tradition

A central tenet of the Christian tradition, which has personal and universal importance for practicing Christians of all denominations, is the belief in eternal life and that at death there is an expected encounter with God. Although the Pope is the spiritual leader of only one of the many and varied Christian traditions, the following definition of death have been included, because of the context in which it was given. In the broadest terms, it reflects, in my view, contemporary Christian beliefs regarding death. The following definition of death described by Pope Paul in his 2000 address to the transplantation society (cited in Shewmon (2010) was:

Death of the person is a single event, consisting in the total disintegration of that unitary and integrated whole that is the personal self. It results from the separation of the life principal (or soul) from the corporeal reality of the person. The death of the person, understood in this primary sense, is an event which no scientific technique or empirical method can identify directly. Yet human experience shows that once death occurs certain biological signs inevitably follow (p.283).

The Hindu Tradition

The Hindu understanding of the constitution of the human being is relevant, in order to comprehend the Hindu understanding of death. The following explanation given in the Tattiriya Upanishad is cited in Rambachan (2003), who states that its essence has been widely adopted by observers of the Hindu tradition. This Upanishad describes the composition of the human being as having an essential human self (Atman), which is enveloped in five sheathes or koshas. These sheaths are successively more subtle in nature, with the outermost physical sheath being most tangible, whereas the innermost sheath is the most subtle. This explanation has been simplified in later works and, in the interest of brevity; this description will be given here. The ‘self’ is clothed in three bodies. The outermost is the physical body, which is composed of five great elements: space, air, fire, water and earth. This body is the medium through which the self experiences the world in the waking state. The physical body is the object in relationship to the atman or self and the self (different from the psychophysical system and immortal) is the subject or ‘knower’. As the physical body has temporal origins and is finite and mutable; it eventually declines and dies.
The ‘self’ is also associated with the subtle body (sukshma sharira), composed of five elements in an uncompounded form, which do not have sense perception in the manner of the physical body. However, the subtle body counterparts of physical sense organs control the function of the physical senses and the physical body is incapable of functioning independently of the subtle body. The Hindu understanding of death is that it is the separation of the subtle bodies from the physical body. The physical body is an instrument through which multitudinous experiences that are influenced by past karma are acquired, and it is shed at death, following the completion of these experiences. The subtle body survives the destruction of the physical body and continues to be associated with the self as the repository of karma, until liberation is attained. Life and death are understood by Hindus as part of a continuum of existence with the cyclical acquisition and shedding of physical bodies until Moksha (liberation) is attained (Rambachan, 2003). Kramer (1988) states that in the Hindu tradition, “death is natural and unavoidable. But it is not real. Only union with Brahman is real. Only union with the True Self (Atman) is real” (p.32).

The Hebraic Tradition

Kramer (1988) states that in the Jewish tradition there is no death, as both body and soul return to their source and thus continue. However, Judaism has a variety of beliefs from a conviction that there is no afterlife, to a belief in the resurrection of the body and the immortality of the soul (p.123). Within this tradition, biological death occurs “when the vital force (ruah), or breath, withdraws through the throat,” although earlier Jewish positions do not include return to God after death, but they believed that an impermanent residue ‘shadow’ or ‘shade’ remained in 'shoel' (the ‘underworld’, ‘non-land’ or ‘unland’ following biological death). This understanding evolved to one where humans are born with a pure soul and a sacred body, which are interdependent. The human soul (ruah) is believed to have memory and personality, which “precedes and outlives the body since the soul was with God before the body was created” (p.125). Consequently, death is not considered either an intrusion on life or an enemy. Cytron (1991) is more cautious regarding the espoused beliefs of contemporary Jews, stating that Judaism’s classical teaching of the “triple hope ... affirms personal survival in some form or another - though the form of that survival is a matter of considerable debate” (p.123).

The Islamic Tradition

According to the Islamic tradition, human beings are created from two things: the world and the afterworld. The purpose of life, according to the Qur’an, is to prepare for
eternal life; death is a transition from the physical world to eternity (Gilanshah, 1993; Kramer, 1988). At death the two aspects separate and the person (soul) survives and lives in the afterworld. With the separation of the soul from the body there is a cessation of physical functioning and activity. The essential purpose for living is for a successful and desirable transition into the next life. Death is considered predetermined and controlled (Babacan & Obst, 1998; Gilanshah, 1993; Sultan, 2003).

The Buddhist Tradition

Although there are two different lineages within Buddhism and within these lineages, different schools, there are many common elements concerning the understanding of death and dying (Babacan & Obst, 1998). In their exploration of theories of dying, Corr, Doka & Kastenbaum (1999) acknowledge that the oldest stage theory of dying comes from Buddhism that “is rooted in a millennium of experience and belief”. Moreover, this theory “cannot be separated meaningfully from the Buddhist theory of living” (p.249). “In contrast to the Western tradition, Buddhists conceive of a continuous interweaving of life and death in which the final moments of an individual’s embodied life are a significant episode, but do not tell the whole story” (p.249).

According to Sogyal Rinpoche (1992), life and death are perceived as one whole and death is considered to be “the beginning of another chapter of life” (p.11). Central to Buddhist belief is the idea that “death is a mirror in which the entire meaning of life is reflected.” In his book The Tibetan Book of Living and Dying, Sogyal Rinpoche (1992) describes the ancient Tibetan notion of ‘the Bardos’, which are commonly considered the intermediate step between death and rebirth. However, he states that in reality, ‘Bardos’ refer to “constantly changing transitional realities” that “are occurring continuously through both life and death” and that it is at these turning points that the possibility of enlightenment is greatly increased. He further states that, according to Buddhist philosophy, “the greatest and most charged of these moments, however, is the moment of death.”

Summary

Kramer (1988) asserts that Western spiritual traditions comprising of Christian, Islamic and Jewish faiths share a spiritual goal of “salvation from self,” which will manifest as rebirth and “participation and the presence and power of the Transcendent one.” These spiritual goals and beliefs distinguish Western traditions from their Eastern counterparts (Buddhist and Hindu), whose spiritual goal is described in such terms as ‘realization of self’, and ‘actualization’ of one’s ‘true self’ or ‘true nature’. The spiritual
source which informs and sustains the Western spiritual traditions is described as “transcendent,” “the personal without,” the “wholly other,” or “the word of God.” In contrast, for Eastern spiritual traditions, such as Hindus and Buddhists, the spiritual source is described as “immanent,” “the personal within,” “the true Self” and “the silence at the centre.” All traditions use the methods of “self-sacrifice,” “self-surrender,” and “spiritual death/rebirth” to achieve their spiritual goals (p.22). The different perceptions of internality and externality of “the source” and body/soul duality is important, as it is also reflected in Eastern and Western secular perceptions of the reductionist, dualistic, mind/brain notion of consciousness, which is of consequence to this study. This chapter now returns to a discussion of Kellehear’s (2009a) categorisation of themes in thanatological literature.

Transcendence - Dying as Transformation

There is a large body of thanatology literature, which describes a very different picture of dying and death from the ones described in the secular literature. This body of work falls into Kellehear’s (2009a) ‘dying as transformation’ category. The distinguishing characteristic of this theme is the notion that there is a transcendent aspect to dying, which is ignored in the literature reviewed in the previous six themes. Transpersonal psychologist, Dowling Singh (1999) advocates for an acknowledgement and exploration of the transformative experiences of the dying, and states that “our spiritual impoverishment directly gives rise to our denial and terror of death.” She uses Sherwin Nuland’s book, *How we die* (1994), as an exemplar of this state, and questions whether Nuland “has ever participated with the dying,” arguing that by “describing death with all the horror of a mental ego in the role as spectator ... [he] deeply and profoundly misinterprets the process of dying” (p.169).

Kellehear 2000, 2009a; Kubler-Ross, 1999, 2008; Moody, 2001, 2005; Moreman, 2006; Morse, 1992, 1994; Parnia 2007; Parnia, Waller, Yeates & Fenwick 2001; Parnia & Fenwick, 2002; Ring & Cooper, 1997; Sutherland, 1992). These phenomena are collectively known as end of life experiences (ELEs) and are experienced by the person dying, loved ones or health carers, who are emotionally close to the dying person during or after his or her transition. ELEs are regarded as “profoundly subjective and meaningful events, which usually occurred in clear consciousness” (Fenwick, et al., 2010, p.177). End of life experiences are transformative experiences for all concerned and include near death experiences, death-bed visions, coincidences and post death encounters.

Near Death Experiences


Reports of near death experiences (NDEs) have been found in diverse cultures throughout history and include accounts from Plato’s Republic, reports from mountaineering accidents in Switzerland in the 1800’s, and reports from survivors of earthquakes in China (Parnia, & Fenwick, 2002; Grof & Halifax, 1977). There are currently many working definitions of NDEs. However, the term near death experience, was originally coined by Moody (1975). Greyson (1999) has elaborated on Moody’s original definition of NDE as “any consciousness perceptual experience which takes place during a near death encounter” and it is a “profound subjective event with transcendental or mystical elements that many people experience on the threshold of death” (p.8). Moody (2001) identified 15 primary features of NDE experience (1) ineffability, (2) hearing news of one’s death, (3) feeling of peace and quiet, (4) hearing a particular noise, (5) traversing a dark tunnel, (6) feeling out-of-body, (7) meeting others (deceased relatives, friends, spiritual guides), (8) meeting or experiencing a being of light, (9) perceiving a life review, (10) perceiving a border between life and death, (11) coming back to the body, (12) telling others of the experience, (13) perceiving effects on attitudes towards, (14) gaining new views on death, and (15) corroboration of information gained from otherworldly travels.
According to Greyson (2003), two thirds of the experiences report common features: 1) an altered sense of time, 2) a sense of being out of the physical body, 3) seeing or feeling surrounded by light, and 4) feelings of peace and of joy. Although most experiences are positive, there are some reports of negative experiences (Rodabough & Cole, 2003). Researchers (Greyson 2009, 2010; Moreman, 2006; Noyes, 1980) state that the majority of people, who experience a NDE, regard it as the most profound event of their lives, often bringing a newly defined sense of uniqueness to their lives. Coupled with this is a reduced fear of death, a sense of relatively invulnerability, a feeling of special destiny, and a sense of post-mortem survival. With this sense of survival of consciousness following death, comes an experience of the preciousness of life, a re-evaluation of priorities, a more robust, less cautious approach to life and additional equanimity towards uncontrollable events. In sum, these changes contribute to an improvement in emotional health and wellbeing.

Morse (1994) tested 100 adults who had NDEs as children with a battery of psychological tests and found that they their psychological profile included low death anxiety, few symptoms of depressed anxiety or depression, and lower self reporting of drug and alcohol use, or use of over the counter health products. They also have increased scores on general mental health and spiritual well being, and spent more time and money in charitable service to others. The other control populations scored within the normal range, but in contrast, adults who nearly died as children, but who did not experience a NDE, “had increased death anxiety, increased repressive and defensive symptoms, and evidence of post traumatic stress syndrome” (p.70).

In spite of the transformative effects on those who undergo a NDE, their experience is “disenfranchised” by the biomedical professions, who habitually discount it as “hallucinations, ramblings of a sick brain, and fantasies based or wishful thinking (Greyson, 2009, p.264). Other biomedical researchers have discounted NDEs as currently unsubstantiated phenomena of an anoxic brain (Agrillo, 2011; Blackmore, 2003; Seigel, 1980). Parnia & Fenwick (2001) have challenged this hypothesis, arguing that in cases within a hospital environment oxygen levels are twice as high in patients experiencing NDE, and in situations of isolation, such as with falls, uncomplicated childbirth, or other situations of prolonged isolation where NDEs have occurred, anoxia is rare (Barbato, 2009). Other hypotheses include epileptic discharges from temporal lobes or changes in endorphin levels and altered brain receptor function (Persinger, 1983, 1984; Jansen, 1997). These hypotheses have been discounted by Fenwick (1997), who states that “temporal lobe seizures do not
resemble NDEs ... they are confusional rarely ecstatic, and never clear, as are NDEs, nor are they remembered afterwards” (p.43).

There is a theory that the N-methyl D-aspartate (NDMA) receptor as well as ketamine–like chemicals may be implicated, as they produce some of the symptoms characteristic of these experiences. These theories have also been dismissed, as these chemicals are usually present when the brain is stressed or damaged, and this is not the case in NDEs. Moreover, ketamine experiences, according to Fenwick (1997), are dissimilar to NDEs, as they are not clear, vivid or memorable.

Greyson (2010) argues the majority of NDE occurrences occur under general anaesthesia or during cardiac arrest. EEGs taken during general anaesthesia attest to the fact that there is “complete disablement of the brain under anaesthesia,” and full cardiac arrest “leads rapidly to the three major clinical signs of death (absence of cardiac output, absence of respiration, and absence of brainstem reflexes) (p.39). Furthermore, the normal features of NDE are of “mental clarity, vivid sensory imagery, a clear memory of the experience and a conviction that the experience seemed more real than ordinary consciousness.” Moreover, NDEs transpire “in conditions of drastically altered cerebral physiology under which the reductionist model [of biomedicine] would deem consciousness impossible” (p.38).

Hallucinations have also been proffered as an explanation for NDEs (Seigel, 1980). In reference to this hypothesis, Parnia, et al. (2001) and Fox (2003) argue that these memories differ from confusional hallucinations, as they are highly structured narratives, which are clear and easily recalled. Barbato (2009) states that the imagery of visual hallucinations differs from NDE memories in that hallucinatory imagery “invariably includes animals, bizarre figures or supernatural beings,” whereas, if human or humanoid figures are common, “they are rarely if ever recognisable” (p.91). Furthermore, Barbato states that if visual hallucinations are due to morphine toxicity, they will cease within 24 hours of suspending treatment, as will auditory hallucinations. Parnia et.al (2001) also dismiss the reductionist claim of false memory or retrospective imaginative reconstruction of NDEs.

One distinguishing feature of NDEs is that when people are out of their bodies, they witness events that could not be otherwise perceived; for example, witnessing attempts to resuscitate them at an accident scene, or in an emergency room. These phenomena are reported by unconscious people, some of whom have their eyes taped at the time of their experience, while others, as Ring (1997) reports, are blind (some from birth). Some of these testimonies also report unusual details of the events, which
have subsequently been corroborated by independent witnesses (Greyson, 2010; Kelly, 2000, 2001; Ring & Cooper, 1997).

The argument has been made that false memory may account for this phenomenon (French, 2001; Seigel, 1980), and these claims have been countered by Greyson, (2010, 2003), Parnia, et al., (2001); and Parnia & Fenwick, (2002). In his study into consistency of near death experiences, Greyson (2007) dismisses French’s (2001) false memory claim. He concludes that the findings of his study of accounts of NDE, which was conducted 20 years after the initial description of a NDE, “contradict the expectation that accounts of near-death experiences are embellished over time ... Accounts of near-death experiences and particularly reports of their positive effect, are reliable over a period of two decades ... Memories of near-death experiences appear to be more stable than memories of other traumatic events” (p.410).

When discussing the inadequacy of the mind–brain model of consciousness when deliberating on near-death phenomena, Greyson, (2010) states that “the predominant contemporary model of consciousness is based on principles of classical physics that were shown to be incomplete in the early decades of the 20th Century.” Although post classical physics have provided empirical support for “new scientific conceptualisations of consciousness,” it is only “when we expand models of mind to accommodate extraordinary experiences such as NDEs will we progress in our understanding of consciousness and its relation to brain” (p.43). Ring & Cooper (1997) sustain Greyson’s (2010) argument by stating that the “study of paradoxical and utterly anomalous experiences play a vital role in furnishing the theorists of today with the data they need to fashion the science of the 21st Century (p.146).

In spite of the compelling nature of Greyson’s argument, Lynn, Cleere, Accardi and Krackow (2010) counter Greyson’s (2010) model, by stating that “even if an elegant, comprehensive account of NDEs proves elusive in the near term ... the burden of proof rests squarely on Greyson to mount or recount convincing evidence for the extraordinary claim that a holistic, nonmaterialistic explanation must be at the heart of understanding near-death experiences” (p.118).

NDE researchers (Braude, 2003; Fenwick, 1997; Greyson, 2003, 2010; Parnia & Fenwick, 2002; Radin, 1997; Ring & Cooper, 1997; van Lommel et al., 2001) assert that the current models of reductionist science are inadequate to explain “mentation under extreme conditions” and are at odds to explain enhanced cognitive ability and memory during cerebral impairment, as well as accounting for accurate perceptions from a perspective outside the body or reported visions of deceased persons, some of
whom were not known to be deceased, prior to the event (Greyson, 2010, p.37). In
reference to their study of blind peoples’ accounts of NDE, Ring & Cooper (1997) state
that “the blind experience is more astonishing than the claim that they have seen. Instead, they, like sighted people who have had similar episodes, have transcended
brain-based consciousness altogether and, because of that, their experiences beggar
all description or convenient labels (p.146).

Health professionals’ familiarity and responses to NDEs, as well other death related
phenomena, is variable. Two studies were conducted to ascertain health
professionals’ knowledge and attitudes towards near–death phenomena. Walker &
Russell (1989) assert that the participating psychologists knew little about near-death
phenomena and there was a wide range of feeling expressed towards NDE from
support to antagonism. Barnett (1991) found that in her sample of 60 hospice nurses,
50% had adequate knowledge of the phenomena and the majority (92.18%) had a
positive attitude towards NDE phenomena, believing that it is a legitimate clinical
concern.

Between 12% and 50% of people, who are resuscitated, report near-death
experiences. Although the debate regarding causality continues with various physical
hypotheses presented, and defended, these have been carefully scrutinised and
dismissed by the researchers challenging the mind–brain model (Greyson, 2003, 2010;
Parnia et al., 2001; van Lommel et al., 2001). Whatever the ultimate outcome of this
debate, these particular end of life experiences have served a transformative function
for the experiencers, (including very young children and people who have been blind
since birth), as they have greatly reduced the fear of death and led to significantly
improved psychological health and spiritual wellbeing.

While near death experiences are not specifically related to this study, the issues
pertaining to their veracity and causality are similar to other death related phenomena.
NDE research also provides an excellent foundation for the consciousness debate,
which underpins the central issue in all other death related phenomena. Coincidentally,
three of the participants in this study believed that they owe their near death
experiences to the sudden appearance of their ongoing psychic ability, healing skills
and dramatic career changes.

Death-Bed Visions

The phenomenon of meeting deceased relatives, friends or spiritual guides has been
well described in the literature of NDEs and it occurs with people who are dying and do
not survive. This experience is considered to be transformative for the person who is dying as well as those who witness and understand this phenomenon (Barbato, 1999, 2009; Betty, 2006; Barrett, 1986; Brayne, et al., 2006; Brayne, et al., 2008; Callanan & Kelley, 1997; Dowling-Singh, 1999; Ethier, 2005; Fenwick, et al., 2010; Fenwick & Brayne, 2011; Mazzarino-Willett, 2010; Morse, 1992, 1994; Osis & Haraldsson, 1997).

Death-bed visionary experiences have been recorded throughout the ages and across cultures. They are found in literary sources, which include The Tibetan Book of the Dead, the Egyptian Pert Em Hru, and in woodcut illustrations of the Ars Moriendi. Pre-death visions, commonly reported amongst the peasants in Europe and Mesoamerica, were understood to portend the onset of dying (Fenwick, et al., 2010; Grof, 1994; Kellehear, 2007; Osis & Haraldsson, 1997). Death-bed visions are also common amongst indigenous people, including the Australian Aboriginal people, who reportedly see pre-deceased relatives and spirits when they are “finishing up.” Aboriginal health workers in palliative care settings report that these attending spirits and deceased relatives come to lead the person to ‘the other side’. These visions “are respected and honoured by Aboriginal people and they are for them predictive of death” (Barbato, 2009, p.16).

Although pioneering exploration of death-bed visions was commenced during the 1920s by physics professor, Sir William Barrett (1926/1986), formal research into this phenomenon commenced with notable studies done by Osis (1961), Osis and Haraldsson (1997) and Kubler-Ross (1999). Kubler-Ross described dying children’s visions of family members, who were not known to be dead by them. Osis conducted a questionnaire of physicians and nurses, who were requested to present their observations of gravely ill patients. He received 640 responses from the 10,000 questionnaires and found of 35,000 patients represented in these responses, eight out of ten patients, who were terminally ill, reported death-bed visions. This work was followed by Osis and Haraldsson’s (1977/1997) publication of the seminal book At the Hour of Death, reporting cross-cultural research into this phenomenon.

Seventy percent of death-bed visions are of a pre-deceased person, usually a spouse, parent, sibling or offspring. Only 13% of visions are of religious figures in the Caucasian population, and when encountered, these figures are culturally specific and these always reflect the person’s spiritual belief. Although the visions are usually of pre-deceased relatives, other imagery consists of vistas, scenes, trains or boats (Barbato, 2009).
Death-bed visions, also known as death related sensory experiences, end-of-life-experience or exceptional experiences (EEs), come under the rubric of research literature known as ‘after death communication’ (ADC). The term death-bed refers to the misapprehension that these visions always occur in close proximity to the moment of death. Barbato (2009) claims that the term, ‘death-bed’ is somewhat misleading for, although "many death-bed visions occur when death is imminent, a significant number happen days, weeks or even months beforehand" (p.18). Furthermore, the further away from death that these visions occur, the more likely they are to be unrecognised, disregarded or mislabelled as an hallucination. The word, ‘vision’ is also a misnomer, as phenomena experienced by the dying also include auditory, tactile and olfactory characteristics. These experiences are often transformative, as they have reduced the patient’s fear of death and facilitated the dying person’s transition at the time of death (Barbato, 1999, 2009; Benor, 2006; Ethier, 2005; Krippner, 2006; Mazzarino-Willet, 2010).

In their seminal work on death-bed visions, Osis and Haraldsson (1997, p.64) found that in the majority of cases (62%), visions heralded death within a day of it occurring and 27% died within the hour. In a similar, smaller study conducted by Barbato, Blunden, Reid, Irwin and Rodriguez (1999), 50% of the death-bed visions occurred within 24 hours of clinical death and 38% experienced visions more than a week prior to death. Likewise, Wills-Brandon (2000) has estimated that approximately 10% of all those who are dying are conscious shortly before their deaths and approximately 50%-60% experience death-bed phenomena However, this number may be inexact, as there is reluctance on behalf of those who experience these phenomena to disclose their experience, because of a fear of ridicule (Barbato, 1999, 2009).

Although most visions are pleasant and welcomed by the dying person, Haraldsson and Osis reported in their 1977 transcultural study that 29% of their subjects, mostly from their Indian sample, responded negatively to the apparitions. Negative emotions were directly related to the nature of the apparition. In the Indian sample, the negativity was most commonly in response to seeing the apparition of Yamdoot, the Indian messenger of death (Osis and Haraldsson, 1997, p.71).

The central features of death-bed visions are:

- The appearance of and communication with pre-deceased relatives and less frequently friends, unfamiliar figure, religious identities or heavenly beings vistas or scenes.
• Gesturing – the welcomed response to the vision is often seen in the manner in which the person responds to the experience by reaching out, or attempting to embrace whomever they see in their vision. Osis and Haraldsson (1997) believe that this may be perceived as a willingness to follow the beckoning of the relative or spiritual entity.

• A state of peace, acceptance and spiritual transformation and reduced fear of death. This is often expressed verbally and non-verbally by communicating their vision to another, as well as the change in facial expression during and after the experience (Barbato, 2009, Ethier, 2005; Mazzarino-Willett, 2010; Osis and Haraldsson, 1997).

Kubler-Ross (2008) claimed that most people, who are dying, have death-bed visions, irrespective of their psychological status. This includes people who are demented, or have a psychiatric history. However, the experience is more difficult to discern and requires careful observation in subtle changes in the person’s change of mood or behaviour to make a diagnosis that may exclude a medical or psychiatric cause (Barbato, 2009). In spite of this claim that these experiences are common, it is difficult to ascertain palliative care professionals’ experiences and responses to end of life experiences (ELEs). In their study Brayne et al., (2006) reported that their small sample of nursing home staff stated that ELEs “were neither rare nor surprising” (p.205). Barbato et al. (1999) states that although these phenomena are widely reported in psychological and psychiatric literature, there is a notable absence of this topic in mainstream palliative care journals, which he proposes “maybe a lack of awareness of such phenomena by palliative care workers or a reluctance by them to talk of such events” (p.35). Not surprisingly, other researchers have found that ELE training is lacking and many palliative care nurses feel inadequate when dealing with these issues (Brayne, et al., 2006; Brayne, et al., 2008; Cole, 1993; Fenwick et al 2010; Fenwick & Brayne, 2011).

Death-bed visions also include those experiences described by relatives and healthcare staff, present at the death-bed. Some of the phenomena witnessed include:

• Emanations of lights or radiance near or around the body;

• Vapours, or seeing mists and shapes, leaving the body of the dying person at the time of death;

• Feelings of love or light at this time often described as spreading out to fill the room, which assists to calm grieving loved ones;

• Change in room temperature during the final moments of dying and at death (either icy cold or unusually hot); and
• A sudden return to lucidity from coma or dementia with sufficient time to say goodbye (Brayne, Lovelace & Fenwick, 2008; Fenwick & Brayne, (2011); Nahm, 2009; Nahm, Greyson, Kelly & Haraldsson, 2011).

This phenomenon has been represented in various literary genres and art throughout the millennia (Aries, 2008; Bailey, 1934, 1953; Davies, 2003; DeSpelder & Strickland, 2002; Groff, 1994, 1980; Gittings, 2009; Markides, 1990; Walton, 2003), with Sir William Barrett (1926/1986) dedicating a chapter in his seminal work *Death-Bed Visions* to this phenomenon. One of the experiences related by Barrett was of a man, who witnessed these changes during the death of his wife. Although the family doctor, also present, did not witness the energetic transition of his patient, he subsequently provided a written testament, acknowledging the witness's clarity of mind during his wife’s death. The following is an excerpt of this account:

Two figures in white knelt by my wife's side, apparently leaning towards her; other figures hovered about the bed, more or less distinct. Above my wife and connected with a chord proceeding from her forehead, over the left eye, there floated in a horizontal position a nude, white figure, apparently ‘her astral body’. At times the suspended figure would lie perfectly quiet, at other times it would shrink in size until it was no larger than perhaps eighteen inches, but always the figure was perfect and distinct ... with her last breath and last gasp, as the soul left the body, the chord was severed suddenly and the astral figure vanished. The clouds and the spirit forms disappeared instantly and strange to say all oppression that weighed upon me was gone.

The debate regarding the veracity and underlying causes of all of the experiences continues. However, Fenwick, Lovelace & Brayne (2010) caution that “the dying process involves a far more subjective and intimate connection between the dying and the bereaved than previously noted by the scientific community” (p.177). Betty (2006) has responded to the differing views regarding the cause of death-bed visions, by stating that “if we don’t make the mistake of assuming that they are confused we are likely to feel some of the excitement they convey, for we are witnessing the momentary merging of two worlds that are at all other times remain tightly compartmentalized and mutually inaccessible. The merging is what I mean by spirituality of death” (p.37).

Morse (1994), in refuting the argument that death-related phenomena are pathological, summarises their relevance and recommended management, by asserting that:

they are a coherent spectrum of events that cannot be understood in isolation. It is only necessary to honour the basic principles of medical care, to listen to
patients and validate their feelings and intuitions. The experiences have a power to heal, not only our patients but also our society, which is grappling with the limitations of medical technology and our denial of the reality of death (p.78).

Summary

The literature reveals that ELEs are relatively common and are an intrinsic part of the dying process and yet knowledge and management of these important events are inadequate, primarily due to lack of training within the health care system. The conclusions of researchers of these phenomena is that the majority of health care staff interviewed in studies were concerned at the lack of ELE training and recommended that this aspect of dying to become part of standard teaching practice (Barbato, 1999; Brayne et al. 2008; Brayne et al., 2006 Fenwick et al. 2010; Mazzarino-Willet, 2010; Nahm et al, 2011). Given the positive effects of these experiences on people who are dying and those associated with them, it is timely that research into this phenomena is treated as a legitimate subject for medical and health research.

Terminal Lucidity

The sudden re-emergence of coherence or lucidity by people who are suffering from severe psychiatric or neurological conditions is known as terminal lucidity (TL). This phenomenon has been noted and described in the literature since classical times. Scholars such as Hippocrates, Plutarch, Cicero, Galen and Avicenna observed that the symptoms of mental illness decreased with the approach of death. They attributed this phenomenon to the fact that the person’s soul remained intact and unaffected by mental pathology or illness, and shortly before or during death, it was released from its material constraints, thus regaining its full potential (Nahm, 2009).

In current literature on the subject, the conditions in which terminal lucidity has been observed include people suffering from brain abscess, tumours, stroke, meningitis, schizophrenia, dementia and affective disorders (Nahm, 2009; Nahm, Greyson, Kelly & Haraldsson, 2011). Although there is a relative scarcity of literature devoted to the subject of TL, researchers found in a recent study of end-of-life experiences reported by caregivers in an English nursing home, that seven out of ten staff members have witnessed a return to lucidity in patients suffering from dementia and confusion, shortly before dying (Brayne, et al., 2008).

In their recent review of the literature on terminal lucidity, Nahm, Greyson, Kelly and Haraldsson (2011) state that although physicians of the 19th Century were very familiar with this phenomenon, publication of cases in the 20th Century are primarily from non-
medical sources. Nahm et al. (2011) state that this “intriguing phenomenology” given in accounts, particularly where destruction of brain tissue is apparent, “pose difficulty for currently prevailing explanatory models of brain physiology and mental functioning”. This phenomenon is particularly curious in terminally ill people with neurological pathology, such as stroke, tumours or Alzheimer’s disease. Furthermore, these authors argue that the study of terminal lucidity may “elucidate the factors governing the particular relationship between mind and brain, particularly as the brain deteriorates” (p.4).

Death-bed Coincidences

‘Death-bed coincidences’ are phenomena occurring at the time of death, which have been reported by researchers (Barrett, 1986; Fenwick & Fenwick, 2008; Fenwick & Braine, 2010; Mackenzie & Henry, 2005; Osis & Haraldsson, 1997). This term refers to accounts from people, who are emotionally close to someone and who, unaware that the person is dying or dead, see an apparition of their loved one, or experience an intense feeling that the person may be in difficulty, or may have died. These experiences often occur when the receiver is asleep or, alternatively, in a dream or immediately after awakening. Frequently, the recipient has a vision of the dying person, or hears their voice. These experiences often transpire when least expected. The sense of love and connection that most recipients feel, identify these coincidences as profound moments, “which turned into spiritual reminiscences to be remembered with a sense of awe” (Fenwick & Braine, 2011, p.12). The message most repeatedly gleaned from these experiences is that the person has just died and is safe. This experience is usually described as one of great comfort to the recipient.

After Death Communication (ADC) or Extraordinary Experiences (EEs)

As the purpose of this study was to describe healers’ perceptions of the perimortal process, which includes the phenomena that are perceived following death, it is timely to discuss after death communication. This phenomenon, also known as post death contact (PDC), refers to an encounter with a person who is deceased and denotes signs or incidents, “which hold special meaning for the survivor.” This experience manifests in a variety of ways, namely, visions and dreams, lost-objects-found, symbolic messages and sightings (Daggett, 2005, p.191). However, the most common experience found in Haraldsson’s (1988) study of 127 widows was visual perception (59 percipients), with 44 percipients experiencing more than one modality.
Studies (Greeley, 1987; Kalish & Reynolds, 1973) reveal that between 42%-44% of the general population of contemporary Americans reported some form of contact with the dead. Haraldsson (1988) reported that a multinational gallop poll in 13 Western countries revealed widespread occurrence of this phenomena, as well as cultural differences within the selected countries. In a study conducted by Barbato and his colleagues in an Australian Hospital in 1996, 49% of the subjects reported contact with the dead (Barbato et al., 1999).

Post death contact is experienced in various ways. Table 3.1 summarises the categories and common features of extraordinary experiences (EE) described by the bereaved.

<table>
<thead>
<tr>
<th>Experience</th>
<th>Features /Examples</th>
</tr>
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<tbody>
<tr>
<td>Intuitive or sense of presence</td>
<td>Sometimes accompanied by a telepathic or mental message</td>
</tr>
<tr>
<td>Visual or apparitional presence</td>
<td>Maybe facial or full body appearance</td>
</tr>
<tr>
<td>Auditory or voice experience</td>
<td>Can include telepathic communication</td>
</tr>
<tr>
<td>Olfactory or sense of smell</td>
<td>Flower scent, pipe smoke perfumes or colognes</td>
</tr>
<tr>
<td>Tactile (Sense of touch)</td>
<td>Sense of being embraced or kissed or touched by loved one or divine being</td>
</tr>
<tr>
<td>Unusual behaviour of animals or birds</td>
<td>Appearance in unusual places or times being associated with loved one</td>
</tr>
<tr>
<td>Symbolic</td>
<td>Unusual appearance of rainbow or butterflies repeatedly appearing and staying with survivor. Finding objects associated with the deceased</td>
</tr>
<tr>
<td>Third party experiences</td>
<td>Claimant receives a sign or message that comes through 3rd person (either child or adult) who has an extraordinary experience</td>
</tr>
<tr>
<td>Fourth-party experience</td>
<td>In which the claimant receives a message that comes through two other people</td>
</tr>
<tr>
<td>Visitation dreams</td>
<td>Vivid unforgettable, life like dreams</td>
</tr>
<tr>
<td>Out-of-body experiences</td>
<td>Claimant has an out-of-body experience and sees the departed loved one</td>
</tr>
<tr>
<td>Psi Kappa (nothing shall separate us) experience</td>
<td>Objects move, a clocks stop or starts at the moment of death; lights or electronic equipment go on and off as a sign</td>
</tr>
<tr>
<td>Synchronicities</td>
<td>Meaningful coincidences pairing something associated with the deceased and an unexpected physical event</td>
</tr>
<tr>
<td>Crisis apparitions or sense of presence</td>
<td>Visual appearance or sense of presence of the loved one is experienced before the survivor has been notified of the death</td>
</tr>
</tbody>
</table>

Table 3.1 Categories of Extraordinary Experiences (EE) of the Bereaved (LaGrand, 2005 pp.9-10).
Post death contact has been interpreted as part of a bereavement model known as Continuing Bonds, in which the bereaved individual does not ‘get over’, or sever the bond with the deceased loved one, but rather maintains an inner representation or mental image of the deceased. The phenomena associated with PDC are considered by some researchers as mental constructions of the person who has died (Klass, 1993). However, whether these events described in ADC are real or imagined, they are highly significant to the individual experiencing them (Daggett, 2005; Kalish & Reynolds, 1973; LaGrand, 2005).

Kalish and Reynolds (1973) argue that since the writings of anthropologist Carlos Castaneda (1968, 1976), describing his experiences with Don Juan, a Yaqui sorcerer, “many people have been made aware of the importance of considering individual reality on its own terms as opposed to insisting that perceptions of reality must be shared in order to be considered valid” (p.210). This view also fits with the tenets of phenomenological research. For many people within Western society, an encounter with someone after their death is considered a dramatic example of individual reality, which has a deep impact on the percipient and according to Kalish & Reynolds (1973), is rarely shared by others. These authors argue that often members of the helping professions believe that the individual realities that stem from post death contact “signify a serious form of emotional or social disorientation. Thus, they focus on the diagnosis or even treatment of what they may contend is a condition” (p.210). Consequently, individuals who experience ADC (and those who experience other phenomena discussed within this section) may be reluctant to discuss their experiences, for fear of ridicule or loss of credibility.

Daggett (2005) asserts that “acknowledgement of the phenomena may enhance understanding and support for those coping with this most challenging life experience” (p.206). Krippner (2006) concurs with this view, by stating that “the majority of these experiences are “non-pathological, not pathological: natural, not preternatural; and can be useful in helping survivors move through the grieving process” (p.182). Barbato et al. (1999) warn that in attempting to find the aetiology of parapsychological phenomena related to death and dying, “there is a danger that in objectifying or analysing an experience we may lose sight of its significance for the bereaved and dying ... assumptions about their origins and credibility can alienate subjects at a critical time of their mourning or dying” (p.36).

The literature pertaining to the neurological and psychological theories, which are associated to death related phenomena, were discussed in the ‘near-death experience’ section of this chapter. ‘Transcendent theory’ provides an alternative explanation for
the general lack of success that researchers using reductionist methods and tools have had in their attempts to explore death related phenomena. Barbato (2009) defines ‘transcendent theory’ as one based on the belief that “near death and other experiences around the time of death are beyond normal perception and human understanding and are therefore unknowable to the rational mind” (p.78).

Consciousness researchers, Dunne & Jahn (2007), eloquently reflect this alternative viewpoint when they state that:

> the voice of the wind is the whisperer of the spirit, the breath of life. It sings to the heart, in a language that the scientific mind is not trained to comprehend. It murmurs in inscrutable enigmas and archetypal symbols, arousing a sense of wonder and a longing for understanding (Dunne & Jahn 2007, p.235).

The relevance of exploring the mystical experiences that constitute death related phenomena is given by Moreman (2006), who states that “transcendent meaning seems to guide a forward evolution of some kind” and that “paranormal phenomena can be seen as markers and indicators of this transcendent meaning.” According to Barbato, advocates of this theory are often people who have had a near-death experience, as well as other leading researchers, such as Raymond Moody and Elizabeth Kubler-Ross. Transcendent theory, however, is not readily acceptable to fundamental materialist scientists, nor is it acceptable to a number of theological students within Western spiritual traditions. Barbato (2009) attested to this general scepticism when he asserted that “the same degree of polarisation and confusion exists in the ranks of the clergy and theologians as in the secular world” (p.82).

From a cross cultural perspective, the phenomena most frequently seen as proof of post mortem survival; such as ‘out of body’ experiences (OBE), near death experiences, mediumistic communication and apparitions, have been reported in cultures regardless of religious doctrine and have been described in secular literature throughout the millennia. There are references in the Old Testament of the Bible and in the Koran to the spirits of the dead, as well as admonitions to the congregations of these traditions, against communicating with these spirits (Moreman, 2006). In contrast, many Buddhists and Hindus practice shamanic rituals, which include communication with the dead and astral travel, as an element of their spiritual practice (Freed & Freed, 1993; David-Neel, 1971).

When considering the historical literature on dying and death, Kellehear (2007b) states that when there is a “clear social picture of death” with afterlife images of various kinds,
there has been a commensurate clarity in the social role and focus for people who are
dying and those who are caring for them. By contrast,

wherever and whenever death has been asocial - a content-free nothingness, an
extinction, or a disappearance - the roles of dying and grieving have also been
hidden, embarrassing, and lacking social direction and legitimacy. In these ways,
when death has its own life, death is a community affair, a celebration of
transition and transformation (p.72).

The secularization and comodification of dying and death in post-industrial Western
society has been very costly to the dying, in that it has sustained community dread and
fear of death. It has also led to the disenfranchisement and marginalisation those who
are dying by pathologising their transcendent experiences. This opprobrium has also
been extended to other witnesses of these phenomena as well as the bereaved.
However, there is a growing acknowledgment that this transition is a more complex
issue than the secular model of dying and death suggests. Rhea White (1997) states
that “we need to become aware of what Jung called the gradient of our beings. I think
the best way to sense that drift is via the human exceptional experiences that life gives
us” (p.84). In response to the ineffability and impossibility for transcendent experiences
to be objectified or to be reproduced at will, White (1997) maintains that ‘exceptional
experiences’ such as the ones surrounding death are “as spontaneous as moments of
grace, which indeed they may be” (p.84).

Summary

This chapter addressed the literature associated with the spiritual and transpersonal
aspects of perimortality, related to the transcendental and spiritual realm. Following an
account of the major spiritual traditions central beliefs about death, the various aspects
of dying and death were discussed. Near death experience was examined, in light of
its relevance as a phenomenon, to provide valuable insights into the dying process,
and the questions this phenomenon broaches regarding the nature and location of
consciousness. The literature concerning end of life experiences including to death-
bed visions, terminal lucidity, death-bed coincidences and after-death communication
were discussed in reference to their veracity, possible mechanisms and the
transformative effect that they had on the dying person, bereaved loved one or witness
experiencing these phenomena.
The importance of all aspects of end of life experiences is that not only do they give credence to the transformative aspects of dying and death, but they also provide an alternative view of consciousness than the one proffered by mainstream medical science. Their inclusion is relevant to this study, as the participants describe similar phenomena in their interviews. Because these phenomena are relatively unknown in the wider community, I have provided a description of each subcategory to present a context for the review of the associated literature. The significance of phenomena described in these end of life experiences and during ‘post death contact’ is that they support the existence of a ‘spirit body’, which coexists with the physical but transcends the spatial and temporal constraints of the physical world, as it is perceived through our sensory experience (Moreman, 2006). This gives credence to the capacity of healers to access this non-physical aspect of a person for healing purposes. These experiences also support the notion that some aspect of sentient life survives physical death. Most significantly, this research offers the message that death is not to be feared. These ideas are central to this study.
CHAPTER FOUR

LITERATURE REVIEW: CONSCIOUSNESS AND SUBTLE ENERGIES

I have already died all deaths,
And I am going to die all deaths again,
Die the death of the wood in the tree,
Die the stone death in the mountain,
Earth death in the sand,
Leaf death in the crackling summer grass
And the poor bloody human death.
Hermann Hesse (Wright, 1970 p.79)

This chapter concludes the descriptive and analytical review of literature structured according to Wilber’s perception of the three realms of being and the methods used to assess these realms. Chapter Three commenced the exploration of the spiritual realm, which is accessed through the “eye of the Spirit.” It examined the spiritual and transpersonal aspects of perimortality. Chapter Four discusses the various theories and the crosscultural understanding related to consciousness and post-mortem survival. It describes the constituents of the human energy field, investigates the literature underpinning the current understanding of these and other subtle energies, and their theoretical relationship to consciousness and healing. This chapter concludes with an examination of the literature associated with different types of healing research, the inherent difficulties encountered by researchers when exploring both the mechanisms of healing, validating their claims and the obstacles encountered when attempting to publish these studies in mainstream medical journals.

Consciousness and Evidence for Post-mortem Survival

One of the oldest questions to challenge investigators from scientific, theological and philosophical domains in all cultures is whether consciousness survives physical death. This question is central to my study, because the healers’ perceptions, particularly during the post-mortem stage of this study, intimate that consciousness does survive in the post-mortem state.

The genesis of the word consciousness is relatively recent, dating back only a few centuries. It was derived from the Latin word conscientia, which was a jurisprudence
term meaning the knowledge a witness has of another's deeds. Consciousness has had a number of meanings during its evolution. Its contemporary meaning has its origins in Cartesian sense of the word *conscientia*, to denote an awareness of an inner reality; the awareness of ideas, thoughts or images (res cogitans). This definition was further elaborated upon by Locke, who emphasized the inner experiences of the mind as the only dependable basis of knowledge. It is understandable, therefore, that within the Western tradition, the concepts of ‘consciousness’ and ‘mind’ are often interchangeable (Combs, 2009; Rao, 2002).

As conscious beings, humans function at two levels. Awareness can be directed outwards, focusing on objects and events, or inwards towards one’s thoughts, feelings and being. Outward awareness of objects and events in the physical domain lends itself to the application of the guiding principles of scientific method to provide intersubjective validation. By contrast, the experience of inward awareness is limited to the experiencing subject and, as such, is not accessible to public verification. The ontological questions regarding primacy of the two knowledge domains that arise from these forms of awareness and the means by which they can be explicated are long standing (Rao, 2002).

In his work in the cross-cultural perspectives of consciousness, Rao (2002) asserts that the dominant intellectual traditions around the world are formed by a matrix of four constituents, the Greek, the Jewish, the Chinese and the Indian. The Greek and Jewish intellectual domains constitute the Western tradition, while the Chinese and Indian comprise the Eastern tradition. Each tradition has made distinctive contributions to knowledge in various spheres, including an understanding and study of consciousness.

The primary difference between the Eastern and Western conception and study of consciousness lies in the focus and emphasis on inner and outer awareness. The Western tradition emphasises outward awareness. It is concerned with materiality and the focus is on the object of the experience. The preferred method of exploring physical phenomena is rational and intellectual. Therefore, it subscribes to the principles of the scientific method. Within the Western tradition, consciousness is generally considered to be an aspect of the mind and intentionality is thought to be its defining characteristic. The goal in studying consciousness within this paradigm is to seek a rational understanding of what consciousness/mind is (Rao, 2002).

The focus of Eastern tradition is inwardness, which can be explicated by reasoning. However, this method of explication is subservient to inner experience, whose contents
differ from the outward material content of reason. Therefore, the preferred method of explication is psychological rather than physical and is characterised by first-person based introspection. Eastern tradition subscribes to the view that consciousness is an autonomous principle, which is grounded in spiritual traditions and its features are represented by Hindu and Buddhist theories, particularly within the philosophical schools of Samkhya Yoga, Advaita Vedanta, and Buddhism. In contrast to Western traditional thought, Eastern traditions make a basic distinction between consciousness and mind. The existence of pure consciousness, which is thought to be nonintentional, is postulated, whereas in contrast, mental phenomena are regarded as intentional (Rao, 2002, p.8). Rao (2002) argues that one can ascribe primacy to subjective awareness, because it alone is directly accessible, whereas “objective” knowledge is mediated and, therefore, only available indirectly. However, he concedes that because it is inaccessible to intersubjective validation, subjective awareness, and the primary role of subjective awareness as a means of studying consciousness, can be questioned.

Currently, there are two primary ways of regarding consciousness and each has implications in terms of its survival following physical death. Researchers' theories are diverse and oppositional, with some researchers debating that the dependence of the human personality with the physical brain disqualifies any possibility of a non-physical aspect of the mind and therefore, no possibility for survival. Researchers, such as Churchland (1986, 2011), Dennett (1991, 2001), Johnson-Laird (1983), Burns (1991), Blackmore (2003) and Metzinger & Gallese (2003), subscribe to a reductionist materialist paradigm and attest to the theory that consciousness is a bio-product of the brain and manifests from an interaction between electrical, biochemical and neuro-hormonal activity, within complex webs of neurones, which reside in specific areas of the brain.

Within the Indian tradition, mind is deemed a subtle form of matter. Alternatively, consciousness is non-corporal. In this tradition the mind is the interfacing instrumentality or conduit between the external world and consciousness (Rao, 2002). A similar view is proffered from Buddhist physicist Dharmawardena (1999), who argues that consciousness is not a property of the brain, or a by-product of the brain’s activity. Rather, while interacting with the brain during biological life, it is a non–material entity, which is independent, as is demonstrated by its temporary separation from the body during mystical experiences, when life is threatened and with impending death. Furthermore, the departure of consciousness is permanent with biological death. These views are reiterated by such authors as Goswami (1993, 2001), Chopra (2006), and Phillips (1995).

Numerous researchers, scholars, philosophers and scientists (Braud, 1997; Capra, 1975, 1982; Follesdal, 2001; Heidegger, 1962, 2001, 2008; Husserl, 1952, 1964, 1975, 1990; Gadamer, 1976, 1989; Grof, 1994; Grof & Grof, 1980; Grof & Halifax, 1977; Lazlo, 2004, 2011; Merleau Ponty, 1962, 1968; Rao, 1997, 2002; Ricoeur, 1981, 2003; Targ & Katra, 2001; Targ & Puthoff, 1977; Turnbull, 1992; Wolf, 2002) question whether the scientific method and logical discourse, which seem to adequately disclose outward experience, can adequately explicate inward, subjective experience. This argument is applied to the study of consciousness. Jahn (2001) argues that in relation to consciousness “as yet we do not really know how to define it, how to characterize it, how to model it, or how to measure its properties. We do not understand its relationship with the physical world, including those with its own physiological mechanics” (p.456). Furthermore, he argues that “the inclusion of consciousness within the purview of rigorous science indeed represents an array of conceptual and methodological problems”, as it brings with it “a universe of subjective experience and expression that does not nestle well into the canons of scientific objectivity, replicability and quantification, along with a host of mildly and wildly anomalous physical events” (p.456). Rao (2002) reiterates this argument asserting that there are intrinsic difficulties in “casting consciousness in a wholly deterministic and reductionist mould” and encourages scholars to consider “the exciting implications of the views that grants primacy and autonomy to consciousness across the entire range of consciousness” (p.9).
In her introduction to the conference into *The Interrelationship Between Mind and Matter*, biophysicist, Beverly Rubik (1992), succinctly articulates a major problem in the application of a scientific reductionist paradigm for such things as the exploration of the subtle manifestation of consciousness or subtle energy. She cites mathematician, John Von Neumann, who said “If you start with molecules and use standard reasoning of physics and chemistry and standard experimentation, you will never find anything but the properties of molecules” (p.3).

Philosopher, Ken Wilber (1996, 1997, 2000, 2000a, 2001), is both inclusive and ambitious in his assertions, making further distinctions regarding the disparate views of what constitutes consciousness, where it resides and how it can be studied. He argues that there are 12 conflicting schools within consciousness theory and research; each of which he believes “has something irreplaceably important to offer.” Wilber asserts that “the interior dimensions of the human being seem to be composed of a *Spectrum of Consciousness*, running from sensation to perception to image to symbol to concept to formal to vision-logic, to psychic to subtle to causal to nondual states.” Consequently, he has endeavoured to develop a model, which integrates the essential aspects of each of them (1997, p.1). Although disparate, essentially these schools either subscribe to the mind brain model or proffer non-materialist models when they conceptualise the location of consciousness. Wilber’s categories and their underlying theoretical position have been summarised in Table 4.1, because they demonstrate the diverse ways in which consciousness is conceived and applied across the discipline.

Wilber (1997) summarises his claim by stating that “consciousness is not located in the physical organism, or in the ecological system, or in the cultural context, nor does it emerge from any of these domains. Rather, it is anchored in and distributed across, all of those domains with all their available levels” (p.17). Similarly, Rao (2002) summarizes the complexities of consciousness studies and argues that although contemporary notions of consciousness within the Western scholarly tradition embrace a multitude of concepts, the common thread that runs through all these disciplines is that consciousness refers to some form of awareness.

The four basic forms of awareness under investigation are:

- Paradoxical awareness, in which nonssubjective and unrecognized awareness embraces as a variety of mental phenomena, including subliminal perception, implicit memory, hypnotic analgesia and negative hallucination, and other forms of impaired awareness from brain damage. This form of awareness is inaccessible to introspection.
<table>
<thead>
<tr>
<th>Discipline/Field of Study</th>
<th>Assumptions</th>
<th>Location of Consciousness</th>
<th>Proponents/Researchers</th>
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<tbody>
<tr>
<td>Individual Psychotherapy</td>
<td>Consciousness anchored in individual organism’s adaptive capacities</td>
<td>Interior intentionality cannot be explained in physicalist or empiricist terms, methods or validity claims</td>
<td>Asagioli, 1971; Erickson, 1982; Ferrucci, 1982; Havens, 1989; Jung, 1964, 1971; Rossi, 1980</td>
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<tr>
<td>Social Psychology</td>
<td>Consciousness: (1) embedded in networks of cultural meaning or (2) a by-product of social system itself</td>
<td>Nexus of consciousness is not located in the individual</td>
<td>Bateson, 1980; Gadamer, 1976, 1996; Lovelock, 1986; Marx, 1974; Maturana &amp; Varela 1988; Ricoeur, 1981, 2003; Von Essen, 2010; von Foerster, 1984; Watzlawick, 1984</td>
</tr>
<tr>
<td>Developmental Psychology</td>
<td>Consciousness – not a single entity but unfolding process</td>
<td>Residing in organic, complex neural systems within the physical brain</td>
<td>Carey &amp; Gelman, 1991; Flavel, 1992; Galton, 1983; Jiménez, Vaquero, &amp; Lupiáñez, 2006; Piaget, 1977; Rosch, 1973; Rumelhart, 1981; Shanks, 2005</td>
</tr>
<tr>
<td>Psychosomatic Medicine</td>
<td>Consciousness is intrinsically interactive with organic bodily processes</td>
<td>Non local, cannot be explained in physicalist or empiricist terms, methods or validity claims</td>
<td>Bottomley, 2009a, 2009b; Childre &amp; Martin 1999; Diensthrey, 2005; Pert, Dreher &amp; Ruff, 2005; Simon, 1999; Taylor, 2009</td>
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<tr>
<td>Discipline/Field of Study</td>
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<td>Eastern &amp; Contemplative Traditions</td>
<td>Ordinary consciousness is narrow and restricted version of deeper and higher modes of awareness</td>
<td>Non-local, cannot be explained in physicalist or empiricist terms, nor be subject to its methods or validity claims</td>
<td>Boyd, 1999; David-Neel, 1971; Govinda, 1969; Kalu, 1997; Levine, 1986; Macy, 1991; Muktananda, 1994, 1999, 2000; Nisargadatta, 1984; Osborne, 1995; Suzuki, 1988; Targ &amp; Hurtak, 2006; Varella, 1997; Vessantara, 1993; Villodo, 2007; Wallace, A, 2003; Yogananda, 1972</td>
</tr>
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</table>

Table 4.1 Consciousness Schools: Categories, Proponents and Theoretical Positions (Wilber 1997)
The four basic forms of awareness under investigation (continued):

- Primary awareness is that which occurs in response to acts of perception, thinking, feeling and volition. This category includes perceptions, images, inner speech, feelings, abstract concepts, beliefs, intentions and expectations. Primary awareness is characterised by its subjective quality, its accessibility to introspection and immediate transparency.

- Pathological awareness is aberrant, dysfunctional awareness. Included in this category are cognitive abnormalities, multiple personalities and thought disorders, such as those experienced in schizophrenia.

- Paranormal awareness refers to non-sensory, non-representational awareness experienced in ESP, mystic experiences and pure consciousness. Parapsychological phenomena are acausal, with no casual link between the subject and the object of awareness (Rao, 2002).

This last category of awareness is contentious with the reductionist scientific community. One of the primary reasons for this Rao (2002) argues is that mainstream science “tends to reject parapsychological claims on the ground of their antecedent improbability.” Furthermore, he states that “if the claimed phenomena are genuine as they seem to be, their relevance to understanding consciousness is paramount” (p.106). However, paranormal awareness, which includes Wilber’s last four categories in Table 4.1, is of consequence to this study, because it is from these domains that this study’s participants operate and have shared their perceptions.

**Non-ordinary States of Consciousness Research**

Non-ordinary or altered states of consciousness include such states as peak experiences, religious or mystical experiences, drug induced states, holotrophic and meditative or contemplative states (Grof, 1994, 2006; Tart, 1975; Wilber, 2001). Ancient and preindustrial societies have cultivated non-ordinary states of consciousness as a means of connecting with sacred realms, communicating with nature, connecting with community members, who are not physically present, and for detecting disease and instituting healing. Western industrial society’s interest in researching nonordinary states of consciousness, to gain a deeper insight into the nature of consciousness, developed from 1950’s and 1960’s with the increasing interest in Eastern spiritual philosophies, shamanism and mysticism (1994, 1993,

**Eastern and Contemplative Traditions**

In contrast to the Western scientific perspective that considers consciousness as local, related to, and dependent upon various cortical structures and incapable of independent existence, the assumptions of Eastern and contemplative traditions are that consciousness as such, is inert and formless. It has no content and therefore, is not an object of cognition. Lazlo (2004) expresses these views from the philosophical viewpoint of Vedanta, stating that “the Indian Vedic tradition regards consciousness not as an emergent property that comes into existence through material structures such as the brain and the nervous system, but as a vast field that constitutes the primary reality of the universe” (p.155). Although there are variations of thinking within Eastern spiritual traditions, in general terms, consciousness is “non-rational and yet is foundational for all awareness and knowledge” (Rao, 2002, p.200).

According to the Indian Advaita Vedanta (non-duality) tradition, there are four forms of consciousness, the waking state, the dream state, the state of deep sleep and the transcendental state. Consciousness, which is mediated by mind, is referred to as phenomenal awareness, which has three aspects: the subject, the process, and the object of awareness. Pure consciousness, which is unmediated by any mental modes, is transcendent awareness, considered supreme as it is completely unbiased. This form of consciousness is attained by voluntarily restraining all mental functions and is
trained by such disciplines as yoga, it cross-cultural equivalents, and meditation (Rao, 1997, 2002). These notions are compatible with the quantum viewpoint of consciousness. Furthermore, Wilber (2000) elaborates on the non-dualistic perspective, when he states that according to the Eastern and Western non-duality schools, which include Plato/Plotinus, Eckhart, Vedanta, and Mahayana Buddhism, the apprehension of non-duality is that, “it is absolutely not that each being is a part of the One, or participates in the One, or is an aspect of the One ... An individual Holon is not part of One Spirit because each individual holon is the one spirit in its entirety (p.357).

Quantum Consciousness

Traditionally, physicists have treated consciousness as nonexistent or beyond the scope of their discipline. For those who recognised its existence, the general premise within the discipline was that consciousness emerged from the physical, and fundamentally, it was not any different from it. Stapp (1989), when elucidating this stance, asserts that for these physicists, “classical physics has no natural place for consciousness. According to the classical precepts, the sole ingredients of the physical universe are particles and local fields, and every system is completely described by specifying the disposition over space and time of these kinds of localized fields” (p.208).

In response to the understanding that the simple act of observation alters the nature of a physical system, the founders of modern physics, Heisenberg, Schrödinger and Einstein, pondered deeply on the nature of human consciousness (Lazlo, 2004). A growing number of contemporary physicists, who have continued this quest to understand the nature of consciousness, continued to speculate about its relationship to mind and matter (Goswami, 1993, 2001; Penrose, 1989, 2001; Radin, 1997, 2006; Rubik, 1992; Schrödinger, 1967; Swanson 2003; Targ & Puthoff, 1977; Targ, 2004; Wolf, 2002).

Two essential aspects of quantum theory have led theoreticians to postulate that quantum mechanics has determined the primacy of the inseparable whole, where there is a fundamental interconnectedness within and between organisms and that of the organism and its environment. Firstly, wave/particle duality, where unobserved subatomic particles can either function as a ‘wave of possibilities’ or a particle, depending on whether they are being observed or not, led researchers to argue that consciousness influences physical process. Secondly, quantum coherence or
inseparability, demonstrates the nonlocal characteristics of physical objects, resulting in non-local connections occurring instantly between objects, independently of space, time or shielding. Researchers (Braud, 1997; Goswami, 1993, 2001; Laszlo, 2004; Millay, 1999; Radin, 1997, 2006; Swanson 2003; Targ, 2004; Targ & Katra 1999, 2001; Targ & Puthoff, 1977) argue that these and other aspects of quantum mechanics are influential in attempting to describe the mechanisms of distant healing, and extrasensory experiences including some of the phenomena discussed earlier prior to and following death.

In most respects, the consciousness theories derived from quantum physics share much more in common with Eastern spiritual traditions than other Western paradigms. This similarity particularly applies to ideas related to the non-locality of consciousness. Both schools of thought provide helpful insights into possible mechanisms of healing and the transition of consciousness.

**Subtle Energies**

In spite of a considerable international body of research into the existence, constituents and mechanisms of the bioenergy, its existence is not recognised by conventional scientists, who assume that energies other than the four basic energies (strong and weak nuclear, electromagnetic and gravitational), do not exist. However, the specific means in which consciousness interacts with matter and energy are yet to be confirmed. During the past decade, a number of contemporary scientists from different disciplines have propounded various theories about the unity and non-locality of consciousness, which may further our understanding of the mechanism of hands on and distant healing (Goswami, 1993; Jahn, 2001, 2007; Jahn & Dunne, 2007; Laszlo, 2004; Sheldrake, 1995, 2000, 2005; Targ, 2001, Targ, 2001; Targ & Katra, 1998; Targ & Puthoff, 1977; Tiller, 1993, 1997, 1999, 2002, 2006; Radin, 1997, 2006; Wolf, 2002).

Ervin Laszlo (2004), a systems theorist, has proposed that so called non-local consciousness-mediated events, such as intercessory prayer, may be explained through developments in physics concerning the ‘quantum vacuum’ and ‘zero point field’. In his book, *Science and the Akashic Field*, he poses a rhetorical question:

> Could it be that our consciousness is linked with other consciousnesses through an interconnecting Akashic field, much as the galaxies are linked in the cosmos, quanta in the microworld, and organisms in the world of the living? And could it
be the same field that we have encountered before, manifesting itself in the realm of mind and the realms of nature? (p.44)

A British botanist, Rupert Sheldrake has developed an ‘Hypothesis of Formative Causation’, which asserts that so called “morphogenic fields play a causal role in the development and maintenance of the form of systems at all levels of complexity” (1995, p.71). Morphic fields, according to Sheldrake (1995, 2000, 2005), are within and around everything from cells, tissues and organs, as well as such more complex organisational structures, as societies and ecosystems and are regions of influence in space-time, similar to those fields which are currently recognised in physics. Sheldrake (1995) argues that past fields influence present ones and “not only does a specific morphogenic field influence the form of a system ... but also the form of this system influences the morphogenic field, and through it becomes present to subsequent similar systems” (p.96). As these fields involve some type of action at a distance in both space and time, which does not decline with distance, Sheldrake asserts that his model of formative causation may elucidate the mechanism of distant mental events. This would include such practices as healing and intercessory prayer, as well as parapsychological phenomena.


In exploring the various concepts of consciousness, it is apparent that researchers in the cognitive science domains have similar conceptual models as the neuroscientists, who were referred to by Beverly Rubik (1992), in her introduction to The Interrelationship Between Mind and Matter conference. According to Rubik (1992), these scientists define mind “in terms of such features as memory, perception, language and analytical ability. However the subtler, unquantifiable dimensions of innate mind, such as states of consciousness, self awareness, and volition are not addressed. Nor are meaning, value and mind’s teleological character considered relevant to the present practice of science” (p.7). The latter aspects of consciousness
are explored by researchers in the last five aspects of Table 4.1, as well by the social scientists and philosophers earlier in the same Table.

Rao (2002) recognises the controversies and conflicts within the various schools of consciousness study and asserts that the inherent historical weaknesses in consciousness research have been demonstrated in the “multiplicity and diversity of connotations of the core concept, the incoherent contexts of its emphasis and debilitating cross purposes of those interested in studying it” (p.3). He proposes a means of resolving these past limitations and turning them into strengths, by turning future consciousness studies into a transdisciplinary endeavour. The importance of investigating consciousness is well expressed by Jahn (2001), who states that “in studying consciousness, we are doing nothing less than studying our own vital essence: our minds; our spirits; our lives; and our eternal presence and purpose in the cosmic plan” (p.456).

Summary

The research into anomalous experience such as NDEs and other near and post death phenomena, which were discussed in Chapter Three, as well as distant intentionality, falls into the purview of paranormal or psychic phenomena (psi). In summarising the importance of this research, scientist and consciousness researcher, Dean Radin (2006), states that the principal affect that:

A scientific acceptance of psi would provoke in the short run is a change of world view. Real psi carries profoundly important implications for our understanding of whom and what we think we are. It indentifies an entirely new realm of knowledge ... It would also force us to re-evaluate ancient lore about the nature of consciousness ... The Tibetan tradition of dream yoga, and the extensive literature on the bardsos, the transitional states between living and dead (and beyond), suggest that Western Scientific understanding of life and mind may have been examining only a tiny portion of our capabilities (pp.276-7).

Because of its differing characteristics and manifestations, numerous researchers (Combs, 2009; Dossey, 2002, 2005, 2008; Goswami, 2001; Radin, 1997, 2006; Rao, 2002; Rubik, 1992; Schlitz, 2005; Wilber, 1997, 2000a, 2000b, 2001) assert that different conceptual maps are necessary to study these distinct areas of consciousness. Similarly, differing methodological strategies are necessary to investigate such diverse forms of consciousness. These methodological tools need to
correspond to and be compatible with the particular goals and objectives identified by those investigating a particular form of consciousness.

The theories and models outlined and discussed in this chapter provide plausible explanations for the underlying mechanisms of healing and the veracity of so called para-psychological phenomena explored both in this chapter and in the previous one. Furthermore, they provide an alternative understanding of contemporary understanding of consciousness, which is of central interest to this study. In acknowledgement of the arguments and in recognition of the fact that dying and death and the possible survival of consciousness following biological death is, and has been, a crucial aspect of the consciousness debate, this study aims to contribute to this knowledge base by explicating the phenomenological aspects of this transition. It is now timely to examine the research related to the subtle energies that are intimately related to the human body. These subtle energies are commonly referred to as the human energy field (HEF) and are considered in some spiritual traditions previously discussed, by indigenous communities and by some contemporary researchers and healers to be the receptacle of consciousness, which ultimately survives physical death.

The Human Energy Field (HEF)

Knowledge that the human anatomy is far more extensive and complex than Western bioscience currently understands, dates back thousands of years and is reflected in the metaphysical teachings which include the Indian, Chinese, Japanese, Tibetan and Toltec cultures, as well as in shamanic beliefs, perceptions and practices throughout the world. Although the scientific community has had difficulty verifying the existence of the human energy field or subtle energy system, it has been described throughout time in all healing traditions, as it is visible to healers and spiritual adepts, as well as many non-trained and relatively unaccomplished individuals. This system is multidimensional in character and the most familiar and commonly described aspects of it include the subtle bodies or aura, the chakras, meridians and nadis.

In some instances, gifted sensitives can perceive the physical body as a complex energy field and are able to examine the bioenergetic aspects of organs and their biological processes within the human body, including the meridians, described in acupuncture texts and other subtle channels within the body. (Benor, 2001; Karagulla & Kunz, 1989; Lambillion, 2001; Leadbeater, 1927 Maheshwarananda, 2004). The perception of a person’s energy field is of paramount value to healers, as it is used to
diagnose any physical, mental, emotional and spiritual abnormalities manifesting within the person and through the manipulation of his or her energy field, to heal these conditions (Benor, 2004; Kok Sui, 1990; Smith, 2011). Some healers and spiritual adepts maintain that the true essence of our being exists within these fields, and that they are shaped by the non material spirit and soul of a person, while the physical aspect of a person is formed by a ‘higher self’, which is another non-material, energetic aspect of a person, residing in and through these fields (Benor, 2004).

The Aura

The aura has been described in general terms as a luminous sheath around all objects, whether they are living or inanimate. The human aura is dynamic and changes not only in response to physical, emotional and spiritual state of the individual, but also alters in response to the person’s interactions his or her environment. It is multidimensional and is most frequently described as having at least five concentric interpenetrating levels, which correspond to a particular aspect of a person’s being. The auric field, also known as the human energy field (HEF), is produced by the spinning of the chakras. As each chakra produces its own field, it combines with other chakras thus producing the auric field. The first, third and fifth chakras generally empower the physical mental and etheric bodies, which are referred to as the primary auric field or inner shell of the aura, and is most easily felt when passing one’s hand over the body of another person. However, the less readily perceptible outer shell or secondary auric field is produced from the interaction of all seven chakras (Bruyere, 1994).

Clairvoyants and healers have differing approaches to describing the aura. Some authors describe it in terms of inner or primary aura, and outer or secondary aura (Bruyere, 1994; Kok Sui, 1990), whereas others describe the particular levels in more detail. Most authors include etheric (energy), astral (emotional), mental and causal bodies in their descriptions (Brennan, 1993, 1998, Bruyere, 1994; Gerber, 2000; Karagulla & Kunz, 1989 Lambillion, 2001; Maheshwarananda, 2004). Brennan (1988, 1993) and Bruyere (1994) describe seven subtle bodies within the human energy field. Barbara Brennan, a former astro-physicist, who teaches auric assessment and healing, describes the aura in more detail, as she observes seven concentric, auric levels corresponding with the seven chakras. She also includes two other aspects, namely, ‘the hara’ and the ‘core star’. The hara, well known and described in Eastern traditions, is according to Brennan (1993), beneath our energy field and holds our intentions. Beneath the haric level is a level, which she describes as the ‘core star’, and it is “the
level of our inner source or local divinity within us ... It is from this inner source that all creativity from within arises” (p.13).

Each auric level penetrates the body and extends outwards from the skin. Each level is of a higher and finer vibration than the one below it and it extends out from the skin several inches farther than the one within it of a lower frequency. Brennan (1993) observes that the odd numbered levels “are structured fields of standing, scintillating beams light.” The even numbered (2nd, 4th and 6th) levels are “filled with formless substance/energy.” According to Brennan, the second level is “like a gaseous substance,” the fourth is “fluid like,” and she perceives the sixth to be “like the diffuse flame around the candle” (p.19). This energy perceived by healers is often called “bioplasma.” Brennan (1993), states that the three unstructured levels of bioplasma are composed of “various colours, apparent density and intensity,” which “flows along the lines of the structured levels” and “correlates directly with our emotions” (p.19). She also claims that, “the energy consciousness of the auric field flows differently and is influenced by different factors on different levels of the field” (p.20). The description, relationship and functions of the seven subtle bodies constituting the aura are summarised in Table 4.2.

Meridians

The meridians (Jing Luo) have been used in the Traditional Chinese Medicine modality of acupuncture for many hundreds of years. Meridians are a series of energy channels, which act as conduits of life energy known as Qi or Ch’i, (pronounced chee), to cells, tissues and organs. Qi is a form of life energy that is derived from three sources; the vital energy reserve inherited from parents (ancestral Qi), absorption and production from the foods that we eat, and absorption into the meridians via the tiny pores referred to as acupuncture points. The Chinese model supports the idea that there are 12 meridians (Ch’i Rivers) traversing the body, which are supported by eight channels (Qi reservoirs), and that these meridians and channels include all parts of the body including trunk, limbs and organs (Bottomley, 2009; Gerber, 2000). Gerber (2000) states that clairvoyant investigators claim that the meridian system develops very early in embryological development, purportedly because the meridians play a role in connecting the etheric and physical body.
<table>
<thead>
<tr>
<th>Subtle Body</th>
<th>Relationship</th>
<th>Description</th>
<th>Function</th>
</tr>
</thead>
<tbody>
<tr>
<td>Etheric</td>
<td>Physical body</td>
<td>Blue grey – violet grey extends 5-10 cm ‘health rays’ on outer area&lt;br&gt;Surrounds/interpenetrates, corresponds to physical body in every detail</td>
<td>Provides energy template for physical body - tissues are shaped, organised and are anchored.&lt;br&gt;‘Health Rays’ protect physical body from environmental toxins</td>
</tr>
<tr>
<td>Emotional</td>
<td>Emotions</td>
<td>Roughly follows body outline - vibrant, multi-coloured pulsing rays extend 25 - 40 cm</td>
<td>Self perceptions or feelings – more mobile than etheric- aspects</td>
</tr>
<tr>
<td>Mental</td>
<td>Thinking</td>
<td>Bright yellow - extends 7-20cm around whole body&lt;br&gt;Contains thought forms as blobs or forms, symbols or pictures - additional colour - comes from emotional body</td>
<td>Contains the energy of thought, creation and invention.</td>
</tr>
<tr>
<td>Astral</td>
<td>I-thou emotions and desires</td>
<td>Bright beautiful clouds of colour particularly rose hue vibrating and spinning</td>
<td>More mobile than etheric&lt;br&gt;Bridges dimensions of matter and spirit</td>
</tr>
<tr>
<td>Etheric template</td>
<td>Higher will</td>
<td>Oval shape-transparent lines on cobalt blue background – looks like negative of photograph – extends 35-81cms</td>
<td>Blueprint for the etheric layer – contains all the shapes and forms that exist of the physical plane</td>
</tr>
<tr>
<td>Celestial</td>
<td>Higher feelings</td>
<td>Shimmering opalescent gold/silver light mostly pastel colours - extends 61-84cm – less defined than etheric template – light radiating out from body like candle glow</td>
<td>Emotional level of spiritual plane where experience spiritual ecstasy or oneness with universe</td>
</tr>
<tr>
<td>Ketheric</td>
<td>Higher concepts</td>
<td>Extends 76 cm- 1m from body - egg shape – golden shimmering light very high frequency – outer edge like eggshell aprox. 0.65-1 cm – contains the main power current that runs up &amp; down the spine</td>
<td>Mental level of spiritual plane holds the whole form of the aura together Contains life plan</td>
</tr>
</tbody>
</table>

Table 4.2 The Description, Relationship and Functions of the Subtle Bodies Constituting the Aura (Brennan, 1988, 1993; Davies, 2002; Gerber, 2000; Lambillion, 2001).
Chakras

Knowledge of these psychic centres, known as chakras, is well established within the Hindu and Buddhist traditions. The term chakra is of Sanskrit origin and means ‘wheel’. Chakras resemble a wheel in both form and function, with the centre or core resembling a hub, where the energies from the various fields are focused and circulated from one energetic level to another. Surrounding the hub or core are revolving petal-like structures. These structures have central root or stem, which resembles a flower; consequently, chakras have been referred to as lotuses within Indian literature. The stem of the chakra connects it energetically to the spine and nervous system (Leadbeater, 1927).

Chakras act as both transmitters and transformers of energy, synchronising the etheric, emotional and mental fields and distributing energy in the physical body. This energy is transmitted via tiny channels known as nadis to the corresponding endocrine glands and the rest of the body physical body. Nadis are subtle channels, which number approximately 72,000. These channels, although unrelated to the nervous system, follow the fundamental structure of the body in a similar manner (Bruyere, 1994; Gerber, 2000; Govinda, 1969 Karagulla & Kunz, 1989).

As well as the seven major chakras there are also 29 minor chakras. These chakras differ in structure from the major chakras, because they function as concentration points for a greater flow of energy. There are minor chakras in the palm of each hand and the sole of each foot, which are significant, as they are used for giving or receiving energy in various healing practices. The splenic chakra, another minor chakra, is the major transmitter of prana to the physical body, and in some traditions it has major chakra status. It is located below the 10th rib in the left side of the abdomen. This chakra is connected to the spleen in the physical body and its most significant function is to absorb energy from the general field and following modification, to redistribute it to the other centres (Karagulla & Kunz, 1989). Table 4.3 summarises the location and the associated physiological and psychological function of the major chakras:
<table>
<thead>
<tr>
<th>Number, English/Sanskrit Name &amp; Location</th>
<th>Associated Endocrine Gland &amp; Energetic Colour</th>
<th>Associated Physiologic Function</th>
<th>Associated Emotional/Spiritual Issue</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Root (Muladhara) Base of Spine</td>
<td>Gonads/Ovaries Red</td>
<td>Excretory</td>
<td>Fear/safety issues Self preservation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Reproductive/Immunity</td>
<td></td>
</tr>
<tr>
<td>2nd Sacral (Svadhisthana)</td>
<td>Payers Patches (located in Appendix) Orange</td>
<td>Genitourinary</td>
<td>Sexuality Self gratification</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3rd Solar Plexus (Manipura) - Navel</td>
<td>Adrenals/Pancreas Yellow</td>
<td>Digestive</td>
<td>Self esteem Self image Issues of responsibility</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4th Heart (Anahata) Heart area</td>
<td>Thymus Green</td>
<td>Circulatory/Immunity</td>
<td>Issues of love Self acceptance</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5th Throat (vishuddha) Base of neck</td>
<td>Thyroid/Parathyroid Blue</td>
<td>Respiratory</td>
<td>Communication/self expression/self reflection</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6th Third eye/Brow (Ajna) between eyebrows</td>
<td>Pituitary Rose/Yellow/Blue/Purple</td>
<td>Autonomic Nervous System</td>
<td>Use of mind/intellect Psychic perception</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7th Crown (Sahasrara) Above the head</td>
<td>Pineal Gold core Violet/Gold petals</td>
<td>Central Nervous System control</td>
<td>“Door of liberation” Spiritual connection &amp; awakening/scepticism</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8th Transpersonal point</td>
<td>Higher spiritual bodies</td>
<td>Coordination between physical and spiritual dimensions</td>
<td>Archetypal/symbolic perception</td>
</tr>
</tbody>
</table>

Table 4.3  Major Chakras: Location, Colour and Associations (Anodea, 2004; Bruyere, 1994; Gerber, 2000; Karagulla & Kunz, 1989; Leadbeater, 1927; Maheshwaranda, 2004).

**Research into Human Energy Fields and Healing**

Healers' ability to use focused intention to influence biological systems has been well known in most, if not all human cultures for centuries, irrespective of a particular culture’s evolutionary status. The capacity to use focused intention in this manner has been referred to by healers or investigators in a variety of ways, including: paranormal healing, psychic healing, psychokinesis, laying-on-of-hands, external hands-on-healing, non-contact therapeutic touch, healing with intent, spiritual healing, bioenergy healing, biofield therapy, telekinesis, natural healing, and distant or remote mental influence on living systems (DMILS) (Jonas & Crawford, 2003).

Benor (2001, 2004, 2005), defined healing as “a systematic, purposive intervention by one or more persons aiming to help another living being (person, plant, or other living system) by means of focused intention, hand contact, or passes to improve their condition” (2001, p.4). Le Shan (1974) identified five types of healing, which has been further condensed by Targ & Katra (1999) into two broader categories, related to the
healer's aims and intentions. ‘Type one’, known as spiritual healing, refers to the healer who aims for “a unity state of consciousness,” where the healer merges his or her mind with the “infinite one,” as well as the recipient of the healing. In this type of healing, there is no intention to diagnose the health issue, no sensing of, or intention to manipulate the recipient’s energy field, nor is any attention given to a particular technique, such as placement of hands. Rather, there is a surrendering of individual desires in order to “[let] healing happen.” No psychic ability is necessary for this form of healing and intercessory prayer falls into this category of healing. Targ and Katra note that in practice, spiritual healers, who possess psychic abilities, tend to implement these gifts in conjunction with their spiritual healing process, particularly when “interacting in the nonlocal domain” (p.243-244).

Conversely, in ‘type two’ healing referred to by these authors as ‘psychic’ or ‘energy healing’, the healer’s intention is to affect the recipient’s “physiology or energy flow” in some manner. To achieve this aim, the healer employs decision making processes, which are concerned with the assessment of the recipient’s symptoms and body processes, as well as the implementation of learned concepts, techniques or strategies. During these processes, a separation of consciousness between the healer and the recipient of the healing is preserved. Both modalities of healing can be done in the presence of the recipient, or at a distance (Targ and Katra, 1999, p.244).

There is an abundance of anecdotal evidence supporting the existence of subtle energies, as well as an accumulation of evidence supporting the notion that powerful bio-magnetic fields are projected from the practitioners of such healing techniques as Therapeutic Touch, Polarity Therapy, Pranic Healing and External Qigong. Most healers report that they perceive palpable sensations, such as heat, cold, tingling, or pressure when moving their hands close to the body of another person. Healrs report a different quality of sensations in an area of the body, which is ill. Furthermore, a substantial number of healers have reported seeing auras and subtle changes within them, in response to the subjects altered physical, mental, emotional and spiritual states (Brennan, 1988, 1993; Bruyere, 1994; Davies, 2000; Eden, 1999; Gordon, 2004; Harpur, 1994; Hawkes, 2006, 2012; Hemsley & Glass, 1999a, Hemsley & Glass, 1999b; Hemsley, 2002, 2003; Hunt, 1996; Joy, 1979; Karagulla & Kunz, 1989; Kok Sui, 1990, 2002; Krieger, 1992; Kunz & Krieger, 2004; Lambillion, 2001; Leadbeater, 1909, 1927; Orloff, 2000; Osumi & Ritchie, 1998; Pearl, 2001; Targ & Katra, 1999; Virtue,1997; Worrall & Worrall, 1985). In response to anecdotal evidence through the millennia about subtle energy fields and healing, studies have been performed by
researchers and scientists over the past decades to investigate the existence and/or constituents of a bio-energy field and to determine if and how healing works.

In a single blind study, Sugano, Uchida and Kuramoto (1994) demonstrated changes in the physiological parameters, such as blood pressure and pulse rate, as well as changes in consciousness and alterations in electrical activity in meridians of 18 healthy subjects, in response to energy directed to them by expert healers. Kirlian photography was also used in this study to monitor changes in corona discharge in plant leaves in response to energy directed to them by these healers. This study had a number of design flaws. It can be critiqued in terms of its sample size, and level of blinding and lack of randomisation and absence of controls as none are mentioned in the description of methods aspect of the paper. However, in reference to issues of controls, Jonas & Chez (2003) claimed that with healing studies that aim to demonstrate a theory or mechanism, “appropriate controls will vary as a function of theory” (p.A9) and this may apply to the study under discussion. For these reasons, this study would fail to meet the gold standard set for conventional medical literature, which is reflected in the guidelines for reporting randomized trials and outlined in the Consolidated Standards of Reporting Trials (CONSORT) statement (Schulz, Altman and Moher, 2010). Alternatively, and more pertinently, it would fail to meet the recommended guidelines for healing research instituted by the Samueli Institute for Information Biology in 2003.

However, in my view this modest study is of interest, possibly more from an historical viewpoint, as it demonstrates the nascent attempts to use instruments such as the AMI and Kirlian photography to measure and demonstrate the effects of healing. Furthermore, the study predates the implementation of evaluative guidelines such as CONSORT, LOVE (Likelihood-Of-Validity-Evaluation guidelines) and the recommendations formulated at the 2003, Samueli Symposium to standardize definitions and protocols for evaluating healing research.

Research and theoretical understanding of subtle energies has become much more sophisticated over the last few decades. William Tiller (1999), one of the world’s leading scientists researching the structure of matter, has been working for the last two decades on a mathematical model of the ‘vacuum state’, in order to illuminate how energies are thought to exist and function in this domain. He defines subtle energies as “all energies beyond those associated with the four fundamental forces accepted by today’s physics” (p.41). Moreover, he proposes that they “constitute energies that flow in various substructures of the [quantum] vacuum” and that “this is why they are non-observables via the physical senses or present day instrumentation” (p.42).
Furthermore, Tiller (1993) argues that as these energies “can only be converted to an observable in our present condition via an intermediate transducer” and he argues that currently, “these transducers are primarily living systems” (p.303).

Various attempts have been made to detect and measure the human energy field. Dr Valerie Hunt (1977, 1996) successfully demonstrated changes in the energy field’s electromagnetic component, in response to a Rolfing session (a form of deep tissue massage). She recorded the electromagnetic changes that were emitted from Rolfing subject’s body on an oscilloscope, while a gifted healer (Rosalyn Bruyere), simultaneously described the changes that she observed in the energy field during the Rolfing session. There was a clear correlation between her observations and the information retrieved from the bio-electric sensors.

Kirlian photography, named after the two Russian scientist inventors, Semyon Davidovich and Valentina Kirlian, was developed during the 1940s and measures the electrostatic discharge patterns at the periphery of living tissue. These discharges are represented by glowing halos around the subject. The varying shape, density and colour of the Kirlian aura have been found to correlate with the health or disease of the plant, animal or human subject (Benor, 2004; Leskowitz, 2009). British researcher, Harry Oldfield, has developed a method of Polycontrast Interference Photography (PIP) purported to produce reliable image of the human energy field (Leskowitz, 2009). Numerous other investigators have researched or developed methods to identify and measure aspects of the human energy field (Oldfield, 2012).

Benor (2004) states that Eastern European countries have a strong interest in energy fields surrounding the body and cites Russian scientists, V.M. Inyushin (1972) and Viktor Adamenko (1972), who have researched biological fields, which they believe to consist of ‘bioplasma’. These researchers consider bioplasma to be a fourth state of matter, which emits ultraviolet light and other unidentifiable radiations. Other researchers have explored the energy field using a variety of electronic sensors, to measure aspects of or responses to the manipulation of the energy field (Chien, Tsuei, Lee, Huang & Wei, 1991, Eeman, 1947; Schwartz & Russek, 1995, 1996).

Tiller (1997, 1999) argues that “humans see only a small fraction of the electromagnetism spectrum and hear only a small part of the sound spectrum. Perhaps we similarly only perceive only a small fraction of a greater reality spectrum” (1999, p.41). When discussing the subtle bodies purported to interpenetrate the physical body, he proposes an energy model, where the physical and etheric domains have together an eight space substructure, embedded in a nine space emotional
domain, which in turn is embedded in a 10 space mental domain. He hypothesizes that “each of these domains contains its own spatial substructure, substances and radiations, and our average evolved capacity to sense radiations and the substances of the various domains is presently limited to the simplest level, the physical (p.41).

Research strategies into the effects of bio-energy on living systems range from randomised clinical trials, qualitative studies and in vitro research undertaken in laboratory conditions. When evaluating the variety of laboratory research that had been done on bioenergy affects in laboratory models, Sparber, Crawford & Jonas (2003) found that the majority of investigators had a Western scientific background, which was reflected in their choice of models to study, and their selection of measurement tools were sourced from mainstream biological research. This is potentially problematic as healing systems are often derived from systems of medicine or healing which do not fall into the standard assumptions of western science or medicine. So, according to Jonas & Linde (2002), it is important that the researcher “considers the interaction of research methods and the conceptual systems being investigated” (p.409). While bearing this in mind, the nature of these studies were diverse and have included investigations into accelerated growth in seeds, fungi and rodents and bacteria (Brooks & Schwartz, 2006, Nash, 1984; Rauscher, 1980, Rubik, 1992a; Rubik, 1992b; Solfvin,1982), the healing properties of water (Lenington, 1979) and plant growth (Sancier,1991), as well as in vitro studies into the effects of bioenergy on cell properties (Chien, et al. 1991), the alteration of cancer cells properties and proliferation rate (Shah, Ogden, Pettker, Raffo, Itescu and Oz, 1999) and the healing rate of wounds (Wirth, 1990, 1996; Wirth, Richardson & Eidelman & O’Malley, 1993).

Kiang (2006) states that although the physical basis of bioenergy remains undefined, in vivo and in vitro studies have demonstrated that “bioenergy increases anti-tumour immunity, promotes tumour apoptosis, enhances metabolic capacity of normal cells, improves organ function, up-regulates expression of certain genes, and increases intracellular Ca2+ concentrations and energy levels” (p.117).

Of the 111 in vivo and in vitro studies that Sparber et al. (2003) examined, that were conducted between 1956 and 2002, 45 studies met their particular criteria for review. They concluded in their results “that there are many well designed and implemented bioenergy healing laboratory experiments.” They also found that “positive results were documented in even the most rigorous and elegantly designed studies” (p.148). Their conclusion was that “a growing body of knowledge, supported by well designed studies, highlights the complexities of studying the healing effects of bioenergy in the laboratory” (p.149).
Another area of research has been directed towards mind matter interactions (MMI) also referred to as psychokinesis (PK). MMI or PK refers to the “the mind’s ability to affect or move an object at a distance by intention alone” (Henry, 2005a, p.126). Distant healing and intercessory prayer are included in this category of research. Numerous investigations have also been conducted into mind matter interactions (Braud, 1988, 1993, Braud & Schlitz, 1983; Hasted & Robertson, 1980; Nelson & Radin, 1988; Radin & Ferrari, 1991; Radin, et al. 2008; Randall & Davis 1982). Many of these studies have produced highly statistically significant results, which Henry (2005) and Jonas and Crawford (2003) argue, corroborate the assumptions made about how mind and matter interact during distant and spiritual healing (p.390).

Healing Research

There have also been numerous randomised controlled trials on energy healing, particularly therapeutic touch (Aghabati, Mohammadi Esmaiel, 2008, Cook, Guerrerio, & Slater, 2004; Glassson & Bouchard, 1998; Hart, Freel, Haylock, Lutgendorf, 2011; Peck, 1997; Lin & Taylor, 1998; Sicher, Targ, Moore and Smith, 1998; Turner, Clark, Gauthier and Williams, 1998). In their review of 19 of these studies, involving 1122 patients, Warber, Kile and Gillespie (2003) reported positive effects on pain and anxiety from the healing applications. In summarising their analysis of the quality of this research, these authors concluded that “the overall quality of evidence for this topic area, as specified by the Guidelines for Quality of Evidence, is of the highest level” (p.98).

A subjective phenomenon related to healing research is complex and not readily quantifiable. Often in attempting to reduce and quantify the subjective there is a failure to capture what is personally relevant for the recipients, so the result is often rigorous, but irrelevant research, particularly for the populations studied in this manner. Aldridge (2003) claims that ‘thick’ descriptions taken in qualitative research serve a number of important functions to remediate the potential irrelevance in quantitative research in this field, by helping to identify the most important outcomes, prior to conducting a clinical trial, and checking on the perceptions and meanings among the different populations studied, as well as providing a rich data set for understanding and conceptualizing the variations of responses observed.

A variety of qualitative research methodologies have been employed to explore healing. For example, Hok, Wachtler, Falkenberg, & Tishelman, (2007) used narrative
analysis to understand the combined use of biomedical, complementary, and alternative therapies in the treatment of cancer. Chio, Shih, Chiou, Hsiao & Chen (2008) applied a hermeneutic phenomenological methodology, to explore the experience of spiritual suffering and healing in terminally ill persons. Sexton & Stabbursvik (2010) conducted a narrative analysis on the traditional healing practices in Northern Norway, while Heath (2000) conducted a phenomenological study into the experience the performance of PK. Sameral (1992) used a phenomenological methodology to explore the patient's experience of receiving therapeutic touch (TT) treatments.


A large number of quantitative and qualitative studies have been examined by Jonas & Crawford (2003). They reviewed 2,200 published reports, which included laboratory studies, randomised control trials, summaries of reviews, reports of observational studies nonrandomised trials, descriptive studies, case reports, and surveys, other writings, including opinions, claims, anecdotes, letters to editors, commentaries, critiques and meeting reports and selected books. In their conclusion they state that “there is evidence to suggest that mind and matter interact in a way that is consistent
with the assumptions of distant healing” (p.xvii). Dossey (2008) emphasises the radical nature of Jonas and Crawford’s conclusions, arguing that “they suggest what conventional science considers to be unthinkable: human consciousness can act nonlocally to effect the so called material world at a distance, beyond the reach of the senses” (342). This conclusion is of considerable interest and relevance to this study, because of its assumptions regarding the consciousness and its transition at the end of biological life.

In contrast to traditional Chinese medicine, Ayurvedic medicine and all traditional healing practices in all other cultures, Western allopathic medicine, deeply rooted in Cartesian intellectual duality, is the world's only healing tradition, which does not subscribe to the theory of subtle energy. Consequently, in spite of this enormous amount of research that has been undertaken over recent decades into healing and related phenomena, mainstream science remains sceptical of this subject and often precludes publication of such studies in mainstream peer reviewed journals. This exclusion has often been perceived by the rejected authors from the parapsychological and healing communities as a political act, rather than a legitimate response to unworthy scholarship.

Two cases, made famous because of the media attention, are influential in validating this complaint. The first is the Harvard Medical School Study of the Therapeutic Effects of Intercessory Prayer (STEP) conducted by Benson et al. (2006), where the findings were that intercessory prayer itself had no effect on whether complications occurred after surgery. Furthermore, patients who were certain that intercessors would pray for them had a higher rate of complications than patients who were uncertain, but did receive intercessory prayer. As this was a very large study (1,802 subjects) from a prestigious institution, in spite of a critique of its numerous methodological flaws from experienced researchers in this field (Dossey, 2008; Schlitz & Radin, 2008), this study has been given a large amount of publicity; most of it decrying healing research (Dossey, 2008).

Another instance of apparent mainstream scientific bias was of the controversial research undertaken by a 11 year old, 6th grade American girl, assisted by her mother, to determine whether TT practitioners could tell whether the experimenter’s hand was closer to the practitioner’s right or left hand (Rosa, Rosa, Sarner & Barrett, 1998). Their findings were that practitioners were unable to accurately identify the energy field of the experimenter and therefore, claims regarding the efficacy of TT were groundless. This study was published in The Journal of the American Medical Association (JAMA). The editor of JAMA published the article with an editor’s note stating that the study
proved that the human energy field did not exist. He also recommended that T.T. practitioners divulge the results of this study to patients and third-party payers, who should refuse to pay for this procedure unless additional “honest” experiments disclose an actual effect.

However, the numerous flaws in the Rosa study design, as well as the motives behind its publication, have been strongly criticized, as have JAMA’s erroneous conclusions regarding the implications of the study, the editor’s recommendations, and JAMA’s refusal to publish any critique of the study, or alternative successful studies or reviews of TT literature by TT or subtle energy researchers. These criticisms have not only come from subtle energy researchers (Anderson, 2009; Benor, 2004; Leskowitz, 2003), but also from mathematician, Professor Franklin Tall (2003), who is particularly well versed in research design. Surprisingly, the critics also included Carla Selby (1998), vice president of the Rocky Mountain Sceptics Society, whose organisation had energetically campaigned against TT for failing, in their view, to meet high standards of scientific rigour. She criticized the Rosa study for its design flaws, including its experimenter bias, sampling bias and limited controls. Moreover, she summarised her critique by stating that it was “completely irresponsible, for JAMA editors to give space to work that, at the very best can be described as competent for a 4th grade science project.” When summing up her critique of the Rosa study, Selby stated the “quality of the work is exemplary of either very bad science or adequate school work” (p.5).

Healing research has also attracted criticism for favouring quantitative methodologies. In response to the difficulties, often cited in fitting healing research into a quantitative paradigm, Aldridge (2003), states that as “healing, like prayer, is not a homogenous practice and is not susceptible to standardization, attempts at standardization would make it no longer prayer [or healing] but superstitious incantation or magical hand passes.” He asserts that all of the research that uses methodologies, such as randomized clinical trials, is unsuitable to demonstrate the efficacy of spiritual healing approaches, and prayer. Aldridge argues that healing is a relational activity and it is informed by system of symbolic meanings pertaining to the particular form of practice.

Much of this research concentrates on the healer. In so doing there is a failure to understand the activity of the patient and “losing this nesting of contexts, fragments the healing endeavour emphasizing a passive patient, who receives healing rather than an active patient participating in a common enterprise” (p.234). In Aldridge’s view, qualitative methodologies would be a more suitable choice to explore these phenomena as they would emphasise the involvement of the patient and construe healing is a relational activity. Furthermore, he claims that there is a political motive
behind choosing quantitative approaches, such as randomised controlled trials (RCTs), to explore healing or intercessory prayer acceptable to mainstream medical practice, rather than analysing which method would appropriately explicate the questions pertaining to the efficacy of healing and prayer. While not doubting the influence of RCTs in conservative scientific circles, Aldridge questions their application as a means of furthering our understanding of healing or prayer.

Aldridge’s critique is in keeping with my rationale for choosing a qualitative methodology for this study. His critique also supports my own view of the current limitations in attempting to employ quantitative research methodologies to obtain information about phenomena, which are highly complex, elusive and so poorly understood at this evolutionary stage of Western scientific reductionist thought. Furthermore, there are vested interests within the scientific community in discrediting the existence of subtle energy fields and the veracity of healing, other than those stemming from traditional Western allopathic models, which have been given the imprimatur of the Western reductionist science.

Summary

In much the same way that many people in Western culture now choose non-mainstream practitioners to assist with natural, and as they see it, non-violating childbirth, there is a growing move towards seeking alternative practitioners, such as energy healers, to provide the necessary assistance and support that will ensure a peaceful and natural death. As a prerequisite for energy healing, these healers come with skills and abilities that allow them to observe the phenomena, near, during and after death that are outside the range of ordinary perception. This particular form of witnessing has allowed these healers the capacity to move beyond the ‘visceral fear’ of the physical deterioration, which portends death, and to fully participate in their clients’ deaths, as well as to perceive and articulate the subtle phenomena manifesting during this period.

By exploring the perceptions of healers during their administrations to the dying, as well as their experience of death, this study aims to provide an alternative picture of death and dying so that the dying person and those entrusted with their care, may experience this process with less ambivalence and fear. Consequently, the literature chosen in this review reflected both the mainstream and the ‘alternative’ view of dying and death.
It aimed to examine the various perspectives of death and dying and the implications of these views regarding the care of those who are terminally ill.

The literature discussed within Chapters Two, Three and Four used Ken Wilber's (1990) three realms of being and three means of access to these realms, to structure the literature review. The secular view of death and dying as perceived through 'the eyes of the flesh and mind', were examined in Chapter Two. The literature in this chapter included the physical, psychological and sociological aspects of death and dying. The spiritual and transpersonal aspects of perimortality, which relate to the transcendental/spiritual realm, and perceived through 'the eyes of the spirit', were investigated in Chapter Three: Dying and Transformation and Chapter Four: Consciousness and Subtle Energies. Chapter Three explored the literature pertaining to the subtle phenomena manifesting before, during and after death and its implications for our understanding of the transition of consciousness during biological death. Chapter Four concluded the literature review. It considered the literature underpinning the various theories of consciousness and subtle energies and examined research related to healing. In addition, Chapter Three and Four provided some description of less familiar phenomena to facilitate the reader's understanding of the literature and to contextualise the healer's perceptions, which will be described in Chapters Seven and Eight.

This study, as it is reflected in the literature review, attempts to redress the imbalance in death and dying narratives by choosing the relatively unfamiliar aspects of the perimortal process, and by using a methodology which best fits the explication of the subtle phenomena which manifests during this period. By exploring the subtle, transpersonal aspects of dying, it is possible to gain insights that provide an opportunity to be less fearful and to give us more clarity as we experience our own and others' deaths. The study of the more subtle changes that herald death may also allow both health professionals and carers to make finer distinctions between "the time of sickness" and 'the “time of dying” and consequently provide the assistance appropriate for these circumstances (Dowling Singh 1999, p.282).
CHAPTER FIVE

METHODODOLOGY

It is only when we forget our learning that we begin to know. I do not get nearer by a hair’s breadth to any natural object so long as I presume that I have an introduction to it from some learned Man (sic). To conceive of it as a total apprehension I must for the thousandth time approach it as something totally strange. If you would make your acquaintance with the ferns you must forget your botany. You must get rid of what is commonly called knowledge of them. Not a single scientific term or distinction is the least to the purpose, for you would fain perceive something, and you must approach the object totally unprejudiced. You must be aware of nothing is what you have taken it to be. [To perceive something truly] you have to be in a different state from the common.

Thoreau (Buhner, 2010, p.139)

The methodology chosen to explore the phenomena of interest in this study is informed by hermeneutic phenomenology, as reflected in van Manen’s eclectic approach to key phenomenological concepts within his phenomenology of practice. Phenomenology has developed in various types and traditions (Spiegelberg, 1994; van Manen, 2002c, 2011a), so this chapter defines phenomenology, identifies the various traditions and outlines the history and key contributions of the main phenomenological movements.

As a contemporary phenomenologist, van Manen (2002c, 2011a) acknowledges many phenomenological approaches and his writing reflects concepts of phenomenological thinkers, such as Husserl, Heidegger, Merleau-Ponty, Gadamer and Ricoeur. Given that the illumination of the perimortal phenomena in this research is informed by van Manen’s eclectic approach to hermeneutic phenomenology, this chapter will review the key concepts of traditional phenomenological thinkers whose writings have influenced his work. van Manen’s understanding of hermeneutic phenomenology, adapted into his phenomenology of practice, will then be described. Research examples of hermeneutic phenomenology are discussed and the chapter concludes with a reiteration of why hermeneutic phenomenology, as applied by van Manen in the phenomenology of practice, is the methodology of choice for this research.
Definitions of Phenomenology

The etymological source of the word phenomenon comes from the Greek *phaenesthai*, meaning to flare up; to show itself; to appear (Moustakas, 1994). Although the term phenomenology was used in philosophical texts of Kant and Hegel during the 18th Century, its genesis as a philosophy came about at the close of the 19th Century, when Franz Brentano instigated phenomenology as an original philosophical concept. The term phenomenology was appropriated by Edmund Husserl, who developed the philosophical concepts pertaining to phenomenology and turned it into a major philosophical tradition, which has continued to evolve throughout the 20th Century and early 21st Century (Moran, 2002).

The definitions of phenomenology are as various as the phenomenological traditions. However, phenomenology essentially seeks to offer “a vibrant and challenging alternative to contemporary naturalistic accounts of consciousness and meaning” (Moran, 2002, p.1). Prominent scholars have endeavoured to define phenomenology and its procedures. For example, Spiegelberg (1994) describes underlying unity of the phenomenological procedures as the “unusually obstinate attempt to look at phenomena and to remain faithful to them before even thinking about them” (p.117). He argues that what distinguishes phenomenology from other methods, “is not so much any particular step it develops or adds to them but the spirit of reverence as the first and foremost norm of the philosophical enterprise. The violation of this norm in the age of reductionism constituted the raison d’être for the phenomenology at the time of its birth” (p.117).

According to Moran (2000), phenomenology “is a radical, anti traditional style of philosophising, which emphasises the attempt to get to the truth of matters, to describe phenomena, in the broadest sense as whatever appears in the manner that it appears, that is as it manifests to consciousness, to the experiencer” (p.4).

Sokolowski, (2000) asserts that:

Phenomenology is the science that studies truth. It stands back from the rational involvement with things and marvels at the fact that there is disclosure that things do appear, that the world can be understood, and that we in our life of thinking, serve as datives for the manifestation of things ... Phenomenology also examines the limitations of truth: the inescapable other sides that keep things from ever being fully disclosed, the errors and vagueness that accompany evidence, and the sedimentation that makes it necessary for us to always remember again the things we already know (p.185).
van Manen (1984) states that phenomenology “aims to establish a renewed contact with original experience...[It] consists of reflectively bringing into nearness that which tends to be obscure, that which tends to evade the intelligibility of our natural attitude of everyday life” (p.3-4). He identifies his orientation to phenomenology as both hermeneutic and as a human science endeavour with this more contemporary explanation that “hermeneutic phenomenological human science is interested in the human world as we find it in all its variegated aspects ... [It] finds its point of departure in the situation, which for the purpose of analysis, description, and interpretation functions as an exemplary nodal point of meanings that are embedded in this situation” (1997 p.18).

Types and Traditions of Phenomenology

Phenomenology as a philosophy has a rich and complex history. Defining the precepts of this philosophy is problematic, as phenomenological varieties exceed their common features. Because there is a lack of consensus regarding the epistemological and ontological viewpoints underpinning this tradition, it is more accurate to describe phenomenology in terms of ‘philosophical movement’ rather than an organised ‘school’ with a body of immutable teachings (Spiegelberg, 1994). Heidegger concurs with this view by stating that there is “no such thing as one phenomenology and if there could be such a thing it would never become anything like a philosophical technique” (Heidegger, 1982, p.328).

Phenomenological historian, Herbert Spiegelberg (1994), asserts that phenomenology is best described as a movement, rather than a particular school of phenomenology, because of the disparate views held by phenomenologists on epistemological and ontological questions. However, he states that although it could be said that that there are as many phenomenologies as there are phenomenologists, there is a common core and connection shared by each philosophical orientation, to situate it within the general rubric of phenomenology. Scholars have attempted to classify the major influences in phenomenology using a variety of groupings (Spiegelberg, 1970, 1994; van Manen, 2011).

Spiegelberg (1970, 1994) identified three phases within the history of the phenomenological movement: the Preparatory phase, the German phase and the French phase. The preparatory phase acknowledges Franz Brentano and psychologist, Carl Stumph, whose ideas and philosophical objectives influenced Husserl, the professed founder of phenomenology in Germany. The German phase
includes Husserl and Heidegger, as well as less prominent scholars, who were members of the Munich and Göttingen Circles.

The ‘Munich Circle,’ refers to students of philosophy, psychology and phenomenology, living in Munich at the beginning of the 20th Century. These scholars, inspired by Husserl’s exposition of phenomenology, which was explicated in his book, *Logical Investigations* (1901), moved to Göttingen in 1905 to study with him. The spirit of camaraderie amongst Husserl’s students, who had come from various parts of Germany (Adolf Reinach, Johannes Daubert, and Moritz Geiger, 1905; Fritz Kaufmann and Edith Stein, 1913), Alsace (Jean Herring, 1910), Russia (Alexandre Koyre, 1910), Canada (Winthrop Bell, 1911), and Poland (Roman Ingarden, 1912), led to the formation of a group known as the ‘Göttingen Circle’. This Circle was the forum for weekly informal readings and discussions and in 1910 it evolved into the more formal philosophical society, which provided philosophers such as Max Sheller with a forum to test his ideas. This philosophical movement flourished until the onset of the First World War when Husserl moved to Freiberg.

Spiegelberg (1994) claimed that the formal dissolution of German phenomenology philosophy came about because of the political influences of Nazism, whereupon the centre of influence of the phenomenology was transferred to France. The French phase includes the philosopher, Gabriel Marcel, as well as the existential philosophers, the most notable of whom were Jean Paul Sartre, Simone de Beauvoir, and Maurice Merleau-Ponty. The major contributions of philosophers, who influenced van Manen’s work, will be elaborated upon later in the chapter. Spiegelberg (1970) endeavoured to identify the unifying or common ground among the various phenomenologies. He made a further distinction in his historical account of the phenomenological movement, by employing what he termed a ‘staggered approach’ to identifying six steps of the phenomenological method. These steps are: ‘descriptive phenomenology’, ‘essential (“eidetic”) phenomenology’, ‘phenomenology of appearances’, ‘constitutive phenomenology’, ‘reductive phenomenology’ and ‘hermeneutic phenomenology’.

Descriptive phenomenology is direct exploration of phenomena, free from unexamined pre-suppositions, with the aim of maximum intuitive presentation. ‘Essential (“eidetic”) phenomenology’ is the examination of these phenomena for their “essences” and for the essential relationship within and among them. ‘Phenomenology of appearances’ refers to the step that pays attention to the different modes of clarity in which such phenomena appear. ‘Constitutive phenomenology’ is the practice of studying the processes in which such phenomena become established or constituted in our consciousness. ‘Reductive phenomenology’ is a process of suspending belief or
validity of the phenomena and ‘hermeneutic phenomenology’ is a special kind of phenomenological interpretation, intended to reveal otherwise concealed meanings in the phenomena.

van Manen (2011a) takes a different perspective from that of Spiegelberg, in his approach to representing phenomenological orientations. van Manen states that although there are many “discontinuities and continuities” among the various phenomenological orientations, several phenomenological movements are predominant in the philosophical and phenomenological literature. Although these movements cannot be identified in exact philosophical or historical contexts, they are associated with the contributions of distinguished scholars and re-occur throughout the literature (Inquiry: Orientations, para. 1).

van Manen (2007, 2011a) adds the caveat that it is appropriate to take a more generic approach to the tradition of phenomenology, as the intention of human science scholars is to apply phenomenology as a methodology, in order to explore an aspect of their life world, or to apply this methodology to their professional practice. Furthermore, his description of phenomenological orientations includes ‘phenomenology of practice’, the phenomenological orientation most compatible with this research. Table 5.1 summarizes van Manen’s six different phenomenological orientations, their definitive themes and the outstanding philosophers or scholars identified with each orientation.

The specific phenomenological orientations that have most influenced this study from historical and theoretical perspectives are transcendental, existential and hermeneutic phenomenology. Therefore, these orientations and their predominant philosophers, whose ideas were instrumental in their genesis, will be discussed in detail. Other orientations, such as linguistic and ethical phenomenology will not be discussed, because their ideas are marginal to the theoretical underpinnings of this study. The phenomenology of practice adopted by van Manen will be elucidated separately in the section: van Manen’s Phenomenology of Practice.
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Table 5.1 van Manen’s Phenomenological Orientations, Themes and Philosophers/Scholars (2007, 2011).
Transcendental Phenomenology

Transcendental phenomenology is a scientific study of the appearance of phenomena (things) as they appear to us and as they appear to us in consciousness. The very appearance of something makes it a phenomenon and any phenomenon is suitable for phenomenalological reflection. The challenge of phenomenalological analysis is to “explicate the phenomenon in terms of its constituents and possible meanings,” to discern the features of consciousness and arrive at an understanding of the essence of the experience (Moustakas, 1994, p.49). The modern phenomenalological tradition and ‘transcendental phenomenology’, had its genesis in Germany at the turn of the 20th Century. The designated founder, Edmund Husserl, originally with a mathematical background, made his conversion to philosophy through his teacher, psychologist and philosopher, Franz Brentano, whose ideas of consciousness and intentionality inspired him. Although the term ‘phenomenology’ was used by philosophers Kant and Hegel, it was Brentano’s use of the term, which inspired Husserl to coin it for his methodology (Moran 2000).

Philosophy as a discipline, as well as science, was in crisis in the early 20th Century (Merleau-Ponty, 2002). Whereas science had made impressive technological advances, which purported to control nature, the scientific tradition failed to address questions of human self-understanding, leading to what Husserl described as “a crisis of meaning.” Husserl responded to the general perception that the current discourse in both traditions was stagnant and irrelevant (Goldenberg, 2006; Walters, 1995). Furthermore, Husserl repudiated the natural sciences’ epistemological stance that consciousness is self-enclosed, that is, it is aware only of itself, its own thoughts and sensations. He also refuted the notion that the highly structured and objective procedures undertaken by the natural science disciplines could give a complete account of reality. These processes were based on Descartes’ rationalist model, which proposed that epistemological certainty was only possible, if consciousness of the world was separated from sensory perception. At the heart of natural science endeavours was a complex set of pre-suppositions and perspectives of knowledge, which were not questioned by the science disciplines themselves (Barnacle, 2001; Cerbone, 2006; Sokolowski, 2000; van Manen, 2011a).

These epistemological insights gave Husserl the impetus and desire to raise philosophy and phenomenology in particular, to the status of a rigorous science, which would provide the essential understanding for all scientific knowledge. In 1901 during the early stages of Husserl’s first “breakthrough” into phenomenology, his conception of phenomenology related to the issues of epistemology and logic. However, according
to Moran (2000), Husserl’s understanding of the possibilities held within the phenomenological field, evolved over the years into a belief that phenomenology could encompass “all conscious experiences, their correlates, and their essential structures, as a science of all essential possibilities” (p. 124). In effect, Husserl envisaged that the role of phenomenology as a science could extend beyond the region of conscious experience to “all material regions of being, every field of ‘material essences’ from geometry to mortality” (Moran, 2000, p.124).

Husserl intended to establish a secure basis for human knowledge with a clarity that would render redundant the need for alternative philosophical systems. His methodology was unequivocally epistemological and he regarded experience to be the principal source of knowledge (Moran, 2000, Dowling, 2007). To establish the foundation of knowledge of reality, Husserl countered the Cartesian model of disembodied consciousness (reflected in Descartes’ famous dictum “I think therefore I am”), with an equally memorable catchcry “Zu den Sachen selbst” or “Back to the things themselves.” To achieve his objective, Husserl developed epistemological strategies for examining how phenomena (‘the things themselves’), present themselves to human consciousness (Crotty, 1996, Dowling, 2007). Three key concepts or themes of Husserl’s transcendental phenomenology are intentionality, eidetic reduction and constitution meaning.

**Intentionality**

Husserl ‘borrowed’ the term ‘intentionality’ form Brentano, who in turn, used the medieval term to distinguish between psychical and physical phenomena. Husserl felt that Brentano had failed to understand intentionally and make it philosophically useful. Husserl’s use of the term refers to the notion that all consciousness is ‘intentional’ awareness. That is, all consciousness is contextual; it is always consciousness of something (Husserl, 1952; van Manen, 2011a). Intentionality emphasizes the idea that “human experience is continuously directed towards a world that it never possesses in its entirety but towards which it is always directed” (Polio, Henley & Thompson, 1997 p.7). Therefore, when Husserl posed the transcendental question: “How can experience as consciousness give or contact an object,” he appealed to the ideas of “giving” and “contacting” and indicated the possibility of the intentionality of experience (Cerbone, 2006, p.17). Objects, from Husserl’s viewpoint, include those which can be internal or external in character and can refer to such things as facts, concepts, dream images or essences to name a few (Paley, 1997).
Husserl’s doctrine of Intentionality, which he dubbed ‘the axis of phenomenology,’ is not only limited to perception (in which the things that are perceived, immediately present themselves to us). It is applied to the categorical articulation, also built on perception. In his doctrine of categorical articulation, Husserl shows that our judgments “are in their most elementary form the assertive articulation of the things we experience; we articulate the presence of things, the manner in which they are given to us” (Sokolowski, 2007, p.216).

Furthermore, through his doctrine of intentionality, Husserl (1952) was able to state that humans intend things that are absent. In other words, human thinking can transcend the present and intend the absent which, when intended is given to us as such. There are various kinds of absences, which correspond to the various empty intending that our intentionality can employ. These absences include the absences of the other side of things we perceive, things meant only through words, things being remembered, the absence of things only depicted, or of those who are far away as distinct from those who have died, the absence of the past and of the future and the absence of the divine (Sokolowski, 2007, p.217).

Eidetic Reduction

Husserl (1962) declared that the domain of reflection is the fundamental field of phenomenology. According to Husserl, phenomenological method proceeds entirely through acts of reflection, hence it has a universal, methodological function (Kockelmans, 1967). Two aspects of phenomenological reflection are reduction and constitution. Phenomenological reduction was an epistemological technique, conceived by Husserl as a means of “yielding the pure and unadulterated phenomena that could not be attained in the ‘naïve’ or ‘natural’ attitude” (Spiegelberg, 1994, p.119).

Eidetic reduction according to Spiegelberg (1994) is the act which Husserl claimed could lead from particulars to universal “pure” essences and refers to the phenomenological strategy of suspending all reference to the particularity of lived experience, to uncover the universal essence or ‘eidos’ that lies in the other side of the concreteness of lived meaning (van Manen, 1997a). Merleau-Ponty’s (2002) explication of Husserl’s eidetic reduction is that it is “the determination to bring the world to light as it is before any falling back on ourselves has occurred. It is the ambition to make reflection emulate the unreflective life of consciousness” (p.xvii).
Constitution of Meaning

Constitutional exploration is an analytic process, which is undertaken to determine the manner in which phenomena establish themselves in our consciousness. “Intentional analysis is always constitutive analysis: an explication of how the meanings of things are constituted by consciousness or the cogito” (van Manen, 2011, p.3). The concept of ‘constitution’ is central to phenomenology and was derived from Kantian philosophy, which in this context referred to the manner in which objects were ‘built up for consciousness from a ‘synthesis’ of sensory intuition and various categories (Kocklemans, 1967, p.201). To “constitute” a phenomenon refers to the process of bringing the phenomenon it to light, or to realize its truth (Sokolowski, 2000, p.92).

‘Constitution’ is also pivotal to Husserl’s thinking. It is considered to be an ‘operative concept’ as distinct from thematic one; meaning that it is a concept which Husserl employs, rather than illuminates. According to Spiegelberg (1994), Husserl attributes the constitution of the intended object to intentional act itself. The revelation of this constituting function of the intentional act is made possible through the method of intentional analysis. Furthermore, Spiegelberg (1994) states that there is a definite pattern to the development of this constitution of meaning within our consciousness. “Its building stones are perceptions of the most elementary kind. These fall into larger patterns, as our perceptions enlarge and enter into relationships with other perceptions and with our acquired fund of perceptual patterns” (Spiegelberg, 1994, p.706).

In summary, Husserl’s writings feature in transcendental phenomenology, because he made a significant contribution to the evolution of modern thought by refuting the Cartesian premise that consciousness is isolated and resides within an enclosed sphere. Husserl’s understanding of consciousness paved the way for philosophers such as Heidegger, Merleau-Ponty and other philosophers (who will be discussed later in this chapter), to replace the primacy of epistemology within phenomenological enquiry, with ontological exploration directed towards the ‘Being’ of human existence.

Existential Phenomenology

Husserl understood consciousness as being intentionally oriented towards its object. However, existential phenomenology describes the “human being itself as intentionally related to the world and oriented towards space and time” (Crotty, 1996, p.40). Martin Heidegger and Maurice Merleau-Ponty were two notable philosophers, who radicalized this orientation towards the existential world, as it is lived and is experienced. Heidegger’s (1962) dismissal of Husserl’s concept of intentionality, which he
understood as a conceptualization of consciousness as centered in a self, led him to pose the more radical view that “essence does not precede existence.” Heidegger’s contention was that presence itself, or being–in-the-world was a much more fundamental category than subjectivity or ego. This philosophical shift in orientation signaled the beginning of the existential phase of the phenomenological movement (Todres 2007, p.166). The four themes associated with existential phenomenology are: ‘lived experience’, ‘modes of being’, ‘ontology’ and ‘lifeworld’.

**Lived Experience**

Lived experience “signifies givenness of internal consciousness, inwardness perceivedness” (Husserl, 1964, p.177). Dilthey (1985) refers to lived experience as the immediate pre-reflective consciousness of life. (van Manen (2007) elaborates that in its most fundamental form, ‘lived experience’ has the attributes denoted by Dilthey; that it is self–given awareness. Lived experience has a temporal structure; as its meaning can only be understand reflectively as “past presence,” not at the moment of manifestation. The richness and depth of lived experience can never be fully appreciated, because it is seated within the totality of life rather than a de-contextualized, isolated experience. Lived experience, from an applied rather than philosophical view point is simply experience as we live through it in our actions, relations and situations (p.16).

The concept of ‘lived experience’ is considered to be central to phenomenological inquiry as it aims to “transform lived experience into a textual expression of its essence in such a way that the effect of the text is at once a reflexive re-living and a reflective appropriation of something meaningful” (van Manen, 1997a, p.36). Therefore, lived experience is both the starting and end point of phenomenological enquiry. Moreover, the methodological strategy used in interpreting lived experience, is to relate “the particular to the universal, part to whole, episode to totality” (van Manen, 1997a, p.36).

van Manen (1997a) cites Merleau-Ponty (1968), who expressed his understanding of lived experience in ontological terms when he described the immediate awareness of lived experience with his term, ‘sensibility’:

The sensible is precisely that medium in which there can be a being without it having been posited; the sensible appearance of the sensible, the silent persuasion of the sensible is Being’s unique way of manifesting itself without becoming positively, without ceasing to be transcendent … The sensible is that: this possibility to be evident in silence, to be understood implicitly (p.36).
Heidegger (1962) asserted that “attempts to solve the problem of reality in ways which are just “epistemological” show that this problem must be taken back, as an ontological one, into the existential analytic of Dasein” (p.252). He coined the term ‘Dasein’ to refer to a way of being, which is characteristic of all people or a specific person (Dreyfus, 1991, p.14). Heidegger (1962) explains that “Dasein always understands itself in terms of its existence - in terms of a possibility of itself” … The question of existence never gets straightened out except through existing itself…The understanding of oneself which leads along this way we call existential” (p.33). Heidegger (1962) explained that ‘existentiality’ is the state of Being that is constitutive for those entities that exist. He argued that “to work out the question of Being adequately, we must make an entity - the inquirer – transparent in his (sic) own Being ... If we are to formulate our question explicitly and transparently, we must first give a proper explication of an entity (Dasein), with regard to its Being” (p.27).

Heidegger states that “Dasein’s understanding of its Being, suggests an understanding of all modes of being and by carrying out the existential analytic of Dasein, we establish a “fundamental ontology,” which permits us to understand all modes of intelligibility – the being of equipment, of objects, of institutions, of people, etc - depends upon a fundamental way of Being, namely existence” (Dreyfus, 1991, p.28). Heidegger (1962) categorizes different conditions of being, which include ‘being as existence’, ‘moods’, ‘concern or being towards death’. He adopts the term ‘sorge’ (translated as either ‘care’ or ‘concern’), to refer to the most elemental way of the human’s being-in-the-world. Heidegger (1962) asserts that, “selfhood is to be discerned existentially only in one’s authentic ability-to-be a self – that is to say, in the authenticity of Dasein’s being as care” (p.243).

As the experience of death and dying is central to this project, it is relevant at this point, to discuss Heidegger’s understanding ‘being towards of death’. Heidegger (1962) argued that humans cannot lead an authentic life unless they face the fact that they are going to die. According to Heidegger (1962) facing one’s finitude is paramount to our human project and, therefore, “the existential interpretation of death takes precedence over any biology and ontology of life” (p.291). However, Dasein avoids reflection on its own mortality and the fact that “death” as the end of Dasein, is Dasein’s ownmost possibility - non relational, certain and as such indefinite, not to be outstripped” (p.303) by distracting itself in everyday objects and projects and believing that, “One of these days one will die too, in the end; but right now it has nothing to do with us” (p.297).
This strategy of self distraction and denial is only partially successful as the experience of a state of anxiety prevails within us. Heidegger claims that this “state of mind” is “anxiety in the face of death,” and it is not a “weakness” but “it amounts to the disclosedness of the fact that Dasein exists as a thrown Being towards its end” (p.295). This experience of anxiety, however, provides an opportunity for Dasein to dissociate from an involvement with the everyday distractions and live more authentically by confronting the inevitability of personal death (Dreyfus, 1991).

It is interesting within the context of this study to note that Heidegger contextualised his ontological analysis of Being-towards-the-end by stating that, in this analysis, “there is no anticipation of our taking any existential stand toward death.” He continues this explanation by claiming that

If “death” is defined as the ‘end’ of Dasein, - that is to say, of being-in-the–world – this does not imply any ontological decision whether ‘after death’ still another Being is possible, either or lower, or whether Dasein ‘lives on’ or even ‘outlasts’ itself and is ‘immortal’. Nor is anything decided ontologically about the ‘other worldly’ and its possibility any more than about ‘this worldly’....

Heidegger concludes his line of reasoning by stating that “our analysis of death is remains purely ‘this worldly’, in so far as it interprets that phenomenon merely in the way it enters into any particular Dasein as a possibility of being” (p.292).

van Manen reiterated the foundational philosophers, who informed his understanding of phenomenology, especially Husserl & Heidegger, when he applies this term to his interpretation of phenomenological inquiry. His interpretation of ‘mode of being’ is elucidated when he states that it is essential when undertaking phenomenological inquiry, to be especially attuned to the “modes of being of the way things are in the world.” He also explains that “to ask for the ‘being ‘of something is to inquire into the nature or meaning of that phenomenon” (1997a, p.175).

**Ontology**

Heidegger (1962) asserted that phenomenology was subservient to ontology in that his philosophical investigation was centred on the question of being; what it means to be. Heidegger saw the ontological question of being as neglected by previous philosophers, as they had mistakenly considered it already resolved. He directed his attention away from Husserl’s pure phenomenology, towards a pre-ontological understanding of being as it is manifested in everyday activity and rather than isolating conscious experience, Heidegger sought to interpret our everyday experience of
Dasein, which is contextualized within the world in which we abide; a world saturated with meaning and purpose.

There is circularity in Heidegger’s investigative method, in which the method and the subject matter under investigation continually contextualizes the other and presents a unity between inquirer and his or her subject matter (Cerbone, 2006; Stolorow, 2006). Heidegger’s outstanding achievement was that he brought “together in a unitary way not only ontology and phenomenology but, through hermeneutics with its connotations of dialectics of rhetoric, the element of language as well” (Crotty, 1998, p.97).

**Lifeworld**

The idea of lifeworld is derived from Husserl and is elucidated in his last text *Crises of European Sciences* (1975). Husserl describes lifeworld (Lebenswelt), as the “world of immediate experiences” and “the world of natural primordial attitude” and states that lifeworld can be disclosed as a realm of subjective phenomena, which have remained “anonymous” (Husserl 1975, p.111). When elaborating on his understanding of “original natural life” (‘natural’ meaning what is original and naïve, prior to critical reflection), Husserl distinguishes between our theoretical attitude to life appropriated from Greek philosophy and our pre-theoretical attitude to life, on which all theorizing is derived. With his commitment to exploring ‘modes-of-being’ or ‘ways-of-being’ in the world, Heidegger adds an existential component to this notion of ‘lifeworld’ (van Manen, 1997a, p.182).

Merleau Ponty contributes to the notion of lifeworld by enumerating four existentials, which are purported to correspond to the basic structure of life the world all human beings, regardless of their historical, cultural or social positioning. The existential themes, which are valuable when undergoing phenomenological reflection, questioning or writing, are: lived space (spatiality), lived body (corporeality), lived time (temporality), and lived human relation or relationality (Dowling, 2005; van Manen, 1997a). These existentials and their value as a reflective tool will be explored further in Chapter Six.

**Hermeneutical Phenomenology**

Dilthey (1976) set the stage for the evolution of hermeneutical phenomenology and his influence is reflected in some of the expressions and thinking of Heidegger (1962), Gadamer (1976, 1996), and Ricoeur (1976, 1981). Dilthey’s (1976) emphasis was the world itself, the historical character of life and the humanness of science or *Geisteswissenschaften* (the ‘sciences of the spirit’). His philosophical enquiry led him to make a clear distinction between human and social science. In contrast to scientific
experiments, which seek to know and explain, human inquiry seeks to understand (Verstehen). Dilthey argued that “the texts that humans write, the speeches they utter, the art they create and the actions they perform are all expressions of meaning” (Crotty, 1998, p.94). Crotty (1998) states that Dilthey’s hermeneutic blueprint is “lived experience,” as it is objectified in the text or artefact. For Dilthey, understanding, rather than being a cognitive act, was considered to be the moment when “life understands itself” (Crotty, 1998; van Manen, 1997a). The basic themes characterising hermeneutic phenomenology are: interpretation, textual meaning, dialogue, pre-understanding and tradition.

Interpretation

The term hermeneutics comes from the Greek hermeneuo, to interpret, and its original purpose was to interpret texts, whose meanings were contentious or difficult to explicate. This enterprise had its genesis in Greece where the interpretation of Homer was a particular concern (Follesdal, 2001). Interpretation as a method evolved in the early 19th Century, under the influence of Schleiermacher, who also included the spoken word in discourse for reflection and interpretation. Schleiermacher’s methodology was further advanced under Dilthey’s scholarship to include the interpretation of meaningful human action, particularly in the fields of history and philosophy (Sharkey, 2001, p.20). Thus, phenomenology becomes hermeneutical when its method embraces interpretation rather than pure description, as is the case with transcendental phenomenology. Crotty (1998) states that “in broad terms, it could be said that hermeneutics is to exegesis what grammar is to language and logic is to reasoning” (p.87).

The most significant philosophers responsible for the synthesis of hermeneutics and phenomenology are Martin Heidegger, Hans–George Gadamer and Paul Ricoeur (Sharkey, 2001; Sokolowski, 2000; van Manen, 2002b, 2011a). Heidegger instigated the shift from description to interpretation in phenomenology by arguing that description is always already interpretation and by extending the notion of hermeneutics to the self interpretation of human existence. As such, this is the central theme of Heidegger’s philosophy and his significant work, Being and Time (1962), is considered primarily to be an exercise in ontology (Moran & Mooney, 2002; Sokolowski, 2001).

In relation to interpretation, Ricoeur (1981) understood that discourse always involves a speaker and the recipient, who hears what is said, or similarly, a writer and a reader as well as the content of what is said about some reality. Thus, full interpretation involves both the objective analysis (for which structuralist devices can be used), as well as a
recognition that there is always additional meaning to be found in discourse that
transcends what objective techniques explain. Discourse is always open to new
interpretations, which occur especially with the passage of time or where the context of
the particular interpretation changes (Dauenhauer & Pellauer, 2011, p.5). Ricoeur
(1981) argued that “interpretation has certain subjective connotations, such as the
implication of the reader in the process of understanding and the reciprocity of the
interpretation of the text and self interpretation. The “reciprocity in the hermeneutic
circle” is antithetical to the sort of objectivity and non-implication, which characterises a
scientific explanation of things” (Ricoeur, 1981, p.165).

Ricoeur was of the opinion that metaphor and narrative are closely linked in an
encompassing ‘poetical sphere’. He states that “the issue is no longer the form of
metaphor as a word focused figure of speech, nor even just the sense of metaphor as
a founding of a new semantic pertinence, but the reference of the metaphorical
statement as the power to ‘redescribe’ reality” (2003, p.5). Ricoeur (2003) argues in
his work, ‘The Rule of Metaphor’, that metaphors are not simply rhetorical
embellishments; instead, they have an authentic cognitive significance in their own
right. Thus, when used in a fresh way, metaphors generate and regenerate meaning
and creatively transform language (Alvesson & Skoldberg, 2000).

Textual Meaning

Hermeneutic understanding for Heidegger aimed at apprehending one’s own
possibilities for being in particular ways and to interpret the text is to have the prospect
of understanding the possibilities of being revealed by the text. Heidegger’s
hermeneutics is also known as interpretative phenomenology (Spiegelberg, 1994; van
Manen, 1997). Gadamer, a student of Heidegger, agreed with Heidegger’s notion of
truth “as unconcealment, a simultaneous revealing and concealing” (Moran, 2000,
p.282). Gadamer (1976) concurred with Heidegger’s ideas about the centrality of
language and advanced the evolution of hermeneutic phenomenology, by putting into
practice Heidegger’s theoretical understanding of human cultural formation. Gadamer
(1976) argued that all understanding, whether of a text or aspects and expressions of
another’s life, is embedded in and contextualized in history and language.

Gadamer (1976) argued that when interpreting a text, we cannot separate ourselves
from its meaning and that understanding is always an interpretation, which is specific.
He recognised that understanding is contextualized within the tradition in which one is
located. Texts come to us from different conversational relations or traditions and they
may be perceived as possible answers to our questions. The movement of
understanding according to Gadamer (1976) is from the parts to the whole and whole back to the parts (Spiegelberg, 1994; van Manen 1997).

When elucidating the relevance of history to understanding, Gadamer (1976) explained that all understanding is influenced by pre-judgement, which is formed by “effective history.” Our concepts are not constructed; rather we inherit them within the context of a living historical tradition. Gadamer (1976, p.300) emphasised that it is imperative to “recognise that in all understanding, whether we are expressively aware of it or not, the efficacy of history is at work.” In addition, he stated that “historically effected consciousness (wirkungs-geschichtliches Bewubstein) is an element in the act of understanding itself, and ... is already effectual in finding the right questions to ask” (p.301).

Ricoeur (1976) broadened the concept of textuality to be understood to be any human action or situation. A social situation is interpreted by treating it as text and then seeking the metaphor that may be perceived to be governing the text. van Manen (1997) argues that in response to Heidegger and Gadamer, Ricoeur returns hermeneutics from its ontological framework to an epistemological one; understanding as a human science method. Ricoeur does this by attempting to convey the methodological relationship between “explanation and understanding” in relation to “distantiation and participation” (p.180).

Dialogue

Gadamer (2004) subscribed to the view that “language is the medium of hermeneutic experience” and argued that it is through language that we arrive at the basic relation of understanding and attain the hermeneutic experience (p.386). He contended that “the real power of hermeneutical consciousness is our ability to see what is questionable” (p.13). Meaning can then be realized by undertaking a dialogue with the text. This is achieved firstly by listening to the text and secondly by asking questions; often posing the questions repeatedly, line by line:

Like a cautious tapping at an object until it gives off a revealing sound, or a knocking at a door until it finally opens. This process of questioning is repeated ... Listening constantly to the text until it no longer answers or (it) speaks to us so unclearly and faintly that the answer can no longer be heard. The idea is not to reach any final answer; instead the journey is its own reward. At the end of the voyage, the question itself has been dissolved and a new question has begun to
manifest itself, so that the process can start all over again (Alvesson & Skoldberg, 2000, p.86).

For Gadamer (2004), questions are of paramount importance in the dialogue within hermeneutic analysis. He recognised that we:

cannot have experiences without asking questions ... A question places what is being questioned in a particular perspective. When a question arises it breaks open the being of the object ... Hence the logos that is explicates this opened up being is an answer. Its sense lies in the sense of the question (Gadamer, 2004, p.356).

Ricoeur (2003) connected the hermeneutic concepts of interpretation, textual meaning and dialogue into an analysis of personal narrative identity. Dauenhauer & Pellauer (2011, p.14) summarised Ricoeur's analysis of personal narrative identity as follows:

1. Because personal identity is a narrative one, self understanding is mediated through my involvement with others.
2. In my relationship with others my role is not pre-assigned and immutable – but can be modified through my own efforts. Similarly, change can also occur with those with whom I am engaged.
3. Total self-change isn't possible for me or others in relationship with me, because of the biological and psychological constraints of embodiment that all human's share.
4. Although I can be appraised for such abilities as verbal fluency, technical skill, to name a few, an appraisal of my ethical response to others, over time, is the most important evaluation.

Pre-understanding

For Heidegger, “the phenomenology of Dasein (human-Being) is a hermeneutic in the primordial signification of this word, where it designates this business of interpreting” (Heidegger, 1962, p.37). Heidegger argues that understanding is a reciprocal activity between pre-understanding and understanding. He conceptualises his notion of understanding in terms of a ‘hermeneutic circle’. Heidegger's (1962) view of phenomenological hermeneutic understanding commenced with and from a pre-understanding of Being, which through ‘phenomenological seeing’, ultimately becomes explicit and thematic, as existential structures are revealed to us and finally, through which Being itself is made available to our awareness (Crotty, 1998; Dowling, 2007; Follesdal, 2001).
According to Spiegelberg (1994), Merleau-Ponty’s (2002) “primacy” of perception is his most cherished philosophical proposition. It aims to explore the most fundamental stratum in our experience of the world, as it is given to us prior to scientific elucidation. Perception gives us privileged access to this level of experience. For Merleau-Ponty (2002, p.560), “perception, constitutes the ground level of all knowledge” and the study of perception “has to precede that of all other strata such as that of the cultural world and specifically that of science.”

Sokolowski (2000) explains that Merleau-Ponty’s philosophy emphasises “the prereflective, the prepredictive, the perceptual, the temporal, the lived body and the life world” (p.221). Merleau-Ponty’s (1965) phenomenology is existentialist, in that it is concerned with the existence of people in a pre-given world; a “world which is already there before reflection begins” (p.vii). Furthermore, Merleau-Ponty (2002) claims that phenomenology “offers an account of space, time and the world as we ‘live’ them by trying to give a direct description of our experience as it is” (p.vii). As such, his descriptions of the phenomenon of interest, disregard psychological origins and causal explanations from scientists, historians or sociologists.

**Tradition**

Heidegger (1962) argues that we have inherited meaning and Dasein has “grown up both into and in a traditional way of interpreting itself” (p.41). This can be problematic as a human being in its “everyday,” inauthentic mode can ‘fall prey’ to the tradition in which it stands. He states that if this occurs:

> tradition thus becomes the master (sic), it does so in such a way that what it ‘transmits’ is made so inaccessible, proximally and for the most part, that it rather becomes concealed. Tradition takes what has come down to us and delivers it over to self-evidence; it blocks our access to those primordial sources from which the categories and concepts handed down to us have been in part quite genuinely drawn (Heidegger, 1962, p.43).

Gadamer extended the notion of interpretation. The idea of ‘middle space’ (Zwischen) was an important concept for him as he understood interpretation as an event, which evolves in the ‘middle space’ of an engagement between text and interpreter. He stated that understanding takes place as a fusion of horizons; the horizon of the interpreter and that projected by the text. Gadamer (2004) explains this process of understanding as a process whereby understanding always involves rising to a higher universality that overcomes not only our own particularity, but also that of the other.
The concept of “horizon” suggests itself because it expresses the superior breadth of vision that the person who is trying to understand must have. To acquire a horizon means that one learns to look beyond what is close at hand - not in order to look away but to see it better (p.304).

Gadamer (1976) argued that historicality allows us to connect with the tradition of the past and interpret what has been handed onto that and us the understanding that takes place through a fusion of horizons between the past and the present. All tradition is coalesced with language, which is at the core of understanding and “language and understanding are inseparable structural aspects of human being in the world” (Gadamer, 1976. p.xxiv). For Gadamer, hermeneutic understanding is essentially historical in nature. Our understanding transpires from the consciousness of the distance between our horizon of understanding and that of the past, which we seek to understand (Moran & Mooney, 2002; van Manen, 2011).

Furthermore, according to Ricoeur (1984, 2003), all action takes place in ‘historical time’, which is constituted by two other elements of time, ‘cosmic time’ and ‘time of the world’. Cosmic time is one in which there is a sequential unfolding of uniform, undifferentiated moments, in which all change occurs but in which any present is defined in the context of what comes before or after. Lived time on the other hand is where the present is experienced as lived ‘now’ with some moments being more memorable than others such as death of a loved one or the birth of a much anticipated child. The clarity of action depends on the synchronization of these two kinds of time into so called ‘historical time’ (Dauenhauer & Pellauer, 2011; Grethlein, 2010).

The present moment of ‘historical time’ takes place in what is construed by Koselleck (1985) as ‘the space of experience’ and ‘the horizon of expectation’ with ‘the space of experience’ constituting past natural or cultural events that are remembered or have influence in the present, and the horizon of expectation is “the future made present”; the unfurling of a range of projects which can be embarked on, or paths that can be explored, as a consequence of the path of experience (cited in Dauenhauer & Pellauer, 2011, p.12).

Ricoeur’s notion of temporality and action is summarized by Dauenhauer & Pellauer (2011), who state that “we are affected both by a past that is not of our making and by the pictured future, that our society presents. Nonetheless, through our initiatives, we do make history and effect ourselves in the process of doing so” (p.12). In order to express the complexities of historical present, a particular kind of discourse known as narrative is used and this can articulate contextualized sequences of human actions.
and events. Ricoeur (1984) explains this transformation from historical time to human time when he states:

Between the activity of narrating a story and the temporal character of human experience there exists a correlation that is not merely accidental but that presents a transcultural form of necessity. To put it another way, time becomes human to the extent that it is articulated through the narrative mode, and narrative attains its full meaning when it becomes a condition of temporal existence (p.52).

In summary, because of their influences on van Manen’s eclectic approach to phenomenology and the development of the phenomenology of practice, this section described three of van Manen’s classifications of phenomenological orientations: transcendental phenomenology, existential phenomenology and hermeneutic phenomenology. Transcendental phenomenology features the work of Husserl and his collaborators, who expounded the concepts of intentionality, eidetic reduction and constitution of meaning.

Phenomenologists, particularly Heidegger, discussed existential phenomenology using the concepts of lived experience, modes of being, ontology and lifeworld. From Dilthey’s original influences, phenomenological philosophers, such as Heidegger, Gadamer and Ricoeur, have discussed hermeneutic phenomenology as epistemology and ontology, in relation to interpretation, textual meaning, dialogue, pre-understanding and tradition.

van Manen’s phenomenological work has developed into another major phenomenological orientation, the phenomenology of practice. van Manen (1990, 1997a) states that human science researchers who are undertaking phenomenological research need to have a comprehensive grasp of the philosophical roots that underpin their methodology, in order to convey the epistemological and theoretical implications of their chosen methodology. The methodological approach for this research was informed by van Manen, therefore, I read widely to grasp the philosophical ideas underlying his method (as detailed in Chapter Six). The next section discusses the phenomenology of practice, developed in part by Max van Manen.

Phenomenology of Practice

Phenomenology of practice, which could also be called ‘experiential phenomenology’, ‘lifeworld phenomenology’ or ‘applied phenomenology’, is a term used to distinguish the phenomenological research performed by professional practitioners from research
undertaken by professional philosophers. Philosophers are engaged in inquiry pertaining to topics and themes derived from issues and questions emerging from the work of distinguished philosophers, or historical developments of philosophical systems. They rarely conduct interviews or on-site observations, nor do they employ illusory logic (van Manen, 1997a, 2001b).

Phenomenological philosophers tend to distrust epistemologies that are artistic, fictional or non-rational and non-cognitive. In contrast, professional practitioners' interests lie within the applied domains of human science, such as health science, education, or clinical psychology, and they refer “to literature and art, to ordinary language sources and voices from the street,” as well as pertinent social science and philosophical disciplines. These strategies are employed to “explore sources of meaning that evoke new and practical understandings and that resonate with the emergent legitimating priorities of local and global contexts of contemporary societies” (2001a, p.852).

The historical origins of phenomenology of practice lie in the research done in the post war 1940s and 1960s by a heterogeneous group of Dutch academics at Utrecht University. The ‘Utrecht School’ included psychologists, educators, doctors, sociologists and jurists, who were committed to phenomenological methodology as a means of researching in their particular fields. According to van Manen (1997b) the abiding interest, of these practitioners, was to use phenomenology as a reflective method to produce “insightful studies of concrete human phenomena” (p.348). Their intention was in contrast to philosophizers, such as Husserl, whose aim was to use his methodology as a rigorous science, with the intention of establishing indubitable knowledge, or alternatively, as Heidegger and his followers, whose goal was to use phenomenology as a method to “overcome metaphysics” (p.348).

According to Levering and van Manen (2002), the Utrecht School, which included the gifted scholars, Frederick Buytendijk and Martin Langeveld, made a significant contribution to international phenomenological discourse and the recent developments in phenomenological methods. As a consequence, researchers now give more credence to the “subjective and intersubjective roots of meaning, to the complexity of relations between language and experience, to the cultural and gendered contexts of interpretative meaning, and to the textural dimensions of phenomenological writing and reflection” (p.283).

The ‘Duquesne School’ was named after academics based in the psychology department at the Duquesne University in Pittsburgh, which was instituted by Adrian
Van Kaam in 1962. Their research was founded on existential phenomenological psychology. Notable scholars from the Duquesne school are Giorgi, Fisher and von Eckartsberg. Whereas the Duquesne phenomenologists focus on eidetic description, the Utrecht or Dutch School has amalgamated aspects of descriptive and interpretative phenomenology (Cohen and Omery, 1994).

Cohen and Omery (1994) describe the formation of three traditions of applied phenomenological research, which have different aims and influences and inform the methodologies of professional practitioners, who undertake phenomenological research. They are: the eidetic structure, guided by Husserl and the Duquesne School; interpretation of phenomena to explicate hidden meanings, guided by Heidegger and Heideggerian hermeneutics; and phenomenology, which employs a combination of these goals, guided by the Utrecht or Dutch School.

**van Manen’s Phenomenology of Practice**

van Manen (1997a, 2007), whose work is the predominant influence of this study, drew inspiration for his method from the European schools, which included the Utrecht School (principally phenomenological), and the German Dilthey-Nohl School, (predominately hermeneutic) in their approach to human science enquiry. He also drew heavily on the philosophical concepts of those phenomenological philosophers discussed earlier in this chapter, namely, Husserl, Heidegger, Gadamer, Merleau-Ponty and Ricoeur. van Manen (2007) asserts that “all phenomenology is oriented to practice – the practice of living” (p.13), and that phenomenology of practice, “finds its source and impetus in practical phenomenologies of reading and writing that open up possibilities for creating formative relations between being and acting, self and other, interiorities and exteriorities, between who we are and how we act” (p.11).

**Themes of Phenomenology of Practice**

van Manen (1997a, 2011a) argues that the themes of phenomenology of practice are ‘lifeworld’ and ‘applied phenomenology’ and specifies the characteristics of his particular orientation as hermeneutic phenomenological research. He states that hermeneutic-phenomenological research is a human science endeavor, which studies persons. It is a philosophy or “theory of the unique” and a philosophy of the personal. Moreover, it is a “curriculum of being or becoming” which enhances our ability to act with tact and sensitivity towards others, thus enhancing our competence as researchers and professional practitioners (1997a p.7).
As the term science is derived from ‘scientia’, meaning “to know,” phenomenology, according to van Manen (1997a), can be deemed in a broad sense to be a ‘scientific’ process, which is systematic, explicit, self-critical and intersubjective in its research endeavors. Phenomenology is systematic, as it subscribes to specific means, which among others are questioning, reflection and intuiting. It is explicit, thereby distinguishing itself from the textual forms, such as poetry or literature, where embedded meaning is implicitly derived. By contrast, phenomenology attempts to articulate the structures of embedded meaning, through the manipulation of content and form of the text. Phenomenology is self-critical, continually reviewing its goals and methods as means recognizing the strengths and deficiencies of both the methods and outcome of the inquiry. Phenomenology is intersubjective, as the presence and relationship with the reader of the text, (“the other”), is a prerequisite, as a means of forming a “dialogic relation with the phenomenon” and thus validating the phenomena of interest as it is described (1997a, p.11).

Lifeworld

Above all, van Manen (1997) states that the primary characteristic of hermeneutic phenomenological research is that it invariably begins in the ‘lifeworld’, derived from Husserl’s (1990) understanding of the natural world, with a pre-reflective, pre-theoretical attitude of everyday life. Phenomenology aims at acquiring deeper insight into the nature or meaning of our everyday lived experiences (van Manen, 1997a, p.7). van Manen (1997a) explains that phenomenology is potentially interested in anything that presents itself to consciousness, and that consciousness is the only means that humans have of accessing their world. However, it is crucial in phenomenological research to understand that consciousness itself cannot be described directly. He reminds us that such a description would fall into the philosophical fallacy of idealism. Nor can aspects of the world or the world itself be described directly without the mediation of the experiencing person or consciousness. van Manen states that to think otherwise, would mean that one has succumbed to the fallacy of realism. Phenomenology attempts to explicate these lived or existential meanings of our lifeworld. Moreover, as we cannot reflect on an experience as it is being experienced, “reflection on lived experience is always recollective” (van Manen, 1997a, p.10).

When elaborating on the characteristics of hermeneutic phenomenology, van Manen (1997a) advises that to ‘do’ this form of research is “an attempt to accomplish the impossible: to construct a full interpretative description of some aspect of the life world, and yet to remain aware that lived life is always more complex than any explication of meaning can reveal” (p.18). Furthermore, van Manen (1997a) states that the end
results of applying this methodology, is that hermeneutic phenomenological research “re-integrates part and whole, the contingent and the essential, value and desire. Its effect on the researcher is that it encourages a certain attentive awareness to the seemingly trivial dimensions of our everyday … lives. It makes us thoughtfully aware of the consequential and the inconsequential, the significant and the taken for granted” (p.8).

From my point of view, there is sense of circularity in van Manen’s statement, because acquiring the above qualities are both pre-requisites for successful phenomenological research, as well as the consequence of applying this methodology. The above mentioned quality of “attentive awareness” and its effects were also observed to be attributes of the participants in this study. As healers, the participants in this study habitually achieved a deeply grounded, open and reflective state in order to assess and assist their clients.

Applied Phenomenology

Applied phenomenology of practice, derived from hermeneutic phenomenology, seeks meaning through experience, words and reflection. Hermeneutic phenomenology is essentially a writing activity, as the process of research and writing is inseparable. Scholars, such as Husserl, Heidegger, Sartre, Gadamer and Ricoeur, attested to this notion, in that they balanced their reflection and research, with reading and writing; often with prolific results (van Manen, 2006, 2002b, 2011c). The aim of the writer of phenomenology is to reveal human meaning, yet this in itself is problematic, because even though the nature of the phenomenon of inquiry can only be represented in words, it nevertheless eludes all representation in its original form. Goethe (as cited in Buhner, 2010), recognized and described this dilemma, declaring: “How difficult it is not to put the sign in place of the thing; how difficult to keep the being always livingly before one and not to slay it with a word” (p.185).

van Manen uses metaphor to describe several definitive “moments” that are experienced in the act of writing. These are: ‘drawing’, ‘entering’, ‘gazing’, ‘seeking’, ‘touching’ and ‘traversing’ (2002b, 2011c). When describing the “drawing power” of words, he states that by “evoking worlds, insights, emotions, understandings” these symbolic representations of our thoughts, “open a temporal dwelling space,” where wonder and realization co-exist (2002b, p.4). The writer of the phenomenological text, states van Manen (2011c, 2002b), enters a space and is admitted into a world created by the words, where language and experience coalesce. He contends that “textual space” is not a metaphorical description, but rather a means of using spatial/temporal
phenomenology. The space of the text holds deep insights for its author, but the language of the text can seem to “vacillate between transparency and impenetrability” and one can also experience “linguistic obscurity and darkness,” where language precludes us from capturing the meaning that we seek (van Manen, 2002b, p.3).

In the hope that the researcher can explicate the phenomenon of interest, through writing, he or she may enter the ‘textual space’ with the intention of recapturing, through reflection or the ‘phenomenological gaze’, a sense of wonder. Wonder is understood as the starting point and end point of phenomenology, for the researcher must experience a sense of wonder, in order to initiate his or her inquiry and must induce wonder in the reader of the text, to validate the “truth” of the inquiry (Merleau-Ponty, 2002; van Manen, 1997a, 2002b, 2011c). What makes phenomenological writing successful is ‘seeking’ and being successful in the search for the meaning, of that which instigated the particular phenomenological inquiry. To accomplish this, van Manen (2011c) suggests one must create a phenomenological text, which brings us ‘in touch’ with the ‘phenomenological gaze’, described in Merleau-Ponty’s terms as:

the reply to a certain kind of questioning on the part of my gaze, the outcome of a second order or critical vision, which tries to know itself in its own particularity, of an ‘attention to the pure visual’, which I exercise when I am afraid of being mistaken, or when I want to undertake a scientific study of the spectacle presented (2002, p.263).

van Manen’s (2002b) last “metaphorical moment” in the act of writing, is to “traverse” the realm where “things” may be encountered before they are named and thus categorized and to “peer past the veneer of human constructs” (p.3). To bring this intention to realization, the writer is compelled to navigate a world other than his or her own; to bridge what poet Marie Howe (2008) calls the ‘kingdom of ordinary time’, in order “to enter the textorium, the world of the text.” In doing so, one leaves a personal self behind and becomes “a neutral self – a self that produces scripture” (van Manen, 2002b, p.3).

Reduction and the Vocative Dimension

van Manen (1997a, 2001b, 2006, 2011b) states that phenomenological enquiry and writing is motivated by two methodological impulses: the reducio (reduction), and the vocatio or vocative dimension. The reduction or suspension of our everyday “natural attitude” is the method used to achieve a pre-reflective experience of lived experience
that interests us, and to “emulate” lived experience in order to reveal the unique significance of the phenomena under investigation. This method of reduction or bracketing is not a procedural technique, but rather, refers to a certain manner of “thoughtful attentiveness,” which must be adopted by phenomenological researchers and readers alike when engaging in phenomenological enquiry. This process is a means for phenomenological meaning and understanding to be “produced constantly anew by the writers and readers of phenomenological texts” (van Manen, 2011b, Reducio, para 6).

In acknowledgment of the complexity and confusion of the various philosophical explications of the terms ‘reduction’ and ‘epoche’, van Manen (2011b) states that for the purposes of eclectic phenomenological enquiry, this process of attentive awareness takes several forms and is characterised as follows: eidetic, hermeneutic, heuristic, methodological, ontological and phenomenological reduction.

_Eidetic Reduction_

Eidetic reduction is a process of bracketing all incidental meaning and it is to inquire what possible invariant aspects there are to the particular experience in question. This form of reduction is a derivative of Husserl’s concept, and it endeavours to see through the particularity of lived experience to find “iconic images” of the phenomenon. It “makes the world appear as it precedes every cognitive construction: in its full ambiguity, irreducibility, contingency, mystery and ultimate indeterminacy” (van Manen 2011b, Eidetic Reduction, para 7).

_Hermeneutic Reduction_

Hermeneutic reduction is a method of suspending all interpretation and reflectively explicating any assumptions or pre-understandings that may prevent one from being transparently open to the meaning and significance of the phenomenon of interest. The intention underpinning this practice of critical self-awareness, by reflective examination of one’s textual endeavours, is to expose the multiple layers of meaning within the particular lived experience. While undertaking this form of reduction, one must remain mindful that quarantining or fully forgetting pre-understandings, private preferences or biases, although ideal, is not completely possible. However, explicating our inclinations and motivations in this manner clears a path for us to realise a “radical openness” towards the particular lived experience being investigated (van Manen, 2011b, Hermeneutic reduction, para.2).
Heuristic Reduction

By bracketing the attitude of familiarity or taken-for-grantedness towards the phenomena of interest, one aims to awaken a deep sense of ‘wonder’. This sense of wonder is defined by van Manen (2011b) as “the unwilled willingness to meet what is utterly strange in what is most familiar” (Heuristic Reduction, para.1). van Manen asserts that although it is unusual to consider ‘wonder’ as a method, when considering that the etymological source of method is *methodos* meaning ‘path’ or ‘the way’, the ‘way’ to knowledge and understanding begins in wonder, which makes the use of ‘wonder’ within scientific enquiry appropriate. van Manen (2002a, 2011b) explains that the purpose of developing a sense of wonder is to “animate one’s questioning of the meaning of some aspect of lived experience” and refers to the ancient philosophical proposition that the roots of all philosophical thought begin with wonder. Likewise, philosophical reflection is the outcome of wonder. The challenge to the researcher, when writing the phenomenological text, is to evoke a similar sense of “wondering attentiveness to the topic under investigation” (Heuristic Reduction, para.4).

Methodological Reduction

This form of reduction calls upon the researcher to bracket all established methods and to pursue an approach that accommodates the phenomenological topic under investigation. van Manen (1997a, 2011b) reasserts that the phenomenological challenge is “create a text that is iconic in its entirety,” in order to develop a method that is suitable to investigate and represent the phenomena in question (2011b, Methodological reduction, para.3). van Manen (2006) returns to Heidegger’s famous “woods” metaphor, when explaining that for Heidegger (1982), “genuine phenomenological method consists in creating one’s path, not in following a path.” Moreover, to achieve one’s intention as a phenomenological researcher, “one must experiment with a narratively informed inventiveness, that fuses the reflective and pre-reflective life of consciousness” (p.715).

Ontological Reduction

Ontological reduction is a practice of suspending “being itself” to explore what recommendations for human action or social policy could be proposed as an outcome of the research findings. In explaining this particular form of reduction, van Manen (2011b) reminds us that in Heideggerian terms, “phenomenology poses the question, what is the meaning of being?” However, van Manen argues that in order to radicalize this question, one must suspend ‘being’ itself and ask the question: “What is
other than being?” (This particular inquiry, according to van Manen, is one which philosopher, Levinas denotes as an ‘ethical reduction’). For the researcher to remain true to this form of reduction, van Manen argues that even moral theories and ethics require suspension (Ontological reduction, para.1).

**Phenomenological Reduction**

Phenomenological reduction seeks to bracket all knowledge, theory or belief, when undertaking a research project. One must be mindful of the necessity to examine the body of knowledge pertaining to the range of phenomena in question. van Manen (1997a) claims that it is of equal importance when reviewing theories, to gain insight into how these theories inform our experience of a phenomenon being investigated. Nevertheless, one needs to recognise that theories are ultimately unsuccessful in apprehending a phenomenon in question, in its limitless depth and richness. In the interest of perceiving a phenomenon in a non-abstracting way, one must eschew all theorizing, generalization and all prior belief of what for us constitutes reality. van Manen (1997, 2011b) reasserts that the most effective way to bracket theoretical meaning is to analyse it for hidden phenomenological insights or apprehensions and it is also valuable to observe how these theories conceal the experiential reality upon which they are founded.

**The Vocative Dimension**

van Manen (2011b) describes the second “methodological impulse” the vocatio or vocative dimension of phenomenological inquiry. He notes that vocative is a derivative of vocare, “to call,” which is also related to the root “voice.” van Manen maintains that ‘the vocative turn’ has multiple purposes; to speak or generate text, which reveals our understanding of the phenomenon of our inquiry, as well as to remain open; to ‘listen’ to the object of our inquiry (2011b, Methodology: vocatio, para 6).

van Manen (1997b) argues that phenomenological understanding is “distinctly existential, emotive, embodied, situational, and non-theoretic” and that a “powerful phenomenological text thrives on a certain irrevocable tension between what is unique and what is shared, between particular and transcendent meaning, and between reflective and pre-reflective spheres of the lifeworld” (p.346).

Vocative methods such as alliteration, assonance, rhythm, and internal rhyme according to van Manen (1997a, 1997b, 2011b), bestow an “acoustic richness, an audible imagery to the text,” provide ‘mantic’ meaning, which intensifies the reader’s non-cognitive understanding, thus leading to a ‘phenomenological reverberation’
van Manen (1997b, 2011b) makes further distinctions when discussing the ‘vocatio’, by describing the various characteristics of a good phenomenological text and how it is produced. He coins six terms to describe the distinctive characteristics of the ‘vocatio’, an expression used to describe the manner in which the text can speak to the reader. These terms are the ‘convocative’, ‘evocative’, ‘invocative’, ‘provocative’, ‘revocative’ and ‘vocative’ turns (2011b, Methodology: vocatio, para 1).

The convocative turn is derived from ‘convocare’, to summon, assemble or ‘call together’. This term is used by van Manen to describe an aspect of the phenomenological text, which has a revelatory quality and the potential to have a transformative appeal to the reader, who “will have a sudden perception or intuitive grasp of the life meaning of something.” This epiphany, “may stir us to the very core of our being” (1997b, p.364). To convoke, states van Manen, is to “create conversational space in which the other can be encountered” (van Manen, 2011b, Vocatio: The convocative turn, para.2).

For this ‘revelatory quality’ to manifest in the phenomenological text, the author must finely construct the text; a practice that van Manen (1997a) defines as an “interpretative act.” The “corporeal act” of writing is a symbolic form of the researcher’s embodied knowledge and interpretation and reflects the author’s “style,” which is not mere “artistic idiosyncrasy,” but is demonstrative of Schleiermacher’s notion of “Geist” or the “mind, culture, spirit” of the author. It is, according to van Manen (1997a), the external expression of the “embodied being” of the writer (p.132).

van Manen (1997b) claims that “phenomenological texts aim to enchant, to turn mundaneness into transcendence and familiarity into strangeness” (p.354). When discussing the ‘evocative turn’, van Manen (1997b) asserts that evocation means “experience is brought vividly into presence so that we can phenomenologically reflect on it” (p.353). Furthermore, he contends that human science presents the “data of enquiry” by evoking experience through pathic means and that the range of strategies available to the phenomenological researcher to achieve a sense of ‘presence’ and ‘vividness’ are limitless. Reminding us that ‘vividness’ or ‘aliveness’ is sometimes used as an evaluative category, within the domain of phenomenological research, van Manen asserts that vividness cannot be considered as an aim for its own sake, but rather, it has a functional role, as it can evoke the capacity of realisation.

The invocative turn refers to the means by which the writer invokes the potency of language to affect the reader in a particular way. The poetic or repetitive use of words, when writing phenomenological text, can produce a “strongly embedded” meaning (van
Words can also become imbued with the meanings of other words that are juxtaposed or placed in relationship to them in an alliterative or repetitive way. When meaning is strongly embedded, “the relational tension between words and passages is compressed and tightly woven and would be disturbed if interfered with” (van Manen, 1997b, p.358). Meaning, declares van Manen (1997b), “may be differently embedded in different types of texts. In poetic text, “meaning tends to be strongly embedded, whereas in informational text; meaning tends to be weakly embedded” (p.358).

The provocative turn is a term conceived by van Manen (2011b) to describe the accountability of the phenomenological researcher, to articulate any ethical predicaments and responses to those concerns. He advises us that the word ‘provoke’ is a derivation of ‘pro-vocare’; meaning to challenge, to call forward or to arouse a feeling and that a robust vocative text is “action–sensitive and opens up the real of the ethical” (van Manen, 2011b, Vocatio: Provocative turn, para.2). This action may manifest as providing advice, changing policies or modifying practices within one’s professional domain.

van Manen’s ‘revocative turn’, which he states is derived from ‘revocative’, meaning ‘to recall’ or to ‘bring back’, refers to the mantic feature within phenomenological texts of ‘lived thoroughness’ or ‘concreteness’ (van Manen (1997a; 1997b; 2011b). He claims that when writing phenomenology, the use of effective anecdote and poetic imagery place “the phenomenon concretely in the lifeworld so that the reader may experientially recognise it” (1997 b, p.351).

In summary, the phenomenology of practice, also called ‘experiential phenomenology’, ‘lifeworld phenomenology’ or ‘applied phenomenology’, is a term used to distinguish the phenomenological research performed by professional practitioners from research undertaken by professional philosophers. This section discussed the phenomenology of practice, in terms of its two major themes: lifeworld and applied phenomenology. Various forms of reduction and the vocative dimension were described, as means to seek out the phenomenon through experience, words and reflection.

Phenomenology of Practice: Modes of Knowing

van Manen (2011c) proposes that three distinctions can be made when explicating the forms of knowledge and modes of knowing attributable to phenomenology of practice; “knowledge as text” (product), “knowledge as understanding” and “knowledge as being.” Phenomenological knowledge in text is distinguished from the type of
knowledge found in other texts, in that meaning is embedded in a phenomenological text and in addition, “phenomenology-as-text” has cognitive and pathic, conceptual and poetic, as well as informative and formative qualities. The type of understanding within phenomenology that van Manen (2011c) names as “knowledge-as-understanding,” aspires to a discursive and embodied form of understanding (Epistemology of practice, para1).

‘Knowledge as being’ refers to the formative knowledge that van Manen (2011c, 1997a) attributes to phenomenological reflection. He argues phenomenological knowledge and practice do not provide us with new theories or techniques and that human science does not perceive theory as something that “stands before practice in order to inform it. Rather, theory enlightens practice” (1997a, p.15). Because of its formative nature, phenomenological reflection “enhances our perceptiveness, it contributes to our sense of tact in human relations, and it provides us with pathic forms of understanding that are embodied, situational relational and enactive” (2011c Epistemology of practice, para.3).

van Manen (1997a, 1997b, 1999, 2011c) restates often that phenomenological understanding, rather than being gnostic, cognitive, intellectual and technical, is pathic in nature. Whereas the cognitive aspects of our world are the conceptualized qualities of something that are objective and measurable, the pathic aspects can be described as the relation we have with the world, which is immediate, unmediated and preconceptual in nature (van Manen 2007, p.21). In other words, pathic understanding is “a felt sense of being in the world” and is related to Heidegger’s notion of ‘Befindlichkeit’ which refers to the general mood or sensibility or “the way one finds oneself in the world” (Practice as pathic knowledge, para. 2).

van Manen (1997b, 2007, 2011c) describes the four forms of pathic knowledge as actional knowledge, embodied knowledge, relational knowledge and situational knowledge. Actional knowledge refers to the notion that we possess knowledge of the world through our actions. However, van Manen (2011c) indicates that this form of knowledge is “tacit, non-discursive and silent” (Epistemology of practice: Actional knowledge, para1). He advises that we discover what we know through our actions and activities and that actional knowledge although often “sedimented into habituations, routines, kinaesthetic memories,” allows us to be “sensitive to the contingencies, novelties and experiences of our world” (van Manen, 2007, p.22). Although this is generally applicable to us all, ‘actional knowledge’ was particularly evident in the participants of this study, who responded with remarkable alacrity, to the often highly unusual events unfolding before them while caring for terminally ill people.
According to van Manen (1997b, 2007, 2011c), embodied knowledge relates to Merleau-Ponty’s notion that we are embodied beings; our access to knowledge in and of our world is mediated through our bodies. Furthermore, he argues that, phenomenologically speaking, the whole body is pathic and thus the body “knows.” van Manen (2007) declares that “the pathically tuned body recognises itself in its responsiveness to the things of the world and to the others who share our world or break into our world. The pathic sense perceives the world in a feeling or emotive modality of knowing or being” (p.21).

The healers in this study exhibited highly developed abilities to access the multiple levels of their world and those within it, through their sensory and extrasensory capacities. They described not only how they use their ‘gnostic knowledge’ when diagnosing and prognosing the psycho-biological state of their terminally ill patients, but the study participants also demonstrated their pathic, embodied knowledge, which was used to access and respond to those in their care. This embodied knowledge is accessed and applied by feeling, touching, seeing, hearing and giving voice to their understanding. They demonstrated the high level of pathic knowing that is used to perceive the physical, emotional, psycho-spiritual changes and needs of their clients, but more importantly, for the focus of this study, to perceive the subtle changes occurring in the energy fields or “higher bodies” of the people in their care.

Relational knowledge, according to van Manen (2007, 2011c) belongs to the form of knowledge that abides imperceptibly in our relationship with others and the things around us. This relational sphere can place limits on our capacity for reflection and it can distance us from interactional experiences with others. Alternatively, because of the interactive relation between our conversational structure and the person with whom we converse, the inverse also applies. van Manen (2011c) cites Merleau-Ponty (1962), who says: “My spoken words surprise me myself and teach me my thought” (Epistemology of practice: Relational knowledge, para.2).

With respect to situational knowledge, van Manen (2007) suggests that pathic knowledge is not only integrally within in our bodies, but in the circumstances in which we find ourselves, the relation that we have with others and with all aspects of our surroundings. He states that “pathic knowledge also expresses itself in the confidence with which we do things, the way we “feel” the atmosphere of a place and the manner in which we “read” a face” ... this knowledge “inheres in the world already, in such a way, that it enables our embodied practices” (p.22).
The illustration of pathic knowledge was particularly evident in this study, in the often exquisitely subtle manner in which the healers demonstrated actional, embodied, relational and situational knowledge. It was also my responsibility and endeavour, as the researcher, to develop and demonstrate these modes of knowing in relationship to the participants and throughout all stages of the analysis and writing process of this thesis.

**Phenomenological Literature**

The rationale for reflecting on method within phenomenological literature is to uncover the historical approaches and suppositions that may assist in making human experience interpretable within the context of our present time and place. van Manen (1997b, p.346) asserts that there is no intention “to arrive at a recipe, a fool-proof set of techniques and know-how's that are guaranteed to produce repeatable scientific result; rather, we hope to become sensitive to some of the principals that may guide our enquiry.”

Scholars of phenomenology from various practice professions (Madjar & Walton, 1999; Pollio, Henley & Thompson, 1997; Taylor, 2007; Toombs, 2001; van Manen, 1997a, 1997b, 2002b), both implicitly and explicitly encourage phenomenological researchers to become immersed in phenomenological literature. This provides a means for deriving inspiration and familiarity with the various of ways that phenomenological texts employ particular strategies to “speak to our everyday experience as well as to the lifeworld of the professional practitioner” (van Manen, 1997b, p.348). Indeed, van Manen (1997a) remarks that the European students of outstanding phenomenology scholars were required to learn their craft by a process of osmosis or apprenticeship, often referred to by the Germans as ‘Bildung’ (education). Hence, this practice of engagement with phenomenological literature has a time honoured history.

Therefore, I have read numerous phenomenological articles and texts, in an endeavour to become ‘immersed’ in phenomenological literature, with the view to becoming inspired and informed, and to develop a level of familiarity with my chosen methodology. The following scholars have undertaken phenomenological research, to explore their particular phenomena of interest, which, although not identical to my inquiry, bore similarities to some aspects of it. Researchers have investigated the lived experience of dying or of being terminally ill from the dying person or the health worker’s perspective (Borbasi, Wotton, Redden & Chapman, 2005; Brannstrom, Brulin,

Projects have also explored the lived experience of being a healer and the phenomenology of healing (Hemsley & Glass, 2002, 1999a, 1999b; McCabe, 2007; Samarel, 1992; Struthers & Eschiti, 2005; Struthers, Eschiti & Patchell, 2008) and the phenomenology of consciousness (Prakash, Sarkhel, Rastogi, Choudharay & Verma, 2009). I also read works by scholars, who were influenced by van Manen’s approach to phenomenology (Cameron, 2002; Chiu, 2001; Esbensen, Dykes, Hallberg Thome, 2004; Haase, 2002; Halcomb, 2004; Hemsley, 2003; Hemsley & Glass, 1999a; 1999b; Penman, Oliver & Harrington, 2009; Porritt, 1999; Robertson-Malt, 1999; Schmidt, 2002; Shuying, 2002; Tarzian, 2000).

All of these studies have been instructive to me at some level of knowing. For example, Porritt (1999), to fulfill the requirements of her PhD candidature undertook a hermeneutic phenomenological study using van Manen’s approach, to inform her study into “The lived experience of readiness for death.” Hemsley (2003) wrote his PhD thesis on the lived experiences of nurse healers. Hemsley & Glass (2002, 1999a, 1999b) studied the phenomenon of “superpresencing”; which is the ability of nurse healers to engage with their patients in a particular manner to facilitate healing. Hemsley and Glass also carried out two other studies (1999a, 2002) on the lived experience of nurse healers. These studies all used a hermeneutical phenomenological methodology, guided by van Manen’s approach, which supported their aim in seeking the nature of the phenomenon.

Other scholars used different phenomenological orientations. For instance, Ross (1997) inquired into “The meaning of death in the context of life.” He used Heidegger’s notion that human being-in-the-world is always oriented towards a being-towards-death, to enrich his understanding of the experience of interest in his study, but was not more specific about his phenomenological methodology. Gullickson (1993) used a Heideggerian approach to study the lived experience of persons with chronic illness, to investigate the experience of “My death nearing its future.”
Struthers & Eschiti (2005) carried out a phenomenological study informed by Colaizzi, van Manen & Rose, on the lived experience of being healed by an Indigenous healer. This was done from the perspectives of three Indigenous participants, with the intention of elucidating the depth and diversity of alternative healing practices and their place in modern western culture. Struthers, et.al (2008) undertook a phenomenological study into the experience of being an Anishinabe man healer combining Colaizzi’s and van Manen’s approach to phenomenology to inform their methodology.

In contrast, Prakash, et al. (2009) conducted a phenomenological study of Vihangam Yogis’ lived experience of “inner light perception.” This study aimed to explicate this phenomenon, which is sometimes described by experienced meditators. (Researcher’s note: This mystical perceptual experience was of personal interest to me, as it was experienced by my sister, while I was giving her a healing session during the final months of her life).

The studies on chronic and terminal illness provided me with valuable insights as they anticipated the onset of the perimortal process (Iranmanesh et al. 2010; Gullickson, 1993; Hadwiger & Hadwiger, 1999; McPherson, et al. 2007; Sand, Olsson & Strang, 2009). Those studies that illuminated the experience of chronic illness and the fear of death (Borbasi, et al. 2005; Brannstrom, et al. 2005; McPherson, et al. 2007; Mercer & Feeney, 2009; Sand, et al. 2009; Tarzian, 2000), validated in my mind the importance of the aims of my study. The studies of healers’ journeys (Hemsley, 2003, Hemsley & Glass, 1999a, 1999b, 2002; McCabe, 2007; Struthers, et al., 2008) also provided valuable background knowledge, which informed my understanding of the diverse and profound abilities and practices of healers.

Although divergent from my subject of interest or methodological orientation, other studies clarified my understanding of the various ways that phenomenology could be presented to achieve the much sought after “phenomenological nod.” Of particular interest were some of the studies presented in van Manen’s (2002) edition of phenomenological inquiries in his book Writing in the dark, which clearly depicts specific methodological strategies. For example, van Manen includes Howard’s phenomenological explication of “the look” in a teacher’s performance evaluation in his text, to demonstrate the idea of using this ordinary phenomenon and employing linguistic devices, to increase the sense of vividness of her account and to evoke a feeling of “wonder” on the part of the reader. This strategy and other approaches in phenomenological studies have guided my approach to the structure and tone of my study.
Summary

The aim of this study was to explore the perceptions of healers, as they assist people who are dying, in order to provide a richer insight into the process of both dying and death, so that health professionals and carers may provide more appropriate assistance and support for the dying, and so that individuals within our culture will have the opportunity to experience their own dying process more consciously and with less fear. van Manen’s interpretation of phenomenology fitted these aims, because in elucidating the interrelationship between phenomenology, hermeneutics and practice, he offers a research process for a phenomenology of practice, which does not intend to show any functional relationship, prove any hypothesis, or provide any empirical generalization regarding the phenomena of interest. Rather, it seeks through the process of textual reflection, to develop an understanding that always remains focused on the uniqueness of human experience; one which clarifies lived meaning. In developing this understanding, van Manen’s methodological approach, seated within the phenomenology of practice, endeavours to offer an explication of the phenomena of interest. Through a “validating circle of inquiry” that “is collected by human experience and recollects human experience,” human experience is validated (1997a, p.27). Therefore, van Manen’s phenomenological approach was the methodology of choice for this research.

This chapter described the methodology of phenomenology of practice, adapted from its hermeneutic roots by van Manen, to fit the needs of educational and health practitioners. Phenomenology has developed in its various types and traditions (Spiegelberg, 1994; van Manen, 2002, 2011a), so this chapter defined phenomenology, identified the various traditions and outlined the history and key contributions of the main phenomenological movements.

In acknowledgement that the illumination of the perimortal phenomena in this research was informed by van Manen’s approach to hermeneutic phenomenology, this chapter reviewed the key concepts of phenomenological philosophers, whose writings were influential to him. van Manen’s understanding of hermeneutic phenomenology, adapted to the phenomenology of practice, was described. The modes of knowing in the phenomenology of practice were described and I identified how these forms of knowing have been evidenced by the research participants and how as a researcher, they were instructive for me.

Research examples of hermeneutic phenomenological literature with some similarities to my own were discussed, as they assisted me to gain a firmer grasp on
phenomenological concepts and to understand how phenomenology has been applied to other projects. This chapter concluded with a reiteration of why hermeneutic phenomenology, as applied by van Manen in the phenomenology of practice, became the methodology of choice for this research project.
CHAPTER SIX

METHODS AND PROCESSES

Understanding is entirely mediated by the procedures that precede it and accompany it.

Phenomenology aims to be presuppositionless, in that the researchers influenced by this methodology avoid constituting a “predetermined set of fixed procedures, techniques and concepts that would rule-govern the research project” (van Manen, 1997a, p.29). Bearing this in mind, van Manen (whose phenomenological method informs this project), defines methods as the “various ways or approaches that the researcher uses to illuminate the phenomena for our reflective awareness.” He also states that procedures or processes refer to the “various rules and routines associated with the practice of research” (1997a, p.28). Thus, even though phenomenology aims to be presuppositionless, thereby avoiding rule-ridden approaches, van Manen (1997a) suggests particular processes for undertaking phenomenological inquiry and these activities or research themes inform this study.

van Manen (1997a) uses Heidegger’s (1977) metaphor of following certain paths or “woodcuts” that “plunge” us deep into unknown parts of a forest taking us finally towards a “clearing” where previously unknown aspects of our study are revealed to us”. Like the “woodpaths,” which are not determined by “fixed signposts,” the methods we use, “need to be discovered or invented in response to the question at hand” (p.29). Furthermore, van Manen asserts that a hermeneutic phenomenological researcher can recognise and then explore these “woodpaths,” by engaging in the “dynamic interplay amongst six research activities” (1997a, p.30). Given the complexity of phenomenological philosophy, I welcomed this approach to facilitate the revelation of phenomena witnessed by healers, during the transition of terminally ill people in their care.

This chapter outlines van Manen’s approaches or “woodcuts” that were used to locate the “clearing” and to illuminate the phenomenon, congruent with his phenomenological research methodology. van Manen’s (1997a) six research activities are outlined and applied to the project. The participants are introduced and data collection and analysis
procedures are described. The ethical issues and the approval process that were undertaken to protect the confidentiality and privacy of the participants are discussed. In the final section of the chapter, the issues of trustworthiness in qualitative research are discussed, and the legitimizing criteria that were chosen and implemented to ensure the trustworthiness of this project are described.

I was indeed then in the dark and struggled on, unconsciousness of what I was seeking so earnestly; but I had a feeling of the right, a divining rod that showed me where gold was to be found
Goethe (Buhner, 2004, p.172)

Application of van Manen’s Research Activities

Although van Manen states that phenomenological inquiry cannot be reduced to a set of procedural techniques, he has identified six research activities, which are of assistance when undertaking phenomenological research. These activities are performed in a “dynamic interplay,” rather than being accomplished either in isolation, or in a strict sequence (van Manen 1997a). These six research themes have provided structural guidance for this study, and their application is summarized in the following Table 6.1.

van Manen (2011e) makes further distinctions when describing these research activities, stating that they fall into empirical or reflective processes. Empirical processes constitute activities that aim to identify and explore the various sources of pre-reflective materials, pertinent to the study in question. These include describing, gathering, and interviewing, observing, and engaging in fictional and imaginal activities. Reflective processes aim to explicate the aspects of meaning of the lived experience of interest to the researcher. van Manen (2011e) has described multiple reflective methods, which were used as a guide when undertaking this task. These methods included collaborative, exegetical and guided existential reflection in conjunction with hermeneutic interviewing, linguistic and thematic reflection. These empirical and reflective processes will be defined and discussed in the sections of this chapter where they have been applied.
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<th>van Manen’s Steps</th>
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<tbody>
<tr>
<td>1. Turning to the phenomenon which seriously interests us and commits us to the world</td>
<td>Orienting to the phenomenon Formulating the research question Explicating assumptions &amp; pre-understandings</td>
</tr>
<tr>
<td>2. Investigating experience as we live it rather than as we conceptualise it</td>
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</tr>
<tr>
<td>3. Reflecting on the essential themes which characterise the phenomenon</td>
<td>Thematic Analysis: Isolating thematic statements from the interview transcripts Making synopses of the interviews Incorporating poetry and literature</td>
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<td>“Living with” the phenomenon to gain clarity, undertaking reflective journaling, guided existential and exegetical reflective methods and exploring literature to reveal depth, strength and richness of the phenomenon</td>
</tr>
<tr>
<td>6. Balancing the research context by considering the parts and the whole</td>
<td>Interpretation of the themes, by considering the three phases of the perimortal process, then synthesising them into a unified whole phenomenon Integrating the participants’ thematic accounts with literature, poetics and my research experiences and insights</td>
</tr>
</tbody>
</table>

Table 6.1: Application of van Manen’s Six Research Themes
1. Turning to the phenomenon which seriously interests us and commits us to the world

van Manen’s (1997a) first research task has three guiding briefs; orienting to the phenomenon, formulating the research question and explicating assumptions and pre-assumptions. I used these guidelines to inform my project in the following manner:

**Orienting to the Phenomenon**

*Go to the pine*  
*if you want to learn about the pine,*  
*or to the bamboo*  
*if you want to learn about the bamboo*

*Basho (Buhner, 2010, p.139)*

van Manen (1997a) states that the origin of a phenomenological study starts with “identifying what it is that deeply interests you or me and of identifying this interest as a true phenomenon.” He also asserts that “to orient to phenomenon, always implies a particular interest, station or vantage point in life (p.40). The genesis of my interest in this phenomenon has been described previously, in the background section of Chapter One and other aspects of orienting to these phenomena are explored later in this chapter.

The phenomenological question posed in this study was, “What are the healers’ subtle perceptions of the transitional stages ‘nearing death’, ‘death’ and ‘after-death’?” van Manen (1997a) maintains that “a phenomenological question must not only be made clear and understood, but also “lived” by the researcher” (p.44). Furthermore, Holroyd (2007) states that “the opportunity to engage in hermeneutic understanding is likely to arise when individuals undergo any experience that serves to disrupt the ordinary, taken for granted aspects of human existence” (p.2). The formulation of this research question was generated and sustained by the onset of my sister’s terminal illness. Consequentially, my quest for clarity, understanding and the “living” of it has been a heartfelt and synchronous experience for me, as the past decade has been marked by my preoccupation and close participation in the death transitions of a number significant people in my life and consequent self reflection of the meaning of these experiences.

**Explicating assumptions and pre-understandings**

There is a potential for phenomenological enquiry to be compromised by our pre-understandings, suppositions and assumptions, which may, “predispose us to interpret
the nature of the phenomenon before we even come to grips with the question” (van Manen, 1997a, p.46). Rather than following Husserl's attempt to return to a pre-reflective, pre-predictive state, by using the strategy known as ‘bracketing’ (a suspension of any prior knowledge or belief regarding the nature of the phenomenon), van Manen (1997a), advocates transparency. This is achieved in his view, by making explicit our biases, beliefs and theories concerning the phenomenon of interest.

In my introductory chapter I described the professional, spiritual and personal experiences that influenced my decision to undertake this particular inquiry. In summary, these influences were:

- My spiritual exploration, which led me to a belief in the post mortem survival of consciousness and reincarnation;
- My professional evolution, which led me to work in palliative care settings. This combination of working in palliative care and being a Feldenkrais practitioner allowed me, both intellectually and technically, to work at a much more subtle level with my clients, thus developing my perception of subtle energy;
- My own evolution as a healer, facilitated by the numerous energy healing courses in which I participated, which improved my personal ability to perceive and work with my client’s subtle energy fields;
- My reading prior to the onset of this study, as well as undertaking an extensive literature review, which has further influenced my knowledge and beliefs; and
- Finally, my personal participation in the transitions of close relatives and friends and my connection with them following their deaths, which has influenced my beliefs in post-mortem survival.

The real power of hermeneutical consciousness is our ability to see what is questionable.  
(Gadamer 1976, p.13)

2. Investigating experience as we live it rather than conceptualise it

van Manen (1997a) states that in order to investigate “the world of lived experience” as it is lived rather than as it is conceptualised, we “need to search everywhere in the lifeworld for lived experience material, that upon reflective examination, might yield something of its fundamental nature” (p.53). Therefore to fulfil the requirements of this research activity, I needed to collect “lived experiential material” or data.
I have chosen to include the processes of gaining ethical clearance and recruiting participants under the umbrella of data collection, as these activities are prerequisites for the processes of collecting data, and as such can be considered to be a logical part of the composite of this research activity. van Manen (1997a) reminds us that the original meaning of ‘datum’ is ‘something given’ or ‘granted’ (p.54). Therefore, it also makes etymological sense to include these activities in this section.

Data Collection

To undertake van Manen’s second research activity, of “investigating experience as we live it rather than conceptualise it,” I fulfilled the prerequisites for collecting data, by gaining ethical clearance to undertake the study and recruiting participants for the study. I then conducted data collection methods, which included conducting face to face and phone interviews, and gathering emailed written accounts from some participants. The face-to-face interviews were conducted with 13 participants and the phone interviews were conducted with two participants, who were living interstate or overseas. I also collected experiential descriptions in the form of emailed written accounts of experiences from two participants, who became geographically unavailable following my initial interview.

Although the term data collection has a positivist nuance, van Manen (1997a) reminds us the gathering or collecting of data within the context of eliciting participants’ experiences, do not provide objective information that is quantifiable as such, but capture lived experiences, which are compatible with the intention of hermeneutic exploration. van Manen (2011e) describes a hermeneutic interview as “an interpretive conversation wherein both partners reflectively orient themselves to the interpersonal or collective ground that brings the significance of the phenomenological question into view” (Methods & Processes Hermeneutic Interview, Para.1). With this intention in mind, there is an honouring of each voice in conversation, as well as that of the phenomenon being described.

My initial invitation to the 15 prospective participants to participate in the study was by email, phone call or in person. The means of contact depended on the particular person’s residential location. As the participants were located in Australia, the USA, UK and Europe, the interview processes varied accordingly. Although five participants resided overseas, I managed to conduct an initial interview with three of them in person, either while I was travelling, or during their visits to Australia. I then continued follow up interviews or communication with each of them by phone or email. As two international participants could not be interviewed in person, our initial communication
was by email and phone calls. Negotiating busy schedules and differing time zones necessitated multiple conversations with these participants, thus allowing us the time and means to develop a rapport, prior to commencing the initial interview. As these participants were both published and were well known teachers, I read their books or journal articles and explored their websites prior to interviewing them, as a means of contextualising their work and perceptual abilities.

_Gaining Ethical Clearance_

Prior to commencing the study, a research proposal and an application for ethical approval of the project, were submitted to Southern Cross University Human Research Ethics Committee and approval was gained to undertake the project (ECN-04-38).

In the course of this research, processes and procedures were used to ensure the ethical standards of the project were upheld. All research participants had the right to full disclosure. They had the right to be fully informed of the aims, objectives, methods and processes of the research, in order to give their informed consent to participate in the project. Therefore, participants received a detailed verbal and written explanation of what the research involved, which included a full description of the research and what their role as participants would entail. This was given to them for their perusal before requesting them to sign a consent form to participate in the project. The participants were offered the right to refuse to participate, or to withdraw from the project at any time, without censure. Participants were also given the opportunity to ask questions, comment or voice any concerns that they may have had concerning the project.

The privacy, confidentiality, and anonymity of the participants were primary considerations. These ethical rights were protected throughout the research project, by providing participants with pseudonyms and coded names, rather than any personally identifiable information. Also, the names and locations of any person or context within the participants’ accounts were de-identified, as measures to ensure privacy confidentiality and anonymity.

To protect each participant’s privacy and confidentiality, the data collected from audio taped interviews or emails were stored in a locked filing cabinet for the duration of the study. In accordance with the National Health and Medical Research Council (NHMRC) requirements, data will be held in a secure filing cabinet for a period of five years. All information received from the participants was confidential and was not disclosed to anyone other than my supervisor (NHMRC, 2001).
The research participants had the right to be emotionally unharmed as a consequence of participating in the study. Although the majority of participant healers in this study were working in a professional capacity with their clients, many of them became emotionally close to these people, during the final stages of their lives. Some participants described the terminal illness and death of friends, family members, babies or little children. Furthermore, some of participants had not had the opportunity to describe or discuss these very intense and poignant experiences, prior to the interview. As a result, some of them experienced emotional pain when recalling these events.

As a physiotherapist and Feldenkrais practitioner, who has also done specific postgraduate training in counselling, I felt both comfortable and competent in providing appropriate emotional support during participants’ catharses. This was undertaken by giving the distressed person ‘time out’, to reflect and debrief during the interview, as well as at the conclusion of the interview. If further emotional support had been necessary following the conclusion of the interview, participants would have been referred to a qualified counsellor, at no personal cost.

On one occasion, a participant became distressed when reflecting on the sudden death of her friend’s baby, as she had not discussed the details of this experience with anyone since this event. During the interview and at its conclusion, we took time out, so that she could begin to process the memory of this experience and to acknowledge the trauma of the incident. After establishing that she did not want formal counselling, I re-connected with her a few days after our interview. During our conversation, she reassured me that she did not require further emotional support.

Recruiting Participants

The inclusion criteria were: adult participants over the age of 18 years who self-identified as healers, with experience of caring for dying people; and they were willing to speak of their healing experiences during the perimortal period. The participants who were recruited for the study were from a variety of healing traditions, and came from differing professional backgrounds, including academia, medicine, nursing, and scientific research. Others came to their healing practice from seemingly unrelated work practices, including the arts, permaculture, and veterinary science. Some participants, particularly those who were not initially working in mainstream health areas, were directed to their current healing practice, following an epiphany of some sort, which for two participants, was a near death experience. Several participants were currently practicing healing in hospitals and others were teaching healing or working in private practice.
The sampling method for this project was purposive, with the aim of choosing informants, who could articulate rich descriptions of the perimortal phenomenon. The balance of the participants were recruited, using a snowball technique. This was a procedure, whereby the initial respondents, who fulfilled the criteria as appropriate participants for the study, identified other potential participants, who in turn continued this process, until the designated number of participants for the study was achieved (Gubrium, & Holstein, 2002).

For some years prior to commencing my research project, I was interested in healers and healing traditions and had attended workshops and classes given by healers in New South Wales and South Australia. Consequently, I was aware of whom to approach as initial participants, because of my involvement in this field. Attending these classes facilitated the development of my own healing abilities, and gave me the opportunity to witness the skills of my teachers. As a result, four of these teachers became participants in the research project. In 2005, I participated in an Australian Holistic Nurses Conference, where I recruited two more participants for the study. In 2006, I recruited another participant while attending the annual conference of International Institute for the Study of Subtle Energies and Energy Medicine (ISSEEM) in Boulder, Colorado.

My preferred approach to recruiting participants was to have a “face-to-face” discussion with each person, so that there was the possibility of developing a rapport with him or her as well as the chance to ask and respond to any questions which may occur to either of us. I was aware that the disembodied experience of the phone or email provided less opportunity regarding the above options and was lucky enough to be able to recruit all but two participants face-to-face, as these two were geographically unavailable. One of these participants lived interstate and the other lived in the UK. Consequently, one person was initially contacted by phone and the other by email.

After explaining the intentions of the study to each participant, I described how I would tape each interview and transcribe it, so that it could be returned for validation. I then gave each participant a copy of the plain language statement, which reiterated these aims and intentions and detailed the method and structure of the interview process. It also gave assurances of my commitment to protect of each participant’s anonymity, and the measures I would undertake to do this. Although I gave each person the option of considering their decision, before committing to be a participant, they all responded immediately. Most participants responded with delight to my request, declaring that he or she would be more than willing to commit to the project. Upon agreeing to participate in the study, I gave each participant a consent form to sign. In
the case of the three participants who were unavailable for face-to-face contact, these documents were emailed to them.

Following my full explanation of the project and the requisites for participation, 15 self-identified healers, volunteered to participate in this study. As I was aware that healers came from a wide range of healing traditions, had a variety of skills and perceptions, and used many different techniques or approaches to achieve their intentions, my aim was to recruit participants who could reflect this diversity.

Some healers had been influenced by more than one healing tradition. They had then integrated these traditions with their own particular modality, in which they were practising and teaching. In this instance, I have described them as either an energy healer or spiritual healer. I have distinguished between energy healers and spiritual healers, as described by Targ & Katra (1999). These distinctions are further explored in the literature review in Chapter Four.

To facilitate ease of communication, the participants were English speaking adults. The 15 participants comprised 13 females and two males, aged between 35-75 years and each with at least 15 years healing experience. Although I had intended the ratio to be roughly proportionate between male and female healers, the final ratio of women to men was 13:2 which reflected the availability of willing participants, rather than any change of intention on my part. The requirement of a balanced ratio between male and female participants is normally influenced by the need for a representative sample. However, phenomenology seeks to illuminate the phenomenon and not necessarily to represent the possible differences in gender perception, so the disproportionate gender mix was of no concern in this study. Table: 6.2 summarizes the characteristics of the healers, their healing traditions, and dominant extrasensory perception/s.

**Conducting Interviews and Receiving Emailed Accounts of the Phenomena**

When discussing the use of the interview as a research tool, Kvale (1996) gives two metaphors for the interviewer’s role; one is the ‘miner’ metaphor, the other, the ‘traveller’ metaphor. Each metaphor exemplifies different views of knowledge collection and formation, represents different genres and has different rules. The miner metaphor likens interviews to “human engineering,” whereby the objective facts are retrieved by various techniques and these remain unpolluted by the interviewer, as they are “moulded into their definitive form.”
<table>
<thead>
<tr>
<th>NAME</th>
<th>AGE RANGE</th>
<th>GENDER</th>
<th>YEARS OF EXPERIENCE</th>
<th>TRADITION/BACKGROUND PERCEPTION/S</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carolyn</td>
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<td>20</td>
<td>Shamanism, Energy Healer, Clairvoyance, Clairsentience</td>
</tr>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>Mediumship</td>
</tr>
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<td>Ellen</td>
<td>40-50</td>
<td>Female</td>
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<td>Energy Healer (Reiki), Clairsentience, Clairaudience</td>
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<tr>
<td>Frances</td>
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<td>25</td>
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<td>Georgia</td>
<td>60-70</td>
<td>Female</td>
<td>35</td>
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<tr>
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<tr>
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<td>15</td>
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<tr>
<td>Julie</td>
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<td>Female</td>
<td>25</td>
<td>Spiritual Healer, Clairvoyance, Clairaudience, Clairsentience</td>
</tr>
<tr>
<td>Kelly</td>
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<td>Female</td>
<td>20</td>
<td>Energy Healer (Pranic Healing), Clairvoyance, Clairsentience</td>
</tr>
<tr>
<td>Marion</td>
<td>30-40</td>
<td>Female</td>
<td>15</td>
<td>Energy Healer (Healing Touch), Clairvoyance, Clairsentience, Mediumship</td>
</tr>
<tr>
<td>Meghan</td>
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<td>Female</td>
<td>20</td>
<td>Energy Healer, Clairvoyance, Clairaudience, Clairsentience</td>
</tr>
<tr>
<td>Miriam</td>
<td>40-50</td>
<td>Female</td>
<td>20</td>
<td>Spiritual Healer, Clairvoyance, Clairsentience</td>
</tr>
<tr>
<td>Nick</td>
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<td>25</td>
<td>Spiritual Healer, Clairvoyance, Clairsentience, Mediumship</td>
</tr>
<tr>
<td>Phillip</td>
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<td>Male</td>
<td>35</td>
<td>Spiritual Healer, Clairvoyance, Clairsentience, Clairsentience</td>
</tr>
<tr>
<td>Rebecca</td>
<td>50-60</td>
<td>Female</td>
<td>25</td>
<td>Energy Healer (Healing Touch), Clairvoyance, Clairaudience</td>
</tr>
<tr>
<td>Rosa</td>
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<td>Female</td>
<td>35</td>
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</tr>
</tbody>
</table>

Table 6.2 Characteristics of Healers healing traditions, and dominant extrasensory perception/s

Conducting Interviews and Receiving Emailed Accounts of the Phenomena (continued)

The ‘traveller’ metaphor resonates with this methodology, as “the interviewer-traveller explores many domains of the country ... The traveller may also deliberately seek specific sites or topics by following a method with the original Greek meaning of “a route or a goal” ... The interviewer ... asks questions that lead the subjects to tell their
own stories of their lived world, and converses with them in the original Latin meaning of *conversations* as “wandering together with” (p.4).

In the spirit of “the traveller,” my interviews were semi-structured and were approximately an hour’s duration. The interview approach was open ended, and conversational in approach, to allow the healers to tell their stories, in a manner that felt most authentic for them. When appropriate, occasional questions were asked to facilitate the continuity of the interview, or as a means of clarification. For example, I began each interview with, “You have identified as an energy healer, who works with dying people. I’m interested in your experience of the changes that occur in the dying person. Can you elaborate on that please?” I used statements such as “Please tell me more about”... and “You were saying before that”... to maintain the continuity and flow of the Interview.

Phenomenological interviews, according to Polio, Henley & Thompson (1997), are “dialogic methods to encourage the self and the other (the I and the you), to clarify for each other the meaning of their dialogue as it unfolds for them. Dialogue not only allows the speaker to describe experience; it also requires him or her to clarify its meaning to an involved other and, perhaps, even to realise it for the first time during the conversation itself” (p.29). The process of inquiry is intended to be “dialogic and playful” with the intention of obtaining what Gadamer described as “a fusion of horizons,” whereby an expansion of understanding arises from the synthesis of the participants and the researcher’s understanding of the phenomena under discussion (Gadamer, 1974; Sharkey, 2001).

Ultimately, the pace and flow of the conversation was controlled by the participant, and my silence and attention when listening honoured my intention to explicate their stories and illuminate the perimortal experience. The participants’ personal accounts during the interview were audiotaped and then transcribed after the interview. Occasionally, I made a note during an interview, if I wished to clarify something that the participant had said. This clarification was then sought, when the opportunity presented itself. However, to avoid distraction, copious note taking was not undertaken during these interviews (Koch, 1996; Kvale, 1996; May, 1994; Sorrell & Redmond, 1995; Ray, 1994; Wimpenny, 2000).

My initial intention was to conduct interviews with each participant on several separate occasions, anticipating that this might be the amount of time needed, to collect sufficient data to fulfil my research intentions. However, I found that some of the participants only needed one to two interviews, to share their experiences, followed by
additional discussions via phone or email, to the point where they felt they had nothing else to add. Once completed, the transcriptions were emailed to participants for validation and for further reflective dialogue, regarding the extent to which they had explicated their perceptions of the phenomenon.

After each interview, I wrote the impressions of my experience in my reflective journal. This provided a means of clarifying my experience, by formulating questions to pose to a participant, my supervisor, or myself. It also assisted in reconceptualising my understanding of the phenomenon and in clarifying my thoughts, regarding the phenomenological process. This means of reflection was also used as a therapeutic tool; as it provided me with a private means of self revelation, and it assisted me to reconnect with my perceptions of participants and their lived space, thus evoking memories of the interviews that brought a further dimension to the transcriptions. As a means of reflection, it also helped integrate my intellectual and emotional responses to the contents of the interviews (Koch, 1996, 1998a, 1998b; Latham, 2001; Sharkey, 2001; Taylor, 2006a, 2006b).

**Consulting Pertinent Literature**

“It follows that poems are not so important as the poetic process, the transforming power that spiritualizes the world, turning visibility into invisibility, the world into ourselves”

*(Donoghue as cited in Neubauer, 2010, p. xii)*

The other empirical aspects of van Manen’s second research theme were fulfilled by reading and collecting accounts of the many faceted aspects of dying and death in various genres of literature. These included novels, short stories and poetry. van Manen (1997a) states that by using fictional accounts, “we are given the chance of living through an experience that provides us with the opportunity of gaining insight into certain aspects of the human condition” (p.70). There were many examples of fictional literature I read and integrated into my thinking (e.g., Allende, 1985; Banville, 2005, 2009; Dillard, 1974, 1982; Eng, 2007; Enright, 2007; Faulkner, 2004; Rilke, 1990; Tolstoy, 1981). Memoir was also used as a resource to explicate the phenomena of dying and death (Allende, 1995; Barrington, 2000; Cracknell, 2001; de Beauvoir 1969; Delahunty, 2010; Didion, 2005; Key, 1991; Lewis, 1961; Wilbur, 2000). Poetry was an essential genre in my exploration of literature. Anthologies of poetry or books about poetry provided me with a rich resource to reflect on the metaphorical aspects of this study (e.g., Astley, 2007; Barks, 2010; Frabotta, 2002; Fry, 2007; Bloom, 2004; Gallagher, 2007; Gray, 2001; Hughes, 1968; Hirshfield, 1994, 1997a; 1997b 2002, 2006; Howe,1988a, 1998b, 2008; Housden, 2001, 2003a, 2003b, 2004, 2007, 2009,
Imaginal Experiences

According to van Manen (2011e) “the products of art are in a sense, lived experience transformed into transcendental configurations” (Imaginal experiences section, Para 1). The exploration of artistic representations of the various stages of transition, illuminated and enriched my understanding of perimortality. Reflecting on the icons of death and other thanatological art illustrating Stanislav Grof’s (1980, 1994, 2006) seminal works on consciousness and death were particularly revelatory, as were artistic representations of subtle energy phenomena (Brennan 1993, 1988; Grey 1990, Maheshwarananda 2004 Leadbeater, 1927). Similarly, traditional Western depictions of dying and death found in the sociological and historical literature (Aries, 1974, 2008; Illich 1975; DeSpelder & Strickland 2002; Gittings, 2009, Walton, 2003; Wyatt, 2007) provided valuable perspectives.

Compiling Personal Observations and Reflections of the Phenomena

My developing interest and experience of the changes in the energy field during the period from nearing death to the post mortem state commenced with my observation of either my dying or dead pets, or dying animals that I retrieved after finding them on the road. For instance, even after an animal was biologically dead, I could perceive an energy field surrounding them, however weakly, and I would allow their bodies to rest quietly until this subtle energy had dissipated and I could no longer feel it. This transition took a variable amount of time from some hours to a few days. Not only did these experiences inform my understanding and interest, but as previously stated, during the course of this study, I was privileged to assist at the bedside of close relatives, during the final stages of their life, thus witnessing some of the phenomena described by my more experienced and skilful participants.

3. Reflecting on the essential themes which characterise the phenomenon

“The way to the whole is into and through the parts”
Henri Bortoft (1996, p.12)

Thematic Analysis

Following the completion of the empirical aspects of van Manen’s research activities, the third research activity was undertaken, which concerns the thematic analysis of the
collected data. My goal, when undertaking the analysis, was to fulfil the task of Kvale’s (1996) ‘traveller’, where “the potentialities of meanings in the original stories are differentiated and unfolded through the traveller’s interpretations; the tales are remoulded into new narratives, which are convincing in their aesthetic form and are validated through their impact upon the listeners” (p.4). van Manen describes thematic analysis as “the process of recovering the theme or themes that are embodied and dramatized in the evolving meanings and imagery of the work” (1997a, p.78). As a large volume of information had been collected and transcribed, my challenge was to organise the text into “meaning units” or themes.

Although I am mindful that the transitional process of dying is a seamless one, I needed to find a way to organise the large volume of sub-themes into a manageable form, before progressing with my analysis. I decided to use a temporal construct, to distinguish aspects of the perimortal process and divided the data into three distinct sections; namely, stories reflecting perceptions before death, at death and after death. I undertook to uncover the thematic phrases within the text that would best reflect or explicate these aspects of the transition process.

In hermeneutical phenomenology, the interpretation of meaning is characterised by a *hermeneutic circle*, a Gadamerian (1975/2004) metaphor borrowed from Heidegger (1962) and adopted by van Manen (1997a), to describe the process of dialectically moving between the whole text and its separate parts. This circle of influence between the parts and the whole text continues until a unitary meaning occurs, which is free from inner contradictions (Koch, 1996; Kvale, 1996). I used this process to guide my analysis, realizing that my original reading of the text as a whole gave me only an intuitive, partial understanding of the phenomenon. Then, when considering a meaningful aspect of the text by locating words that identified a particular theme of the perimortal process, I could gain much more clarity, when contextualizing it with the whole text. By alternating this between the parts and the whole of the text, I gradually gained more clarity and depth of the understanding of the possible meaning embedded in the text.

Initially, analysis involved “macro-thematic reflection” (van Manen 1997a, 2011e), where each interview was re-listened to many times, as a means of reconnecting with the participant. This activity also facilitated a re-engagement with the nuances of the interview, such as tone of voice, hesitation, pauses in the flow of conversation or laughter, which revealed emotional shifts that occurred during the telling of these stories. This process was undertaken in conjunction with reading and re-reading the

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transcripts, to enhance my familiarity with the participants’ storied accounts of their experiences and to become immersed in the richness of the data.

After completing these tasks, I undertook “micro-thematic reflection,” which involves re-reading the text, line-by-line, with the intention of explicating the underlying meaning of a particular sentence or phrase within the text, and its relationship to the phenomenon being illuminated (van Manen 1997a, 2011e). I looked for ‘stand-out’ phrases that revealed the essence of the phenomenon that the participant was describing. These phrases assisted in identifying and naming subthemes in each transcript. These subthemes were then colour coded, so that they could be easily identified and clustered into the essential themes.

van Manen (1997a, p.364.) considers that thematic analysis incorporates the “substantive, conceptual, analytic, or thematic understandings that the text may offer the reader” or “What the text says.” Of equal importance and in contrast, the mantic aspects of the text require consideration; that is “how the text speaks, how the text divines and inspirits our understanding.” Consistent with the hermeneutic approach, literature and poetry were used as a conduit for clarity. It was also used to illuminate the meaning within the text. Poetics were juxtaposed with analysed data, as part of a linguistic transformation. Hirschfield (1997) reflects my intention, when she describes the literary effect of a rich narrative and its outcome. She states that “story, at its best becomes a canvas to which the reader as well as the writer must bring the full range of memory, intellect, and imaginative response. The best stories are almost myth like in their ability to support alternative readings, different conclusions” (p.2).

4. Describing the phenomenon through the art of writing and re-writing

In this research activity, van Manen (1984, 1997a) defines five of many ways of phenomenological writing, which the researcher can use to structure phenomenological description:

- Thematically, where writing is organised around themes extracted from the data.
- Analytically, where one searches and reflects on idiomatic and etymological sources, examines experiential descriptions, literary and phenomenological sources for an ever deepening illumination of the essential themes.
- Exemplicatively where one initially evokes the essential nature of the phenomenon and then expands this initial description by varying the examples, with each case enlightening an essential aspect of the phenomenon.
• Existentielly, by inter-weaving the four existential themes described above, with phenomenological descriptions.
• Exegetically, where one organises one’s writing by engages in dialogical or exegetical manner with thinking of other phenomenologists.

These organisational procedures can be used singularly or in combination, depending on personal choice. van Manen (1984, 1990) recommends that this choice is influenced by the essential structure of the phenomenon being studied. Although the existential themes informed the writing of my analysis, in that I used ‘temporality’ to initially identify and organise the participants’ subthemes and then the essential unifying themes of perimortality, I chose to write my phenomenological descriptions in a thematic, analytic and exemplicative manner. I elected to combine these writing processes, as they best suited the structure of the phenomenon that I was studying.

As I aimed to identify the essentials elements, which characterized the phenomenon of perimortality, I initially used an analytical approach, to examine and write experiential descriptions found in the participant’s anecdotes. After identifying the essential unifying themes of the perimortal process, as they were perceived by the participants, my writing took on a thematic approach, in that it was organised around and described, and interpreted three essential themes. To add further clarity to the initial description of each theme, I then proceeded with an exemplicative writing style. This was achieved by generating a variety of examples, identified in the themes which best illuminated the phenomena. Furthermore, I juxtaposed many of these examples with poetry, to explicate the essence of themes, by highlighting the implicit as well as the explicit meaning of the chosen examples.

van Manen (1997a) claims that “to be able to do justice to the fullness and ambiguity of the experience of the lifeworld, writing may turn into a complex process of rewriting [rethinking, re-flexing, re-cognising]” (p.131) and the poet Yeats captures the importance of this form of revision in the following quatrain:

  The friends that have it I do wrong
  when ever I remake a song,
  Should know what issue is at stake:
  it is myself that I remake
WB Yeats, (Hirshfield, 1997, p.16)

Re-writing is undertaken in its many forms, to fulfil the phenomenological requirements of “constructing successive or multiple layers of meaning, thus laying bare certain truths while retaining an essential sense of ambiguity” (van Manen 1997a, p.131). Re-
writing complimented and accompanied each writing assignment. This included editing and revising all aspects of the thesis, which comprised the analytic descriptions, artistic inclusions and personal writing, as well as the theoretical arguments within the text. It was also undertaken when presenting the participants’ stories in Chapter Seven. In this instance, I blended the participants’ voices with my own, to provide an abbreviated account of their anecdotes. This activity of re-writing, in all of its manifestations, was undertaken, to add strength, depth and richness and to construct a coherent and aesthetically pleasing and meaningful text.

5. Maintaining a strong and orientated relation to the phenomenon

When describing this fifth research activity, van Manen (1997a) states that the methodological prerequisites that make a research text powerful and convincing, (and in his opinion provide evaluative criteria for human science research) are that the text is “oriented, strong, rich and deep” (p.151). To be oriented to research and writing, the researcher needs to bring “an awareness of the relation between content and form, speaking and acting, text and textuality” (p.151). To this purpose, I used my reflective journal to maintain my orientation and to distil my insights regarding the phenomenon of perimortality. Throughout this research process I read and occasionally wrote poetry as one means of relaxing and remaining oriented to this phenomenon. Poet, Jane Hirshfield (1997) describes the potency of this activity when she states that,

> thinking within the fields of image, the mind crosses also into the knowledge the unconscious holds – into the shape-shifting wisdom of dream. Poetic concentration allows us to bring the dream - mind’s compression, displacement, wit, depth, and surprise into our waking minds (p.18).

These processes gave me a doorway to enter into the deeper nature of the various phenomena upon which I was reflecting; it gave me access to language that could provide richer descriptions that would otherwise have been more elusive. Furthermore, the multidimensional nature of my orientation to these phenomena strengthened my relation to the formation of content, form, text and textuality of the study (van Manen, 1997a).

Exegetical Reflection

Exegetical reflection refers to consulting related literature, not so much as a systemic review of this particular literature but by just happening upon a book, news article or radio interview in a more serendipitous way, which resonates or provides new insight
into an aspect of one’s study interest. This manner of remaining open has been a very fruitful experience for me as a further means of maintaining a strong and orientated relation to my research question. For example, at my sister's funeral, I had a reunion, after many decades of separation, with one of my oldest, dearest friends. During our conversation, Sarah told me that some years previously, her little son Freddie, aged 10 weeks, had died from SIDS and she subsequently gave me a copy of her memoir of this experience (Key, 1991). I found this very poignant recollection of the sudden death of her beloved baby, with her early, uneasy portentions of his death and her exquisitely remembered account of the subtleties of grief during the months that followed, intensified my personal and professional understanding of death and grief.

Another chance experience occurred following a phone call from a friend who remarked that an article in a weekend national newspaper “sounds similar to your study.” I immediately tracked down this newspaper item, which alerted me to research and publications that had been undertaken on end-of-life experiences, by a group of Australian palliative care doctors and nurses (Legge, 2011). It included a description by a former palliative care nurse, Deborah O’Connor, of her first “glimpse into death’s secrets.” She recalled in this interview that “there was a young man who had died in the room with his family and I saw an aura coming off him. It was like a mist. I didn’t tell anyone for years. I’ve never seen it again” (p.18). I have also found other pertinent and informative literature and poetry, in similar unexpected ways.

Guided Existential Reflection

"Although the practice of thinking the phenomenon concretely by exact sensorial imagination is irksome to the intellectual mind, which is always impatient to rush ahead, its value for developing perception of the phenomenon cannot be overestimated."
Henry Bortoft (Buhner, 2004, p.173)

Another reflective method that I employed to remain focused and gain clarity regarding the explication of the perimortal process was guided existential reflection. van Manen (1997a), states that “all human science research efforts are really explorations into the structure of the human life world” (p.100). He identifies four existential themes; namely, spatiality, temporality, corporeality and relationality. These are useful to “speak of the multiple and different worlds that belong to different human existences and realities” (p.100). This process is sometimes used as a means of structuring the thematic analysis of a study. However, I found that it assisted me more to reflect on the participants’ stories prior to analysis, as it allowed me to contextualise these events in a particular way, which enriched my understanding of the perimortal process.
Existential Themes

Spatiality is lived space or felt space, which according to van Manen (1997a) “is the existential theme that refers us to the world or landscape in which human beings move and find themselves at home” (p.103). In the instance of the terminally ill person, in the final stages of life, his or her lived space is most likely to be the bedroom, if they are being nursed at home. It may also be a hospital or hospice room, which can be either a small private room or a shared depersonalised space in a hospital ward. As the person nears death, the lived space transmogrifies into the bed, colloquially termed the ‘sick bed’.

van Manen (1997a) states that “there are cultural and social conventions that give the space a certain qualitative dimension” (p.103). This is particularly highlighted in the lived experiences of terminally ill people, who frequently find themselves in a functional, but aesthetically barren space. In order to transcend the social conventions and to feel ‘at home’ within these alien spaces, an ill person often surrounds him or herself with significant objects, which ‘personalise’ their space, be it flowers, photos, sacred objects, icons or other articles, to provide a sense of familiarity and comfort.

For instance, following the death of my mother in hospital, I made a journal entry:

I was packing Mum’s personal effects and made the poignant discovery of her newly acquired bottle of Chanel No.5. My father had bought this particular perfume for her, throughout her married life, and this bottle had been recently purchased by her children, as part of her 88th birthday gift; intended as an aromatic memento of shared lives. I am not sure why my mother directed it to be packed as part of her hospital apparel, but I like to imagine that she bought it not only as a functional object, but as a visual and olfactory icon, which personalised her new space, anchored her to a remembered self, and provided her with a symbol of an enduring temporal experience, which promised a future.

Similarly, many participants in the study articulated the nature of the lived space of the people for whom they were caring, as a means of illuminating the witnessed experience of the person in their care. One participant described how a patient, who loved birds, relocated a small aviary, full of his beloved pets, to his bedroom. The birds gave him great pleasure, as they possibility expanded his experience of himself and his lived space, reminding him of happier, more autonomous times. In the telling of this story, Ellen emphasised the fact that, her patient’s avian companions, who were habitually animated and chattering and connected to this man in their mutually shared space, fell deeply silent as he entered the final minutes of his biological life.
Lived space can also incorporate our sense of personal space; that ineffable area that surrounds us, (which healers recognise as the human energy field) and which becomes even more significant during illness. Rebecca describes her pathic understanding of her intrusion into her patient's energetic space in the following manner:

_When I was working on this part of his body I'd actually have my hands out, about two feet away from his body and when he'd relax I'd start to move them in again and that's when I got a really strong sense of “shoo” (makes a defensive hand signal) I got a really strong sense of tightening and defending._

The events or actions within lived space can also be highly symbolic and eclipse verbal explanations of an event or situation. In traumatic events, such as the sudden death of a child or loved one, the poignancy of the experience often precludes verbal discussion, so that the drama is enacted spatially, either increasing or diminishing the space between the people involved. The use of space as a signifier is described by Kelly, who tells of a frantic race from an isolated bush settlement with a neighbour’s critically ill baby, to meet a waiting ambulance:

_We were going towards the town and we were half way down the hill. We met the ambulance and we were still doing mouth-to-mouth. We gave the baby over to the ambulance driver and as soon as the mother let go of the baby, there was what I could only describe as white smoke left the baby’s head and I knew that the baby had died. And the ambulance driver put the baby on the console. I guess it was like an area near where he was sitting, it was like a little sitting place. He just put the baby there and he didn’t continue to do mouth-to-mouth, he didn’t say the baby was dead”...

Corporeality refers to the phenomenological experience of always being embodied in the world (van Manen, 1997a). In his paper, _Modalities of body experience in illness and health_, van Manen (1998) discusses five experiential dimensions of body experience. He states that these experiential dimensions of body experience are by no means exhaustive, giving an example of the experience of the dead body of a loved one as one of the many other possibilities of experiencing corporeality. His five experiential dimensions are: the body experienced as an aspect of the world; the body experienced as observed; the body experienced as reflective; the body experienced in the modality of appreciation; and the body experienced as call. He divides these dimensions into two modalities: “the experience of one’s own body or the experience of the other’s body” (p.3). Some of these dimensions have been helpful as reflective tools, when undertaking the task of analysis.
This study attends to the healer’s experience of “the other’s body” in all its dimensions (including and most significantly, the ‘higher bodies’, or non physical aspects the person’s body), as they describe the changes that occurred in the physical and energetic bodies of the terminally ill person, during the various stages of his or her transition. When discussing the dimension of the experience of the other’s body as an aspect of the world, van Manen (1998) states that “we participate so much with the other person’s embodied existence that ... it is not surprising perhaps that we may even catch another person’s mood or feeling of tiredness” (p.11).

Healers’ clairsentience provides them with an extraordinary capacity to pathically “catch another’s mood,” in that they often deeply understand the specific nature of the patient’s anguish. Judith, one of the participants, was caring for a client, who was experiencing extreme anxiety as he was nearing death. She gave this account:

So, what I ascertained not so much from words that I could say, because he couldn’t speak a lot at that point, but from being able to go with him and see the images that he was seeing, (which is one of the gifts of many of us in the healing work), was that he would kind of float out of his body and see some very fearsome, frightening images, and ‘wham’ back into his body, because it was too terrifying...” After explaining to her client that the images were illusory, when guiding and supporting him through his transition, Judith said that “he died right then in that guided imagery ... he had made that journey and his face just took on an image of great peacefulness.

Some healers felt or saw which aspect of the ill person’s body was distressing them, as the pain was mimicked in their own body, or reflected in their perception of the dying person’s energy field. In his elaboration of the experiential modality of “the body of self experienced as encumbered” van Manen (1998) describes the person’s experience of the sudden manifestation of disease, in which a “conspicuous disturbance always possesses the character of an encumbrance, something that confronts us and our unity of existence in the world is broken” (p.11). He states that in observing the experience of encumbrance in the other’s body, “some experienced medical practitioners have developed an uncanny ability of sensing a patient’s state of health” (p.13). The Healers’ capacity to perceive the onset or progression of illness, of those in their care is often exquisitely honed. This capacity is depicted in Rosa’s description of perceiving the return of metastatic cancer in a young boy, who had been recently referred to her for assistance, following a sudden onset of leg pain. Having perceived that the boy’s cancer had returned, Rosa requested that his parents return to their doctor with a request for a MRI:
When he went to the doctor, the doctor simply said, “Just give him a Panadol, he’s probably pulled a muscle surfing.” And they wouldn’t do the MRI and then they brought him back to me and I was a little bit triggered. I went into a little bit of fear, because I knew that the cancer had metastasised in other areas. I could feel it in his body. It was just a knowing and I said to the family, No, that’s not good enough. I want you to take him back and have a total body scan, regardless of what the doctor says. Please insist! So they did. And when they came back to me, they’d found it (cancer) in his pelvis, in his lung, in his brain, in his cervical spine and in his knee.

Although it is more usual to write of “one’s experience of the other’s body” as it is living, this study was concerned with the perimortal process, which includes the post mortem state. Participants were requested to reveal their perceptions of the person’s body (including the changes in the higher energetic “bodies”), following biological death. In the following passage, Meghan describes her perceptions of her father’s death:

His breathing stopped and then there was a pause, but it was only a matter of minutes, but I can’t tell you how long that was. The next thing I remember, totally clearly, is this enormous white spirit lifting out of him; upwards … it just lifted upwards out of his body. I was so shocked; I didn’t see which channel it lifted through. I was so shocked to see this enormous white body lifting out of this man. My jaw was on the floor … and I said, “How on earth could that get in there?” … my sense of it was that it was larger than the physical body … not by much, maybe by a quarter … but what stunned me so dramatically was the whiteness and the purity of the spirit in a man, who had been profoundly troubled all his life; profoundly troubled, heavily addicted, psychologically disordered and quite emotionally violent.

The fourth life world existential is temporality, or lived time. This is subjective, rather than objective time and it is the temporal dimensions of past, present and future, which constitute a person’s “temporal landscape” (van Manen 1997a, p.104). When discussing temporality, Merleau-Ponty (1962) states that time is not a real process, but “arises out of my relation to things. Within things themselves, the future and the past are in a kind of an eternal state of pre-existence and survival” (p.480). When reflecting on this existential, in relationship to the transcripts, I became aware of the healers’ remembrances of the physical, psycho-spiritual and energetic changes that occurred within and around the terminally ill people in their care as they experienced their transitions.
van Manen (1997a) states that “the past changes under the pressures and influences of the present” (p.104). He cites Linschoten (1953), when he states “we live towards a future which we already see taking shape or the shape of which we suspect as a yet secret mystery of experiences that lie in store for us.” The knowledge and experience of finitude in the terminally ill, often alters self concepts. This revision brings with it a re-interpretation of the past and a fresh interpretation of the present and future, resulting in a transformative change in personal relationships to the self and others (Levine, 1986, 1987; Kunz & Krieger; 2004; Dowling Singh, 1999). The healers’ stories acknowledged the dying person’s recognition of his or her shifting temporal horizon as their hopes and dreams for any future became radically altered, the decisions that they might make in relationship to their self care and those of their loved ones and the effect that these decisions made on their transition. In the following passage, Judith describes the transformative moment between a couple who had an emotionally impoverished, distant relationship, and whose prior belief system had not embraced the concept of life after death:

So his wife is just sitting there and pretty upset and he was in a coma. I was just sitting beside him and all of a sudden he wakes up and he opens his eyes and I’d never seen him look delighted and kind of glowing and smiling. But he still could speak and get something out so I said, “So have you been on the other side?” And he nods his head vigorously. So I just asked him as series of questions, trying to ask what I was seeing so his wife could get it. I said, “So, was it really wonderful?” And he said, “Yes.” So in this whole odd thing, the one thing that he wanted to do was communicate to his wife that he was in a wonderful place, he wasn’t in cold storage and that he loved her. And I don’t know how long it had been since he’d ever said anything like that. And so as soon as we finished this and it was a sense that everything that he had wanted to communicate had been communicated his head dropped back on the pillow and that was his last breath.

Relationality, according to van Manen (1997a) “is the lived relation we maintain with others within our mutually shared interpersonal space” (p.104). In this study, participants described their own experiences, while they were interpreting the experiences of the dying people in their care. Their descriptions reflected the often intense experiences that they both shared in their lived space. They described the changing relationships between their client and his or her loved ones, which resulted from their healing interventions and the significance of loving, physical contact throughout the person’s transition. The study also explored some of the healers’ relationships with the disembodied spirits of people who are in their care or
relationships with spirits who had come to accompany and assist the dying person during his or her transition. In the excerpt that follows, Nick attests to the importance of a loving connection with those who are dying, no matter how unresponsive they seem to be. He describes the energetic response of comatose people, who respond to this tenderness:

*The main thing is to be there, hold them, touch them, stroke their feet, their hands. They respond so beautifully; you don't think they're doing anything. When you see the colour change, the minute you pick their hand up, you know, you know they feel it and you know once they take that last breath to the next life I feel that energy, still in that hand; still there. It's very beautiful; it really is an amazing journey to have and to see and everyone is different.*

Many healers have an expanded awareness of the lived experience of relationality, which transcends ordinary personal boundaries. Georgia illustrates this in her description of the sudden appearance of ex-husband’s spirit during the final weeks of his terminal illness:

*He started to appear, his spirit would travel from Brisbane to (another place) down in northern NSW to me. And at night I'd wake up and his spirit would be standing beside the bed. It was just a light form, but telepathically it kept coming to me and saying, “Please come and help me, I'm afraid.” He came because he’d been an atheist and I had been spiritual, and he knew I could help. So in the end I said to Luke, my current husband, “Harry’s coming to me every night and waking me up in the night” ... So I went there ... it was weird, because this emaciated skeleton with skin all over it was there and I had been married to him for 19 years and I didn't recognise who it was ... So I sat on the bed and held him and kissed him on the forehead and forgave him and started to explain the death process to him ... he was in that house for about a week or so and then he asked to be put into hospital and one night I woke up at two o'clock in the morning and I heard him say very loudly in my consciousness, 'I'm at peace at last!' and I woke up my present husband and said, “Harry has just passed at about two o'clock.” And about five minutes later his mother rang me from the hospital and she said the last one that she was calling for was me. And he was at peace.*

van Manen (1997a) asserts, and it is reflected in the above illustrations, that these existentials are interwoven. He states that existentials “can be differentiated but not separated. They all form an intricate unity which we call the life world ... these four existentials allow us to perceive an immediate immense richness of meaning” (p.105).
Guided existential reflection helped me to grasp the depth and breadth of the participants accounts of this phenomenon.

6. Balancing the research context by considering the parts and the whole

When undertaking this research activity I interpreted it as a multifaceted process. Firstly, when interpreting the themes of the perimortal process, I considered the phenomena in three stages, the healers’ exemplification of the process of dying, the phenomena that they perceived at death and their descriptions of phenomena following death. Although the themes which emerged during these aspects of the perimortal process were multiple and seemingly discrete in nature, when considered as a whole these phenomena constituted one unified phenomenon of the transition of consciousness during biological death. I constantly considered the ‘parts’ and the ‘whole’ of the phenomenon in order to contextualise it and make sense of the participants’ stories, so that I could do justice to their accounts.

Secondly, when undertaking the narrative task of organising and arranging the structure of the thesis, I took note of van Manen’s (1997b) claim that “a powerful phenomenological text thrives on a certain irrevocable tension between what is unique and what is shared, between particular and transcendent meaning, and between reflective and the prereflective spheres of the life world” (p.346). Consequently, I incorporated and synthesised relevant poetics, as well as my own research experience and insights, with the thematic accounts in the text. This was done with the aim of amplifying thematic meaning and constructing a unified explication of the perimortal process. I employed the above strategies of poetizing and integrating research insights and experience, when considering each chapter of the thesis. I did this with the intention of blending metaphor with the conceptual and analytic aspects of each chapter, so that the final construction of the thesis had strength, richness and depth and presented as a unified whole.

Trustworthiness

Researchers in both quantitative and qualitative domains apply various criteria to demonstrate the rigour of their research. The term ‘rigour’, also known as trustworthiness in qualitative research, refers to the strategies that researchers employ to demonstrate their integrity and competence, in providing a transparent project that can be evaluated by its readers, for methodological accuracy and worthiness. The
criteria for rigour are directly related to the underlying epistemological assumptions of
the researcher (Taylor, 2006a).

Quantitative researchers use terms, such as reliability and validity, to describe the
methods and processes used to determine the robustness of a particular study (Tobin & Begley 2004; Taylor, 2006a). Within a positivist research tradition, reliability refers to
the extent to which the results of a study can be replicated. Validity refers to whether a
study has successfully measured what it has intended to measure (internal validity) and
that the results of the study can be generalized to a larger population than those who
participated in the project. By fulfilling these criteria, quantitative researchers argue
that they have adhered to the strict protocols of scientific method, which are reflected in
the study and therefore, they can draw valid conclusions from their research (Polit &
Beck 2006; Taylor, Kermode & Roberts 2006).

Qualitative researchers have long recognised that criteria used to determine rigour in
quantitative research are not appropriate when evaluating post-positivist research
Leininger, 1994; Rolfe, 2000; Sandelowski, 1986; Taylor, Kermode & Roberts, 2006,
Tuckett, 2005; Yonge & Stewin, 1988). Whereas the initial concepts of rigour in
research were applied from a positivist understanding of reliability and validity,
qualitative researchers found that the traditional means of employing these
benchmarks were incompatible with qualitative research, as they were incongruent with
ontological and epistemological assumptions that framed qualitative paradigms.
Leininger (1994), who sustains this view, states that both “quantitative and qualitative
paradigms have entirely different philosophic assumptions and purposes that lead to
different goals, different uses of research method, and the need for different criteria to
fit with each paradigm” (p.101).

In response to these concerns, qualitative researchers have sought more congruent
means of demonstrating rigour in their studies (Leininger, 1994; Whitmore, Chase &
Mandel, 2001). Over the past 25 years, although not necessarily sequentially, the
concepts of reliability and validity, according to Emden & Sandelowski (1998), have
been “championed, translated, exiled, redeemed and surpassed” (p.207). According to
Emden & Sandelowski (1998), these notions have been defended by authors, such as
LeCompte & Goetz, (1982), who sought to replicate the positivist principals and
application of internal validity and reliability. Similarly, Goodwin & Goodwin, (1984) and
Morse (1994) argued that the measurement of validity and reliability should be of equal
concern to quantitative and qualitative researchers and aspired to close the perceived
credibility gap between quantitative and qualitative evaluation. Likewise, Brink (1991)
claimed that reliability and validity issues or “the minimization of error or control over accuracy and veracity of the research process are similar in both qualitative and quantitative research” and, therefore, qualitative researchers need “to provide information to review panels about how reliability and validity are insured in [their] studies” (p.183).

These notions of reliability and validity were “translated” by Lincoln and Guba (1985), who replaced the term ‘rigour’ with ‘trustworthiness’ and re-conceptualized the notions of reliability and validity. Lincoln and Guba (1985) preferred the terms, ‘credibility’, ‘transferability’, and ‘dependability’ and ‘confirmability’, claiming that these concepts were more congruent with the intentions of qualitative research (Emden & Sandelowski, 1998).

Reliability and validity as evaluative tools were “exiled” by nursing scholars, including Yonge and Stewin (1998), who argued that it was essential to “find criteria and procedures for qualitative methods unlike, but as strong as, those used by quantitative researchers” (p.63). These authors supported Sandelowski’s (1986) alternative means of assessing qualitative studies, by implementing four criteria: ‘credibility’, ‘fittingness’, ‘auditability’ and ‘confirmability,’ as a more appropriate method of evaluation. Leininger (1994) also proffered an alternative to inadequate evaluation processes, and articulated six alternative criteria, which were extended from Lincoln and Guba’s (1985) reconceptualised terms. By banishing these terms as evaluative tools, qualitative researchers claimed that in their view, “qualitative research is distinguished by complexities and nuances far beyond those capable of being captured by traditional usages of reliability and validity” (Emden & Sandelowski, 1998, p.209).

Subsequently, these concepts were “redeemed” by other authors, such as Maxwell (1992), who offered five means of understanding and validating qualitative research, defining them as descriptive validity; interpretative validity, theoretical validity, evaluative validity and generalisability. Reliability and validity as measures of rigor or trustworthiness have been “surpassed” by a growing number of authors, including Lincoln (1995a, 1995b, 2002) and Koch (1994, 1996), who indicate that essentially these measures are primarily of historical significance, when discussing “goodness” in qualitative research (Emden & Sandelowski, 1998). The discourse on what constitutes trustworthiness in qualitative research has continued into the current decade, with authors such as Morse, Barrett, Mayan & Spiers (2002) advocating for the pertinence and maintenance of the terms reliability and validity, while others (Angen, 2000; Cohen & Crabtree, 2008; Sparkes, 2001) aim for a synthesis of interpretative approaches to validity.
The criteria for trustworthiness and techniques for its establishment, continue to be contested as they emerge. However, the abiding wisdom, continually reiterated, is that these issues should be addressed “in a spirit of an invitation to dialogue and not as a barrier to research” (Sparkes, 2001, p.549). Furthermore, Wolcott (1995) asserts that during the evolution of these legitimisation issues, the primary importance is that “qualitative researchers need to understand what the debate is about and have a position; they do not have to resolve the issue itself” (cited in Sparkes, 2001. p.549).

Taylor (2006a) adds her support to the argument that the criteria employed to determine rigour in a particular study, need to reflect the philosophical underpinnings of the methodology, which has been chosen for the study in question. Therefore, qualitative researchers seek to determine the trustworthiness of a project, based on criteria congruent with particular approaches. For instance, some feminist researchers may seek to demonstrate rigour by indicating that their project reflected ‘dependability’ and ‘adequacy’. In this instance dependability (analogous to the concept of reliability), would be reflected in the degree of ‘stability’ and ‘similarity’, which occurred across data collection methods and findings. Meaningful research outcomes, on the other hand, indicate adequacy.

Alternatively, a phenomenological project may be judged against interpretive trustworthiness criteria (Taylor, 2006a). Similarly, Whittemore, Chase & Mandle (2001) state that when choosing particular criteria for a study, “what becomes most important is to determine the validity ideals of a particular study” (p.534). Koch (1996) elaborates on this position by recommending “that each inquiry determine its own criteria for rigour (trustworthiness)”. Furthermore, she argues “for expansion of the concept of rigour in qualitative research” (p.174). Koch (1996) also asserts that it is the responsibility of the writer, to reveal how a study attempts to attend to the issue of rigour. However, she claims that it is the responsibility of the reader, to decide whether the study is believable. Bearing these arguments in mind, the four criteria that I have applied to this research project to demonstrate trustworthiness, are credibility, fittingness, audibility and confirmability (Sandelowski 1986, Taylor et al, 2006; Yonge and Stewin, 1988).

Credibility

Credibility signifies “the extent to which participants and readers of the research recognise the lived experience, described in the research as similar to their own” (Taylor, 2006a, p.402). The participants in this research recognised their own experiences of perimortality, by sharing their accounts of being with people as they passed through the perimortal phases. In some cases, sharing their accounts in
interview conversations, were the first opportunities participants had to give voice to their experiences, as credible accounts of perimortality. Participants demonstrated their resonance with the phenomenon, by recognising they had accumulated first hand experiences of perimortality, accepting the invitation to participate in the project, validating the transcripts as accurate records of the interviews, and attesting that the sub-themes and themes drawn from their descriptive accounts were accurate interpretations of their experiences. In determining the credibility of this project, I have taken readers to mean anyone who is aware of the research, to whom I have spoken, or who has read of, or knows of the research (Taylor, 2006a). During the course of this project, I have discussed the nature of this study in various forums, and have described specific details of the participants’ perceptions of the phenomena associated with transition. At all times, during these events, I have de-identified participants and their contexts, to maintain their anonymity. Discussions of this nature have taken place with postgraduate students and academics, at bi-annual Postgraduate Research Seminars at Southern Cross University, and with participants at healing seminars and workshops that I have attended. I have also engaged in conversations about my project, with participants and speakers at events, such as the 2004 International Conference on Holistic Health Care Practices in Brisbane, the 2006 Annual conference of the International Institute for the Study of Subtle Energies and Energy Medicine (ISSEEM) in Boulder, USA and with healers and pilgrims at the Joao de Deus Tour in New Zealand, 2007.

The following description, which has been taken from my reflective journal, is an example of the everyday experience of extrasensory phenomena that an acquaintance described to me, during a seemingly innocuous conversation about the events that followed the death of her mother. In the discussion that followed, I described aspects of this PhD study and she expressed a sense of relief and resonance with these descriptions.

February 13th. 2009

This morning, I was debriefing over a coffee with Marge, a work colleague, after one of our elderly patients suddenly became ill while exercising, and was admitted to hospital. Marge was clearly upset by this event, and during our discussion, she reflected on the last intense days of her own mother’s illness and death.

After Marge finished her story, I casually asked her whether she had any sense of her mother’s presence since her death. She then told me that some months after her mother died, she was woken by a muffled noise in her mother’s empty
bedroom. As Marge walked down the hall towards the bedroom, she smelt a strong scent of her mother’s talcum powder and realized that her spirit had returned to her bedroom, and was present with her.

Many other spontaneous accounts of perimortal experiences have been shared by people in the aforementioned contexts, and these memories were triggered by the research participants’ explications of the phenomenon. Given that when discussing the project, the people involved in these discussions, including other healers, colleagues and friends, have acknowledged a sense of resonance with their own experiences, I assert that the project fulfils this particular criterion for trustworthiness, and is credible.

Fittingness

Fittingness denotes "the extent to which a project's findings fit into other contexts outside the study setting." This term also refers to the extent readers of the research find that the text resonates with their own experience (Taylor, 2006c p.402). No phenomenon can ever be completely explicated in its entirety. Given this constraint, it is still reasonable to assume that the participants in this study have had experiences that fit into contexts other than the research setting, as evidenced in the texts discussed in the literature review (Bailey 1934, 1953; Benor, 2001, 2004, 2006; Boyd, 1995; Bragdon 2002, 2004; Braud, 2003; Braude, 2003; 2007; Chopra, 2006; Davies, 2003; Dowling Singh 1999; Frohock, 2010; Grof, 1980, 2006; Harpur, 1994; Houran, 2004; Kardec 1978; Kunz & Krieger, 2004; Lambillion, 2001; Leadbeater, 1909, 1922, 1987, 2006, 2007, Levine, 1986, 1987; Maharshi 1994; Mahesh 1969; Markides, 1990; Millay 1999; Monroe, 1985, 1994; Moody 2001, 2005; Osis, 1961; Pellegrino-Estrich 2001; Yogananda, 1972,1975; Worrall & Worrall, 1985).

Phenomena described by the participants are also reflected in aspects of sacred texts, such as The Upanishads (Purohit Swami & Yeats, 1937, trans.), Patanjali’s Yoga Sutras (2003), as well as eschatological material depicted in Tibetan Bardo Thodol, The Egyptian Pert em hru, The Maya Book of the Dead and Ars Moriendi (Grof, 1994). Similar experiences have been described in memoirs (David-Neel, 1993; Delahunty, 2010; Cracknell, 2001; Key, 1992). Recently, some of the phenomena described by participants during transition were described and discussed by palliative care staff in an article published in a national newspaper, The Weekend Australian (Legge, 2011, May 21-22).

Given that descriptions of the phenomena of interest in this study are found in sacred and ancient texts throughout the millennia, as well as in contemporary literature from
various genres, including peer reviewed articles, research texts and popular literature, it is reasonable to claim that the findings of this study fit into contexts extraneous to the research setting and, therefore, have met the criterion of fittingness.

Auditability

According to Taylor (2006a), audibility refers to the “production of a decision trail, which can be scrutinised by other researchers, to determine the extent to which consistency has been achieved in the project’s methods and processes” (p.402). Since the inception of this project, the interview transcripts have been checked and re-checked by participants, and validated by members of the postgraduate research group.

Regular fortnightly supervision sessions have provided a forum where ideas, problems and research intentions were scrutinised and discussed. My reflective journal contributes to the audit trail, as it articulates my intentions, decisions and reflections throughout the course of the project, thereby affording a mechanism for generating my questions and concerns, examining my ideas, assumptions and prejudices and helping me to structure the thesis. It is reasonable to claim that I have fulfilled the requisites for producing a decision trail, which can be examined to determine whether the methods and processes of this study have an appropriate level of consistency and, therefore, have met the criterion of auditability.

Confirmability

Taylor (2006a) states that the confirmability of a study is achieved when the former criteria for the rigour of the project, namely: credibility, fittingness and audibility can be demonstrated. It is difficult to demonstrate or claim confirmability until this thesis is published and the data from this project are published in peer-reviewed journals and presented at professional seminars. However, based on the examples that have been given in the first three criteria to demonstrate credibility, fittingness and auditability, I am confident that this project is trustworthy, and that it fulfils the criterion of confirmability. Finally, in response to Koch’s (1996) delegation to the reader to decide whether this study is “believable,” I have facilitated this process by endeavouring to construct a phenomenological text “that possesses concreteness, evocativeness, intensity, tone and epiphany” (van Manen 1997a, p.368).
Chapter Six described the methods, which were undertaken to provide a structure for this study. These methods or “modes of enquiry” were guided by van Manen. As such, they reflected the epistemological assumptions of his interpretation of hermeneutic phenomenology. The chapter also addresses the procedures that were performed to fulfil the scholarly requirements of this study.

Chapter Six described van Manen’s (1984, 1997a) six research activities and outlined the empirical and reflective processes, which constitute these endeavours. It demonstrated how these processes were applied within the context of my study. In research activity one: “Turning to the phenomenon which seriously interests us and commits us to the world,” the precipitating experiences and events that led to my orientation to the phenomenon of perimortality and my formulation of the research question were outlined. In this section of the chapter, my assumptions and pre-understanding of the phenomenon were also elucidated.

Within the context of the second research activity: “Investigating experience as we live it rather than conceptualise it,” data collection activities were detailed, the process of gaining ethical clearance was given, my method of recruiting participants, the manner in which interviews were conducted and alternative means of gathering data was also discussed. I introduced the participants and outlined their age range, gender, years of experience, healing tradition and dominant extra-sensory perception/s. (As a form of de-identification a participant’s specific age is not given). I also offered the reasoning behind consulting pertinent literature and using imaginal experiences and I provided the rationale for and method of compiling personal observations and reflections of the phenomenon.

The third research activity was: “Reflecting on the essential themes which characterise the phenomenon.” This section discussed how the thematic analysis was undertaken. I gave the reasoning behind the use of a temporal construct, to divide the data into three distinct phases of perimortality, reflecting perceptions before death, at death and after death. This aspect of the chapter also described the use of ‘macro-thematic’ and ‘micro-thematic’ strategies to analyse the participant’s stories.

Research activity four was: “Describing the phenomenon through the art of writing and re-writing.” This research activity was addressed by explaining how the interpretative process was undertaken. It included a description of how the writing, editing and revision of the analysed and interpreted data in both the analysis chapters, as well as
the text within the remaining chapters of the thesis were accomplished. van Manen’s five ways of structuring phenomenological writing were also described and discussed.

“Maintaining a strong and orientated relation to the phenomenon” was van Manen’s fifth research activity. This aspect of the chapter discussed my use of reflective journaling as a means of maintaining my orientation and clarifying my insights during the research process. It also addressed my rationale and approach to using guided existential and exegetical reflective methods, to acquire new and deeper insights of the perimortal process.

In van Manen’s final research activity: “Balancing the research context by considering the parts and the whole,” the process that was employed to synthesise the ‘parts’ and the ‘whole’ of the phenomenon into a unified explication of perimortality was described. This included the method used to integrate individual chapters into the final construction of the thesis, so that it presented as a cohesive whole.

Chapter Six concluded with a discussion of the evolving concepts of what constitutes trustworthiness in qualitative research. Finally, the criteria that were chosen to ensure trustworthiness within this study were specified, defined and applied.
CHAPTER SEVEN

ANALYSIS AND INTERPRETATION: HEALERS’ PERCEPTIONS

Let the beauty we love be what we do.
There are hundreds of ways to kneel and kiss the ground.
Rumi (Barks 2010, p.366)

This chapter describes each healer’s perceptions of the perimortal process and identifies the subthemes identified in their interviews. To personalise and contextualise their accounts and to act as a prologue to their stories, each participant will be briefly introduced. The healers’ biographical details, such as the age range, years of experience and healing tradition, were described in Table 6.1.

van Manen (1997a) states that storytelling allows us to experience life situations and events “that we would not normally experience.” Stories provide an opportunity to “broaden the horizons of our normal existential landscape by creating possible worlds.” Furthermore, stories act as a bridge to evoke a “quality of vividness in detailing unique and particular aspects” of the lived experience of the participants and in particular, their perceptions of the perimortal process (p.70). The participants’ stories are considered essential elements of this study. However, as the aspects of the participants’ stories are often extensive, it was not possible to include the full details in this chapter. I have rewritten an abbreviated account of each participant’s story, which provides a prologue to the supporting subthemes. These synopses are interwoven with the participant’s own voice, which is denoted with italics. Transcripts of the full interviews and analyses with supporting participants’ quotes, appear in Appendices 2 and 3 of this thesis. The ordering of stories and their related subthemes are dictated by the pseudonyms that I gave each participant and follow an alphabetical sequence.

Some of the participants related stories of the deaths of their animal companions. To honour the interdependence of all sentient beings and to acknowledge that perimortality is not the exclusive domain of the human species, these stories have also been included in this chapter.

The act of engaging in writing these synopses fulfils van Manen’s (1997a) third and fourth research activities by “reflecting on the essential themes which characterise the phenomenon” and “describing the phenomenon through the art of writing and re-
writing.” The very nature of this act of editing, writing and re-writing also provided me with an opportunity to engage in van Manen’s fifth research activity, which is to “maintain a strong and orientated relation to the phenomenon.” By becoming and remaining deeply immersed in each story, this phenomenological process allowed me to reflect on the text and seek out “the essential themes which characterise the phenomenon” for each participant, and to subsequently identify the essential unifying themes of the perimortal process as perceived by the participants. The perimortal process themes will be explicated in Chapter Eight (p.30).

The term ‘perimortality’ is used to denote a perception of the perimortal process in general rather than a particular aspect of it, such as pre-death, death or post-death. Although there is a seamless transition through the stages of the perimortal process, I have used a temporal structure, for the sake of clarity and as a means of identifying the subthemes and subsequently the common themes, which pertain to these temporal landmarks. The perimortal transitional process has been divided into three parts: pre-death, death and post-death, to designate the relationship of a subtheme to a particular aspect of the perimortal process.

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Carolyn

Carolyn has a background in medical science and she has been endowed with well developed psychic abilities since childhood. She currently teaches her particular healing method, is the author of books about healing techniques and has a healing practice.

Story One
Synopsis: Death

Carolyn’s healing practice was in a building on the corner of a major city intersection, where there were frequent car accidents. In her first story, Carolyn related that during one of her healing sessions, she suddenly perceived that a man had been killed in a car accident, on the street below her practice. However, his spirit was confused and was unaware that he was dead. She psychically perceived his physical body lying on the ground, with his disconnected spirit standing near it. She recalled that this is the only time I’ve left a client in the middle of a session - I said, “Excuse me for a second; I just have to go and do something.” And I basically got up, and went to the window. And essentially what had happened is that someone had died in that accident and he had become lost. So I reorientated him, cleared him and helped him ‘cross-over’. After
Carolyn cleared the man’s shock and assisted him to recognise that he was dead. She then summoned the assistance of spiritual helpers. Carolyn identified these assistants to the dead man’s spirit, and telepathically communicated with him and encouraged him to seek help from them. Carolyn recalled that she initially knew that the man was dead, because she felt him “cross-over,” which she described is like (an energetic) door opening; felt by some people as a cold wind. Carolyn explained this phenomenon occurs when at death, a person ‘drops’ their energy bodies, and their physical body, causing the energy frequency to increase and the energy to dissipate, thereby changing “from a local to a non-local phenomenon.”

As a prelude to her second story, Carolyn described how, as a person dies, the Kundalini releases and all the energy is pulled into Kundalini channel and out, with the chakras retracting into the body at the same time that the etheric body is separating from the physical body. She mentioned that the etheric sometimes looks patchy during transition, because pieces of it have remained behind on the physical plane. Carolyn believes that it is the spiritual healer’s role to release these aspects of the etheric, to prevent the process of ‘soul-loss’.

Focusing on the actual stories and her wide experience, the subthemes which emerged from these accounts are as follow:

Subthemes: Death

Assisting person to realize he was dead, clearing shock and seeking help from discarnate being.

Feeling the door open like a cold wind as the person crossed over

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Story Two

Synopsis: Death

In her second story, Carolyn focused on her wide experience as a healer and said that the body has its own energy, or cellular consciousness and following death, this energy (which she described as being like group consciousness), is redistributed among the family or genetic group. Sometimes, particularly in traumatic death such as suicide, the energy gets stuck. She explained that just in the same way as when a being dies, if they don’t have a tidy death, they’ll experience ‘soul loss’. She reflected that as a person is dying ... it’s like everything literally gets pulled into the Kundalini channel and out, so you can actually almost see the chakras retracting into the body at the same time, that the etheric is separating from the body and sometimes the etheric can almost look patchy, because they’re the bits where it’s stuck, so you just release those bits.
Subtheme: Death
Seeing patches of etheric energy left during death as process of soul loss

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Synopsis: Post-death

Carolyn explained that because of this group consciousness among the family, the bodies of family members will often go into shock, following a traumatic death of a family member. She described how she recognised that this “physical shock” had occurred to a friend Jen, whose brother Mick had recently suicided. During a distressed phone call from Jen, Carolyn sensed what may have occurred to Mick at his death and said, I had a look and I said, Sure enough! Mick’s energy was stuck in his body and Carolyn further elucidated because of the way it happened, the body’s energy didn’t have a chance to transition out. Carolyn then tuned into where his body was, tuned into that energy, helped it to move onto whomever in the family.

Subthemes: Post-death
Perceiving the body having cellular consciousness redistributed to family group after death
Perceiving the family experienced “physical shock” following traumatic death of family member
Assisting with redistribution of bodily energy to family members following traumatic death

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Ellen

Ellen has a nursing background. She specializes in palliative care, which has been a fertile environment to utilize her healing and her psychic skills.

Story One
Synopsis: Death

Ellen recalled her work with a young man, Sam, who she had known socially for some years, and who was dying of cancer. Sam was admitted into Ellen’s nursing care during the last four weeks of his life. Ellen worked with Sam very intensively during that period and they developed a close bond. She recalled how she was hurrying by car to Sam’s bedside, to be with him during his transition, when she suddenly felt a frigid, icy chill, and realized he had died. She recalled, at the stop light, a couple of miles from his home, there was just this frigid, icy - colder than; it wasn't like you know, sometimes you get this chill, chill. It wasn't like that. It was like a block of ice was
moving through me. It was a very surreal thing, and in that moment, I just had this sense that he had died. And he had in fact; twenty minutes before that.

Subtheme: Death
Feeling a frigid, icy chill - like a block of ice and recognising client had died

Story Two
Synopsis: Pre-death

In her second story, Ellen described seeing and feeling a blackness, when attempting to communicate with Heidi, a critically ill child and recognizing that the child’s spirit had departed. One particular night, there was just blackness, I felt blackness, I saw blackness. There were no thoughts in my mind. There was total blackness.

Subtheme: Pre-death
Seeing and feeling a blackness when communicating with a comatose child and realising spirit had departed

Synopsis: Post-death

Following her death, Heidi’s spirit appeared in a dream, and told Ellen that whenever she saw sparkles, Heidi would be present. Ellen said, “I remember one dream in particular, of her tumbling, (she was a tumbler), tumbling towards me. And she had these sparklers all around her, and she gave me the sparkles and she said whenever you see sparkles that will be me.

Subtheme: Post-death
Believing that spirit manifested in dream and gave a sign of future visitations

Story Three
Synopsis: Pre-death

In her third story, Ellen observed that her client’s pet birds, which usually chattered noisily in his room during her visits, fell silent as their human companion neared death, and remained hushed for a period after his death. She recalled that from the moment that his breathing changed and then through the next fifteen minutes - because it took him about fifteen minutes to pass away, those birds were silent. They remained silent until I left.
Subtheme: Pre-death
Noticing that pet birds fell silent during client’s transition

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Story Four
Synopsis: Pre-death

Ellen described in this story, how her dying client literally would spend periods of time somewhere else and then would describe his visions of these realms, to his family and carers.

Subtheme: Pre-death
Witnessing death-bed visions

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Story Five
Synopsis: Post-death

Ellen nursed Polly for four months, prior to leaving for a visit to Australia. Before she left, they said goodbye and Polly agreed to let Ellen know, if she died while Ellen was away. Ellen shared the experience that during this overseas trip, she heard a disembodied voice greet her. She recalled that prior to this experience; Polly was so intensely on my mind for those few moments ... Suddenly, a woman’s voice called from the other side of the sliding glass door, in a clear, bright and melodious manner, “Good morning!” As there was no one inside, Ellen realized ‘the voice’ belonged to her client, Polly, who was notifying Ellen that she had died. She then described how Polly’s spirit manifested symbolically to her family members, letting them know that she was still nearby. As her husband Jack neared death, Polly also communicated to him that it was time for him to make his transition.

Subthemes: Post–death
Receiving telepathic message of client’s death and continued closeness
Recognising client’s post-death communication with family members
Recognising death-bed communication from recently deceased wife

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Story Six
Synopsis: Post-death

Ellen told a story of Connie, who had widely metastatic lung cancer. Connie was a 67 years old retired nurse and was married with a large and loving family. She had very strong spiritual beliefs, but was very fearful of being breathless and distressed while
she was dying. Ellen's goal was to assist Connie to have a peaceful transition. When she was off duty, Ellen did some imagery to assist Connie. She visualized the earth and the afterlife connected by a beautiful intensely coloured rainbow bridge. During her visualisation, Ellen communicated with Connie telepathically and assured her that she would help her have a safe and peaceful transition. She visualized herself escorting Connie to the arc of the bridge where she bade her farewell. Ellen visualised Connie finishing her journey over the bridge and turning briefly to wave goodbye, before travelling on, absolutely fearless and very peaceful. Ellen described the rainbow bridge to Connie and appealed to her to cross it when it was her time to go. Soon after Connie's death, Ellen saw an intensely coloured, double rainbow at the end of her house.

Subthemes: Post Death
Receiving a sign that client had made a safe and peaceful transition

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Story Seven
Synopsis: Pre-death

Ellen described the events surrounding the final moments of life and death of her close friend Jim. She sensed that Jim was not in his body, and heard him indicate where he was in the room. Ellen remembered that as I touched his arm and said, “Good morning Jimmy, it's Esther.” I distinctly heard his voice and felt his presence up in the north east corner of the room.” He said, “Oh, I'm not down there, I am up here.” It was weird. As I stood there with my hand on his arm, I could feel him up in that corner of the room. Later, Ellen felt Jim’s energy enter her body as she embraced his wife, Judy. Ellen recalled that at one point while she was standing in this corner, I felt the urge to just encircle her with my arms and hold her. I actually felt the energy of Jim come into my body and hold her. It was a peaceful and unworldly feeling, but very loving and comforting. The night before Jim died, Ellen recalled a dream, that we were all in his room, and all the machines abruptly stopped and he was dead. I suddenly woke up and looked at the clock; it was 5:35 AM. I thought perhaps he had died, but did not receive a call. Jim hadn’t died that morning. However, he subsequently died at 5.35pm the next night.

Subthemes: Pre-death
Hearing and feeling dying person, out of body and present in room
Feeling the energy of dying friend enter healer’s body – to give wife a final hug
Receiving portentous dreams of the exact time of a friend's death

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Synopsis: Post-death

Ellen recalled another synchronous experience where, after Judy shared her dream of Jim, who she saw working on his computer, Ellen returned to her own computer to have one last look for a misplaced business document that Jim had sent her, and found it in a place that she had previously searched.

Subthemes: Post-death
Receiving a message from dead friend regarding location of lost document

Frances

Frances has highly developed healing and clairvoyant and mediumship skills, which she utilizes to heal and teach.

Story One
Synopsis: Pre-death

In her first story, Frances describes the transition of a man, who she had known for many years. However, she had lost touch with him, when he and his wife travelled overseas, reconnecting with him again upon his return to Australia, three years prior to his terminal illness. She had known him to be a very bright man with vibrant energy and loads of vitality. Frances recollected that Phillip lived a very full life, was interested in exploring new ideas, and he seemed to be very spiritually aware. She noticed when she reconnected with her friend that, although he was still physically very active, he had lost weight, and his aura was less vibrant and looked more muted. As Phillip and his wife Claire, were living in Asia, Frances did not see him for a further 18 months, and noticed on this meeting, that Phillip had developed a cough and had lost a great deal of weight. There was also a grey film over his aura, and it was reduced in size. A month after this meeting, Phillip was diagnosed with terminal cancer.

As his illness progressed, Phillip made earnest attempts to recover and she recollected that, There was a lot of yellow around his head, so I really feel that he was being really positive in his head, but not in his heart. As his physical health deteriorated, she witnessed Phillip’s energy body diminishing. Three weeks before his death, she perceived his energy field stabilized about 6-8 inches from his body. She noticed that there were no further fluctuations in his field, until the last days of his life, in spite of variations in his physical health during this time.
During these final weeks, Phillip experienced a considerable increase in pain and Frances observed a brightening of his aura, which coincided with periods of intense pain. He was given morphine as a palliative measure, and Frances became aware that although the medication alleviated Phillip’s pain; it also dulled his energy field.

Four days before his death, Frances detected that Phillip’s energy field suddenly shrunk in and she commented that, you could still see an energy body around him, but it was very muted and very slow to move. The colour of his aura was also a brown-grey, which she attributed to the difficult conversations and emotions that Phillip was experiencing during the last days of his life. These auric colours became lighter and less dense, particularly around the throat and heart with the resolution of his concerns. Although Frances had daily contact with Phillip during the last weeks of his life, Frances had to leave him a couple of days before his death, as she had work commitments interstate. She remembered noticing as she farewelled him that he had suddenly deteriorated mentally. However, his field had changed and improved slightly. She said, thinking about it afterwards, he was gathering himself up before he did go, and that morning he did look a little bit brighter, a little bit clearer, and not quite as grey.

Subthemes: Pre-death
Perceiving the person’s aura as less vibrant three years prior to physical illness and death
Perceiving physical manifestation of physical signs and symptoms and a grey film over the aura, one month prior to diagnosis of terminal disease
Perceiving yellow aura around a person’s head denoting intellectual attempts to combat illness
Perceiving diminishing energy body, 6-8 inches remained static three weeks before death
Perceiving a brightening of aura coinciding with increases in pain
Noticing dulling aura and decrease in life force with administration of morphine
Perceiving shrinking, muting and slowing of energy body four days before the person’s death
Perceiving a grey brown colour in person’s aura related to emotional concerns
Noticing the lightening of colour and density of grey aura around throat and chest in response to resolution of emotional concerns
Perceiving a brightening and clearing of the energy field in preparation for transition

Synopsis: Post-death

Phillip died in Frances’s home. After his death, his wife Claire continued to live with Frances and her husband. During the initial months following Phillip’s death, Frances has intermittently perceived his energetic presence. She also recognised Phillip’s
intervention and assistance, with the management of his complicated and unresolved business affairs. In one instance, Claire was unable to access information on their computer, as she could not find the password-file. She lost her temper and loudly appealed to Phillip’s spirit to help. Claire’s stepson, Tom, phoned unexpectedly from interstate and offered to find information that had remained elusive to her. The offer of assistance came within half an hour of us actually screaming at him and saying, you’ve got to help us with this! Because it was important information that was locked away that she needed. However, as Claire has gradually come to terms with her husband’s death, Frances has experienced a lessening of Phillip’s energetic presence in their home. She said that the last couple of months I haven’t felt him here so much. But I think that Claire is a lot better.

Subthemes: Post-death
Perceiving person’s spiritual presence and assistance, for first couple of months following death
Feeling a lessening of deceased person’s energetic presence as his wife became less emotionally distressed

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Story Two
Synopsis: Post-death

As a preface to her second story, Frances described her ability to communicate with people who have passed. She explained how deceased children usually show her the particular part of their body that was injured, and precipitated death. The child’s spirit often requests that Frances tell his or her parents that the injured body-part is no longer crushed or damaged and that they are now free of injury or illness. Frances outlined how the spirits of adults identify themselves to her, and that she also has clairsentient perceptions of the person’s disease prior to death, stating that, I usually get a feeling of blackness over the body if someone has passed from cancer, or I get a tight feeling in my own chest, with an asthma, breathing or a heart problem.

In this story, Frances remembered an experience that she had while working in a nursing home, where a 90 years old woman died, early on the morning of her last day at work. Frances was assisting another member of staff to change the dead woman’s nightgown, before she was taken to the funeral parlour. She jokingly complained to the dead woman about her thoughtlessness, in dying on her last day and making more work for her. She turned around in the midst of her conversation and was shocked to see the spirit of the dead woman sitting in her chair and laughing at her. Frances recalled that she looked like her physical self as I knew her, but certainly, a lot more
energy, a lot brighter and able to move around freely, than she could in her physical body, as I knew her.

Frances then explained that when she sees the spirits of people who have died, they generally project a recognisable and usually younger version of their physical selves to her. If the person was a child and if their chest was crushed they will say, “Tell Mum I’m ok.” And they will be patting their chest, so I will know that it was an impact to the chest that caused them to go ... And I will just get the feeling of a sore knee or a pain in the chest or somewhere, or I usually get a feeling of blackness over the body if someone has passed from cancer.

Frances concluded her interview with me by acknowledging the value of her work as a medium, in providing confirmation of the spiritual survival of deceased people to their grieving relatives. She said it’s very healing when you can give people information that confirms that they [the deceased loved ones] are ok. It’s the little things that they tell you, that people are healed by, and feel better with. For example, what [parents] wrote in the letter to [their] daughter that [they] put in the coffin with her … or that [they] put her [the child’s] favourite teddy bear with her or [things] like that. Frances then illustrated the nature of her work, by describing how a man communicated specific information to his relatives that verified his identity to them. Frances recalled that the spirit of this man laughed and said that he has lovely clothes in spirit. He said, that despite not having clothes when you buried him, he wants you to know that he’s wearing lovely clothes, and good shoes, and shoes were very important to him. The significance of these remarks was made clear to Frances, who was told by his relatives that their father had owned a shoe factory and as he was Jewish he was buried with no clothes.

Subthemes: Post-death
Seeing the presence of the spirit of person who had died the same morning
Seeing the spirit as a more energetic version of the person’s physical self
Seeing spirits manifesting as slightly younger than the age they were when they died
Using mediumship abilities to confirm the survival of the spirit for loved ones

Georgia

Georgia has been clairvoyant and clairsentient since childhood. These abilities became heightened following a personal misfortune. She uses these abilities with her mediumship skills in her healing practice.
Story One
Synopsis: Pre-death

In her first story, Georgia recalls one of her friends, who was in his sixties, had recently remarried. Andrew, who was a heavy smoker, became ill, soon after his marriage. He was subsequently diagnosed with lung cancer. During a visit, Georgia became aware that Andrew was fearful of dying. To help him with his transition, Georgia identified the spirits of Andrew’s loved ones present at his bedside. This allayed his fear of dying. She recalled that, *when I started to tell him the names of the relatives and friends in spirit, who were there to meet him, I could see him separating more rapidly, because there was this sense of ‘I’m safe’; like a child, who feels safe, when there are parents to take them home ... I actually saw his life force starting to separate.*

She noticed that this knowledge gave him a sense of safety, which allowed his energy field to separate from his body more rapidly and for physical death to occur. She mentioned that as some people neared death, their psychic abilities increased and they often physically or verbally acknowledged that the spirits of their loved ones were present at their bedside.

Subthemes: Pre-death
Providing a sense of safety, by identifying presence of friends and relatives in spirit at bedside, allowing life force, seen as a luminous light, to separate from body more rapidly, and death to occur
Recognising people perceiving the presence of spirits as they are dying

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Story Two
Synopsis: Pre-death

Georgia described how she perceived the presence of ex-husband, Harry, who appeared as a light form next to her bed. He told her that he was ill and required her assistance. She recalled that *at night I’d wake up and his spirit would be standing beside the bed. (It appeared as) just a light form, but telepathically, it kept coming to me (and saying), “Please come and help me, I’m afraid.”*

Subthemes: Pre-death
Experiencing presence of spirit standing beside bed, appearing as a light form, requesting assistance with dying

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Synopsis: Post-death

Almost immediately after Harry died, she awoke and heard him communicate to her that he was at peace. She recalled: *And one night I woke up at two o’clock in the morning, and I heard him say very loudly in my consciousness, I’m at peace at last!* Harry’s death was verified when, *about five minutes later, his mother rang me from the hospital.* Subsequently, Georgia saw Harry’s spirit at his funeral.

Subthemes: Post-death
Hearing spirit communicate immediately after death
Post-death, seeing ex-husband’s spirit at the funeral

Story Three
Synopsis: Death

In her third story, Georgia describes how she was with her horse when he collapsed and that as he died she said, *I saw with him, the life force just drift away, like a luminous blanket drifting off the body and just “whist” away.*

Subtheme: Death
Seeing the life force like a luminous blanket drift off the body and ‘whist’ away

Stories Four and Five
Synopsis: Post-death

In the next two stories, Georgia used her ability as a medium, to contact the spirits of her clients’ sons, recently killed in car accidents. She relayed helpful and emotionally healing information from the boys’ spirits to their relatives about their deaths. On one occasion, when a grieving client came to Georgia to contact her son, she telepathically picked up *he had been on the back of a motorbike and was killed.* And [his mother] was so angry against the driver of the motorbike. And this young guy came to me and said, “Tell mum we’ve both had the same poison, namely dope and alcohol, so don’t blame him, because it was my time to go.”

In the next story, Georgia was visited by the parents of some young boys who were killed in a car accident. She remembered that two couples came in, one after the other and there was a lot (of information that) came through about that. You know a lot of proof about what had happened. In this instance as well, the spirits of the boys
pleaded with their parents not to blame the driver of the car who was the only survivor of the accident.

Subtheme: Post-death
Acting as a medium, relaying reconciling messages to family members

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Story Six
Synopsis: Post-death

Georgia then recounted how, a friend’s daughter, Jenny, suicided. She recalled that it was a couple of days after her death, and her spirit was still traumatized. Georgia communicated with Jenny’s traumatized spirit and counselled her. She has since communicated with Jenny’s spirit and recognised that she had found peace. [Jenny] comes through and laughs now. At her funeral, Jenny gave Georgia specific instructions about how to help her grief stricken father. “It’s my dad’s birthday on Sunday, make him a birthday cake.” So, I had only met him once, at the brother’s funeral and then at Jenny’s funeral. So, I made him a birthday cake and I was thinking, “What should I put on it?” And she said, “You’ve got something, in a box in the pantry.” And I said, “Have I?” And she said, “Yep.” So, I went and looked in this little box of ornaments that I collect, and here was this little baby angel, with a bible between its legs, and a halo, and that went on and from spirit she dictated to do this cake.

Subthemes: Post-death
Perceiving spirit traumatized a couple of days after suiciding
Counselling spirit and recognising a transition from a state of trauma to calm
Communicating with spirit after recovery from trauma and receiving guidance to support grieving father

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Helene

After practising for many years as a specialist medical practitioner and undertaking other academic pursuits, Helena had a spontaneous opening of her psychic abilities leading her to relinquish her former career to become a full-time healer and teacher. Helena has also published a text based on her particular method of practice.

Story One
Synopsis: Post-death

Helene spoke of her friend, Penny, whose ex-husband, Ivan, collapsed in the street, and died from a heart attack. Ivan was addicted to drugs and estranged from his
family. After his death, the police contacted Ivan's and Penny's 17-year-old son, Jeff, who was his father's next of kin. Penny helped her son arrange the funeral and her friend, Helene, supported her.

In her first story, Helene described that as she walked past Ivan's coffin, I could feel the soul of this man still there and the interesting thing was that he didn't think that he was dead, because he thought that he was on a heroin trip. Helene sensed that as Ivan's body was cremated, his soul finally acknowledged that he had died. She recalled, I could feel that his body was burning and that gave him the message that, “Yes I'm dead.” And his wife felt the same thing and she said “Did you feel that, as we were going home?” Helene then related how, after his funeral, wrathful entities surrounded Penny's house and when Helene endeavoured to assist by attempting to exorcise the entities, she, too, was subjected to their malevolence. I could feel the house shaking, and it lasted two or three days, off and on. And, it might have been the grief, it might have been the wrathful deities, I don't know ... I had to set time aside from work, and the way I deal with a spiritual crises is: I set time aside and I ask all my helpers to help, as well as remembering the light and remembering the highest life sustaining source.

Subtheme: Post-death
Feeling presence of spirit near coffin
Perceiving that spirit confused physical death with drug induced state
Sensing that as his body burned, the spirit acknowledged physical death
Experiencing presence and disturbing influence of wrathful entities

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Story Two
Synopsis: Death

In her second story, Helene described how her horse died. It was about four hours before I realised, that there was no change, and she would not stay in the body, because the body had a tumour or something ... And after making an invocation for a peaceful death, it started to happen automatically, and there was this amazing strength in her and in everyone, when there was already a change somehow. And then, there was this big cone of light, just coming out [of her crown] and setting her free. It was this separation process going for about an hour, and then we could take the bridle off after about an hour. I learned a lot about being with death, with that horse. It was such a gift for me to be involved and you know it is the transition of shedding of body. I mean, it doesn't matter about whether it is a guinea pig, or if it's a horse, or if it's a human being. We have so separated our bodily existence from anyone else and think that we are different from other life forms - forget it!

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Judith

Judith had a successful career when a near-death experience released her psychic abilities. Soon after this experience, she resigned from her position as a research scientist to develop her healing skills. She has studied for many years with shamanic healers and has published healing books. Judith teaches and works in her own healing practice.

Story One
Synopsis: Pre-death

In her first story, Judith recalls responding to a client’s request to work with her terminally ill husband, Ron, who had been admitted to a hospice unit. When Judith visited, she found Ron near death and drifting in and out of consciousness. She observed that he was very traumatized from his out of body experiences and noticed that he would, *kind of float out of his body, and see some very fearsome, frightening images, and wham, back into his body, because it was too terrifying.* Although Ron could no longer communicate verbally, Judith, who has trained for many years with indigenous shamanic healers in Bali and the Philippines and has the capacity to access different realms of consciousness, was able to *go with him and see the images that he was seeing.*

Judith explained that when assisting her clients with this aspect of their transition, she is careful not to give a religious or conceptual interpretation of the discarnate images that her clients encounter. In this instance, she perceived that she established a safe perimeter around Ron and used guided imagery to facilitate a safe passage for him and he died very peacefully, as he followed her guidance. Judith has observed that a person’s consciousness departs his or her body moments before physical death, and remarked that after Ron’s consciousness departed, *you could feel the room, and he had made that journey, and his face just took on an image of great peacefulness. It looked beautiful.*

Subthemes: Pre-death

Travelling out of body with dying person, seeing his fearful images
Explaining illusionary images and guiding the person towards the light
Story Two

Synopsis: Pre-death

In her second story, Judith recalled working with Ian who was dying in hospital. She said that Ian had a particularly unattractive personality, as he was emotionally unavailable to his wife, Jill, and was very critical of other people. Ian was from a spiritual denomination, which espoused that after death, a person's soul stays in suspended awareness, until the second coming of Christ.

The man was moving in and out of consciousness, and as he returned from his unconscious state Judith noticed, *All of a sudden he comes back and opens his eyes and I'd never seen him look delighted before, and he was kind of glowing and smiling.* As the man could no longer speak, Judith facilitated his communication by asking him if he had been visiting the other side. He nodded his head enthusiastically.

Subtheme: Pre-death
Perceiving and interpreting person's visions of a wonderful post mortem realm

Synopsis: Death

Judith continued to ask him questions, allowing him to communicate to his wife his love for her, and his imminent transition to a safe, beautiful place, rather than a spiritual void, that he had previously anticipated. Judith recalled that after communicating to Jill through her, *his head dropped back in the pillow, and that was his last breath.* Judith felt very honoured to be at this man's bedside as these events unfolded and she said, *Sometimes people just fade off and they go, but every once in a while you get one of those peak events, which is like a birth, almost.*

Before concluding her interview Judith stated her belief that, to work with healing deeply, the healer must not carry any fear of death. She said *it needs to be dealt with, like in any shamanic culture. The shaman has faced his own mortality [sic], leaves the door of death, and comes away going, “O.K. I’m not scared anymore.”* Judith believes that some aspects and outcomes of the near death experience, which she has experienced, have similarities to the initiation rites of the Shamanism. She also observed that some individuals need to die alone, and to facilitate their death, she has
needed to clear the room of people, so that the dying person can complete this aspect of their transition.

Subtheme: Death
Perceiving patient died after communicating love and imminent survival in a wonderful place

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Julie

As a registered nurse, Julie has had many opportunities to recognise, develop and practice her healing and clairvoyant skills. She has had these abilities since early childhood, following a near-death experience.

Story One
Synopsis: Pre-death

Julie described the death of her father, in this story. She prefaced her description by making a general observation that she noticed the energy field started to shrink as a person was dying. Some months prior to her father’s diagnosis with terminal brain cancer, Julie was aware of some distress in her father’s energy field; some impediment to the clear flow. She also observed that he was emotionally distressed and preoccupied during this period. Although her father sought medical assistance for what were vague physical symptoms, his mood change confused his doctor, who misdiagnosed his illness as depression. Consequently, his brain tumour was well advanced, when it was finally diagnosed.

Julie’s father was more open than usual following his diagnosis, and his energy changed from, fearful, something’s wrong, scattered energy, to more emotional openness during this time. Jill and her family respected their father’s wish to die at home and were committed to nursing him.

At this point in her story, Julie commented that as she was able to recognise the specific vibration of an individual’s energy field, she could distinguish between her father’s and other family members’ energy, when they were near her, and she noticed that as her father’s disease progressed, his energy field got weaker and stopped filling the room. As a result, the energetic balance in the room changed, as family members used their love and energy … to bolster and support him.

Julie experienced a strong connecting channel of energy, like a strong rhythm between her father and her, with her energy dominating. Julie’s father chose to abstain from
strong analgesia, such as morphine, so that he could be fully aware during his transition. As her father’s condition progressed, she felt that the energy field, got a bit thready, reflecting his exhaustion and intense pain.

During the last few days before his death, his energy field shrunk and she remembered that it was more concentrated around the body, torso, head region and the edges weren’t too defined. About 12 hours before his death, her father’s energy faded. At this point of his transition, his energy, which was characterised with a reddy, pinkie tinge, had its last brilliant flare … so it was like a ‘woof out’ that filled the room.

Subthemes: Pre-death
Perceiving energy shrinking when person is dying
Noticing impediment to the clear flow and scattering of energy field with emotional distress prior to diagnosis of illness
Noticing emotional and energetic opening following terminal diagnosis
Perceiving weakening, diminishing energy field as disease progressed
Perceiving people have a characteristic energy with different vibrations
Perceiving relatives’ energy bolstering and supporting dying person’s waning energy
Feeling a connecting channel of energy
Perceiving a threadiness of energy field
Perceiving shrinking and concentration of field around the torso and head
Perceiving hot, brilliant red-pink flare of energy filling the room as person neared death

Synopsis: Post-death

Julie’s mother stayed, alone, cuddling her father until he died. After his death, Julie re-entered his room, and could still feel his energetic presence. She recalled that, it was a hot energy, and it stayed in that house for a week, at least. During the next six months, or so following his death, Julie’s father came to her in her dreams, which culminated in her having a dream of letting him go. She remembers telling her mother of the dream, and I told her, that I felt like a large cabbage lifted off my chest.

Subthemes: Post-death
Perceiving hot energy remaining in the house for a week after death
Perceiving communication in dreams for six months after death

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Story Two

Synopsis: Death

In her second story, Julie recalls nursing a solitary old woman, who was dying. She was struggling and fighting and she had very frightened energy. As the woman calmed down, Julie realized that her death was imminent, so after finishing her shift, she returned to her patient’s bedside to provide companionship and support as the woman made her transition.

Julie described the energetic aspect of the woman’s transition, which was like the guttering out of a candle … It was just like she just got dimmer. She perceived the woman’s energy as pale and wispy as she neared death, with a pale thin thread of blue energy above her body, holding her here.

Subthemes: Pre-death
Perceiving very frightened energy corresponding with fear and struggle
Perceiving a calming at approach of death
Sensing a pale, blue, wispy, thin thread of energy above the body prior to death

Synopsis: Death

As the woman died, Julie perceived her energetic thread detached from her body, and the woman’s soul energy, which she described as cool with a bluish tinge, became diffuse and gradually dissipated.

Subtheme: Death
Perceiving a diffuse, cool, bluish energy following disconnection of thread

Synopsis: Post-death

While describing her patient’s transition process, Julie made a distinction between her perception of soul energy, which is not contained or restricted to the body. It surrounds it, the area, the people connected, the room and cellular energy, that is released from the cells in our body; the energy of matter. Julie perceives that this energy emanates from the body and is perceivable for longer following death than soul energy, which moves out of the container … and gradually mingles with the matrix of energy we live in … and gradually loses its specific vibration.
At the conclusion of her interview, Julie reiterated her belief in the necessity for respect when people are in the presence of a dead person. She said, “So when I say respect, it’s about respecting the transition from the body, the soul energy - and it can hang around for a while before it dissipates.”

Subthemes: Post-death
Perceiving energy ceases to have form and definition after death
Perceiving the soul energy moves out of the body and the field and mingles with the matrix of energy in which we live, losing its specific vibration
Perceiving that the energy of matter remains longer, emanating from the body and returning to the greater matrix of energy
Observing need to respect the body and the soul energy in the room after death

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Kelly

Kelly recognised her psychic abilities from an early age, and studied with healing masters to develop these skills, which she utilizes in her healing practice.

Story One
Synopsis: Pre-death

In her first story, Kelly recalled an experience she had when she and her partner were living in a remote rural area. On this occasion, they were called to assist their neighbour, Jackie, who was single parent and whose seven day old baby, Sophie, was critically ill.

Kelly believed that the critically ill baby, Sophie, was still alive, because she recalled, looking at [Sophie] energetically; she still had her outer energy field, which is the blue field around the body. And there was still energy fluxes in the health rays and there was still, I would say, a heartbeat, although very weak incredibly weak. There was also an inner energy aura, but the three bodies or the etheric, emotional and mental bodies weren’t there anymore. There was just an opaque colour.

Kelly, her partner, Sam and Jackie transported Sophie from their remote property to meet the ambulance at a pre-determined place. Kelly and Jackie took turns giving Sophie mouth-to-mouth respiration as Sam drove. As Sophie was given mouth-to-mouth respiration, Kelly detected a reversal in the usual energetic breathing pattern. When there was breathing out (she wasn’t actually breathing at this stage, for herself); when there was air coming out of the baby’s mouth, by I guess, the collapsing of the lungs. It was interesting, as it was quite the opposite from what often happens or what
I usually see, as somebody breathes. You see red in the body and blue when they breathe out. At this point, the baby’s mechanism had shifted from blue to red; blue on the in breath, and red on the out breath, which was different to normal. As they raced to meet the ambulance, Kelly observed that Sophie’s energy field turned white, as the baby neared death. At this stage, I had to do mouth-to-mouth, with the baby. I can’t remember when … it turned white; the field turned white. Kelly recalled that, we went in our vehicle down to meet the ambulance, and I know the baby was still alive, although it (the energy field) was starting to get whiter and whiter; all the colour on the baby was starting to get more opaque. Even around the body was starting to get more opaque.

Subtheme: Pre-death
Seeing blue outer energy field around body, energy fluxes in health rays in critically ill baby
Inner energy aura and opaque colour in absence of etheric, emotional and mental bodies
Seeing reversal in usual energy field pattern - blue on inspiration, red on expiration
Observing energy field turning white near death

Synopsis: Death

Kelly remembered that they met the ambulance, about half way down the hill. I won’t say where we were, but yes, we were going towards the town, and we were half way down the hill. We met the ambulance and we were still doing mouth to mouth. We gave [Sophie] over to the ambulance and as soon as [Jackie] let go of the baby, there was what I could only describe as white smoke left [her] head and I knew that the baby had died.

Subtheme: Death
Seeing white smoke leaving head as baby died

Synopsis: Post-death

After the baby’s death, Kelly observed that her spirit was still present, but that she could not get back into her body. She recalled, that the ambulance driver put the baby on the - I guess it was like an area near where he was sitting; it was like a little sitting place. He just put the baby there and he didn’t continue to do mouth-to-mouth. He didn’t say the baby was dead, he said that if we brought the baby back from here, it would definitely have some mental incapacity. Basically, he made a decision, I think, at
that point, not to bring the baby back, and I feel, that all of us let go. After her death, Kelly noted that the energy surrounding Sophie’s body was black and there was no aura. She said, if I look back at the baby, the energy had gone quite black. Actually, like as though she didn’t have an aura at all. I believe the baby was conscious of what was happening to her, but she could no longer get back in the body. So, I think at that point when it was black; it was very dark, I think, prior to that point, the baby could still have been resuscitated. I think that the baby couldn’t get back in the body, but the baby was totally present.

Two weeks later, when Kelly saw the baby in the funeral parlour, she noticed that the baby’s body was very white. There was still a tiny – like, I think that all things have a particular energy movement, so there was a little tiny energy movement, but the baby was no way connected; the baby was no longer connected to the body, whatsoever. But [she] wasn’t gone. But the baby’s consciousness still hadn’t left, but she didn’t recognise her own body ... she didn’t have any attachment to the body, but she was still in the funeral parlour, so I can only suspect that she had attached herself back to the mother ... but she was really confused, and in a way she was still in the mode of a baby ... I understand the consciousness of a baby, not to be very embodied in the physical body, or very in touch with its body, and it has not really identified with its body. And as it grows, it is more identified with the ego of body. So, the energy of the baby was still unconsciousness of her form. But she still had a form, but it wasn’t a baby any longer. Her consciousness or her being wasn’t a baby, it was as just like - how I saw it as a little circular vortex, really not a vortex, more like a circular little ball. Even though it was a ball, it wasn’t identified with that either. It was identified with its consciousness so it was much vaster than that.

Subthemes: Post-death
Perceiving spirit present, energy black and aura absent
Perceiving that baby’s consciousness was still present and unable to get back into her body
Perceiving consciousness in the form of little circular ball - disconnected from body reconnected to mother and identified with a vaster consciousness

Story Two
Synopsis: Post-death

Kelly related in the second story, that she attended the funeral of a man she knew. When viewing him in his coffin, she witnessed his body looking pink, alive and breathing, and noticed that his energy was still attached to his body. She remembered
that what I recognised was that he hadn’t left. He was still very attached to the people at the funeral, and he had not left the body. The energy of the man, I can’t call it consciousness. The energy of the man was still really attached, to the body. Kelly further described what she observed, the energy field of the body, it didn’t have blue around it, but it was all cloudy all around the body, so it was like again a bit like smoke, but smoke has tendency to be different colours or thicknesses, but this was all then same. There was no inconsistency in colour or thickness, it was equal around the body, and all around the body was smoke, you know, the colour of smoke. (I know smoke can be different colours) but this was very grey, going to white, but not white.

She also observed that the man’s spirit would leave his body in a formed shape, in response to his interest in his friend’s conversations about him, and would then return to his body ... But there was a point when he did leave the body as a body, when he was just a shape and a form, but he quickly went back to the body. Yeah, when people were talking about him, he actually left the body and was sort of interested in what they were saying.

Subthemes: Post-death
Seeing person in coffin pink, alive, breathing - energy still attached to body
Energy field grey-white smoky cloud - consistent colour and thickness surrounding body
Spirit in form leaving and returning to body

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Story Three
Synopsis: Pre-death

In the third story, when visiting a terminally ill client in hospital, Kelly explained, when I saw him energetically, his physical energies; his etheric, emotional and mental and spiritual bodies, were very close to his body, as was the spiritual body, in the sense of us being spiritual in a physical way. She also saw that he had created another energy body. She continued, but his other spiritual body - uh, words are hard to describe. It’s hard to describe this, because there is not a language so much for it, but there was another body, outside of his, which was a supporting body, where he’d been endeavouring to be a lot of the time. It was as if he was creating another self, another being, and it was waiting, it was basically waiting for him. It was also where he went as an escape from his physical and emotional pain. Kelly counselled her client and assisted him to understand why he had created this ‘other self’. As his illness progressed, she visited him again, communicating with his heart or ‘beingness’, which was beyond his body, to guide him and allay his fears.
Story Four
Synopsis: Pre-death

In this story, Kelly described the passing of her dear friend, Madeleine, who she perceived to be a spiritual practitioner of very high degree. Madeleine had been very ill with cancer for a long time and Kelly related the story of the final weeks of her life.

Although Madeleine was a committed Catholic, she had a large community of friends from many spiritual traditions, who prayed on her behalf, throughout her illness. Madeleine believed that because of their prayers, she experienced considerably less pain than was usual with her particular type of cancer. But she didn’t experience pain, very often, [and] her form of cancer should have created a lot of pain. But she said that she didn’t and she said that she knew that it was from the prayers.

Kelly observed that Madeleine was emotionally detached during the final stages of her illness and attributed this to her state of inner control, inner insight and inner peace that she had attained as a spiritual practitioner. Kelly also recalled something that I saw that was unusual was a consciousness that stayed throughout the process … So that in the dying process, there was an extraordinary peace.

Six weeks prior to her death Kelly perceived a greying of her energy field, which had previously remained very clear. This grey element over her body was almost like a coat, a blanket around her, which remained very undisturbed except when she had what Kelly perceived to be an abusive encounter with a doctor.

Four days before Madeleine died, she felt so well that she confided quietly to her daughter that she wondered whether the doctor’s prognosis was correct. About four days before she left she actually said to Bernadette on the quiet, “Do you think they’ve got it right? I feel so well.”

Madeleine died in the early hours one morning, at a point when both she and her family and friends, who were maintaining a bedside vigil, had become too physically exhausted to continue and they could all let go. Kelly had noticed that Madeleine’s feet, which were usually hot, had gone blue and felt cold. She felt that this was
preventing Madeleine from leaving her body, so Kelly put some woollen socks on her feet. At some point I knew that she couldn’t leave. The physical feeling of coldness in her feet - It was too cold for her. You know that physical sensation can keep you in the body. So I put socks on her and it wasn’t long after that that she left.

With her grey energetic blanket still around her, Madeleine’s breathing changed to a Cheyne-Stokes respiratory pattern and Kelly recalled that those people by Madeleine’s bedside were a bit in awe of the unfolding experience. The Cheyne-Stoking seemed to bring the energy into her body to leave … So there was this powerful experience of building the energy to leave … It takes energy to leave. It actually takes a lot of energy for some people to die, Kelly reflected. [Her energy] actually moved up her body and her energy became concentrated in the top part of her body. And so it was just white so her legs didn’t really exist any more.

She continued, I knew she was passing and it was going to be very sudden, that was the unusual thing … I knew it was going to be very sudden, so I aroused everybody, because some people were sleeping, some people were in the waiting area, so I pulled everybody in and we stood holding hands around her bed...

Subthemes: Pre-death
Understanding that the person’s lack of pain resulted from her faith in prayers being said for her
Perceiving the person’s emotional detachment to her pending death due to inner control, insight and inner peace
Perceiving a state of consciousness and peace that remained throughout the dying process
Seeing a clear undisturbed, greying of energy, surrounding the person like a blanket, six weeks prior to death
Noticing a disturbance in energy field resulting from an abusive encounter with a doctor
Noticing that the person felt particularly well, four days before her death
Perceiving that the physical exhaustion of the loved ones allowed the person to let go and die
Seeing that the physical feeling of coldness in the person’s feet was inhibiting her from leaving her body
Perceiving that the grey energy blanket remained around the person as her breathing deteriorated and death was imminent
Perceiving that Cheyne-Stokes breathing operated to bring energy into the body in preparation for leaving
Perceiving white energy moving up body, and concentrating in the top part of the body prior to death
Portending that passing would be very sudden

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Synopsis: Death

At this point in her transition, Kelly perceived that Madeleine vacated incredibly quickly out the top of her head. As a long standing, practising Buddhist, Kelly was very experienced in Phowa (a Buddhist tantric practice of facilitating the transference of consciousness through the crown chakra at the moment of death) and performed it without consciously thinking. She too left her body and journeyed with Madeleine’s spirit until she was prevented from travelling any further and she felt that Madeleine had reached her spiritual Kingdom. After the ejection of Madeleine’s spirit through her crown was complete, Kelly observed other aspects of [Madeleine’s] leaving. She saw ‘mist’ passing out of her body, like heat was leaving.

Subthemes: Death
Perceiving the spirit vacated very quickly out the top of person’s head
Travelling with the spirit of the person until she reached her spiritual Kingdom
Seeing a ‘mist’ passing out of her body

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Synopsis: Post-death

Following Madeleine’s death, Kelly witnessed what she perceived as a subtle habit of consciousness in Madeleine’s body that manifested when the nurses sat her body up while washing it. She perceived Madeleine looking straight at her, although Kelly was aware that she was dead. The experience was very subtle and she interpreted it from a perspective that we have many forms of consciousness and that let go at different times.

Although there was no energetic sign of Madeleine when they sat with her in the chapel morgue the afternoon of her death, the next day when Kelly returned with Bernadette, to visit Madeleine in the viewing room, her spirit was present. There was like a presence above her body. The [energetic] body was just above the coffin, lying, but not so stiff, still clothed. The clothing was a little different; it was light, because it wasn’t substantial, but it was identifiable as hers. Madeleine, however, wasn’t in her [energetic] body. She was around us. Kelly described what she perceived as separate forms of consciousness in the room. She described the ‘form consciousness’ that was like her own body above her body, a ‘mind consciousness’, which actually related [to her] and a ‘hearing consciousness’ that could hear Kelly and Bernadette. Mindful of this, the women were very honourable in their discussion about Madeleine.
Kelly noted that Madeleine was completely gone by the funeral, five days later. *It was a funny thing, I got to the actual funeral, to the actual graveside late, and actually there was nothing there either. She was completely gone by the time of the funeral ... the thing of importance; the thing of essence had already left and [it] was final.*

Kelly observed there were many *little miracles* or coincidences that were acknowledged following Madeleine’s death that proved to Kelly and Madeleine’s family that her consciousness had survived.

**Subthemes: Post-death**
- Perceiving that the subtle habit of consciousness was still in her body after death
- Perceiving different consciousnesses letting go of the body at different times
- Perceiving that the person had returned and was present above her body to two days after her death
- Perceiving three separate aspects of consciousness in the room
- Seeing that the person had the form of her old physical body like a mirror above her body
- Noticing that the clothing that the person’s energetic form was wearing was lighter but identifiable as hers
- Perceiving that the energetic form was not present at the funeral five days after death
- Perceiving that the essence of the person had left the human plane
- Perceiving many little miracles after death

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**Marion**

Marion has utilized her healing and psychic skills in her capacity as a paediatric nurse. Her abilities emerged during her childhood, which was sometimes difficult. As a young adult and while undertaking professional healing instruction, Marion’s psychic abilities rapidly accelerated.

**Story One**

**Synopsis: Pre-death**

In her first story, Marion reflected on a traumatic experience she had while working as a solo nurse in a paediatric causality unit. As she had not worked in this particular area before and felt anxious, she requested help from her guides, who said that they would assist her, if she did as they requested.

A nine year old boy, who had had a seizure at home, was admitted to the unit, and Marion attended to him. As she left his room, she was directed by her guides to go back into it. She recalled that, *a voice said to me “Go back to that room.” And I said,*
“I've just left.” And the voice said, “GO BACK TO THAT ROOM!” And it was like, “GO BACK TO THE ROOM.” And I went back and caught the child as he ‘seized’ off the bed. And his mother was hysterical, and I remember thinking, “Thank goodness you said ‘GO!’” Although the doctor was not concerned (thinking that the boy was an epileptic), Marion perceived that his condition was much more serious. It was my time to clock off, but he needed a CT scan and there were no staff to go with him, so I stayed back and went down to CT with him, and I didn't like - I had a feeling that whatever was happening was not right. And I remember the doctor saying, “Oh, it’s an epileptic fit.” And I kept thinking, “No, this is not right, this is something!”

The following morning Marion was sent to work in the Paediatric Intensive Care Unit, where she found the little boy, who had been diagnosed with meningitis, was intubated and ventilated and was being nursed in this unit. At the end of her shift, Marion was asked whether she could do the night shift. She hesitated, as she was tired, but was again firmly directed by her guides to do this shift. That night, she returned to the unit to find that she was to take care of the little boy. As she was busy completing her nursing tasks, she remembered that all of a sudden the room heated up dramatically, and I remember someone from another bed said, “God, it’s hot in here!” and I said, “Yeah!” and I looked up, and here honestly, was this hugest angelic spirit that I have ever seen in my life. She tried to ignore the angelic being and continued with her task. However, when she looked up again, the angel was looking at her and requested that she channel energy into the little boy’s head and body. Marion thought, “That’s a reasonable request!” So I stood at his feet, and put my hands on his feet. I was just allowing some ice blue, crisp ice blue energy that travelled up through him, but settled enormously around his head. It went through his whole body, but it was particularly there. It swirled, almost like a cloud over his head. And then, the ice blue turned to a kind of a silver and then to a white and then back to the blue. She continued to follow the angel’s instructions and the little boy telepathically communicated that his headache had gone.

Subthemes: Pre-death
Hearing spiritual guidance about an impending seizure
Intuiting the grave condition of the patient
Feeling a dramatic increase in room temperature coinciding with the arrival of a huge angelic spirit
Responding to the angelic request to channel energy into child’s head and body
Telepathically hearing the child communicate relief of headache

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Synopsis: Death

Marion returned to her nursing tasks, and all of a sudden, the alarm started going. I thought, “Oh my God! Oh, no!” And a nurse came over and said, “He’s coning!” and I’m thinking, “What’s happening here?” And the angel had the boy with him, the boy’s spirit beside him. She recalled that as the hours went by following the boy’s brain death, she observed his energy fields diminish ... And I remember after he was brain dead and I remember as the hours went on, watching his energy fields diminish, and watching his mother, (pause) the connection. She was so desperately trying to hang on. It was an unravelling, but it was diminishing in the amount of energy going from him to her.

Subthemes: Death
Seeing the child’s spirit beside the angel as he was pronounced dead
Watching the unravelling, the diminishing energy between mother and child during child’s transition

Synopsis: Perimortality

Marion initially felt that by channelling energy into her patient’s body, she had unwittingly precipitated his death. She felt very traumatized and bewildered that the angel would have knowingly requested her involvement in this way. However, Marion gradually realised the purpose of the angelic request. She recalled: And it was about that pain kept him in his body, and that no matter how much we upped his medication, because he was unconscious, (because we had sedated him), nobody would up the opioids for his headache, because, there was no parameter that said that he had a headache! And yet, that was what he did have. He had brain swelling and meningitis. And that was the thing that kept him in his body.

Subtheme: Perimortality
Realizing that pain had kept child in his body and interfered with his transition

Story Two
Synopsis: Perimortality

Marion described how during a staffing crisis, she was sent as an agency paediatric nurse, to a high dependency adult ward. As she was still recovering from the traumatic experience she described in her first story, she had developed a visualisation technique to close down her psychic powers while at work. Notwithstanding, she
suddenly saw an angelic being enter the ward. She remembered that, all of a sudden here was this angel standing behind the nurses’ station. [It looked] just like the typical angel, but very big. For me they have a soft blue around them. These angels are big, they are big! In terms of size they would be about five and a half to six feet and they are broad, they are bright, and there is no doubt about them. And they never come together. I have never seen them together. Whatever these ones are [angels], [they] have faces, but not clear [ones]. Kind of, you can see their jaw line and it’s in a flesh colour. A jaw line, but that’s about it and then it disappears. They certainly have wings but the rest is kind of ... She unsuccessfully attempted her visualisation technique, to shut down her psychic perceptions but the angel remained evident. Marion related that when these beings appear, she tried not to look at them too closely, for fear of becoming involved in a metaphysical event.

Subtheme: Perimortality
Knowing that the appearance of a huge, bright angel portends dramatic incidents

Synopsis: Pre-death

Marion recalled the events leading up to her witnessing a significant metaphysical incident. The angel then withdrew and went over to a middle aged woman’s bed. I remember there was a lady in the bed, who had grey hair. She was quite elderly, probably, in her fifties, and I looked, and there was a nurse with her, and I thought, “This isn’t good!” And I looked at the nurse and the nurse said, “I don’t think she’s well.” I said to her, “I don’t think she’s well either!” (I’m assuming that the night nurse was seeing something different from what I was seeing!) The woman suddenly ‘arrested’. And it was the most amazing arrest that I have (pause) the most visual arrest I have seen! When Marion arrived with the resuscitation trolley, the woman had left her body and the angel was standing behind the bed. And the lady was out with the angel, with a few more angels, and they were chatting!

Marion realized that the medical staff were going to abandon their efforts at resuscitation, and I thought (and it was all telepathic) - And I remember saying [to the woman], “I don’t mean to interrupt, but if you want to get back in, you better hurry, because they’re going to stop this in a minute, and you’re going to end up in big trouble! ... And the next thing I looked at her, and she was gone and the resident said, “She’s back!” And I thought, “Oh, O.K!”

Subthemes: Pre-death

Seeing an angel withdraw and reveal identity of patient going into transition
Seeing the dying patient out of body, chatting with angels
Telepathically communicating with the patient to return to body

Synopsis: Perimortality

After the ICU staff left, Marion noticed that both the woman and her vacated bed were surrounded by flowers. *After they had left there were flowers everywhere! Literally, her bed had flowers all around and I remember she had them; the main thing - like peace lilies. I remember looking at them and thinking, “Wow!” They’re as white as the glow that is around this bed! It was amazing!* Marion finished her shift and went home, doubting her perceptions and wondering if she had imagined the whole event. Upon arriving home, she glanced out of her back door and saw a solitary peace lily that she had not planted, in the garden. She realized that its manifestation was an angelic message, verifying her recent experience.

Subthemes: Perimortality
Seeing a bed surrounded with flowers like peace lilies as white as the glow around the bed
Receiving angelic message verifying metaphysical experience

Synopsis: Perimortality

Marion offered perceptions of the perimortal process that were channelled to her from her guiding sources. She channelled an understanding that some children are very reluctant to die, but that their spirit realises that their body is too depleted to recover, so they decide to leave. She said that *these are the children that don’t want to leave. Their spirit does not want to leave, but their physical body is so debilitated that it would never recover, so they understand that they have to go.*

She was also informed by her guides that the sleep patterns of children who are dying are often reversed, so that they can conserve their energy and that the presence of the moon (which assists in fluid balance), and elemental spirits (which help sustain them) contribute to this pattern reversal. The children also avoid the impact of all the busy energy of people in the ward during the day, which depletes them. *So, you often see children who are dying, having a reversal of sleep patterns. You see lots of people having reversal of sleep patterns. And they’re saying, [Marion’s guides] that we as health professionals think that is undesirable [this pattern reversal] and we try to reverse that, and [then] have them in a more agitated state.*
Marion described the different roles of angels and undines in changing the energy field during transition. She described the role of angels as the architects, who hold the overall plan, while the undines then change the physical body, in order to facilitate energetic changes and the healer acts as a transformer, to move the energy into [a form which] is sustainable for the body, and the human energy field to use. She also talked about children dying when their parents were not in the room, to reduce the burden of dealing with their grief during transition. She reflected that sometimes, the energetic load of having parents that don’t want this to happen, whose emotional load is so high, that some kids choose to die when they are not in the room, so that the energetic burden is less. And as distressing as that is to the parent, it’s easier for the child.

Subthemes: Perimortality
Perceiving spirit recognises that physical body is too depleted and reluctantly chooses to leave
Explaining roles of angels, undines and spiritual healers in changing energy field during transition
Recognising dying children reverse sleep patterns to conserve energy
Perceiving some children die without parental presence to reduce energetic burden

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Story Three
Synopsis: Pre-death

In her third story, Marion recalled the death of a two year old boy in the terminal stage of leukaemia, who was admitted to the paediatric unit of a city hospital, where she worked. Both parents, who came from the country, were sleeping in or near the hospital. They were exhausted after keeping a vigil at his bedside for many hours. Marion asked her spirit guides to allow these parents to be present at the moment of his death and her guides asked her what she wished for herself. She replied that she wished to see between the worlds during the little boy’s transition. Marion, who was on night shift, remembered that [at] about a quarter past two [in the morning], I walked down the corridor and a big angel arrived. And I thought, “Wow! God!” By now I know what a big angel means - an energetic transition is happening.

She asked her spiritual guide, Samuel, what to do, and he said, “The time is near, wake the mother.” Marion reluctantly obeyed his instructions, as she could not see any physiological change in the little boy, to signify that his death was imminent, and she knew that his parents were exhausted. And I thought, “Right, O.K!” And I went in and I counted the [boy’s] ‘resps’ [breaths] and nothing had changed, and I thought,
“Nothing’s changed!” And back I go to wake the mother. Marion also contacted the father who was sleeping in an adjacent motel. Her guide then told her to go back into the child’s room and watch what was about to unfold. She noticed that the little boy had turned blue and was grunting. The room temperature suddenly increased with the arrival of a large angel. The angel was standing behind this child as well, and as any other spiritual being, he looked fabulous. [The child] hopped out via his crown and he hopped, and he sat in his mother’s aura. Not even in her aura, in her core. And at that point in time, she stopped her crying, and said, “I will always love you, no matter where you are in the world.” And she literally took her hands and placed them on her heart. ... I’ve seen a connection like a horizontal connection, but I’ve never seen a - It wasn’t even an overlay, it was an integrated thing. ... And he hopped out [of his mother’s field] and I thought, ‘Wow!’ And he looked at the big angel and the big angel nodded, and he sat in his father’s core. And at that point, his father said, “Me too! You’re the best thing ever! I’ve been privileged to be your dad, and I’ll always be your dad.” All of this was said spontaneously as he integrated into them.

Marion noticed that the boy’s mother had turned a bright pink colour, and I thought it was a flush from tears and the warmth in the room, but the bright pink began to glow, she began to radiate. Marion then perceived that the child’s spirit, who appeared to be very happy, hopped out of his parents’ energy fields, and returned to the angel, who had made a platform with his arms for the child to sit on.

Marion’s attention returned to the physical world and realizing that the child’s physical death was imminent, she encouraged his parents to cuddle him and lifted the child into his mother’s arms. But he needed a lot of support to move him, because he was almost gone energetically, so we gave him to his mother and his dad was there, and his dad had his feet, but his mum had him. Marion then felt a tremendous vibration in the room, and it wasn’t a thumping, it was a very refined feeling and it had a high pitched hum about it.

Her attention returned to the energetic realm and she noticed that the child’s solar plexus had opened and a column of light surrounded the central area of the child. The guardian angel, who had remained at the top of the bed, while his parents had him, now moved and while this white light, this column of light, surrounded pretty much the whole central area of the child.

Subthemes: Pre-death
Recognising presence of big angel as sign of energetic transition
Telepathically receiving a request from spiritual guide to awaken mother
Noticing an increase in room temperature coinciding with appearance of a big angel
Seeing the child’s spirit hop out of his crown chakra and integrate into parents’ energetic cores
Perceiving mother glowing and radiating bright pink in response to energetic presence of child
Seeing child sitting with angel
Feeling tremendous vibration as a very refined and high pitched hum
Seeing child’s solar plexus open and column of light surrounding his whole central area

Synopsis: Death

Marion realised that the child’s death was imminent when the angel began to move into the column of light. She recollected that, sure enough the big guardian angel then took him, took his hand and kind of helped move him out through this column of white light. And his mum said “He’s stopped breathing!” And I said, “Yes, I think his time has come to go.” And she said, “I’ll miss you, I’ll miss you.” And the crying started. Marion recalled They moved into the column... they hung there for a while, like minutes; ten, fifteen minutes, just hanging ... and his father had got very emotional and was hugging his mum, who was hugging the child, who was involved in this huge light, and the father and mum were part of it, and the energy stayed for a long time.

Subtheme: Death
Seeing guardian angel take child’s hand and help child’s spirit move out through column of white light at moment of death

Synopsis: Post-death

Marion saw that the energy column then folded and child and angel left, and the light column left with them in a kind of a formation, turning inside out, from the bottom up. Marion then saw that ‘the light’ was comprised of millions of angelic beings, who were keepers of the path to the spiritual world, who had opened and lined the pathway, like a guard of honour.

A short time after the child’s physical death, she noticed that there was like a physical glow energetically, like the physical glow, which exists about 8-10cms. And it’s a softness of energy around the body. It has no movement. It doesn’t flow. It dissipates, but there is no movement in it. It’s just kind of there. And that existed for a number of hours. Hours and hours and hours.
Marion then recalled children’s deaths that she had witnessed, where the energy gradually diminishes and completely dissipated after a few days. She also observed that some of the children, who choose to hang around a lot longer and continue to visit their parents energetically, and stay in the room that those parents often still think that their children are here. And often their children are. However, Marion perceived that the spirit often leaves when the parent leaves the room to undertake another task, and upon returning to the room, the parent will recognise that their child’s spirit has left, leaving only the body.

Subthemes: Post death
Seeing the guardian angel and child hang within the column of light for 15 minutes, enveloping parents
Seeing energy column fold up, turn inside out and leave in ‘formation’ as child and angel left
Seeing column of light comprised of millions of angelic beings, opening and lining pathway, like a guard of honour
Seeing soft physical glow of 8-10 cm surrounding body dissipating, not moving, remaining for many hours
Perceiving spirit stays in room with parents and leaves when parents leave room
Energetic glow, very close to body 4-6 hours, disappears within a few days
Observing people recognise that spirit has left, leaving only the body behind

Post-Script:

At the conclusion of the interview, Marion channelled guided information related to perimortality. She was told that, when the days go past, when the body decays, that’s when there is no energy surrounding the body and that every hospital (that has been blessed) has an angelic structure that is responsible for the healing. Moreover, regardless of cultural difference, that all people who die, are usually supported by that [angelic structure]. Her guides also said that some people get lost during transition. [They] get trapped between the worlds, and they often try to find their way back to either place that are familiar, places where light occurs; churches or hospitals, so they try to find their way to the glow to people who meditate, those sort of places, trying to find their way. Her spiritual guides concluded by stating that death cannot be predicted by assessing the state of the aura. In some instances … everyone thinks [death is] going to happen … and then they come back. They are surviving on angelic energy, in order to achieve, some of the things that they need to do. [This angelic energy is] almost like fuel for the body, for them to complete their contract.
Subthemes: Perimortality
Perceiving body decays when energy absent around body
Believing angelic structures exist in hospitals to facilitate healing and transition
Perceiving some spirits get lost during transition
Receiving channelled information that death cannot be predicted with auric reading
Perceiving that people survive on channelled angelic energy to complete life contracts

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Meghan

After undertaking extensive education in multiple medical specialities, Meghan’s lifelong psychic and healing abilities led her to a career change, to become a healer and teacher of her particular healing method.

Story One
Synopsis: Pre-death

In her first story, Meghan recalls witnessing her father’s death from heart failure. Meghan remembered that as she sat by Jim’s bedside, she recognized the energetic signatures of his brothers, who had come for him. She recalled, *I actually saw them in a different way, as if they were distant, but I knew that they were coming close.* Although Jim had lost consciousness, she perceived that he could still hear her and she alerted him to his brothers’ presence.

Subtheme: Pre-death
Recognising energetic signatures of spirits of dying person’s brothers in the room

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Synopsis - Death

Meghan was shocked when a moment after her father’s last breath, an enormous white spirit lifted out of his body. She reflected that *when people are spiritually engaged, the crown chakra appears as very white and it's that same white colour that composed my father’s spirit.* She remembered that the energetic body was about 25 percent taller and larger than Jimmy’s physical body, and *it sort of rolled out of the body and hovered beside the body for the moment, like standing beside himself, and stayed in that position as if standing on the floor.* Meghan recalled that *it was not formed, not recognisable; a white figure, not recognisable and not recognisable energetically.*

Subtheme: Death
Perceiving an enormous white spirit lifting upwards, out of the body

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Synopsis: Post-death

The spirit remained in the room for about five minutes without communicating with Meghan, before disappearing. Meghan summarized her experience by saying, what stunned me so dramatically was the whiteness and the purity of the spirit in a man who had been profoundly troubled all his life: profoundly troubled, heavily addicted, psychologically disordered and quite emotionally violent. And it was the purity of the spirit that shocked me so dramatically.

Subthemes: Post-death
Observing the spirit hovering beside the body, as if standing beside
Observing the spirit was unformed, not recognisable energetically
Observing the white purity of the spirit lifting out of a profoundly troubled man
Observing spirit remained in room for 5-6 minutes before disappearing

Story Two
Synopsis: Pre-death

In her second story, Meghan described an experience when her husband, also a healer, returned home, cradling a severely injured rabbit, which he had found tangled in barbed wire on their property. Meghan explained that, the rabbit’s head was lolling sideways. It was still alive. Its heart was beating fast and my first impression was of it being cradled incredibly lovingly, in Henry’s energy. And the animal’s shock and pain settling in that energy.

Meghan assessed the rabbit and noticed that its shock and pain were settling, in response to her husband, Henry’s healing energy. While Henry held the rabbit, Meghan gave it healing and recalled: I felt the pain in the animal’s energy. The energy was a bit hyper-expanded again by about 30% larger than I would normally expect it. There was that spiky kind of quality in the energy. And it was quite a white energy.

Subthemes: Pre-death
Perceiving the rabbit’s shock and pain settling in the healing energy
Feeling the pain in the animal’s energy
Perceiving expanded, spiky, white energy

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Death - Synopsis

As Meghan proceeded to give the little animal healing energy, she recalled that she had the intuitive sense that this was going to kill it or cure it. Not that the healing would kill it, but that the animal would go into transition or it would get better. The little animal decided to go; Meghan recalled that the rabbit’s energy then lifted out of its body. It seemed to lift straight up from its back, but between my two hands.

Subtheme: Death
Seeing the rabbit’s energy lift out of its body between the healer’s hands

Synopsis: Post-death

As the rabbit’s energy rose about a metre above its body, she followed the energy with her hands. And then it just slowly disappeared, as if I’d just passed it through the wall of an envelope into another dimension. Moved by her experience, Meghan continued, there was a very sacred sense of holding the spirit of this animal, which was the same, interestingly. The spirit of the animal as it was still alive, felt the same as it did when it actually lifted above and separated from the body ... And then, a definite sensation of it slipping through some article, as if through a membrane, from one dimension to another. Meghan drew a similarity with an experience that she had previously, in witnessing the transition of a pet guinea pig. She recalled her experience of the spirit lifting out of the guinea-pig’s body, leaving it empty and that which animated it, being present and remaining present, in a dimension separate from the body, for a short period of minutes, and then again transiting into another dimension.

Subthemes: Post-death
Following the rabbit’s spirit as it rose and slowly disappeared through the wall of an envelope into another dimension
Feeling that the spirit which animated the animal was the same spirit that separated from it in death

Story Three
Synopsis: Pre-death

In her third story, Meghan recalled seeing a young man, in his late thirties, who was referred to her for a psychiatric assessment, following his longstanding complaint of stomach pain, which had no apparent physical cause. After examining him physically, psychologically and energetically, she concluded that he had a physical pathology that had not been identified.
Meghan noticed on the three occasions that she saw him, that his chakras were much larger and wider than normal. *I assessed him energetically and I remember that his chakras were much larger and wider than normal and he came back to me twice more for assistance with the pain and the chakras had gotten wider and then he didn’t come back again. They were much wider than normal.*

She lost contact with the man, as he did not return for treatment. When his wife contacted her requesting a receipt, Meghan tentatively asked how her husband was. She recalled that the woman replied that he had died. Meghan elaborated; *she said that he had Linitis Plastica or Leather Bottle cancer of the stomach. It is cancer of the stomach, which occurs in between the two layers of the gastric lining. So, it hadn’t been found, but the man had cancer and in fact, what was happening was that the chakras were getting larger and larger as he was dying. The man was dying!*

Meghan, who also witnessed this pattern of increased activity and enlargement of the chakras in another elderly client prior to death, said *I saw this once another time a year later with an elderly woman whom I did see a number of weeks before her death, twice; maybe five weeks and then three weeks before her death. And again, this pattern of chakras, which were abnormally large and abnormally energetic. So, there would have been a pattern of shutdown from the illness. And the chakras; because (as you know), we scan the chakras and so there seems to be a process of preparation for death, which can occur. Certainly in these people, (it) occurred weeks prior to death, where the chakras get larger and larger and seem to be very active and taking in energy and exchanging energy in the energy field as part of the preparation for death.*

**Subthemes: Pre-death**

Seeing chakras larger and wider than normal on assessment

Realising a pattern of increased activity and enlargement of the chakras signified preparation for death

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**Synopsis: Death**

Meghan differentiated between what she observes of the chakras at death *This spirit [that moved out] is what animates the being. (During my father’s transition), you know when a snake sheds its skin? That’s what I see, just like ‘snakes’ skin’ of the chakra, but none of the animating energy, none of the dynamic energy [remains].*

**Subtheme: Death**

Perceiving the dynamic energy left the chakras during transition

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Synopsis: Post-death

As she reflected on the energetic changes that she observed in her father’s and other people’s deaths, Meghan commented that two layers of energy field stay with the body … It’s like a body doesn’t decompose immediately, so there is actually a separation, but I can’t tell you precisely where it is. I believe it to be somewhere in the layers of the physical etheric because in the system we use there are four layers; the physical, mental, emotional and spiritual. But within each of these layers are sub layers. So that there are at least two layers of the physical etheric that remains. And they hold the body together, but they do not last long … when the animating spirit is gone, they then begin to decay, decompose and the body follows that.

Subtheme: Post-death
Perceiving at least two layers of the physical etheric stay briefly with the body after death

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Story Four
Synopsis: Post-death

In her next story, Meghan recalled attending the funeral of her aunt, accompanied by her cousin, a healer, and her 10 year old psychic niece. All three saw their dead aunt standing beside her coffin during the service. Meghan described her vision of her aunt as much younger than at death, manifesting her soft, lively energy, and looking slightly bemused. She also perceived with irony that the theme of the service was life after death, and remarked, Because of the grief, nobody actually believed it - nobody actually believed it - and there was our aunt actually standing there looking at us!

As she concluded this story, Meghan remembered, while in the presence of her cousin, seeing her father, many years after his death. She recalled, he came as if from a distance towards us, was present with us, and then went back a distance. She remembered feeling an emotional rather than a verbal connection and said; the experience with my father was visual. I saw that as clearly as I see you.

Subthemes: Post-death
Seeing the spirit of the person standing beside her coffin
Seeing the apparition looking much younger and slightly bemused
Seeing an apparition of healer’s father coming from a distance, being present and going back into the distance

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Story Five

Synopsis: Pre-death

Meghan concluded her interview with a story of an acquaintance with terminal cancer. This woman had a great desire to live and Meghan visited her when she had been hospitalised with ascites, for palliative interventions. Meghan reflected that when I saw her in hospital; two things struck me, that her energy had become very fragile. And I felt very strongly, as we were working with her, and she did improve, and her energy was very thin, and her chakras were quite wide in her too, but they didn’t have a lot of energy. They had [become] large, and she was very thin and underneath it all [what] I could feel was, “This is far too much, it’s too much for you, you can’t hold on.” Meghan concluded that in fact, despite what she’d wished, that she was not going to maintain it. In fact, more deeply the truth was, that she was so tired, that she needed to let go.

Subthemes: Pre-death
Perceiving very thin, fragile, energy field and very wide chakras with diminished energy
Perceiving energy field strengthened with healing but the person was too tired to maintain it

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Miriam

Miriam came to her career as a Registered Nurse with well honed psychic and healing abilities, which she used throughout her career. She has published an academic text and continues to utilize her healing skills in her retirement.

Story One

Synopsis: Post-death

As a young student nurse, Miriam was supervising a coronary care unit in a country hospital with staff shortages. She was providing advice and support to a nurse in the adjacent ward, who had just returned to work after not practising for many years. Miriam was particularly concerned about a patient her colleague was nursing, who was ill with congestive heart failure. When she went to check on him, she described how she saw the absence of the energy field as a black void surrounding a person, who had been dead for some hours. She recollected; I had this torch and I snuck up to the bed and it was so black and there’s a part in me saying, that it wasn’t just because it was night. It was black! And still it was black, because what I was tuned into was the energy field.
Subthemes: Post-death
Perceiving absence of energy field as a black void surrounding a person, dead for some hours

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Story Two
Synopsis: Post-death

Miriam relates a story about going to see her dead brother, three days after he died in a motor cycle accident. The funeral parlour staff were reluctant to allow her to view his body, as it had just been released following an autopsy, and hadn’t been cleaned up. She persuaded them, however, saying that she was a nurse, had seen plenty of dead bodies and wanted some time alone with her brother. They hesitantly agreed to a viewing.

Miriam explained how she mistook the etheric body of her dead brother for his physical body, and how the characteristics of these bodies differed. When she first saw him his flesh was still alive, he was surrounded in light. Miriam returned to the funeral parlour with her parents the following day. To her dismay, part of her brother’s face had caved in and he looked worse than a piece of dead meat! Miriam explained that the conflicting experience was because she initially saw him with her inner sight or ‘third eye’. She recalled; in hindsight, what I think I saw was his etheric and I saw him in the second layer and not the first layer. And so I saw him how he was then and not how he was now.

Subthemes: Post-death
Mistaking the etheric body for physical body of dead person

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Story Three
Synopsis: Pre-death

In the third story, Miriam used her considerable experience working with the terminally ill to state that dying people begin to gather their energy between three to four days – and a couple of hours prior to death, before they leave for the last time. This phenomenon manifests physically, as feeling and looking absolutely splendidferous. Miriam referred to it as ‘the shines’. She illustrated this phenomenon with a description of her father’s appearance the day before he died.

Subtheme: Pre-death
Gathering of energy with corresponding appearance of wellness prior to death

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Miriam then continued to describe how, 48 hours after her father died, she was doing energy work with a group of people, when she was directed by an inner voice to look up, look up! Miriam saw what she perceived to be her father’s energy (of this particular incarnation), manifesting as a small ball of light merging with a larger ball of light, which she interpreted as his total energy from other incarnations.

Subtheme: Post-death
Being guided to look up and witness the merging of balls of light, following father’s death

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Story Four
Synopsis: Post-death

Miriam concluded this discussion by describing how she continues to connect with her father’s energy; she can feel her father comes to visit, because what you’re sensing ... what you’re feeling, not sensing is the energy pattern of that individual - no different, whether they are incarnate or not incarnate - and you know exactly who’s there. However, Miriam said that she was too bound in [her] own levels of grief to connect with her dead brother after he died, until she had resolved this grief 25 years later and he is now accessible to her.

Subthemes: Post-death
Connecting with an aspect of fathers energy after his death
Sensing father’s unique pattern of energy when he visits

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Story Five
Synopsis: Pre-death

In her last story, Miriam recollected an experience as a paediatric nurse, where for 22 months, she cared for a little girl, Ruby, whose condition had not been diagnosed during this time and who was deteriorating rapidly. During this time she had a cardiac arrest and was resuscitated. Following this incident, Ruby remained comatose for a month.

Miriam was with Ruby when she regained consciousness. She recalled that during that month she was out there floating. And I’d go to her body and I’d say “O.K., we're still out there. Then I came one night duty, and I had a look at her and I said, “Ah, we’re coming back!” And I sat beside her and in she came, in she came and ping, she was
awake! Miriam greeted Ruby and then said; *where have you been darling?* The little girl replied, “*Oh Miriam, it was so ‘boootiful’, I saw the lights and I crossed the water.*” Miriam remembered that Ruby then *reeled off [listed] every kid that had died around her over the past 16 months.*

Miriam remarked that when comatose, she could see that Ruby was *out of her body.* She explained, *what I get is a change in the light ... and there’s a light grid when you’re in and a light grid when you’re out.* To clarify, Miriam pointed towards her elderly mother, who was sitting in an adjoining room and said “I know when she’s in and out of her body and how much she’s in and out of her body. I can sense it, I can see it and I know it.

**Subthemes:** Pre-death
Acknowledging child’s experience of ‘other dimensions’ while comatose
Perceiving a change in ‘light grid’ denoting out of body experience

**Nick**

In the midst of a successful career related to the theatre, Nick had a near-death experience, which left him with highly developed psychic and healing abilities. This experience prompted a career change to that of healer and teacher. Nick teaches, has a healing practice and works in collaboration with medical practitioners, to assist terminally ill people with their transition.

**Synopsis: General observations**

Nick’s interview included a number of vignettes and general observations, which were based on his extensive experience working with dying people, and which he used to illustrate his perceptions. He began his interview with a brief description of a man, who he telepathically assessed during a phone conversation. He noticed that the man’s energy field was unusually active, which coincided with an increase in physical vitality. These phenomena signified to Nick that the man was energetically preparing to die. He explained, *I knew because of his energy field ... the energy changes and generally what changes before they pass over, is that their energy becomes very alive and it’s as if they’re well and fit and it’s absolutely spot on.* Nick observed that prior to death, a person’s energy field changes into a deep pink colour.

He also observed that as people are dying, there are generally a number of people in *spirit form*, who are waiting to help the dying person with their transition. He said; *the*
interesting thing about that is, you can walk into the room with the living people and there are all these other people around, waiting to help them cross over in spirit form. They’re almost as clear as a person on this plane is. There is a renaissance colour change with clothing. The clothing style is different. There could be many from a Victorian era to a modern era or from the 1800s and 1700s.

Subthemes: Pre-death
Perceiving an increase in vitality in field three weeks prior to death
Perceiving a deep pink colour in the energy field just prior to physical death
Perceiving companion spirits in the room prior to death
Seeing the form of spirit companions wearing clothing style befitting their period on earth

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Synopsis: Death

Nick perceived that at the moment of death, the colour of the energy field changes form pink to blue and the temperature also changes, signifying to Nick that the person [has] transmuted over to the other side. He observed that a fearful person’s energy field appears bright red as they are dying, and on the last breath, the field changes to pink. He recalled that even if there’s a lot of anger there … And even though they may die with fear in their eyes … When that last silence and then the lungs, “fffhhhh” (N makes expiration sound) you will see that change from red to a very soft pink.

Subtheme: Death
Perceiving colour change from pink to blue in energy field at moment of death
Perceiving that energy field of fearful people changes from deep red to soft pink at time of death
Perceiving temperature change in energy field signifying death

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Synopsis: Post Death

Nick made the observation of people who are fearful at death that, my experience with those people [is]; they don’t leave too readily. They don’t transmute too readily to the other side. And you will see them hanging around or being more present around the dead body, around the shell.

He observed that when they get to the other side, I see and feel that energy and they become alive again. After death Nick has noticed that these same spirits greet their
loved one on the other side and that although they retain their facial characteristics, the spirits lose their colour and, they’re virtually white.

Nick telepathically perceived that immediately following death, the person’s spirit is taken into a ‘waiting room’ where he or she undergoes preparation for further transitional experience. When describing the state and form that the person’s spirit takes after ‘crossing over’, Nick said, it’s clearer than clear, encased in this white light, and it’s very much alive.

Following death, the time that the energetic form of the person stays in the room, varies and depends on the people who are grieving. The form will last a lot longer, because the person, who has crossed over, doesn’t want to leave, because the family haven’t come to terms with the death. After the spirit leaves, Nick has perceived that the loved ones become more emotionally comfortable.

Nick has also observed that the energetic form of the person is present, at the funeral, often standing beside the coffin, and as the coffin disappears from view, the form seems to break away to nothing; [it] just goes into the atmosphere.

When Nick has alerted the loved ones that the dead person’s spirit has left, they often simultaneously express a strong sense of grief and relief. He noticed that following death, when they cross over you see the very same people greeting them on the other side ... and when they cross over, you see them in a different way too. They’re virtually white. So there is a ... it’s like a veil – white and they lose their colour ... however, they have exactly the same [facial characteristics]. Nick perceived that upon death the person’s spirit is physically picked up and carried to the other side by the attending spiritual visitors.

Subthemes: Post-death
Perceiving spirit of fearful people reluctant to leave their dead body
Perceiving client’s revived spirit after death
Perceiving a state of waiting and preparation following death
Perceiving a clear form encased in a white light following death
Being aware that client’s energy form leaves the room when loved ones come to terms with death
Seeing and feeling the return of the energetic form on the day of the funeral
Seeing the energetic form dissipating as the coffin disappears
Seeing the energetic form of the client standing beside the coffin at the funeral
Noticing relative’s grief and relief when the energetic form leaves
Perceiving the same spirits greeting the client following death
Noticing a change in colour of spirit companions after they cross over
Perceiving that spirit companions retain facial characteristics after crossing over
Perceiving that the person is picked up and carried to the other side

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Story One
Synopsis: Pre-death

In his first story, Nick recognised that his client had cancer and encouraged him to seek medical investigation, where his clairvoyant diagnosis of advanced prostate cancer was verified.

As his client’s disease progressed the bluey-purple colour of his energy field changed. Nick recalled that, this man went through various stages of colours like the rainbow, you know; and moods: his unhappiness, his sadness, his joy. We all go through this gamut of emotions and colour around us. And, bit by bit as it gets closer to the day, it becomes softer. You see the heart becomes softer. Nick also noticed that as he neared death, the man’s field became more dense and solid and made the observation: But when it comes to somebody crossing over, it becomes more definite and solid, as if it’s more a protection thing.

While telling this story, Nick observed that as many of his clients neared death, they telepathically saw non-physical beings. They start to see things and people think that they’re going mad, that they’re seeing fairies … No they’ve seen the angels, don’t worry! It’s spirit’s way of preparing them to see that on the other side. The dying person’s disclosure of these visions often resulted in negative reactions from loved ones and although the dying person did not respond verbally to suggestions that he or she was hallucinating, the response could be seen in his client’s energy field with its colour becoming solid. If, however, the response was affirming, the colour and density of the field would become softer. He reflected that, the only thing that responds is colour (of the field). If you say [to them], “Oh, don’t be stupid!” - It goes solid. If you say, “Oh, how were they [the angels] today?” - It just goes softer. Nick also observed that when a dying person was comatose, he or she remained highly responsive to carers’ non-verbal emotional states, with the energy field becoming more solid in density and colour, in reaction to negative states such as resentment or anger, whereas softening of density and colour occurred when the comatose person experienced a loving, gentle touch. He said, and the main thing is to be there; hold them, touch them, stroke their feet, their hands. They respond so beautifully, and you
don’t think they’re doing anything. When you see the colour change the minute you pick their hand up, you know - you know they feel it.

Subthemes: Pre-death
Clairvoyantly diagnosing that client has serious illness
Noticing the fading in colour and change in density of the energy field from solid to soft as illness progressed
Perceiving the dying clients’ progression to seeing non physical beings
Seeing client’s energy field respond to communication with visitors
Seeing the colour changes in comatose clients’ energy fields in response to verbal communication
Seeing colour of client’s energy field become solid and resistant in response to loved one’s anger
Perceiving the unconscious clients’ positive energetic response to gentle touch

Synopsis: Death

Nick remarked that when holding his clients’ hands as they die, he was aware of their energetic presence remaining in their hands after they have taken their last breath. He used the analogy of the elaborate movements of a Balinese dancer’s hands to describe the energetic movement in the chakras of a living person, and said when somebody crosses over, it’s like pulling the energy through - it’s like a dance, a Balinese dance. And once somebody crosses over, there’s this stillness. The hands [of the dancer] become still as the energy becomes still.

Subthemes: Death
Feeling the presence of energy at the moment of passing
Perceiving the changes in the chakras upon death

Synopsis: Post-death

After death, Nick perceives that the person’s energy leaves the body, dissipates and, There’s no longer anything in that body, there’s no colour, there’s’ nothing, only shell. Describing his experience of temperature changes in the room, following the death of different individuals Nick said, I felt somebody leave the room icy cold, and with others it’s gone [the spirit], with a warm breeze. Nick perceived that when the temperature becomes icy cold as a spirit vacates, the person has experienced some trauma in ‘crossing over.’
Subthemes: Post-death
Perceiving the energy field dissipate and leave the client following death
Noticing the differing temperatures as the spirit leaves the room

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Story Two
Synopsis: Post-death

In his final story, Nick described how a client, referred her husband to him for healing. Max had cancer, was sceptical of healing and very fearful of dying. After a distant healing session, Tom experienced an emotional transformation and acknowledged to Nick his readiness to die. The following night, Nick awoke in the early hours of the morning to the sight of fireworks and recognised that this was a message for him that Max had passed. Max’s death was verified with a phone call from his wife, who was surprised at precognition. She was delighted when Nick recalled his fireworks vision and told him that Max had loved fireworks and had ended every event that he managed with fireworks.

Nick summarized his experience of the uniqueness of each person’s death, when he said, *it’s very beautiful; it really is an amazing journey to have, and to see, and everyone is different.*

Subtheme: Post-death
Perceiving the client communicating with healer after death

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Phillip

As a child Phillip was involved in a natural disaster, which precipitated a near-death experience. As a result, he was left with very refined psychic abilities. Phillip has employed these abilities to teach, publish books on healing and run a healing practice.

Synopsis: Pre-death

As a prelude to his stories, Phillip described phenomena that indicate to him that a person is approaching death. He has noticed that the red ray of the emotional field, an *earthing vibration*, which he described as the ray of *will and purpose*, acting *like a magnet that brings us into consciousness*, becomes paler, more transparent, *watery in nature* and begins to fade. Phillip observed that as the red colour in the etheric aura diminishes in volume, it begins to fragment, and disappear *like a butterfly’s wing that has become knocked*. Corresponding changes then begin to occur in the astral body,
which also fragments and takes on a *confetti-like* appearance. When the fading of this energetic vibration reaches a critical mass, the remaining red energy suddenly rushes out, because the higher bodies of the person *literally have been told to withdraw*. At this stage, the dying person has reached a point of no return in their transition, where human intervention of any kind is inconsequential. Phillip noted that during this time, the energy withdraws from the bottom up the body, with the colours breaking up and looking like *little patches and dots of colour*, which then disappear. Phillip sees that at this stage of transition, the crown chakra, which he perceives as funnel shaped, opens up, appearing larger and clearer, *almost as if someone has hoovered it out and widened it*, signifying that the person is approaching death. He remarked, that as this phenomenon occurs, the dying person often has a late burst of energy and can be seen to look and feel quite well: He said that, *in their face they can actually appear slightly well*. *They often appear fairly buoyant ... Because the withdrawal is from bottom to top in a sense*. *So that you get a late burst of energy, before it finally leaves. And in most people, [although] you do get exceptions to that, the departure if you like, appears to be in that mode.*

**Subthemes: Pre-Death**
- Perceiving that changes colour in the emotional body indicate proximity to death
- Noticing the red colour in astral body becomes paler and more transparent as death approaches
- Observing the correspondence with colour change in the aura and the astral body
- Perceiving fragmentation and fading of red colour as a sign that higher bodies are withdrawing
- Perceiving irreversible withdrawal of colour up the body
- Describing perception of the funnel shape of the crown chakra
- Perceiving opening, and widening and clearing of the crown chakra as a sign of impending death
- Perceiving a late burst of energy shortly before dying
- Perceiving clarity of the crown chakra allows transition of consciousness

**Synopsis: Death**

Phillip considers that the chakras are inter-dimensional doorways and the opening and clarifying of the crown chakra, allows the consciousness to move through this chakra point. He believes that the transitioning person experiences this exit through the chakra, as if moving through a tunnel. He noted that most people he has observed exit through their crown chakra, particularly in a slow or tranquil death, or when a person
dies in their sleep. Conversely, he has also witnessed some people exiting from the physical body with their higher bodies moving up and leaving, near the heart chakra.

Subtheme: Death
Perceiving that some people exit from the physical body near the heart chakra

Story One
Synopsis: Pre-Death

Phillip then told a story of how, while watching a Dutch film of euthanasia, he was asked to use his psychic abilities, to observe the energetic changes that occurred as the person died. He was surprised to see that when they administered the injection, something started to happen around the solar plexus (of the person). It was a bit like a tornado effect, you know, these twisters, you see suddenly emerging over the fields of Arkansas, it looked a little bit like that and it was around the solar plexus ... there was a sense of turbulence about it, there was something that was going on that was being managed.

Subtheme: Pre-Death
Seeing turbulence around the solar plexus following administration of lethal injection

Synopsis: Death

Phillip recalled that it was not as clear as it could have been as a process, and it appeared that all the energies of this person, the higher light of this person, kind of evacuated almost through the solar plexus.

Subtheme: Death
Seeing the higher light of a person evacuating through the solar plexus following euthanasia

Synopsis: Post-death

Phillip interpreted this as the conflict between the intentions of the dying person’s higher self and the desires of his personality, during this person’s self imposed transition. He reflected that it was a bit odd, because afterwards, I got the impression that adjustment in that death afterwards may have been a bit more difficult for the higher self of the person (and) something else as well was that, there was an impression that there was a slight energy of conflict.
Subtheme: Post-death
Perceiving energy of conflict between the intentions of the higher self and the desires of the personality following euthanasia

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Story Two
Synopsis: Pre-death

Phillip recalled, in his second story, witnessing a motorcyclist hitting a bus and being knocked off his bike, like he’d been fired by a catapult. After hitting the bus, his higher bodies exited, looking like a partially inflated, bluey white parachute, which was still in contact with the edge of the body, by a chord connected to the solar plexus. The higher bodies immediately started to pull away from his physical body, demonstrating to Phillip that the man was unconscious, or if not, he would not have experienced any pain, as his higher bodies were disconnecting from his physical body.

Subthemes: Pre-death
Seeing the higher bodies leaving like a parachute before traumatic death
Seeing the energy field like a transparent bluey white parachute or hot air balloon before traumatic death
Seeing the energy field begin to pull away before traumatic death

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Synopsis: Death

Phillip recalled that the man then hit a car, and bounced off it, with an immediate detachment of his higher bodies. He also observed the crown chakra opening at this time and the energy exiting through this portal. There was a severing of the etheric energy from the body and as this occurred, (there was a) burst of golden light ... a flash, almost as if someone had taken a photograph. At this moment, Phillip knew that in spite of the administrations of witnesses to the accident, the man could not be saved, as he had died. He recalled when he saw the flare of golden light, (which he associates with the soul or higher self), he understood that at that point, the man’s soul had taken over and dictated the play of what was happening.

Subthemes: Death
Seeing the detachment of the etheric energy at the moment of traumatic death
Seeing a burst of golden light at the moment of traumatic death
Perceiving that the soul was in control of dying process
Seeing higher mental self departing via the crown chakra at moment of traumatic death

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Story Three
Synopsis: Pre-death

As a prelude to his next story, Phillip made a general observation that as people approach death, *they often see the souls* of dead relatives. He also observed that the dying person's communication with these beings is frequently mistaken for hallucinations. Phillip remembers that when his wife's grandfather was dying, *very slowly over one weekend*, he witnessed the presence of the man's brother and other entities by the bedside. Phillip realised that his death was imminent, when the dying man's crown became *very active* and he started to communicate with the 'souls' around the bed.

Subthemes: Pre-death
Perceiving the dying person communicating with dead relatives
Perceiving that departed souls project themselves in a recognisable form

Synopsis: Post-death

Phillip observed that souls who return to their loved ones prior to death, often project a recognisable form of themselves, which is usually a younger version of their physical body, than the one they had at death. He recalled seeing a *light form of some kind* through this projection of a physical body, which is *more like the aura than the physical self*. Phillip believes that this light form is how the *real self* looks after death.

He also stated that people who have left their body and then return to the earth plane in this manner, have auras that are *more shiny, more iridescent*, and are more metallic in appearance. He believes this to be so, because the mental body, which is now the observable aura, is the same colour as the emotional body, but of a higher frequency.

Phillip recalled seeing a *vibrant almost overwhelming light* appear around the higher bodies, when the astral and mental bodies pull away from the physical body at death. He believes this *metallic glow* to be the mental aspect of the person, becoming manifest during this stage of transition. With this shift of vibration, there is the beginning of a realisation of the non-accidental aspects of events in our evolutionary journey; an understanding of the bigger picture which brings with it a loss of fear.

Phillip observed a subtle bluish glow, *like a glow-worm*, surrounding the body of a person, a few days after physical death. He observed that this subtle glow is composed of *lots of little points of light joined together … which looks like a kind of dust*
breaking up, as the body itself starts to decompose and disperses into the general energy field. The intensity of this energetic glow is variable, and depends on the intensity of earth energy in the geographical place where the person dies. If the level of energy is high, the glow surrounding the body will be commensurably high and the body will decompose more slowly.

Soon after death, Phillip has noticed the presence of beings from the angelic kingdom, which he described as Undines, Devas and nature spirits around the person's body. He believes that these elementals are intelligent forces that help with the transportation of matter from one state to another. He recalled watching a post mortem where the energy body was still imprinted around the body. He mentioned that in the same way that the body is built via the energetic imprint of the meridians, he could see little dots of light, using the meridians as kind of roadways, to break up the structure following death.

Phillip then remarked that although the energetic dissolution (of the body) has been escalated with cremation, when he held an urn containing the cremated remains of someone he knew, he perceived the presence of the emotional component of the energetic field around the ashes.

Post Death: Subthemes

Seeing a light form through the soul’s projected form

Seeing metallic colours in the auras of people who have left their body following death

Seeing a vibrant, metallic almost overwhelming glow around the higher bodies that have pulled away from the person's body after death

Perceiving the mental glow in the higher bodies as the process of realisation of ‘a bigger picture’ and fearlessness, following death or near death experience

Perceiving a subtle bluish glow around the body following death

Perceiving the residual energy dispersing into the general energy field as the body starts to decompose

Seeing that the intensity of the glow around the body depends on the intensity of the Earth's energy

Awareness of entities around the body assisting in transportation of matter from one state to another

Seeing the breakdown of the body via energetic imprint of meridians around the physical body

Perceiving an energetic connection of the emotional body of the dead person with the cremated remains

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Rebecca

Rebecca is a Registered Nurse, who has worked as a clinician and teacher. During her career, Rebecca has undertaken numerous professional trainings in healing practice, which she has then taught in the academic domain.

Story One
Synopsis: Pre-death

In her first story, Rebecca recalled working with Jenny, who was dying of metastatic cancer of the kidneys. Eight weeks before she died, Rebecca placed her pendulum, which she used as an assessment tool, around the bottom of Jenny’s feet. Instead of it responding to the presence of energy, it remained still. When she placed her hand in Jenny’s field, Rebecca recalled, *you know when you’re expecting to feel something and you know when a balloon is blown up and it just keeps going. Well, that’s like when I put my hand in. It was drawing me in.*

As Rebecca continued to work with Jenny, she noticed that this absence of energy continued to move up her body and that Jenny’s body started to develop a particular odour, which is associated with someone who was dying. Initially dubious, Rebecca continued to do energy healing in the areas of Jenny’s body, where there was an absence of energy and realized that the energy healing was relieving pain in these areas.

As she continued to work with Jenny, Rebecca noticed that the marked energetic changes in Jenny’s lower body preceded any observable physical changes, such as cooling of her limbs. She also noticed that Jenny’s crown chakra had become larger and seemed *blown out.* Rebecca recalled that, *it came from the throat and went out from there. It was like the top three chakras were beginning to meld into one.*

During the year that Rebecca had worked with Jenny, prior to the terminal stage of her illness, she had noticed Jenny’s consistently compromised sacral and solar plexus chakras. As these chakras are associated with relationship issues, Jenny felt that her troubled relationship with her sister was causing this dysfunction. In the final weeks of her life, Jenny confided in Rebecca that she wanted to resolve some significant issues with her sister, before she died. After Jenny resolved some major issues with her sister, her energy started to move more quickly up her body and Jenny acknowledged that she was ambivalent about dying, because although she was ready to die, she would also like to *sit in the space* with her healed relationship. During this time,
Rebecca felt a non-physical presence and saw a shimmer standing in (Jenny's) chest area.

A week prior to Jenny's death, Rebecca observed that physical changes associated with dying became apparent, including the cooling of her feet. Whereas there was no perceivable movement of energy in her heart chakra, Rebecca felt that Jenny's heart was full and remembered spiritually she was satisfied with herself. She wasn't saying she wasn't advocating reincarnation, or anything else. She was saying that “I am satisfied with this life.” Rebecca performed her last ‘chakra spread’, then invoked a blessing and completed her healing work.

Late that night, Jenny's niece phoned Rebecca. She told her that Jenny was restless and in pain and requested that Rebecca visit and give her a healing. As she was doing the chakra spreads, Rebecca became aware that Jenny was leaving her body and re-entering it, as if she were exploring the non-physical realm. Rebecca recalled that she sort of looked up and there was sort of like these little wisps and I thought, “oh” and I think that [Jenny] just popped out for a little look see, then popped back in again. I saw the wisp go this way and the wisp go back again.

While Rebecca continued her healing, she perceived that Jenny, although comatose, was alert to what was happening to her body. It was like she was a witness to what was happening to her physical body, and my sense was there wasn't any physical pain. There was just this getting used to this change, whatever this change was.

Rebecca completed her healing and as she was leaving the room, she experienced a large wave of warmth permeating her body, and felt a sense of grace and thanks from Jenny. She recalled that it was like a “thank you,” if that makes sense not in that gratitude “oh, thank you for what you've done for me” but like one sister to another sister.

Subthemes: Pre-death
Noticing energetic changes shortly before death
Perceiving movement of energy field up the body
Detecting analgesic effect of healing on areas with no energy
Noticing energetic changes preceding physical changes
Noticing enlargement and merging of top three chakras
Noticing compromised sacral and solar plexus chakras associated with an unresolved interpersonal relationship
Becoming aware that resolution of relationship issues correlated with changes in energy field
Perceiving a standing, shimmering presence near the person
Sensing the beginning of physical changes a week before death
Sensing a fullness of the heart chakra
Sensing out of body explorations

Story Two
Synopsis: Pre-death

In her second story, Rebecca described a man, Tom, who was in severe pain, with terminal liver cancer and was experiencing great difficulty coming to terms with his illness. Tom had been prescribed high doses of analgesia, which was ineffective in controlling his pain. Consequently, he was extremely irritable. Tom was referred to Rebecca for energy healing, primarily to relieve his pain.

As she worked with him, Rebecca noticed that his energy field was drawn in tightly, towards his body as a protective strategy. When Rebecca brought her hands closer than two feet towards Tom’s body, his field would contract as a means of defence. Rebecca questioned him and Tom admitted that he was not comfortable having a woman treating him. However, as the healing treatments relieved his pain, Tom’s field relaxed a little, and Rebecca noticed that the energy was quite tight but it actually came in, except for around the liver area, where there was a great spike because of the amount of pain that he had. Rebecca described this spike as having a hard sharpness of fibreglass. She recalled that I did quite a number of different techniques, just to balance, so that his field needed to do whatever it needed to do and it was interesting that as the pain started to reduce, so the field started to relax little bit.

The two other areas which were most compromised were Tom’s heart and solar plexus areas. Things were starting to soften a bit, but the two areas that were most compromised were the solar plexus, and that makes perfect sense really, and the heart. ... The energy started to come up, but these areas just maintained their compromise.

As she continued to give him energy healing sessions, Rebecca observed that the energetic spike softened and Tom’s pain was relieved for 48 hour periods before returning.

Rebecca remembered that when she started working with Tom, he looked physically quite robust. However, after a frank discussion with his doctor regarding his poor prognosis, Tom deteriorated rapidly. As his illness progressed, Tom gained a
heightened awareness during his healing sessions and describing his experience said, “Well, it’s like somebody’s taking some water somehow and cleaning, you know, the gritty bits.” Rebecca perceived that Tom’s energy moved up his body as his physical condition deteriorated and softened as his difficult relationship with his daughter was resolved.

Subthemes: Pre-death
Noticing tightness, resistance and guarding in the energy field as protection
Observing the energy field relaxed with pain reduction
Noticing that the energy healing reduced pain
Perceiving energetic pain spike softened in response to healing
Perceiving compromised areas in the solar plexus and heart
Perceiving physical deterioration in response to hopeless prognosis
Becoming aware of patient’s heightened perception of energy healing
Perceiving energetic movement and softening in response to resolution of relationship

Synopsis: Death

On the final day, as Tom was dying, he was semiconscious with laboured breathing. Rebecca greeted him and commenced her healing. She observed, when I walked in there it was [a sense of] “I have to breathe it’s my job to breathe!” Anyway, as I did the ‘chakra spread’ and I came into the heart chakra and I came in really, really close, and spread it once and then twice and then on the third time (this was the first round) he took this great big deep breath and one side of his face smiled and he died. So it was like, I feel confident enough to let go now. Rebecca continued her healing until she finished her technique and as she continued working around his heart area, she saw out of the corner of her eye, what appeared to look like very fine star dust, exiting from the side of Tom’s heart chakra.

Subthemes: Death
Noticing energy healing around heart chakra facilitated easy death
Feeling fine stardust energy from heart chakra

Story Three
Synopsis: Pre-death

Rebecca described in her next story, a woman who was dying from a very virulent disease and who had sought healing to facilitate her transition. Justine had told Rebecca that her priority during this last period of her life was, sorting out disordered
relationships, and to have her chakras as clear as she could for the journey, because she realised that when there are blockages in the chakras, it makes the death process more uncomfortable for people.

A week before Justine died, Rebecca saw a six inch smokey haze covering her whole body. Rebecca said, it didn’t have that bluey grey colour particular to her etheric, which was a lovely bluey grey colour that was very strong. But this was a haze. When Rebecca placed her pendulum inside the haze to assess the state of Justine’s energy field, the pendulum did not register the presence of a field in the lower chakras.

In the final stages of Justine’s life, Rebecca became aware of angelic beings in the room, who directed Rebecca’s hands during the healing sessions. Rebecca realized that Justine’s knowledge and acceptance of energy healing allowed her to follow her guidance and said, working with someone who was in that space, I think, allowed me that freedom to go with the flow a lot more, [where usually] because of family [expectations], or because of the person’s [expectations], or because of the hospital, or whatever, I’d need to stick to healing touch techniques per se. So, that was quite a different experience working with her.

Subthemes: Pre-death
Perceiving a Smokey haze above the person
Noticing absence of lower chakras
Perceiving the presence of non–physical beings supporting and holding during transition
Perceiving guides directing energy healing
Recognising that the client’s acceptance facilitated intuitive healing

Story Four
Synopsis: Pre-death

In her next story, Rebecca and Helen, (also a healer) were asked to visit Mary, a 60 year old woman, who was dying in a hospital. Mary was very restless, picking at the bed clothes when they arrived, and they were asked to help settle her agitation. Rebecca placed her hand in Mary’s energy field and observed that Mary became more agitated, so she withdrew from her field, realizing that Mary was unable to tolerate the strength of her energy.

Rebecca perceived that Mary had agitated energy around her head and heart, which was just like this agitated energy around her head and around her heart. I felt this heaviness. She also noticed that Mary’s 10 years old grandson, Stephen, had a
particular energetic glow emanating from him, indicating to her that he would be a suitable surrogate healer. While supporting Stephen with their energy, Rebecca and Helen verbally guided him to do a technically simple healing technique on his grandmother’s feet. Rebecca saw the energy flowing from Stephen’s hands to his grandmother, like this golden honey coming through her field. Rebecca recalled that Mary’s agitation settled and she actually stopped plucking the bed sheets, and she died the next morning, quite comfortably.

Subthemes: Pre-death
Noticing that energy transference was too strong for the client
Perceiving agitated energy around client’s head and heaviness of heart
Perceiving the energy flowing from grandson’s hands and settling disturbed energy

Story Five
Synopsis: Pre-death

In the following story, Rebecca related how she was asked to assist a man who had been hospitalized and placed in an induced coma, following a car accident. When Rebecca entered the room, she felt guided to stay on the periphery of the person’s field and assess whether his higher self wanted her to give him a healing. Rebecca felt that the man’s field was disturbed because there were lot of things not right with the field, a whole lot of jagged edges. She remembered I had a sense that this person was already out of their body. She had difficulty contacting the man’s ‘soul’, but had a sense that he did not want a healing. And (the client was) just letting me know that there wasn’t anything that he really required, so I didn’t actually do anything. I mean ‘hands-on’ anything. But I got a sense that I was falling down a tunnel, falling! And you know it was just like this little whisper at the end, this little tiny whisper saying, “It’s alright, and you can go away.” Rebecca arranged with the disappointed relatives to review the man the next day. However, he died during the night.

Subthemes: Pre-death
Perceiving a disturbed energy field with a lot of jagged edges
Attempting to make contact with the client’s soul
Sensing that client’s consciousness had vacated the body

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Story Six
Synopsis: Pre-death

In this story, Rebecca remembered taking a supportive role during her father Frank’s terminal illness, by facilitating his understanding of his psycho-spiritual experiences. The day before he died, she visited him in hospital. Frank was sitting up in bed, in a very good mood. He told Rebecca that he had just had lunch with his brother Pete, who had died 15 years ago. Frank gave her details of the dinner he had enjoyed with his deceased brother. And he and I could talk about Pete, and those things. He had one brother alive, and he had quite a few brothers who were dead, but he didn’t remember them. He only remembered Pete. Rebecca felt that Frank had communicated with his brother as part of the preparation for his transition.

Subthemes: Pre-death
Perceiving father’s communication with dead brother prior to death

Rosa

Rosa was born seeing and hearing spirit and recalled that I’d see people who were sick and I’d say to my mother “Their light is not on!” Rosa’s parents discouraged disclosures such as these. However, in spite of this disapproval, her abilities continued to develop. She currently runs her own holistic healing centre, where she works as a healer and teacher.

Story One
Synopsis: Death

Rosa’s client [Theo] was an old man, who was terminally ill with cancer. She assessed him energetically and found that he was physically, emotionally and spiritually depleted. Rosa assisted him during the final months of his illness and continued to support him energetically in an intensive care unit, where he subsequently died from an embolism following surgery.

Rosa saw the light around Theo’s body, become energetically and physically, very bright. She perceived that the soul energy was very flowing, indicating to her that he was very spiritually integrated at the time of his death. Rosa said that at death, she often saw very small light from the heart, like a fairy light just gently move out of the body. Just gently move and there’s always been peace as this takes place and the person takes a deep breath and it will be one of “Thank God, finally.”
Subthemes: Death
Perceiving light around body became very bright, flowing and integrated at death
Perceiving the essence like a small fairy light move from the heart at death

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Synopsis: Post-death

After death, the light around the body dissipates. I see that fade. I just see it fade. It tends to become nothing. It doesn't go anywhere, it just fades … (It) possibly takes 30 seconds to fade and it just diffuses, becomes nothing.

Rosa was not present at this man’s death and she said, I left the hospital … but I was talking to him, coming home in the car. And then within two days, he came through clearly. He told me that he was with his mother; gave me his mother’s name. Things that I guess were proof for the family. He said to me about his daughter and about the man that was coming, and that she would marry. And, [the wedding] happened within six months and that was a surprise to us all.

Rosa has maintained an ongoing communication with Theo and continues to pass on information to his family, which is in turn, validated by them. Rosa further elaborated on her ability to communicate with the spirit following death and its benefits to bereaved relatives and friends. In these accounts, Rosa described her communication with the spirits of two people, shortly after their deaths. These spirits communicated information to her to be passed on to their friends or relatives. The specific nature of the information assisted the recipients to believe that the spirit of their loved one was still connected to them and had survived physical death.

On one occasion Rosa recalled, Last week, I was driving home. Now, she [Jess] lost her best friend [Alyson] from a heart attack, three months ago and [Alyson] was only 65. I'm driving up the hill from having a cup of coffee the other day, and this little voice said, “Hello.” I said, “Who are you?” She said, “I'm Alyson.” I said, “How are you going?” She said, “I want you to go to Larry and Jess, and tell Larry he's got to read those papers before he signs the contract.” And I thought, “Oh, what's she on about?” Rosa repeated what she had been told to Alyson and Larry. That's amazing! He said, “I'm just about to go to Hong Kong and I've got this contract and I was thinking, 'I think I'll get legal advice this time.”

Subthemes: Post-death
Perceiving the light around the body fades and diffuses 30 seconds after death
Feeling the presence of the spirit and communicating with it after death
Receiving unsolicited information to pass onto loved ones
Acting as a medium, relaying reconciling messages and warnings to family members

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Story Two
Synopsis: Pre-death

Rosa relates in her second story that she started to treat a young man, Daniel, who had cancer, but was in remission. She recalled that I started treating him, and I could feel through his body, that there were blocks in his energy field … and I asked them [his parents] to take him to the doctor please, and have another MRI, and they said, “Well, he’s in remission and everything’s fine.” When he went to the doctor, the doctor simply said, “Just give him a Panadol, he’s probably pulled a muscle surfing.” … I went into a little bit of fear, because I knew that the cancer had metastasised in other areas. I could feel it in his body. It was just a knowing, and I said to the family, “No, that’s not good enough! I want you to take him back and have a total body scan, regardless of what the doctor says. Please insist!” Daniel subsequently had an MRI and Rosa said, they’d found it in his pelvis, in his lung, in his brain, in his cervical [spine], in his knee. And the family went into total shock!

Daniel was given three weeks to live and in spite of his poor prognosis Rosa continued to work with him daily. When he was reviewed at a specialist unit, the family were elated as there was a marked improvement with no sign of the cancer in most areas. He still had some in the brain and a spot in the lung. Daniel’s prognosis was revised and he was given interventions including knee surgery. Soon after his surgery, Rosa remembered, once they had operated on the knee, it (the cancer) returned … And then something started to happen around the crown chakra, and his head actually formed a peak as a Buddha does, and there was a growth coming from his brain; I could see that. This energetic change coincided with the acceleration of his brain tumour.

Subthemes: Pre-death
Recognising blocks in energy field signified metastatic cancer
Working energetically to retard the spread of cancer
Noticing peak in crown chakra, coinciding with the growth of brain cancer

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Synopsis: Post-death

Rosa continued to give Daniel healing and remembered, I was on my way to him, and they phoned me, and said he had just gone, and could I go up and see him. So he was
in the room and he was standing there ... He was so clear and he was there to heal everyone else, and I said to him, “Are you O.K.?” and he said to me, “Just make sure they’re (the family are) O.K.” He remained there and I went back the next day and I could still feel his energy in the room, but the light had gone. I felt his essence remaining, when I went back the next day, to the room, and then, when he came out here [Rosa’s healing centre] ... I went on to do his funeral, the funeral was here at [my centre], he was laid out for people to see him ... He enjoyed being there and he was once again a very bright light in that room. I said to him, “How will I know to identify you in the future?” And he said, “Look to the sky.” And whenever he’s around, he always presents as a very bright orange sunset.

Rosa remembered that Daniel had helped her with some garden renovations during his illness. She recalled that the sky went orange and we took a photo. Sometime after his death, Daniel’s brother was married at Rosa’s Centre. Rosa felt that Daniel’s spirit was also present at the wedding and said, “If you’re here, give us a sunset!” And within 15 minutes, the whole sky changed to a beautiful orange sunset, and it was just so powerful and I just found it very hard to believe he could change it just like that, and I said to (my friend), “We haven’t had an orange sunset for many, many months, and he just did it on cue!”

Subthemes: Post-death
Communicating with spirit, standing, filling the room with light, soon after death
Perceiving absence of light but essence remaining in the room the day after death
Reappearance of bright light in room at the funeral
Communicating with spirit about future signs of his presence
Recognising a pre-ordained signal of spirit’s presence at brother’s wedding
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Summary

This process of analysis and interpretation was undertaken in order explicate the subtlety, depth and richness of dying and death, as it was witnessed by healers in their care of people undergoing this transition. van Manen (1997a) states that “what appears unspeakable or ineffable one moment may be captured, however incomplete, in language the next moment” (p.114). Bearing this in mind, the participants’ interview transcripts were closely examined and the themes or “structures of experience,” that were inherent in each story were identified (p.79). Some of the healers’ biographical details, such as the age range, years of experience and healing tradition, were
described in Table 6.1. However, to personalise and contextualise their accounts and to act as a prologue to their stories, each participant was briefly introduced. The ordering of stories and their related subthemes was determined by the pseudonym given to each participant and followed an alphabetical sequence.

A temporal structure was applied during the analysis, to identify the subthemes and subsequently the common themes, which relate to the temporal landmarks of perimortality. Accordingly, the perimortal process was divided into three parts: pre-death, death and post-death, to designate the relationship of a subtheme to a particular aspect of this transitional process. The term ‘perimortality’ was used to denote a perception of the perimortal process, which was general or all encompassing, rather than related to a particular aspect of it.

The amount of data gathered during the interviews was extensive. Consequently, it was not possible to include the unabridged accounts in this chapter. Therefore, each of participant’s stories was summarized and my voice was combined with theirs in each précis. These synopses provided the means to contextualize the healers’ experience and illuminate the subthemes that were embedded in each story. As the participants provided rich and diverse accounts of their perceptions of the perimortal process, I have elicited numerous themes from their anecdotes. These themes (designated sub-themes in this chapter) will be further examined and distilled in the next chapter, to identify the unifying themes of the perimortal process.
CHAPTER EIGHT

ANALYSIS AND INTERPRETATION: REVEALING THE PHENOMENON

Behind all words, the Unsayable stands;
And from that source alone, the Infinite
Crosses over to the gladness, and us -

Free of our bridges, Built with the stone of distinctions;
So that always, within each delight,
We gaze at what is purely single and joined.

Rilke (Hirshfield 1997, p.56)

van Manen (1997a) defines thematic analysis as a “process of recovering the theme or themes that are embodied and dramatized in the evolving meanings and imagery of the work” (p.78). This process was partially completed in Chapter Seven by reflectively reading the participants’ accounts of the perimortal process, to identify the themes embedded in their individual stories. In this chapter, this phenomenological practice is further refined, in order to retrieve and explicate the essential themes that best illuminate the process of perimortality, as perceived and described by all of the participants. It became apparent to me during this process of phenomenological reflection, that some themes that were identified in Chapter Seven were characteristically particular to one participant’s experience. Others, however, were reiterated in numerous participants’ stories. The phenomenon of perimortality, as perceived by the participants collectively, was revealed in three essential themes described as, Gathering-up, Giving-up and Enduring Consciousness.

This chapter aims to describe, Gathering-up, Giving-up and Enduring Consciousness “to navigate and explore” the phenomenon of perimortality. Exemplars from the participants’ stories will be provided as a means of validating the essential themes of the perimortal process. In some cases, the exemplars are protracted, because the stories have been kept intact intentionally to highlight the participants’ voices and the contexts of their experiences. Poetry and literature is also included with the aim of adding phenomenological depth and clarity to these descriptions.

van Manen (1997) states that phenomenology, “not unlike poetry is a poetizing project. It tries an incantative, evocative speaking, a primal telling wherein we aim to involve the
voice in an original singing of the world ... poetizing is thinking on original experience and is thus speaking in a more primal sense” (p.13). However, he clarifies this statement, claiming that a primary difference between poetry or literary narrative and phenomenology is that “literature or poetry (although based on life) leaves themes implicit ... whereas phenomenology attempts to systematically develop a certain narrative that explicates themes while remaining true to the universal quality or essence of a certain type of experience” (p.97). In this chapter, I have juxtaposed many of the stories with a short poem or poetic phrase to amplify both the implicit and explicit aspects of a thematic feature embedded within the participants’ accounts. By setting the thematic statements in relief in this manner I have endeavoured to reveal their “multi-dimensional and multi-layered” meaning, in order to illuminate the essence of the phenomenon (p.13).

To accomplish this poetizing process, I have used for the most part, but not exclusively, the Japanese poetry form, Haiku. This poetic form was chosen, as Haiku is not only succinct, and to my mind beautiful, but many of the poems chosen have been specifically written on the theme of perimortality. According to Hoffman (1986) with Haiku, “words are used like a few lines of ink in Japanese and Chinese landscapes, [to] emphasize the vastness of the scene” (p.22). The season often chosen in these poems is winter. Hoffman (1986) explained many Haiku poets’ predilection for depicting wintery scenes when he stated that “we cannot discern [a landscape’s] feature if an occasional point does not stand out against the snow, a point of colour that puts the white view in relief. It is at this point that the Haiku stands, through its significance, like that of the point in a drawing, lies in the grandeur of the surrounding scene.” Similarly, each representation of a theme chosen to explicate the essence of the phenomenon of perimortality stands out “like points of colour,” which taken together also emphasize the vastness and grandeur of this phenomenon.

**Gathering-up: Dying**

*Dying is a wild night and a new road*  
Emily Dickinson (Cooley, 2003, P 100)

The essential theme of ‘Gathering-up’ was described by the healers as a means of energetic and psycho-spiritual preparation before the dying person finally gives up the ghost at death. These changes were perceived as a movement of the energetic field up the body, with a corresponding enlargement of the higher chakras. These energetic changes were perceived to occur, in preparation for the evacuation of the spirit through
one of these interdimensional portals (most commonly, the crown) at death. This phenomenon often coincides with a sudden improvement in vitality or as one of the participants described it, a sudden burst of wellness in the dying person. Corresponding changes in colour, density and activity of the energetic bodies and energy field of the dying person were also perceived. Temporary out-of-body episodes, which were perceived as practice before the final and permanent evacuation of the consciousness principal at death, were also perceived during this time. The appearance of spiritual companions to gather-up and assist the dying person during the final stage of physical life was also recognized to be an aspect of this theme.

Feeling Well

As people approach death, there is an energetic and psychospiritual process, which can be best described as a Gathering-up of their energy in readiness for their transition. Although the subtle energetic changes are not perceptible to most people, the healers related how the physical correspondence of this preparation is often experienced or recognised as a sudden burst of wellness. This phenomenon is observed by both the person who is dying and/or those caring for him or her.

When assisting with Madeleine’s care as she was dying, Kelly recalled that Madeleine felt this sudden experience of vitality, and recalled that about four days before she left:

Madeleine] actually said to Bernadette on the quiet, ‘Do you think they’ve got it right, I feel so well?’

No sign in the cicada’s song
That it will soon be gone
Aki-No-Bo (Hoffmann, 1986, p.133)

Miriam explained that,

Some people begin like three or four days before they die and you hear people say, “Oh God, aren’t they looking well!” But I always get nervous about that; ‘the shines,’ I call it, and then some people do it like two hours before they go. They gather it and then they’re out ... She then described her father’s appearance shortly before he died, saying: He looked a million dollars, and my mother would go so far as to say, that she saw stars coming out of his head, and he died through the night of the next morning.

It lights up
as lightly as it fades:
    a firefly.
    Chine (Hoffmann, p.149)
Frances had a similar observation of a person for whom she cared as he was dying. She recollected:

_He just seemed a little brighter, if anything and thinking about it afterwards he was gathering himself up before he did go and that morning he did look a little bit brighter, a little bit clearer. Not quite as grey and I didn’t know how to interpret that; whether he was going to go that day, whether he was going to pick up a little bit before he went, or what. But the following twenty four hours he couldn’t speak and really lapsed. He couldn’t breathe and he passed about thirty six hours after we left._

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**Lightening flickers**
**Only in the north:**
The moon is overcast

_Amano Hachiro (Hoffmann, 1986, p.135)_

Nick made this reflection of his observation that his client was approaching death:

_I knew because of his energy field. When they’re very close to going (and I’m talking about weeks), it changes, ready for preparation to the point of living and death. There’s no line somehow, but there is a line, because the energy changes and generally what changes before they pass over, is that their energy becomes very alive and it’s as if they’re really well and fit and it’s absolutely spot on, It’s in pure joy!_

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**Although the wind**
Blows terribly here,
The moonlight also leaks
Between the roof planks
Of this ruined house

_Shikibu (Hirshfield, 1997, p.92)_

Phillip also observed this aspect of transition in the following way:

_You see this often in a hospice. When I’ve been in to visit people in the local hospice, oddly enough as that is happening, in their face they can actually appear slightly well. They often appear buoyant … Because the withdrawal [of energy] is from bottom to top in a sense. You know what I mean, so that you get a late burst of energy, before it finally leaves. And in most people, [although] you do get exceptions to that, the departure if you like, appears to be in that mode._

**Chakra Enlargement and Shift of Energy up the Body**

Philip’s reference to the withdrawal of energy from bottom to top is another common perception of this energetic ‘Gathering-up,’ in preparedness for the departure of the
higher bodies at death. The participants perceived that this phenomena is also evidenced by an increase of activity and enlargement in the higher chakras (particularly the crown chakra), and a corresponding movement of energy up the body, in preparation for evacuation of the higher bodies through one of inter-dimensional portals or chakras, which is most commonly the crown chakra.

Meghan revealed that when she saw her client,

*I assessed him energetically and I remember that his chakras were much larger and wider than normal and he came back to me twice more for assistance with the pain and the chakras had gotten wider and then he didn’t come back again. They were much wider than normal.*

Although she was not aware of the terminal nature of this man’s undiagnosed illness at the time, Meghan realized retrospectively what she was witnessing:

*The man had cancer and in fact, what was happening was that the chakras were getting larger and larger as he was dying. The man was dying! ... I saw this once another time a year later with an elderly woman whom I did see a number of weeks before her death, twice. Maybe five weeks and then three weeks before her death. And again, this pattern of abnormally large chakras, which were abnormally large and abnormally energetic. So, there would have been a pattern of shutdown from the illness. And the chakras; because as you know, we scan the chakras and so there seems to be a process of preparation for death, which can occur. Certainly in these people, (it) occurred weeks prior to death, where the chakras get larger and larger and seem to be very active and taking in energy and exchanging energy in the energy field as part of the preparation for death.*

While working with one of her clients, Rebecca observed a movement of energy field up the body and an enlargement and merging of top three chakras as her client was dying:

*What I noticed was this pattern, that each time I went to see her or every second time, the energy was further up the body. And, the second time I started asking questions [of her higher self] like, do I need to work in that area. But I got the answer that I still needed to work in that area even though, there wasn’t a lot happening energetically. The other thing that happened concurrently, was the crown chakra got bigger. I started to feel a little bit circumspect about working in that area because it was just seemed to be really blown out. But it was sort of like it came from the throat and sort of went out from there. So, it was like the top three chakras were beginning to meld into one.*
On another occasion, Rebecca noticed the changes in the dying person’s energy field:

*It started to come up her body. But that time when I visited, I put the pendulum below her feet and it was actually still and I actually put my hands in and it was actually like … you know when you’re expecting to feel something and you know when a balloon is blown up and it just keeps going. Well, that’s like when I put my hand in it was drawing me in.*

A green gourd
swells and swells and finally -
Clear autumn waters
Somaru (Hoffmann, 1986, P.323)

Kelly observed the movement of Madeleine’s energy as she was nearing death:

*She actually moved up her body and her… so her legs didn’t really exist anymore.*

Each day the absent grow
more numerous - tree branches
frozen
Ranseki (Hoffmann, 1986, p.259)

Kelly also observed a correlation between a change in a physiological pattern of respiration and its corresponding energetic function:

*The Cheyne-Stoking seemed to bring the energy into her body to leave … So there was this powerful experience of building the energy to leave … It takes energy to leave. It actually takes a lot of energy for some people to die.*

Julie corroborated this perception when she described the change in her father’s energy field as he was dying:

*I start to see their energy and when people are dying their energy field starts to shrink. But as they die, it shrinks and it kind of becomes more and more concentrated, around the upper body about the torso … So, not so much down in his feet at all, in that last day or two … And (Dad’s energy field was) more concentrated around the body, torso, head region and the edges weren’t too defined.*
Philip described his perception of this phenomenon in the following way:

And what is often a very clear sign [that a person is dying], (and I’ve known many clairvoyant [healers], who have worked with people in hospital, for example, who see this) is the crown centre almost opens up. It appears bigger and clearer, almost as if someone’s hoovered it out and widened it and that is a very fair sign that the person is approaching death. In one instance, I spotted it in someone who was walking around the town, here. She didn’t look very well, but she was walking around and it was perfectly obvious that she was not far from death; within weeks I would have thought, probably days. Whether she knew that or not, I don’t know. It’s almost like when somebody’s dying; you get this clarity in the crown chakra, allowing this point of transition. I think that is why when people die, this is the tunnel. It’s the consciousness moving through the charka point, in effect and we travel in consciousness through that and we do that when we sleep and all kinds of things.

Change in Colour and Density of the Field

The healers who witnessed a corresponding shift in the vibration of the energy field, perceived a change in its colour and density during this time of preparedness for finally “giving up the ghost.” These energetic changes have been described in terms of the person’s protective response to their physical and psychological experience during this period. This observation is expressed by Nick, who commented about the variable density of the energetic field, in response to the dying person’s emotional state:

If you see somebody in a coma, and you speak to them, you see the change in the colour. They respond to it. And everybody [people who can’t see the aura] thinks, ‘Oh, There’s no life in here!’ And they’re just waiting for them to die. You know, they [people who are dying] hear every word, every word that you have to say. And you see the change in the colour. And the more love you put into that being, the softer it becomes and it makes it much easier for that being to cross over. And if the anger is coming from the people [loved ones], who are mad because they’re leaving them, then the person who’s dying, also feels uncomfortable and become more solid in their
colour. It also protects them from crossing over. It delays slightly in some way. And in saying that, I don’t altogether believe what I’ve just said because when ‘the Boss’ is ready to take you, you go. But there is some resistance that goes on there. And that’s what I do see with people. And the main thing is to be there, hold them, touch them, stroke their feet, their hands. They respond so beautifully and you don’t think they’re doing anything. When you see the colour change the minute you pick their hand up… you know, you know they feel it.

Frances made these observations about the interrelationship between the colour and density of the energy field and the person’s emotional state:

[The colour was] mostly grey and brown, mostly browny – grey. He did in the last week; go through a lot of emotion. We had lots of really hard conversations with him about what he wanted done after he died. Because he realised after he couldn’t get out of bed that he wasn’t going to get up again, and that was really upsetting. And he was really, really upset about dying in someone else’s house. [We made it clear to him that] we’re perfectly O.K. with it, and once we had had that conversation, it was like around his chest wasn’t so grey as dark. And we had those conversations with him and his wife and he really wasn’t as dark across his throat and across the rest of him. He wasn’t quite as grey, not quite as heavy.

You work with what you are given,  
The red clay of grief,  
the black clay of stubbornness going on after  
Hirshfield (2002, p.12)

Rebecca shared this insight about a patient, whose physical and emotional pain were reflected in their energy field during the final weeks of their terminal illness:

The energy was quite tight, but it actually came in, except for around the liver area, where there was a great spike, because of the amount of pain that he had initially. It was interesting that the energy field started to come in, closer to the body. I was a little bit concerned about that from the point of view of his pain, because you know what that was doing, it was really pressing on that ‘spike’ area. I did quite a number of different techniques, just to balance, so that his field needed to do whatever it needed to do and it was interesting that as the pain started to reduce, so the field started to relax little bit. Well, to see someone in that amount of pain and assuming the energy field was pulled in because of the pain only, even though I thought resistance as soon as I went in there. That was a good lesson for me in that you know people can pull their field in as much as a defence, as protection.
A hand moves, and the fire’s whirling takes different shapes:

All things change when we do

Kukai (Mitchell, 1989, p.36)

The energy field is also gathered up, in response to the dying person’s general physiological deterioration and depletion of life force and it is perceived that the energy is closer to the body as it migrates up it, in preparation for evacuation of the higher bodies through the crown chakra at death.

As the energy moves up the body there is a colour change in the aura, which is described by Phillip who explained that changes of colour in the emotional body indicate proximity to death:

There are certain things when death is approaching particularly, that become apparent. One of them is, if we look at the colours in the aura first, or in the emotional field, which is the one that most clairvoyants see. Most psychics tend to have a vision of the astral body, because it’s the easiest one, at this stage in our awareness anyway. So, that’s what most clairvoyants tend to see. The key thing there really, is the change in the colours.

What tends to happen there is that certain colours begin to fade. You could see how the red ray … The red ray in the aura is the ray of will and purpose. It relates to the vibration that gets us to incarnate in to the first place. It actually acts like a kind of magnate to bring us into a consciousness. So the red ray is almost like the earthing vibration. It brings us down into planetary experience and so long as that it is fairly active, in some of its width from vermillion right through to crimson colour … When it is fairly active, the person is reasonably grounded and they stay alive and they function and so on … As death is approaching, that colour tends to become paler, and the reds become fainter so that you can see through them. They become more transparent. All the colours are transparent anyway, but they become even more transparent, slightly watery.

And if the colour begins to seriously diminish in volume in the aura, if you see it disappearing and thinning, it’s like a butterfly’s wing that has become knocked; the same thing starts to happen in the astral body. There is a kind of a critical mass point which I’ve never quite been able to work out, but there comes a point that once that energy of will to be, illustrated by the red fades to a certain point, it suddenly rushes out. So it’s almost like somebody pulls the plug out more fully, so the leak of colour, you get a rush of colour and that is when the higher bodies in the person literally have been told to withdraw.
And once that stage is reached, there’s absolutely nothing anyone could do to change it. You know, we could put lead weights on the higher bodies but they would still withdraw, because there is nothing we could do. And that is one of the clearest signals that any clairvoyant will see. The red light in the astral body begins to fade. It also fragments. You get a phenomenon. I was talking to a doctor about this yesterday. You get a phenomenon, which is a bit like confetti. It often happens in the colours and they break up into little patches before they completely disappear like little splotches and dots of colour ... And they almost appear to come up the aura, oddly enough away from the bottom, which is where they are placed and that is a sign that the higher bodies are leaving. But as I say, at that point nothing can be done and that is one of the easiest things to see.

I'm slipping, I'm slipping away
like sand
Slipping through fingers. All
my cells
Rilke (Barrows & Macey, 2005, p.87)

Nick also perceived this colour change just prior to death, reflecting the dying person’s psychospiritual state:

Then, just prior to crossing over, when that happens, there is a beautiful deep colour that surrounds them. It’s deep pink. It always comes into pink and that’s a very healing colour. The energy does change between people. You know somebody who’s in fear of passing over. You generally will see this very deep red … and there’s a lot of anger there and even though they may die with fear in their eyes, when that last silence and then the lungs, “fffhhhh” (makes expiration sound,) you will see that change from red to a very soft pink.

Suddenly the depths: the morning fresh,
But overcast. Wild honeysuckle,
Colours of dawn, all day
Borson (2004, p.57)

Frances made this observation of the energy field during this period of transition:

His energy seemed to shrink in a bit and I could really only determine an energy body six to eight inches around the body and that whole three weeks I didn’t see any change, because I’d look at him every day to see if he was going to be better or worse and physically, he’d have some really good days and physically he’d have some really bad days. I really didn’t see a great change in his energy body until about two days before I went away and that was four days before he died. And then, I don’t know how
to describe it really. It was - I knew he was going to die and it was like; was it going to be today? Was it going to be tomorrow? Was it going to be next week? Because his energy body around him hadn’t really changed and then around about four days before he did die, it suddenly shrunk in and you could still see an energy body around him but it was very muted and very slow to move. When you’re well, your energy moves out from you quite strongly, it’s vital, and it moves out and dissipates, from what I can see, into thin air, so to speak.

Paintings fading
In empty halls - silent, patient,
Willing to let go
Rilke (Barrows & Macey, 2005, p.1211)

Kelly described the change in a dying baby’s energy field, as the baby’s higher bodies prepared to depart:

There was also an inner energy aura, but the three bodies or the etheric, emotional and mental bodies weren’t there anymore. There was just an opaque colour. Then, we went in our vehicle down to meet the ambulance, and I know the baby was still alive, although it (the energy field) was starting to get whiter and whiter; all the colour on the baby was starting to get more opaque. Even around the body was starting to get more opaque.

Upon the lotus flower
Morning dew is
thinning out
Fuso (Hoffmann, 1986, p.165)

She also described the changes in colour and density of Madeleine’s energy field prior to death:

And there was a greying of her energy, which was very clear and when I observed her in the sixth week prior to her dying, there was a grey element over her body but it wasn’t disturbed in any way. It was almost like a coat, a blanket around her ... And then, there was a name for it, Cheyne-Stokes breathing started to happen and even then that grey blanket was still around her.

Chrysanthemums were yellow
or were white
Until the frost
Godo (Hoffmann, 1986, p.173)

Phillip saw the Gathering-up of a person’s higher bodies, moments before a traumatic death. He described his perception of seeing the higher bodies leaving like a
parachute and beginning to pull away from the physical body before traumatic death, but remaining attached to the physical body until death. This story also demonstrates the seamlessness of the transition process between these themes of Gathering-up and giving-up in this instance of sudden, traumatic death. He said:

*I have seen traumatic deaths where nonetheless … I mean I saw a chap knocked off a motorcycle on a busy road one day, and he died instantly as he hit the ground. And when I saw this chap, actually as his body hit this bus and he came off his motorbike like he’d been fired by a catapult and went up in the air almost loop the loop really. He hit a car and bounced off it. But before he hit the car, I was aware of the higher bodies leaving him, before he hit the car, like a parachute coming out of his physical body … In fact this is the other thing that is interesting. If ever you see people jumping out of windows in tall buildings, before the body ever hits the ground they’re out of it, before the body ever makes contact or, as it makes contact, out come the higher bodies.

It was all very quick, but the energy field looked like a transparent bluey white parachute, coming onto the edge of the body, but coming onto it because he was still alive. So, if you can imagine something around the solar plexus attached, to the physical body, with a chord or a line, and then around it is there’s a kind of whitish field, a transparent blue-whitish field. This is what it looked like and that’s the thing that I noticed and as that happened, I didn’t tune into his astral body, that was the thing that dominated my awareness, but it was like a parachute. It was quite odd, yes! It looked like a parachute or a balloon that was only partly inflated … It was kind of like a balloon, I’m just trying to visualise it again. You know you see a hot air balloon … Yes, it looked a little like that. And it rather began to pull away immediately (pause) so, by the time he hit the car, he was either unconscious or detached to such a point that there wouldn’t have been any real pain. The pain would have come had the body stayed connected, and he begun to regain consciousness.

Phillip’s story will be revisited to explicate the next theme of Giving-up in the next section of this chapter. His description and judgement that the victim of this accident had left his body at this stage of his transition and, therefore, would be unconsciousness and pain-free, is corroborated in literature. In the research discussed regarding NDE phenomena in Chapter Three, experiencers were reported to have undergone out-of-body (OBE) experiences during various physiological crises, such as cardiac arrest. This OBE phenomenon is also perceived by healers as a person nears death. I also had a personal experience of this phenomenon, when I was visited by my sister’s spirit, seven hours before her death. She was as clear to me as though she
had just walked through the door in her body and her expression was that of intense engagement with me.

Therefore, the OBE phenomenon is included in the essential theme of ‘Gathering-up’ as it is identified as the gathering of information regarding non-local aspects of consciousness, or of the post-mortal domain, prior to death. These experiences were perceived by the healers in a number of ways. For example, many participants observed that the dying person seemed to go through a number of ‘dress rehearsals’ prior to the final departure, by temporarily leaving his or her body. This means of moving in and out of the body was identified as a means of acquiring energetic and psycho-spiritual information. It was also perceived as a process for the dying person to rehearse for his or her final exit; the stage when giving up the physical body at death is permanent.

Out of Body Experiences

This process of gathering knowledge and courage is described by Miriam, who explained this process when she said,

Some people begin to gather their energy three or four days before they leave for the last time, because we witness the coming in and the going out and I think maybe for some people, that's to help them leave for the final time so that they're not frightened.

A water bird asleep,
Floats on the River
Between life and death
Robun (Hoffmann, 1986, p.262)

Ellen described an experience where she was visiting her critically ill friend and business partner in hospital, when she recognised that he had left his body. She explained:

[On Thursday], while talking with him, I felt that he was still actually in his body and present. On Friday, when I walked into the room, I felt very different. As I touched his arm and said, "Good morning Jimmy, it's Ellen," I distinctly heard his voice and felt his presence up in the north east corner of the room. He said, "Oh, I'm not down there, I am up here." It was weird. As I stood there with my hand on his arm, I could feel him up in that corner of the room.

This ability to leave the physical body when close to death was also perceived as a means of requesting assistance by Georgia, who recognized the disembodied
presence of her terminally ill ex-husband, requesting assistance with his transition. She recalled:

*His spirit would travel from [his home] to [my home] down … to me. And at night I’d wake up and his spirit would be standing beside the bed. [It appeared as] just a light form, but telepathically, it kept coming to me [and saying], “Please come and help me, I’m afraid.” Because he’d been an atheist and I had been spiritual. So in the end, I said to Luke, my husband, “Harry’s coming to me every night and waking me up in the night.” So, in the end I called his parents, who were living in [a large city] and I said, “Look mum, Harry is appearing to me every night and saying, ‘Please come and help me!’ I want you to ask him physically, verbally, ‘Is this right?’” And she went to him and he said yes he wanted me there.*

At night my sleep
Embraces the summer shadows
of my life
Oto (Hoffmann, 1986, p.253)

Rebecca sensed her client’s out of body explorations, during the final healing session before she died. She recalled:

*And at the same time that I had finished working with this lady, I’d done the final charka spread, and I said a blessing, because I didn’t think that I was going to be seeing her again, and I really had a strong sense of her spirit taking a little hop out and a little hop back in again, just as a little trial to see what it was like outside the body so to speak … So I did the last session with her.*

On a journey, ill:
My dream goes wandering
Over withered fields
Bash (Hoffmann, 1986, p.82)

Finally, Marion described an instance where she perceived the child’s spirit hop out of his crown chakra and integrate into his parents’ energetic cores as a means of gathering them up as a “heartfelt connection,” moments before he died:

*This child, the angel was standing behind this child as well, and as any other spiritual being, he looked fabulous. (The child) hopped out via his crown … And he hopped, and he sat in his mother’s aura. Not even in her aura, in her core. And at that point in time, she stopped her crying, and said, “I will always love you, no matter where you are in the world.” And she literally took her hands and placed them on her heart … And he sat in her. I’ve seen a connection like a horizontal connection, but I’ve never seen a – It*
wasn’t even an overlay, it was an integrated thing. And all the time, the big angel stood there holding hands out … and there were a moment that I was in awe of what happened. And he hopped out (of his mother’s field) and I thought, “Wow!” And he looked at the big angel, and the big angel nodded, and he sat in his father’s core. And at that point, his father said, “Me too! You’re the best thing ever and I’ve been privileged to be your dad, and I’ll always be your dad.” All of this was said spontaneously as he integrated into them. And I remember thinking, “Oh, that’s amazing!” And then the mother had gone bright pink, and I thought it was a flush from tears and the warmth in the room, but the bright pink began to glow, she began to radiate. All the time, I’m kind of between the worlds, so I have a telepathic opening to the big angel and a telepathic knowing to the child and a heartfelt connection with his parents, so it was quite amazing. He hopped out and went back to sit with the angel. And he was sitting with his angel, like you would do for a toddler. But the angel didn’t cuddle him; it was more like the angel made a platform with his arms and the child sat in there. And the child was ‘as happy as Larry’.

Gathering of Spirits

Another phenomenon that was perceived shortly before death is a gathering of spirits around the bedside. These spirits are usually identified as the person’s deceased relatives and friends. The spirits are perceived to communicate with and assist the dying person with their transition and to gather them up and at death, to accompany them into the next realm. The healers observed that these experiences gave the dying person courage and confidence to complete their transition. This phenomenon was described by Phillip, who said:

But, you know, the business of the dead-relative thing where, as people are approaching death, they start to talk about everyone who has died beforehand. That’s a very common phenomenon and where their brothers and sisters who have been dead for fifteen years and their great aunt or uncle, and I mean, you know, it is very common occurrence. Like, when my mother was dying, (pause) when my wife’s grandfather was dying, he was about eighty four and died very slowly over a weekend, and I think it was his brother and one or two people and you could see that his crown had become very active, there was extra movement there, and I said to my wife, “I think he’s going to pass.” And then he started [to talk] about his brother and various other people and you could quite clearly see their presence around the bed.

Sometimes, the awareness of spiritual presence of discarnate relatives and friends is recognised by the healer or those caring for the dying person. This ability is very
useful, as the healer is able to provide reassurance and comfort to the dying person, by informing him or her of their presence.

In this instance, Georgia described how she perceived the presence of spiritual companions at his bedside, and identified them to her dying friend, thus providing a sense of safety for him. She explained what occurred:

Anyhow, a few weeks later, he did give up cigarettes and a week later he vomited blood and he went down very quickly with cancer of the lung. So he hung in and hung in, and I felt that there was a little bit of fear of dying, so when I started to tell him the names of the relatives and friends in spirit, who were there to meet him, I could see him separating more rapidly, because there was this sense of ‘I’m safe’; like a child, who feels safe when there are parents to take them home ... I actually saw his life force starting to separate.

Meghan also described how she recognised the spirits of her dying father’s brothers in the room and brought her father’s attention to their presence, to comfort him. She said:

If I recall the actual process of death itself, as he lost consciousness, he slumped and his head went to his chest. His breathing slowed. It had been much laboured, because of the cardiac failure, but I was very aware that he could still hear me and I was more aware of that energetically, than I was physically. I was also aware of the presence of his two brothers, in spirit, close to him, I spoke to him, and said to be aware of George and Terry, and that they had come for him. I felt them, and saw them on internal vision. I did not see them externally with my physical sight, but I recognised the signature of their energies. I actually saw them in a different way as if they were distant, but I knew that they were coming close.

Although this experience is transforming for the dying person, these experiences are often misunderstood by relatives or medical staff. Nick, who often witnessed this phenomenon, explained:

And you see they [terminally ill people] start to see things and people think that they’re going mad, that they’re seeing fairies … No, they’ve seen the angels, don’t worry! It’s spirit’s way of preparing them to see that on the other side.

Like a great reassurance
A deep calm in the heart
A presence
Nick then described what he often sees when he enters a room of a dying person:

... But going back to before they die, the interesting thing about that is, you can walk into the room with the living people and there are all these other people [in spirit form] around, waiting to help them cross over in spirit form. [These people have a physical form]. They’re almost as clear as a person on this plane. There is a renaissance colour change with clothing. The clothing style is different. There could be many from a Victorian era to a modern era or from the eighteen hundreds and seventeen hundreds ...

Summary

The healers’ perceptions of the theme ‘Gathering-up’ revealed a preparatory phase for death, which manifested in a number of ways. The energy field was perceived to migrate up the body with a corresponding enlargement of the top chakras, particularly the crown, in preparation for ‘Giving-up’ the higher bodies and vacation of the spirit, usually through the crown, at death. These energetic changes corresponded with a sudden but transient improvement in the dying person’s vitality. During this preparatory phase, changes in the colour, density and activity of the energy field and the chakras were observed. Transient out-of-body episodes were observed and perceived as a means of gathering experience prior to finally giving up of the spirit at death. The final manifestation of Gathering-up was the visitation of spiritual companions as the person was dying. These spiritual entities were perceived to be either deceased relatives and friends or angelic beings, who communicated with and assisted the dying person during this stage of transition.

Dante’s verse summarizes the labour of Gathering-up and it takes us to the next phase of perimortality:

This mountain of release is such that the
Ascent’s more painful at the start, below;
The more you rise, the milder it will be.
And when the slope feels gentle to the point that
climbing up sheer rock is effortless
As though you were gliding downstream in a boat,
Then you will have arrived where this path ends.
Dante (Mitchell, 1989, p.67)
Giving--up: Death

Time to go...
They say the journey is a long one:
change of robes
Rashu (Hoffmann, 1986, p.267)

Death is the climactic experience of the perimortal process; certainly for the witness and probably for the experient. The most evocative aspect of this study’s title is “Giving up the Ghost”. This phrase refers to surrender of the spirit at death. The provenance of this quotation is Biblical, and its age alludes to the long held belief within Western culture, that at death, there is a separation; a Giving-up of the non-material aspects of a person to a non-visible and unknown domain. Giving-up is the second of the essential themes of the perimortal process, describing the death phase. Many participants captured the evocative aspect of this theme in their descriptions of moments of death.

There is a seamless transition between each phase of the perimortal process. However, there are climactic moments, which act as sign posts for a transition from one stage of the perimortal process to the next, as well as crossover points, which sit between the gathering-up phase and the Giving-up phase of the perimortal process. One such instance is expressed by Phillip, who captured these moments of ‘Gathering-up’ and then ‘Giving-up’ the higher bodies at death, in his detailed description of a man’s death from a motor-vehicle accident. The metaphysical aspect of Phillip’s description the dying man’s spirit is reiterated by the poet Rilke’s phrase: “being flung into brightness into the intimate skies” (Mitchell, 1989, p.136).

In the gathering--up phase of this transition where he described the prelude to the motorcyclist’s traumatic death, Phillip commented:

... And the energy field which looked like a transparent bluey white parachute, coming onto the edge of the body, but coming onto it, because he was still alive.

In the following narrative, Phillip continued his story. Because of the speed in which this accident and consequent death occurred, Phillip’s description of the energetic process of and Giving-up was accelerated and could be observed as one continuous process, other than the milestones marking the two phases. He described seeing the detachment of the etheric energy at the moment of traumatic death, seeing a burst of golden light at the moment of traumatic death and seeing the higher mental self departing via the crown chakra after traumatic death. The sequential detachment of the higher bodies in this account is reminiscent of Ransetsu’s verse:
Phillip recalled these events:

And then what happened, he hit the car and then he bounced off this car. He must have died as he bounced off this car, because as he hit the car, there was an immediate detachment by this sort of bluey, whitishness ... At that point there was a severing of the etheric energy from the body and at that point he was dying, you know it was finished ... And as this happened, the one thing I do remember, is there was a burst of golden light. It was almost as if someone had taken a photograph, and there was a flash and there was this golden, there was a range of golden light; I'll put it like that. I knew at that point he was dead. So he died before he hit the road. Then he hit the road and you know, they were doing all sorts of things but whatever they did it was too late. The guy had left ... But it was this big balloon thing that I remember and this flash of golden light. But what interested me was that at what must have been the point of death, there was this golden light, and golden light I always associate with the soul or the higher self or the spiritual dimension and it was almost as if at that point the soul took over completely and dictated the play of what was happening. The only other thing I remember is that I was also aware of the crown chakra opening out, so although the energy seemed to rip away from the solar plexus, its actual departure was via the crown chakra. And that was a fairly traumatic situation, it all happened in a matter of seconds. And as I talk to you I can actually see it as if it was a video and his actual exit was via the crown chakra, his higher mental self withdrew via the crown centre.

Would not, from all the borders of itself, 
Burst like a star: from here there is no place 
That does not see you... 
Rilke (Hirshfield, 1997, p.52)

By way of clarification regarding which interdimensional portal or chakra the higher bodies exit from at death, Phillip later remarked:

It would seem to me these days, most people seem to come out that way [through the crown chakra] and particularly in a slow death. You know, in a more tranquil death or a death in sleep it seems to me from what I've looked at that that is the route out. But there do seem to be exceptions to that. Sometimes, some people seem to exit from the physical body. The higher bodies seem to move up from the physical body near to the heart centre. Now, why people do that I don't know. I can't give you any reasonable explanation for it.
When her horse died, Helene also observed that his spirit exited from his crown chakra. She recalled:

You know when my horse died; I could see her spirit leaving. It was just unbelievable! [Her spirit left], through the head you know, and there was before this - the helpers [spiritual assistants] had come to facilitate [her death]. They were already there [and there] was a change, from when I was aware that she would die. The first ten hours, I thought that she would survive, but then I was - or no, it was longer than that. I would say the first eighteen hours, we thought she would not die, and there was this incredible peace, between her and all the horse people there, who were very intuitive, you know.

It was about four hours before I realised, that there was no change, and she would not stay in the body, because the body had a tumour or something. And then, we invoked the helpers to facilitate her death. And after making an invocation for a peaceful death, it started to happen automatically, and there was this amazing strength in her and in everyone, and there was already a change somehow. And then, there was this big cone of light, just coming out and setting her free. And the separation of the soul aspect of the body and the soul aspect of that horse - It was interesting and very cathartic. It was interesting, because [there was] an amazing peace in the [horse’s] body and you could still feel the chemistry doing its own energetic thing - you know, the sugars still - the body chemistry - and there was a period of about an hour, because she still had the bridle on. We were not allowed [to disturb her]. I sat with my son there. He came, we were sitting there, witnessing and grieving, and letting go, and we couldn’t touch her, so it was like she was just lying there still. It was this separation process going for about an hour, and then we could take the bridle off after about an hour. I learned a lot about being with death, with that horse. It is such a gift for me to be involved and you know, it is the transition of shedding of body. I mean, it doesn’t matter about whether it is a guinea pig, or if it’s a horse, or if it’s a human being. We have so separated our bodily existence from anyone else and think that we are different [from other life forms]. Forget it!

Every being in the universe  
Is an expression of the Tao...  
The Tao gives birth to all beings,  
Nourishes them, maintains them,  
Cares for them, comforts them, protects them,  
Takes them back to itself.  
Lao-Tzu (Mitchell, 1989, p, 13)
Kelly’s experience was similar, as she perceived that Madeleine’s spirit evacuated through her crown chakra when she died:

_I knew she was passing and it was going to be very sudden, that was the unusual thing. I knew it was going to be very sudden, so I aroused everybody, because some people were sleeping, some people were in the waiting area, so I pulled everybody in, we stood holding hands around her bed … and then she vacated incredibly quickly out the top of her head._

This transition is also described by Kelly, who recalled the final minutes and subsequent death of Sophie, a two week old baby:

_So we were in the vehicle, rushing down to meet the ambulance, and every time we breathed into the baby, it would respond with this blue and red [in her energy field], but we were failing in the process. We started to know that it was almost like - it was hopeless. We felt helpless - we’re not saving the baby, but [we thought], “let’s get to the ambulance”. You know, that was our rescue. We met the ambulance, about half way down the hill. I won’t say where we were, but yeah, we were going towards the town, and we were half way down the hill. We met the ambulance and we were still doing mouth-to-mouth. We gave the baby over to the ambulance driver and as soon as the mother let go of the baby, there was what I could only describe as white smoke left the baby’s head and I knew that the baby had died._

_And the ambulance driver put the baby on the - I guess it was like an area near where he was sitting; it was like a little sitting place. He just put the baby there and he didn’t continue to do mouth-to-mouth. He didn’t say the baby was dead, he said that if we brought the baby back from here, it would definitely have some mental incapacity. Basically, he made a decision, I think, at that point, not to bring the baby back, and I feel, that all of us let go. And the baby had left, but hadn’t completed the leaving process. And when he said that, it was like, everyone gave up. It was like this was like the voice of authority, and who wants a baby that you know, is mentally handicapped? So, the baby was - I think that he may have put some oxygen over the baby, but not for very long; maybe less than a minute and then and now, looking at the baby; if I look back at the baby, the energy had gone quite black. Actually, like as though she didn’t have an aura at all. I believe the baby was conscious of what was happening to her, but she could no longer get back in the body. So, I think at that point when it was black; it was very dark, I think, prior to that point, the baby could still have been resuscitated. I think that the baby couldn’t get back in the body, but the baby was present. Now, at that point, I can’t tell you anymore, because at that point; and this_
was really horrific; the baby was strapped in the ambulance and … She was put in the front of the ambulance and the baby was taken to the hospital and so, I can’t really say what happened anymore. That’s all I saw of the baby.

Griefunresisted as granite darkened by rain

Although the crown chakra is the most common exit portal at death, some healers have witnessed a movement of energy through other portals such as the heart or the solar plexus. Rosa recalled her experience:

I sometimes I see the essence move up and out … you know, from the heart … I’ve seen just a very small light from the heart, like a fairy light just gently move out of the body. Just gently move and there’s always been peace as this takes place and the person takes a deep breath and it will be one of “thank God, finally!” It’s that kind of feeling and a feeling of I’ve done what I’ve had to do. Even though they fight to the end to stay in that physical body, I see in that moment a let go and acceptance … [The light around the body] I see that fade. It tends to become … just nothing. It doesn’t go anywhere, it just fades … [It] possibly it takes thirty seconds to fade and it just diffuses, becomes nothing.

This climactic evacuation of the higher bodies, through one of the higher chakras, most commonly the crown, is reflected in Teikitsu’s verse:

Open the shutters
to the autumn typhoon -
herald from beyond.
Teikitsu (Hoffmann, 1986, p.323)

To add further clarity to the exit of the non-material aspects of the person at death via one of the chakras, Nick said:

[The chakras] are energy, so energy stops [as the person dies]. So when I look at your chakras, they’re swirls of energy, so whilst the life is there this is doing this business. It’s like a dance. (Nick gestures - using convoluted movements). And then, when somebody crosses over, it’s like pulling the energy through … It’s like a dance, a Balinese dance … The hands [of the dancer] become still as the energy becomes still. The energy stays, and then you feel the energy dissipate and there’s no longer anything in that body, there’s no colour, there’s nothing, only shell. And you know then, that that spirit, soul that was there a nano second ago has left … And sometimes it can leave the room immediately too.
This reference to the de-animated ‘shell’ by Nick is reminiscent of Fukaku’s verse:

Empty cicada shell:
  as we come
  we go back naked
Fukaku (Hoffmann, 1986, p.163)

Meghan also perceived the dynamic energy being given up and the deanimation of the chakras during this stage of transition. She recalled at her father’s death:

This [spirit that moved out] is what animates the being. [During my father’s transition], you know when a snake sheds its skin? That’s what I see, just like ‘snakes’ skin’ of the chakra, but none of the animating energy, none of the dynamic energy [remains].

The emptying of the chakras of their animating energy, described by Meghan as well as Nick’s description that once somebody crosses over, there’s this stillness, are both representative of the immediate sequel to death, often experienced by witnesses as a sudden cessation of movement; a silence. This experience calls to mind Dogen’s beautiful verse:

Midnight. No waves
  no wind, the empty boat
  is flooded with moonlight.
Dogen (Mitchell, 1989, p.49)

The theme Giving-up is perhaps more aptly described as ‘giving up the ghost’, as exemplified in the following accounts. It is perceived in such descriptive terms as a white spirit or luminous blanket or white smoke and the means of departure as lifting out of the body, or drifting off the body. These descriptions of the spirit that leaves the body at death (particularly Meaghan’s following account of her father’s spirit), are evocative of poet, Mary Oliver’s verse:

To be more than pure light
  that burns
  where no one is
Oliver (1986, p.36)

The following description is Meghan’s account of her father’s death:

His breathing had definitely slowed and then stopped, and then, as well as I can recall, because this was fourteen years ago now. I recall the next piece dramatically, because his breathing stopped, and then there was a pause. But it was only a matter of minutes, but I can’t tell you how long that was. The next thing I remember totally clearly, is this enormous white spirit lifting out of him; upwards … it just lifted upwards
out of his body. I was so shocked; I didn’t see which channel it lifted through. I was so shocked to see this enormous white body lifting out of this man. My jaw was on the floor, and I said, “How on earth could that get in there?” … [It was] definitely taller and larger, by about twenty five percent … [It was] above, behind and slightly to the side. It sort of rolled out of the body and hovered beside the body for the moment, like standing beside himself, and stayed in that position, as if standing on the floor. [The spirit] was not formed, not recognisable, a white figure, not recognisable and not recognisable energetically. [It was] the only time my jaw was literally on the floor.

It was - my sense of it was that it was larger than the physical body, not by much, maybe by a quarter … But what stunned me so dramatically was the whiteness and the purity of the spirit in a man who had been profoundly troubled all his life, profoundly troubled, heavily addicted, psychologically disordered and quite emotionally violent. And it was the purity of the spirit that shocked me so dramatically and made me think of what some of the teachers talk about, that it is only those who profoundly love you who will profoundly challenge you … When people are spiritually well engaged, the crown chakra appears as very white, and it’s that same white colour that composed my father’s spirit. That was what I found so shocking. Because, psychologically and emotionally, this man was very disordered! But yet, that was what my shock was, my sense was the difference, and that was, “How did that fit in there?” It wasn’t the physical size, it was a spiritual size. Somewhere in me registered the spiritual positivity, in the being that I was looking at. But to me, my small incarnate mind was at gross variance with my experience of the being. So, it’s certainly not something that I could have psychologically projected. It shocked the socks off me!

But that was my experience and it stayed in the room, it didn’t communicate with me, it just stayed present for maybe five or six minutes and then it just disappeared. It just seemed not to be there, I don’t remember the process of disappearing I’m afraid, but it seemed not to be there.

A hand turned upwards holds only a single unanswerable question.
(Hirshfield 2002, p.9)

Giving up the spirit at death was also witnessed in non-human beings and the descriptions reflect the ancient proclamation of the Upanishads:

Self is everywhere, shining forth from all beings,
vaster than the vast, subtler than the most subtle,
unreachable, yet nearer than breath than the most subtle,
Unreachable, yet nearer than breath, than heartbeat.
Mundaka Upanishad (Mitchell, 1989, p. xv)
Meghan witnessed this phenomenon when she and her husband were assisting a critically injured rabbit. She recalled that just prior to the rabbit’s death:

*It seemed to be hovering, making a decision for a while and then it decided to go. And I was very touched by what happened next. The animal's energy lifted out of its body. It seemed to lift straight up from its back, but between my two hands. And my hands just followed, as we would in the way that we’ve looked at together, and I just followed it up and it rose about a metre above the body and it moved to the right and then it just slowly disappeared, as if I’d just passed it through the wall of an envelope into another dimension. The energy just disappeared out of my hands and I had the sense that it had slipped out of one membrane, into another and there was a very sacred sense of holding the spirit of this animal which was the same, interestingly … The spirit of the animal as it was still alive felt the same as it did when it actually lifted above and separated from the body. So there was no difference in these two things, when it actually went through. And then, a definite sensation of it slipping through some article, as if through a membrane, from one dimension to another. There’s the early story I told to you about an animal, about the guinea pig, which died and again a huge sense of the thing lifting out of the body and of the body then being empty of that which animated it, and that which animated it, being present and separate from the body. And then of that which animated it, being present and remaining present, in a dimension separate from the body for a short period of minutes and then again transiting into another dimension.*

* A shadow opened then folded behind her  
I followed as if past a gate latch  
Sliding closed on its own silent weight  
Hirshfield (2006, p.15)  

Georgia recalled a similar experience when her beloved horse Feldspar collapsed and died:

*So I had him in the paddock across the road and I used to take him bread and bananas and he used to love that and he’d whiney and he would talk to me. He was a beautiful big fellow with ginger and white markings on his forehead. So I said, “Feldspar!” and he came up to me, and he went a bit shaky on his legs. So the next minute, he toppled over, and I went, and put his head on my knee and said, “Feldspar, what’s the matter, boy?” And it came to me telepathically, “I’ve had a heart attack, and I’m leaving my body”. [Then], I just saw with him, the life force just drift away, like a luminous blanket drifting off the body and just “whist” away.*
Perhaps the most mystical depictions of giving up the spirit were two accounts of death given by Marion. The following is a description of a little boy who died suddenly, soon after a healing Marion had performed on him, under the direction of an angelic being. After the little boy was diagnosed as clinically dead, Marion remembered seeing the little boy surrendering his spirit to the angel who was guiding his transition and the ever diminishing energetic connection between this child and his mother:

I wrote down another measurement and all of a sudden, the alarm started going. I thought, “Oh my God! Oh, no!” And a nurse came over and said, “He’s coning!” and I’m thinking, “What’s happening here?” And the angel had the boy with him, the boy’s spirit beside him. And I’m just looking and I’m thinking “What’s happening here?” Then all of a sudden, he was bradycardic. We were pumping drugs in, and they said, “We think he’s coned, he’s dead.” ... And I remember after he was brain dead and I remember as the hours went on, watching his energy fields diminish, and watching his mother, (pause) the connection. She was so desperately trying to hang on. It was an unravelling, but it was diminishing in the amount of energy going from him to her. It was like the connection was there, but the energy flowing to it had dissipated.

In Marion’s second story she describes the transition of another little boy:

And when I looked back or somehow or other watched what that was, (because it was almost like I had moved back to the physical, to give him to his mother), I had to get back to where that is; that energetic place. And what happened was, I watched and the solar plexus in him had opened and there was the light, and thank God there was ‘the light’, because I always wanted to see it. And it was huge! And a doctor walked in, and said, “How are things?” And I said, ‘They’re OK.’ And he said, “It’s awfully hot in here!” and I’m thinking, “Yeah, Yeah, it’s awfully hot!” And it was the most amazing thing! The guardian angel, who had remained at the top of the bed, while his parents had him, now moved and while this white light, this column of light, surrounded pretty much the whole central area of the child.
The big guardian angel began to move into that column. At that point his parents began crying, and I thought, “I think he’s going.” And I think this is what this is. And sure enough the big guardian angel then took him, took his hand and kind of helped move him out through this column of white light. And his mum said “He’s stopped breathing!” And I said, “Yes, I think his time has come to go.” And she said, “I’ll miss you, I’ll miss you.” And the crying started. And I remember thinking, “Oh my goodness!” And they didn’t go. They moved into the column and you’d imagine go, go. And they hung there for a while, like minutes; ten, fifteen minutes, just hanging. But he had clearly left his body and there were no respirations, and whilst I didn’t take his pulse, it was quite clear that he had stopped breathing, and his father had got very emotional and was hugging his mum, who was hugging the child, who was involved in this huge light, and the father and mum were part of it, and the energy stayed for a long time. And as the energy then folded, like folded up, went up, the guardian angel and the child left, and then the column almost left in a kind of formation from the bottom, but kind of turned inside out, and when that column left

Do you know, it was a most amazing thing! I imagined it was only light. I had thought in my head, “It is only light,” but they were millions of angels. Millions of angels are what caused the column of light. And you could only see it, as it dissipated. And it had come as a mass and that’s what the light was, and they were angelic beings, who’d had opened the pathway, who had lined the pathway, like a guard of honour. And it was like, that’s what the light is. In paediatric deaths that’s what the light is. They are the keepers of the path to the spiritual world.

Indescribable vastness,
Streaming from all sides,
Streaming from no sides,
an ocean full and overflowing
with a luminous nothing.
Laird (Housden, 2009, p.184)

A short time after this mystical experience of the little boy’s transition, Marion observed a physical glow around the child’s inanimate body, which brought to my mind Jane Hirshfield’s (2006) poetic phrase - “Sharp starlight coming all the way down to snow” (p.11).

There was like a physical glow energetically, like the physical glow, which exists about 8-10 cms. And it’s a softness of energy around the body. It has no movement. It doesn’t flow. It dissipates, but there is no movement in it. It’s just kind of there. And that existed for a number of hours ... Hours and hours and hours.
Marion’s vision where she saw a column of light comprised of millions of angelic beings, who opened and lined the pathway like a guard of honour, is reminiscent of a vision of mystic scholar, St. Hildegarde of Bingen, where “she encircles God with nine choirs of angels representing hierarchies of spiritual beings whose harmony reveals his glory.” This image is depicted in a miniature held in the breviary of St Hildegarde in Germany, where “God appears as a disc of brilliant light at the centre” (Grof & Grof, 1980, p.44). This perception of the tunnel lined with angelic beings is also captured by Hieronymus Bosch's 15th Century depiction of “The Ascent into the Empyrean”, which illustrates Dante’s “vision of paradise where the tunnel leading to the Divine is composed of millions of angelic beings” (Grof & Grof, 1980, p.63).

Nick also described the spirit of the dead person being escorted to the other side when he said:

*And when they cross over you see the very same people greeting them on the other side, which is an interesting … For me, there is a physical picking up of that person [by the spirits] and carrying them to the other side.*

Nick’s perception of a physical picking up of that person [by the spirits] and carrying them to the other side is reminiscent of Greek mythology, where brothers Thanatos (Death) and Hypnos (Sleep) perform a similar task as they facilitate the transition between the material plane and the other world of existence (Grof & Grof, 1980).

The giving–up of the spirit at death has also been recognised as a change in energetic frequency, which manifests as a change in colour of the energy field. Another phenomenon, which has also been perceived by those emotionally connected to the person at their death, or alternatively by those in the geographical vicinity of this event, is a sudden unusual change in temperature, which punctuates the moment of passing or giving up the spirit.

Carolyn described this phenomenon while describing her experience of telepathically assisting a person who was killed in a car accident near her clinic:

*When people die, to a greater or lesser extent, depending on the consciousness awareness of the person - I like to use the old term that people use; ‘cross over’. And that is literally like having a door open. Now, in that case, that is what I felt; I felt the ‘door’ open. And that door doesn't open for nothing. And if it opened, it meant that that person was meant to go, or it was a moment of choice for them; whether to go or stay. And it was interesting for that particular client, because, I went and sorted the person out, and he actually did choose to go. And I came back [into the clinic]. And I said,* [to
my client] “Look, I’m sorry, but someone just died out there.” And I said, (I wouldn’t normally say that to somebody but, I was prompted to say), “You might have felt them leaving; the door opening. Some people feel it like a cold wind.” And she looked at me and said, “Oh my god! Is that what that feeling is?” She’s a person who’s had a lot of death in her family, and she felt it [the cold wind] essentially sitting in the hospital. You know, she’s often had that feeling … Now, so the thing is, what happens when you die, you tend to drop some of those [higher] bodies, at the very least you drop the physical body, well there’s a shift in energy, like the frequency knob has just got turned up. So you can feel it … Your energy, instead of being focused in one little spot in the hologram; all of a sudden it’s everywhere. And that’s why some people experience it as annihilation. Because, if they don’t have the conscious awareness to actually be able to be everywhere, and be conscious … it can be difficult. But the thing is that it’s actually that spreading out of the energy, that people feel as a cold thing, because the energy actually dissipates. And when energy dissipates, it actually cools down … Well; you go from being a local phenomenon to a non-local phenomenon, which is what your soul is anyway.

First - Chill - then Stupor - then the letting go -
Dickinson (Bloom, 2004.p.581)

Ellen recalled a similar experience of feeling this sudden unusual change in temperature and recognised that her client had died:

You know, that morning, he had developed some breathing difficulties and it was pretty clear that things were changing for him. And it was my day off, and my supervisor paged me, because she knew that I had a long-term relationship with him, and said, “You know, I think Sam might be dying. Do you want to come and see him?” And I said, “Oh yes, I will.” And as I drove to his house, it was a very dramatic day. It was very stormy, and I remember that there were black clouds over the sky and white clouds, which is something that I’ve never seen. And I remember driving and just thinking, “There’s something going on here! I just hope that you wait for me, ‘cause I’d like to say good bye to you.” And at the stop light, a couple of miles from his home, there was just this frigid, icy - colder than; it wasn’t like you know, sometimes you get this chill, chill. It wasn’t like that. It was like a block of ice was moving through me. It was a very surreal thing, and in that moment, I just had this sense that he had died. And he had in fact; twenty minutes before that, and so there was some connection there; something energetic going on there, I believe … That [cold chill] was really a phenomenal thing for me, yeah. I think that, that was his energy; I mean he knew that I was coming; I mean, he didn’t know I was coming, because
nobody called him and said, “Oh, by the way, I called Ellen and she’s coming to see you.” But, I think that the connection that we all have, and the fact that why was it that, of all the many patients that I have, my supervisor was going, “Oh, I’m just going to page her to see if she’s around.” And there I was! On all my days off, usually I’m off doing something, so who knows where that was. So, there’s definitely something there and just the whole thing.

A voice calls me  
A sudden winter  
In this floating world  
Yaba (Hoffmann, 1986, p.237)

Similarly, this energetic shift has been described as a change of colour of the dying person’s aura during and immediately after their transition. Nick described the shift in temperature and colour of the energy field at death when he said:

And when they take their last breath, when they die, their body can still carry their energy. And you feel it go. And it goes in temperature. So it goes from the pink to the blue and then you know that they’ve transmuted over to the other side.

He also commented on the variation in temperature change which he believes is related to the whether the dying person has a peaceful or traumatic experience at the conclusion of their life:

And it can change ... I feel that when that happens, the people that go with icy cold somehow have had trauma crossing over ... I felt somebody leave the room, icy cold ...

Chilling cold:  
winds blow through  
bleak timber  
Shoku'o (Hoffmann 1986, p.302)

And with others it’s gone [the spirit] with a warm breeze. Just so beautiful, it is so beautiful! And the softness to me is, “Ah well, I’m ready and I’ve gone.” And they’re so beautiful. Kiddies do that all the time, it’s lovely, light, and warm.

It will flame out, like shining from shook foil  
Hopkins (Mitchell, 1989 p.119)

Julie also shared her experience of this energetic ‘change in gear’ as her father gave up his spirit at death. She recalled the shift of colour and temperature in her father’s energy field during this phase of his transition:
And the temperature changed [as] he died. ... It was almost like a combustion ... He did get congested, but it's almost like something ... it's like going out with a bang ... You know what I mean? As it fades ... as the energy fades, it has its last brilliant flare ... It was a feeling thing. That reddy, pinkie colour that I described, which is more like a tinge and it's not just a solid thing, so it was like a woof out that filled the whole room ... it goes red and also it's like an explosion ... [It was] late afternoon. And that sustained, so it was like that - this heat and this concentrated energy and stuff - it had started about six and it was full on and I didn't expect him to be alive for very long ... Just as a nurse, you could see, really, coning, showing all the signs that he was about to die.

Julie described a different experience with an elderly patient whose death she witnessed when she said:

She was different from Dad. Energetically, she had a lot smaller presence. She was like the guttering out of a candle ... So, what happened then was that the energy then became general and diffused in the room. The thread was there, connecting to the physical form so, the energy became (pause). You know how [earlier], I couldn't discern the upper margins? Well, I couldn't discern any margins, when the thread had gone. There was just a diffuse energy that was there. And it was a cool energy, and it had that slight bluish tinge. I don't know why...

Summary

In the second essential theme, Giving-up, the participants explicated the process of death. This process was described as a disconnection of the energetic thread connecting the body followed by a tearing away of the higher bodies at death. These higher bodies were perceived as a luminous blanket or a white cone, which lifted off the body and/or a white spirit or white smoke, which vacated the physical body via an interdimensional portal, most commonly, but not exclusively, the crown chakra. This white spirit was perceived to leave the earth plane through an interdimensional...
membrane or door. At death, a change in energetic frequency was perceived, which was experienced most notably, as a shift in temperature and/or a change in the colour of the dead person's aura as he or she 'passed away'. When the person's spirit vacated the physical body, there was also a perception of the remaining energy surrounding the inanimate body fading and/or becoming diffused and non-local. These perceptions are:

A tune of non-being
Filling the void:
Spring sun
Snow brightness
Bright clouds
clear wind
Daido Ichi'i (Hoffmann, 1986, p.92)

The participants' experiences of death, which often included a sense of peace and silence, is best illuminated by the following prose of mystic poet and contemplative, Martin Laird, who heralds the next theme of Enduring Consciousness:

And so this silence washes
Onto the shores of perception,
Making it stretch to receive
In metaphors of light, union, calm,
Spaciousness
You are the vastness into which you gaze
Laird (Housden, 2009, p.184)

**Enduring Consciousness: After Death**

How does an essence of the world
Leave the world?
How does wetness leave water?
Don't even try.
You are here to stay.
Rumi (Housden, 2012, p.9)

The third essential illuminating the last phase of perimortality, post-death, is Enduring Consciousness. Although this theme, for chronological reasons, is addressed last, its title and implications underpin the raison d'être of this study. Enduring Consciousness resides in the post-death phase of perimortality and the phenomena described by the participants may occur any time from moments after biological death onwards.
The unifying aspect of this theme is that following death the Consciousness of the person is perceived to survive, and as spirit it manifests in various ways. The participants' accounts included a clairvoyant experience of the deceased person, where the person in question manifested in a variety of ways. The post-mortem sensing of the person was also experienced by some participants as an auditory message, given by deceased people, who identified themselves and gave a message to the healer. The purpose of this communication was to verify their spiritual survival of death. In addition, the communicating spirit often passed information to be shared with their loved ones.

A kinaesthetic experience and an intuitive awareness, or sense of knowing, were other means of perceiving the presence of a person's spirit following death. A message from a deceased person may also be given to the healer in a symbolic form, such as the sudden or unexpected manifestation of a rainbow, or a bird. These signs may be pre-ordained by the deceased person in discussion with the healer prior to or just after death, or may be intuited by the healer as representing the spirit of the deceased person. This phenomenon is known in Indigenous communities, where so called 'shape shifting' is a well-known occurrence and is accomplished by both incarnated and discarnate beings (Groff, 1980, 2006; Harner, 1980; Krippner, 1986, 2005). The spirit of the deceased person was also perceived to manifest to the participant in either a dream or vision.

Some healers have also described their experience of travelling in the astral plane with or to a recently dead person to assist them. The following excerpts from Kelly and Carolyn describe these later experiences. In this story, Kelly described travelling with her friend, Madeleine's spirit until she reached her spiritual Kingdom:

Full autumn moon:
My shadow takes me with him
And returns
Sodo (Hofmann 1986, p.308)

And I journeyed with her for some way and this was unusual, because I actually did the Phowa (Buddhist) practice without consciously thinking of doing that. It just happened that I shot out the top of my head the moment that she left as well and travelled with her some way and then I got to some gates or doors or something and I couldn't go any further. You'd have to go beyond this way and she didn't need me. I'd actually promised her verbally that I'd help her travel. I didn't exactly say travel but I said that I'd be with her the whole way.
And that hadn’t happened to me before. I’d travelled with others but not where it was so definite. I could not go any further and it felt to me like she had entered her spiritual kingdom, which wasn’t mine you know, unless you die you can’t enter the spiritual kingdom and it did seem like this.

As an eagle, weary from the long flight, folds its wings,
Gliming down to its nest, self hurries to the realm
Of dreamless sleep, free of desires, fear, and pain.”
Upanishads (Mitchell 1989, p.3)

Carolyn described her experience of communicating in the astral plane with a person, who moments before had been in a motor vehicle accident, assisting this person to realize he was dead:

And one particular day, I was working on a client, and there was an accident. And you know, you could tell it was a bad one … when I’m working with a client; this is the only time I’ve left a client in the middle of a session - I said, “Excuse me for a second, I just have to go and do something.” And I basically got up, and went to the window. And essentially what had happened is that someone had died in that accident and he got lost. So, I reoriented him, cleared him and helped him cross over … Well, (I knew that the dead person was disorientated because) to begin with, I just felt something, O.K.? So, I just went and had a look, and there was a person standing there (pointing to an imaginary place) and there was (his) body on the ground. So, I just talked to him. And he was confused; I mean, how do you tell anyone is confused? Because they give you nonsensical answers! So, (I didn’t go physically). Basically, I went out there astrally, and if people can see you astrally, they are usually not in their body. Some people can see you, even when they are in their body, and that’s always interesting, but a lot of people can’t. So, if they can, you know that they are either very, very asleep, because they’re out of their bodies, while they’re asleep. And then you can see if they’re still connected to their body or not, because essentially, they won’t have their body with them. But if they’re dead, they will, because the etheric body won’t be on the body; it will be on them. And I said [to him], “Hi” and he went, “Err?!?” - He was a bit in shock. So, I cleared the shock for him, and I pointed out to him that he was dead, and that he now had the choice of actually dying, or sorting himself out, and getting back in his body. And what did he want to do? And he wanted to go. So I said, “See that person over there [a discarnate being]?” … I didn’t have the time to run out of the ‘shop’ [clinic], and I didn’t really have the time to do everything for him, so I just yelled for help as I do, and someone [a discarnate being] turned up, as they usually do.
Other participants described how they perceived the person’s spirit after death. One of the features of these perceptions was introduced (although not highlighted as an aspect of Enduring Consciousness) in the theme Gathering-up, when healers described visitations of a dying person’s deceased loved ones, just prior to death.

Earlier in the chapter, I related how Nick described how he saw the spirit companions present in the room of the dying person. In the conclusion of this account he described how he saw the same spirit companions who assisted the dying person, in attendance with the dead person after they had crossed over and described his perception of these same spirits.

He continued his account:

> But it’s there [in the post mortal realm] and you see its one of those people [who was in the room] ... When they cross over, you see them in a different way, too. They’re virtually white. So there is a … it’s like a veil – white and they lose their colour … [And] they have exactly the same [facial characteristics].

Nick continued his account with a description of how he perceives the spirit immediately following death:

> [The energy] takes on a shape - the way I describe it, the way I see it, it takes on a white light with ice in the middle of it. So it’s clear but not clear, it’s clearer than clear encased in this white light, and it’s very much alive. It’s as though they’ve crossed over into a new life and that’s when I say and I said earlier, I liken it to when people are dying, it’s a celebration of the end of this life which is form, which is colour, to the beginning of a new life, and that’s when I see this other form … That’s how I see it and feel it. It’s very clear.
The bright eternal self that is in lightening,  
the bright eternal Self that lives in the light of the body,  
are one and the same; that is immortality, that is the Spirit, that  
is all.  
Ten principal Upanishads,  
(Trans. Purohit, & Yeats, 1937, p.134)

Nick maintained that the dead person’s spirit is aware of the grieving relatives, so remains in the room until they have adjusted to their death:

_How long the energy form stays in the room, depends on the people who are grieving. And I've experienced people who are not aware of my work. And I notice then, that the form will last a lot longer, because the person, who has crossed over, doesn't want to leave, because the family haven't come to terms with the death._

_I've been with people - say, for three or four weeks [prior to death] and the family are there. They get used to me being there and I work with the living and the person whose about to cross over. And once they go, the people that remain there are a lot more comfortable. And you see that shape still in the room and you'll feel it go._

_I borrow moonlight  
for this journey of a  
 million miles_  
Saikaku (Hofmann, 1986, p.275)

Kelly described her perception of the spirit of a two week old baby, Sophie, which she observed when she visited Sophie at the funeral parlour, a fortnight after her death:

_And I only saw the baby again at the funeral parlour ... I'd say that it was two weeks (after her death when we saw her in the funeral parlour). The baby's body was very white. There was still a tiny - like, I think that all things have a particular energy movement, so there was a little tiny energy movement, but the baby was no way connected; the baby was no longer connected to the body, whatsoever. But [she] wasn't gone. But the baby’s consciousness still hadn’t left, but she didn’t recognise her own body. She didn’t recognise who she was, she didn’t have any attachment to the body, but she was still in the funeral parlour, so I can only suspect that she had attached herself back to [her] mother. She may not have, but all I can remember is that she was still in the room of the funeral parlour. She didn’t know where she belonged, so she was - I wouldn’t say distraught, but she was confused, and in a way she was still in the mode of a baby. She didn’t have language and she still had the consciousness of a baby. I understand the consciousness of a baby, not to be very embodied in the physical body, or very in touch with its body, and she hasn’t really_
identified with her body. And as it grows, it gets more identified with the ego of body. So, the energy of the baby was still unconsciousness of its form. But she still had a form, but it wasn't a baby any longer. Her consciousness or her being wasn't a baby, it was as just like - how I saw it, as a little circular vortex, really not a vortex, more like a circular little ball. Even though it was a ball, she wasn't identified with that either. She was identified with her consciousness so it was much vaster than that ...

Still tied to the world,
I cool off and lose
My form
Ozui (Hoffmann, 1986, p.254)

Miriam also described how she perceived her fathers' consciousness, soon after his sudden death. This description bears some similarity to Kelly's portrayal of baby Sophie's energy:

But on that Thursday, I had the most amazing experience. I was with the group of people that I do energy work with, and this little voice just said, “Look up, look up!” And all a sudden this big ball of light appeared and a smaller ball and they just merged. It was just absolutely spectacular too see that and that was nine years ago, and I had never seen that with my physical eyes before, but I had a real sense in our clock time, he would have been dead for, ah, not quite forty eight hours, but whatever had occurred in that forty eight hours, he had done what he needed to do, review the lifetime … And I actually feel that he had been through that process and so the energy that he had brought down into the body of this particular incarnation, was then going back to join his total energy. And that’s what I physically saw with my eyes.

Moon in the water
Somersaults
And streams away
Ryota
Ryota (Hoffman 1986, p.26)

Marion described her perception of how the spirits of children, who have recently died, choose to stay around their parents and how many parents are aware when the child’s spirit is no longer in proximity to them, leaving only their vacated body:

And the interesting part is some of the children, who choose to hang around a lot longer and continue to visit their parents energetically, and stay in the room that those parents often still think that their children are here. And often their children are, and there comes a time for whatever reason, their parents will leave the room, and it’s like the parents reset the dial, and when they come the child has gone, and they perceive
that the child has gone now and many parents have told me that. And that's the bit that... people notice [that] this is only the body. It's because the energy has gone; it has dissipated.

Clouds floating on the high wide skies
The moon curves through its million-mile course
Yakuo Tokucken (Hoffmann, 1986, p.127)

Phillip offered the following description of how departed souls project themselves to some mediums:

They would project themselves how they would be recognised. It seems to me that when mediums pick up on someone after they have died, what they see is a transmission of a form. For example, there was a very famous psychic artist [who] I did work with once, but she has now died. And she noticed that the drawings that she did of people who had passed over were always of them slightly younger than they were when they died. I mean, for example, one chappie, the image of him was when he was about forty and he died when he was about sixty. So, you know, it's a projection and they seem to project an image of them that the person is going to recognise … But I don't believe that for one minute that that is what they look like anymore. I think that we do become something else, like a ball of light or energy or something so that we can create any form that we want. It's a bit like the old shape shifters. This is what they do; they project themselves in a way that is recognisable. But you can go through that and see just a light form of some kind … And I think that is what the real self is like after death. I think that the real self is more like the aura, than the physical self, you know.

And usually, once people come out of their body, the colours of their aura, because they retain their emotional field for some time … to look at, is much more metallic, because the mind-body or the mental body seems to have in it the same colours of the emotional body, but at a higher frequency. Sort of up a notch … I use the word metallic. You know, shinier, more iridescent.

And once the astral body and the mental body have pulled away from the physical body, then that seems to be the case. There is a vibrant almost overwhelming light which begins to reflect more of the mental side of the person, and I think that's because after death, of course the big adjustment is the mental one, because we've got to understand what we've left behind, reacquaint ourselves with where we are and go through an evaluation and so on and so the mental body starts to take over and you
get this sort of metallic glow. That’s the only way I can express it really, that appears around the higher bodies.

So, one of the reasons for that is that the understanding that we have is not intellectual in a very concrete sense, but in much more realised mental thing, where we realise what’s going on. When I was struck by lightning, although it caught me by surprise, when I was out of my body, I kind of understood what was going on, and I understood it was not an accident, somehow, even though it appeared to be. And I think this is what happens to the mind of the person, when we’ve passed out of the body, that we start to go into the process of realising the bigger picture, what’s going on, and the fear goes, absolutely, after a while. And I think that this sort of mentally glowing, because you see through the higher bodies, is that process of realisation.

Frances described her experience of seeing the spirit of a person, who died a few hours before this encounter with her and corroborated Phillip’s view that spirits often project themselves in a chronologically younger form than when they died:

I had an elderly lady; I think that she was ninety-one and I came in the morning and she had died, probably six o’clock that morning and the supervisor had attended to the first things. We went in and she had on the oldest, tattiest night gown and I said, “Oh my God! We cannot send her away from this place in this” ... And she had obviously passed, I don’t know - early morning, and she had started to stiffen up a little bit and one arm was sticking out and it wasn’t easy and I turned around and said, “Mrs. Jones, did you have to die on me today? Do you know how much work it is when somebody dies in one of these places and it’s my last day! Could you not have waited until tomorrow?” And I turned around and she was sitting in the chair laughing at me; just sitting in the chair, laughing. Because I really said it in fun, not in the other way. ... I turned around, she was sitting in her favourite chair, and I got quite a fright.

She looked like her physical self, as I knew her but certainly a lot more energy, a lot brighter and able to move around more freely than she could in her physical body as I knew her. She did present to me with a vision of how I would have expected her to look physically ... And certainly when I’ve done readings for people [as a clairvoyant medium] they’ve always presented themselves to me in the way in which the person in front of them will recognise them, and sometimes they will show themselves to me a lot younger and particularly say, “I had beautiful skin when I was younger, and this is how I looked and my hair was this and this and this” And they will show themselves to me in a slightly younger form where they felt more comfortable.
Rosa also described her perception of her client, Daniel, soon after he died; seeing her client Daniel’s spirit, standing, filling the room with light, soon after death:

Yes, yes, and he did that [communicated after he died], and when the family phoned me, minutes after he passed over. I was on my way to him, and they phoned me, and said he had just gone, and could I go up and see him. So he was in the room and he was standing there.

He filled the room with light. It’s so humbling, to work with souls as his, to see the transition of passing, and put that essence into that soul as they pass. How strong they are, how powerful they are. He was so clear and he was there to heal everyone else, and I said to him, “Are you O.K.?” and he said to me, “Just make sure they’re [the family are] O.K.” And he said, “Feel me.” And I said, “Why do you want me to feel you?” And he said, “So I can feel me.” And he wanted me to touch him, so he could feel his body.

He could see himself lying there, and I just put my hand on his body, and he said “I’m so cold!” and I said “It’s only your body.” And he said, “I understand that.” And he said, “I’ve got no pain!” And he said, “I’m concerned about their [family] pain.” He said, “I’m happy with my choice.” And he was. He was happy with his choice. He said, “I’ll stay with them”. And I said, “You just do, what you need to do.” And he said “I’ll just stay here and help them.” So, he remained there and I went back the next day and I could still feel his energy in the room, but the light had gone. I felt his essence remaining, when I went back the next day, to the room, and then again, when he came out here.

Kelly witnessed what she perceived as various levels of consciousness being present following Madeleine’s death and leaving at different times. Her discussion regarding this aspect of her experience commenced soon after Madeleine’s death, when the nurses were washing Madeleine’s body and preparing it for transportation to the morgue:

There were all sorts of other elements leaving, like there was moisture and it was interesting, because I stayed in there, while they washed her; the staff came and I think
that they do that fairly quickly and dressed her and clothed her and when they picked
her body up which had already started to go into rigor mortis, she was actually in her
body again. Well, when they sat her up, it was like a habit. The habit of being in the
body was still there and I was sitting in the chair and she was there, (Kelly points to an
imaginary bed in front of her) and they sat her up and she just looked at me and I
knew, that she was looking at me and I knew she was dead also. If I hadn’t known it
was habit, I probably would have screamed or I would have said, “Hey, she’s still alive!”
But it was the habit of looking. So our consciousness contains so many different levels
and so it didn’t actually form an aura, it was bodily consciousness and it didn’t give out
an essence in the sense of an aura, because the consciousness had left but the habit
was still present.

I’ve never known that before, but being at that death gave me that insight of being
human is so strongly linked to our body that it remains as a consciousness after. The
consciousness of movement or the consciousness however you would like to
summarise that consciousness, isn’t a habit of the body and yet there is a habit of the
body that remains for a little bit which you might say in the killing of animals which I’ve
seen my father do, that shaking that happens. But this was at the end after death,
when the body … It was subtle, very subtle.

So there are different consciousnesses, not even different levels. Different
consciousnesses and they die at different times. And they let go of the body at
different times. And there is not one whole thing that we can call consciousness.

There are actually lots of little things. I don’t know what that thing was that left [through
her crown]. It seemed to be the major aspect of life and death. I don’t know what to
call that. But after seeing that habit of bodily ‘beingness’, it was quite new for me. I
hadn’t seen that before.

Well there was actually [an energetic aspect that remained after her death] because
they came fairly quickly and put her into a bag to take her to the morgue and then we
went up with her, Bernadette [her daughter] and I and we just sat with her then, in the
chapel. And there wasn’t anything then it was like she had gone and then the next day
… We kept coming back each day but the next day, after she had been put in the
morgue, and brought back out and they’d give you a viewing room, she was definitely
present then. And she hadn’t left. That was like a presence above her body, actually.
You know how people come back and they look down. She was there but she wasn’t
in her body. The body was there but she was around us. There were a number of
things, the consciousnesses again, there were three separate consciousnesses. There
was ‘the form consciousness’ and that was like her own body above her body, and there was ‘the mind consciousness’, which actually related. There was something that related to me who was grateful that we were there, talked, that had a sense that “This is all so new and so difficult, in a sense that I’m glad that there is somebody to talk to that I’m glad that there is some familiarity, that there is something to relate to.” And I think that there was ‘hearing consciousness’ too. I felt that she could hear us and we were very conscious of that with her body, we were very honourable with how we spoke about her. I just had a sense that she was present. So those two unseen elements of hearing and the speaking; but the body was actually above and she had the form of her old self, of her physical body. It was just above the coffin, lying, but not so stiff, still clothed. So I guess that it would be like a mirror. But the clothing was a little bit different. It was light because it wasn’t substantial, so it was light; it was identifiable as hers. Anyone walking in would have identified it as hers. It was a nightie, actually. It was one of the nighties, which she wore before she died, so it was recognisable. The funny thing as I look back at it, she had slippers on. And I didn’t even think about that but she didn’t wear slippers of course but she always did wear slippers at home.

Shadows from a lingering sun
Blur into dusk
falling cherry petals
Soku (Hofmann, 1986, p.311)

Other participants described how they saw the spirit of the dead person attending his or her funeral. In the following account, Georgia disclosed how she was given an auditory message from her ex-husband, who told her he had died. Some days later she saw his spirit at his funeral:

And anyhow, he was in that house for about a week or so, and then he asked to be put into hospital. And one night I woke up at two o’clock in the morning, and I heard him say very loudly in my consciousness, “I’m at peace at last!” And I woke up my present husband and said, “Harry has just passed at about two o’clock.” And about five minutes later, his mother rang me from the hospital, and she said the last one that he was calling for was me, and he was at peace ... So, I went to the funeral, and at the funeral I saw him, and this quite often happens at funerals. You know, I’ve done many funerals as a spiritualist minister, and I see the spirit of the person standing beside the coffin saying, “Hey, that’s not me in there, here I am!”.  

In stillness, I light-bodied, set out for
the otherworld
Hamon (Hoffmann, 1986, p.318)
Rosa perceived Daniel's spirit at his funeral where he communicated how she could symbolically recognise his presence in future. This perception reiterates (though in a more abstract form) Phillip’s earlier insight, when he said *It’s a bit like the old shape shifters. This is what they do; they project themselves in a way that is recognisable.*

Although he was specifically describing spirits who project themselves in human form, projections similar to the ones that follow are perceived as manifestations, which are also specifically intended to demonstrate to the experient, the survival and presence of the deceased person’s consciousness.

*I went on to do his funeral, the funeral was here at [my healing centre], he was laid out for people to see him, and he really enjoyed that. He enjoyed being there and he was once again a very bright light in that room. His friends found it very difficult, but he said that he wanted to stay, to give them comfort, and he enjoyed being the centre of attention, very much. He enjoyed that, and he was very proud, about what they felt about him. He could see that he had been loved by his friends, and he took pride in them, to see that.*

Returning thanks
For life, I turn back
and bow eastward
Goshi (Hoffmann, 1986, p.177)

In the following account, Nick disclosed from his considerable experience, how he perceives the energetic form of a deceased person at the funeral:

*And the funny thing is that it [the spirit] will return on the day of the funeral of the celebration of the passing that body over … I can both see it and feel it ... My experience as a rule is, I see it stand at the side of the coffin. And when that coffin … well, depending on how the service is done … If the coffin drops down and goes wherever it goes, I see it disappear. It seems to break away to nothing, just go into the atmosphere ... And I say [to the relatives that I’m supporting] ok, it’s O.K., it’s [the person’s spirit] gone and that’s when some people feel a strong sense of grief and relief, at the same time. This is what I see.*

On its way west
To paradise –
Migrating bird
Choshi (Hoffmann, 1986, p.156)

Helene described an experience, where she perceived the presence of the spirit of the dead man at his funeral, who was confused and unaware that he was dead.
Anyway, the funeral was a cremation and so, it was a very, very small community at it. There were only a few people there, when the coffin was in the crematorium, so we were all sitting there, and there was the ritual of just walking past the coffin. And so I did that too, just out of honour of my friend and her son, and while that was happening, I could feel the soul of this man still there. And the interesting thing was that he didn’t think that he was dead, because he thought that he was on a heroin trip. So, he couldn’t distinguish that, that was it [he was dead].

When we were driving home, all in separate cars to meet, and during that driving home, all of a sudden, I could feel that his body was, burning and that gave him the message that, “Yes I’m dead.” And his wife felt the same thing and she said “Did you feel that, as we were going home?” So, when they burned the body he was leaving so, that was the first time that I felt that this ritual was important.

Skies at dawn -
is this reality?
O God
Sonome (Hoffmann, 1986, p.312)

Similarly, Kelly perceived the spirit of a person present at his funeral and unaware that he was dead. She said:

And at his funeral I actually saw him breathing in the coffin. That was really, really, freaky. I just really wanted to scream out and tell everybody. It was really overpowering, to tell everybody, when we got there. [There] was such as strong sense, of being held back, because of what people would say. But, what I recognised was, that he hadn’t left. He was still very attached to the people at the funeral, and he had not left the body. He was actually breathing in his coffin. [He] was still attached to his body and his body, was still pink and alive somehow. Yeah, it was all pretty big! But with this man - with this man breathing, I didn’t know my responsibility at that time, you know; what to do.

I did write a note. Like, people were writing notes, and putting them into the coffin, as goodbyes and ‘send-offs’. He was really loved, this man. He had a big heart. But seeing him breathe, it was different! The energy of the man, I can’t call it consciousness. The energy of the man, was still really attached, to the body … And I didn’t know what to do and then there was a queue going up to the coffin and I thought I’ve got to go up and I think what I wrote in the note was something like, “You’re dead and you need to move on.” … I think that I spoke to him in this way but even when I looked at him, up close to the coffin, I didn’t see a dead person, I didn’t see a - He
looked completely alive to me. I saw somebody else in a coffin once, and he looked waxy. With this man, it was like we had this heart connection and he wasn’t dead. He was dead as far as the medical profession went, but he wasn’t dead ... I saw his chest rising and falling... I saw his physical body, like, I almost fainted, because I thought, ‘Shit! He’s still alive!’ ... And no one knows that he’s still alive! I freaked out in my head. I just freaked out and I made myself keep looking and it kept happening and I’d look away and I’d look back, but I knew that everyone else going up to the coffin - no one else saw it.

First of all, I saw the breathing and it was as though the energy field of the body, it didn’t have blue around it, but it was all cloudy all around the body, so it was like again a bit like smoke, but, smoke has tendency to be different colours or thicknesses, but this was all the same. There was no inconsistency in colour or thickness, it was equal around the body, and all around the body was smoke, you know, the colour of smoke. I know smoke can be different colours but this was very grey, going to white, but not white. Yeah, so it was like that. So I had a sense that over the next month the body and his ashes were out [at the crematorium], so I didn’t complete something. Maybe I should have - maybe I still should go back up there and see what I can see there. Yeah, but there was no colour around the body.

But there was a point when he did leave the body as a body, when he was just a shape and a form, but he quickly went back to the body. Yeah when people were talking about him, he actually left the body and was sort of interested in what they were saying. Yeah, there was an interest in what people were saying about him. Yeah, it was almost like he became more alive then, when they were talking about him.

The fall of leaves
has left some autumn
on the lower branches
Shozan (Hoffmann, 1986, p.303)

The following account is Meghan’s description of her aunt's presence at her funeral, which Megan attended with her relatives, including her cousin (also a healer), and her 10 year old psychic niece, Evelyn:

And as luck would have it, she [her niece] would end up sitting between Bronwyn [a healer] and me at the funeral. And our aunt Angela was actually present, standing beside her coffin, for the funeral. And this young lassie said, “You know, but Auntie is here!” and we went, “Yes!” And she said, “She looks O.K!” And we went, “Yes!” [She
said], “And, why is everyone so sad?” “Because, Evelyn, they don’t see her!” And she said, “Why can we see her?” And I said, “Well, maybe we'll tell you that someday!”

We wanted to be kind of discreet and we advised her not to say anything to her mum, because her mum might be a little upset! But it was a little - it struck us very profoundly, because the whole service - just the words of the service, spoke of life after death, but because of the grief, nobody actually believed it - nobody actually believed the sermon, and there was our aunt actually standing there looking at us!

She was just looking in a slightly, smiling way, slightly, bemused. And she was much younger. Interestingly, she was much younger than she was when she died. She was a very elderly lady when she died. She was maybe in her fifties [in this apparition] ... what I remembered of her when I was a young child [she was] very, very, gentle, a soft woman ... with very lively, sparkly eyes. And it was that flavour in her energy that [manifested as] she was looking at us. [Her look seemed to say], “What are they all doing here?” Ah, and I remember a slightly bemused quality as well, as if maybe she didn’t quite understand. I didn’t have any sense of communicating at all.

The voice of the nightingale
Makes me forget
My years
Uko (Hoffmann 1986, p.332)

Meghan also described how she saw an apparition of her father, whose death was portrayed in the earlier themes:

My father came back to me once, when the same cousin was with me, many years later and we both felt his presence very strongly, and we felt a kind of emotional connection with him, but not a verbal connection. And again, he came as if from a distance towards us, was present with us and then went back a distance ... sort of a sense of distance ... ahh, the experience with my father was extremely visual. I saw that as clearly as I see you.

Following death, the deceased person’s spirit often communicated with the healer who had assisted them during their transition. At other times grieving relatives sought connection with recently deceased loved via the mediumship of a healer, who was previously unknown to them. These people wished to affirm that their loved one’s spirit had survived death and to seek some understanding of the events surrounding the person’s death, particularly if it was traumatic. Georgia described three instances when her ability as a medium was used, to deliver messages from a dead relative to their family members:
Recently, I saw a lady, who I did a mediumship for, and I picked up that she had a son, who had recently been killed and she said, “That’s right!” And he’d been only 18 and had been a champion skateboard champion, and had been all over the world, doing it and was the [national] champion. And I picked up that he had an accident that way and that he had been on the back of a motorbike and killed. And the woman was so angry against the driver of the motorbike. And this young guy came to me and said, “Tell mum we’ve both had the same poison, namely dope and alcohol, so don’t blame him, because it was my time to go.”

Round a flame  
Two tiger moths  
Race to die  
Kaikai (Hoffmann, 1986, p.212)

Georgia also recalled a similar experience on another occasion:

And there were some young boys killed locally, and I’ve read for two of their sets of families of two of the boys, just recently and they [the dead boys] also said that they were “in the shenanigans” [making mischief], and I saw them [telepathically], outside [a local] pub and they said, “Don’t blame the driver!” He was just the one, who was meant to get them where they had to go at that time.

He was popped out [was thrown out of the car] and just got scratches and bruises. And he’s been in court, but they [the dead boys] don’t blame him at all, because they [the family] have to live with that [the other boys’ deaths], for the rest of their lives. George, was one of the fathers who came here, and two couples came in, one after the other and there was a lot [of information] that came through about that. You know a lot of proof about what had happened.

On another occasion, Georgia recalled an experience where she communicated with and assisted a young woman who had suicided:

A friend of mine’s son suicided four years ago. He gassed himself in his car. He was eighteen and I did his funeral. And earlier this year, another friend of mine came over and her kids had come home and said that a young girl had gassed herself in her car and her brother did it four years ago. And I thought “surely not!” ... Sure enough, it was [the boy’s sister]. By the time I got home, her mother had rung me, and it was the daughter, Jenny, who had suicided. And the mother had asked me to go to a viewing and although I had been involved with death and dying, I never actually had seen anyone in a coffin before.
And I went there for the viewing, and the mother was kissing the daughter. But it really shook me! I guess it was because it was too unrealistic. It was too contrived with the body made up. It was too contrived and it wasn’t how it should have been. I guess I was also picking up the girl’s trauma. See, a lot of her friends there, and her mum [was] there, and everybody [was] trying to pretend that it was O.K., and it wasn’t. And her spirit was still in trauma … The spirit was still going through trauma, and the body laid out, as if it was perfection. There was a dichotomy. It was a couple of days after her death, and her spirit was still traumatized … I counselled her … and I spent time with her mother after that, and she [the girl’s spirit] was at peace.

She [the spirit of the dead girl] comes through and laughs now. I was at the graveside and I was holding the mother there at the graveside. She was buried on top of her brother. The mother had another young son, about fifteen, but the mother and father had another baby, who had died at nine weeks old with heart problems. So, the father’s three children had died. And after he spent time at that graveside, he went to the infant’s graveside. Anyhow, the daughter said to me in spirit, ‘It’s my dad’s birthday on Sunday, make him a birthday cake.” So, I had only met him once, at the brother’s funeral, and then at the sister’s funeral. So, I made him a birthday cake and I was thinking, “What should I put on it?” And she said, “You’ve got something, in a box in the pantry.” And I said, “Have I?” And she said, “Yep.” So, I went and looked in this little box of ornaments that I collect, and here was this little baby angel, with a bible between its legs, and a halo, and that went on and from spirit she dictated to do this cake.

A graveyard
Autumn fireflies
Two or three
Gensho (Hoffmann, 1986, p.169)

Georgia assisted the spirit of the young woman to return from being very traumatised into a calm almost happy state. She commented that:

[I conversed with her when she was in a traumatized state] and I was saying to her, “You be at peace now, you’re past the pain, past the suffering.” [She said that she had suicided] because of a broken heart, like her brother; girlfriends, boyfriends, all that, with a little bit of alcohol thrown in. She actually told me the day of the funeral. [She didn’t regret suiciding, but was] just sorry for her mother.
Frances also recollected an experience, where she telepathically connected with a recently deceased man and passed his message onto his relatives:

But it’s very healing when you can give people information that confirms that they [the deceased loved ones] are O.K. It’s the little things that they tell you, that people are healed by, and feel better with. For example, what [parents] wrote in the letter to [their] daughter that [they] put in the coffin with her … or that [they] put her [their child’s] favourite teddy bear with her or [things] like that.

I had one gentleman who laughed and said, despite not having clothes when you buried me, he wants you to know that he’s wearing lovely clothes and good shoes. Shoes were very important to him and they looked at me and they blinked and said, “Well, he wasn’t buried in any clothes!” and I said, “Was he not buried in any clothes?” and they said, “Well no, we’re Jewish and Jewish people don’t bury our dead in clothes.” But he came through and said he has clothes where he is and he’s got very good shoes. And apparently he ran a shoe factory [when he was alive]. Well, it’s very validating stuff and that’s what I do, mostly that’s what I do in my spare time.

Rosa also shared her mediumistic communications with clients who had died as well as some unsolicited messages from deceased friends or relatives of people, whom she knew:

[I feel their presence after transition] definitely, definitely. And sometimes I’ll just stay and say, “Now, do you need to speak with me? Is there anything that you need to say?” And quite often they do. And the spirit speaks, because the spirit is still there, but the soul is gone. It’s only the spirit I communicate with. And if that spirit has had a good close connection with me, when I’ve been there and most people do … During the process of healing, they’re in my energy field anyway, so it’s very easy for them to communicate with me.
The man that I spoke of a moment ago [Theo] - he stayed around. I left the hospital. His daughter stayed with him and I left and the family said that he remained peaceful [prior to death] … but I was talking to him, [after visiting his body], coming home in the car. And then within two days, he came through clearly. He told me that he was with his mother, gave me his mother’s name. Things that I guess were proof for the family. He said to me about his daughter and about the man that was coming, and that she would marry. And, that happened within six months and that was a surprise to us all. Yes, total surprise. She’d never met the man before and she was married within three months. So he [her father], had orchestrated a lot of that. It is a great comfort when they pass over, if they continue to communicate, because that says to the family that they are o.k. And that has happened quite often. If the family aren’t at a level of accepting that, I don’t pass that on, because they can’t move from one mode to another. Because I allow time, and then often times, the spirit will impress the people to come to me, to talk to me, and then if they are ready, I’ll pass that on, too.

The spirit always continues [to communicate after death] … It’s a different connection to all of the spirits depending on what they have to do. With the man, Theo was his name; I only have to call him in, and he’s there. And occasionally I’ll say “Are you around Theo?” and I’ll hear him very clearly and there’s always a little password I have with them to make sure it’s authentic. Once they can give me proof, and I know that it’s authentic, then I might allow, and I say allow, because I need to take responsibility for what’s coming and going and make sure there’s no psychoses there.

So you know, there’s always a, “How are you?” He always calls me “Rosy” and when he speaks to me, (I) hear the Italian, and that energy, and I feel the love. He was like a Dad. It was that kind of energy, and you know, when he speaks, it’s always about a family member, and I’ll know nothing about what’s going on and so I’ll phone them and they’ll confirm what’s going on, and that confirms what he’s said. So, I always seek confirmation and I am looking for the validity in what’s given.

Like breezes through their leaves
Was their whispering to each other
and their robes rustled over gravel paths like water
Rilke (Barrows & Macy, 2005, p.211)

Rosa recalled another experience when she was given a message from one of her deceased clients, which validated her Enduring-presence:

One lady was coming to me twice a week and she passed over within a month of Daniel passing actually, and she came back to me a few days later and said to tell her
daughter to go to this box and that there is a ring there from Noel. Now, when I did, the daughter knew nothing about it. She said: “Mum never spoke about a Noel.” Anyway, she found it and in the ring it had, “With love from Noel.” She [the daughter] spoke to her father, and said, “Who was Noel?” And he said, “He was an old boyfriend of your mothers.”

And last week I went to see her at the hairdressers [the daughter’s workplace] and the mother came through, while I was sitting there, and said, “Go and tell her [the daughter], that she needs to put a yellow rose in the garden.” So I went to her, I hadn’t spoken to her for months about her mother, and I said, “Look, your mum’s here and she said, you need to put a yellow rose in the garden.” And the daughter just shook her head and said, “My auntie’s just doing a rose garden up in Cairns and she spoke to me the other night about putting a rose there for Mum.” I said, “Well, she wants a yellow one.” You know, you get that sort of thing and it’s just too authentic to dismiss by chance and I guess knowing that they’re still there, they’re still O.K.

Although, for Rosa, most telepathic communications are from people who she had helped with their transition, she said that she occasionally got an unsolicited message from a friend or relative of someone she knew. In the following anecdote, Rosa related her communication with her receptionist’s beloved friend, Alyson, after Alyson’s recent, sudden death:

Last week, I was driving home. Now, she [Jess] lost her best friend [Alyson] from a heart attack, three months ago and the lady was only sixty five. I’m driving up the hill from having a cup of coffee the other day, and this little voice said, “Hello.” I said, “Who are you?” She said, “I’m Alyson.” I said, “How are you going?” She said, “I want you to go to Larry and Jess, and tell Larry he’s got to read those papers before he signs the contract.” And I thought, “Oh, what’s she on about?” Anyway, I went to Larry and he said, “Oh, Jess’s not here.” I said “I need to talk to you. Look, this is what I’ve just got from Alyson.” He said, “That’s amazing!” He said, “I’m just about to go to Hong Kong and I’ve got this contract and I was thinking, I think I’ll get legal advice this time.” And I said, “She wants you to really read the contract before you sign anything.”

She [Alyson] was here once for dinner, and I spoke to her once at the hospital when Jess had the baby, but she just knows that I can see. And Jess came to me yesterday, about three weeks after I spoke to Larry and said “I’m just feeling so abandoned by Alyson. I can’t hear her, I’m just so abandoned. You know, and I didn’t even know the woman and she was communicating with me and all I can do is just pass onto the family what I get. And another night I was sitting in a Chinese restaurant and she
Alyson] said, “Oh, I love this! I used to love the curry. Tell the girls I’m not missing out on anything and I enjoy the Chinese every time they go.” So, I thought, a little bit of trivia, so I phoned Jess and I said, “Alyson popped in and she said, she used to love Chinese.” I said, “Oh, O.K. so there you go, she just wants you to know.” But you really have to be decisive in who you tell. You don’t want to appear to have psychoses. You don’t want to overwhelm people, and the medical society would say, “This is psychotic!” and that’s O.K., but it works for me.

Listen – don’t you hear something?
Aren’t there voices other than mine?
Rilke (Barrows & Macey, 2005,p.141)

As well as seeing, hearing or feeling a deceased person’s presence, some healers receive information of a spirit’s presence and connection with them through symbolic communication or in a dream. Rosa described in the following extract how she asked her young client Daniel at his funeral how he could be identified in future:

I said to him, “How will I know to identify you in the future?” And he said, “Look to the sky and whenever he’s around, he always presents as a very bright orange sunset. I have a photo of him in the garden with me, and the photo shows the orange sunset in the background. He had his crutches there, and he was helping me build a circle here at [our centre], and the sky went really orange, and we took a photo. He’s recently had his brother’s wedding here, and both [a friend] and myself were there, and we haven’t had an orange sunset for months, and I got the photo and I held it and I said, “If you’re here, give us a sunset!” And within fifteen minutes, the whole sky changed to a beautiful orange sunset, and it was just so powerful and I just found it very hard to believe he could change it just like that, and I said to [my friend], “We haven’t had an orange sunset for many, many months, and he just did it on cue!”.

I know that nothing has ever been real
Without my beholding it.
All becoming has needed me.
My looking ripens things
And they come towards me, to meet and be met.
Rilke (Barrows & Macy, 2005, p.43)

Nick also related how his client, in a symbolic manner, conveyed to him that he had died. This person was initially very reluctant to have distant healing sessions and was intensely resistant to dying. After an initial distant healing session, he acknowledged a profound emotional change as well as his readiness to die. Nick had the following experience the night of his client’s death:

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I’m lying in bed the next morning, I admit like three o’clock in the morning, I lived in the country then, I had all of the tree ferns over the window, and I couldn’t see much. But I saw all these beautiful fireworks’ and I woke up tn eight o’clock and the phone rang and my friend [the person who referred the client] from the north said, “Guess what?” and I said, “Yes, Tom passed away, didn’t he.” And he said, “How did you know?” And I said, “Well, I saw the fireworks outside my window and I knew it was him going.” And he said, “You’ll never believe this, but Tom loved fireworks and he created a firework show, after every horse show.”

The lotus seeds in ten directions jumping
Playfully.
Donsui (Hoffmann, 1986, p.159)

Messages of future contact with a deceased person are also given in dreams. Ellen recalled that she dreamt of such a connection, following the death of her friend’s child:

But then I had dreams about her. And, I remember one dream in particular, of her tumbling, (She was a tumbler), tumbling towards me. And she had these sparklers all around her, and she gave me the sparkles and she said, “Whenever you see sparkles that will be me”. And so of course, I woke up and called my friend.

Eternal snows littered with stars...
Rilke (Barrows & Macy, 2005, p.193)

In the following story, Ellen related how she received a message from her deceased business partner via a dream that his widow related to her:

Judy, Jim, Keith [Ellen’s husband], and I have a vineyard together. We all made wine for the past 8 years. Jim and I were the blenders and the label designers. He had made a label for our latest vintage 2004 that we planned to bottle in July. He had sent me the design, via email but try as I may I could not find it in my computer files. I decided to try and create another label, similar to what I remembered the one he designed looked like. The night before we were to bottle, Judy had her first dream about Jim, (it was 3 months after his death). She saw him sitting at his computer, barefoot. This was significant, because before his accident, he NEVER went barefoot. She asked him how he was doing, and he said fine. He then returned to the computer to work. The next morning I looked one last time for the label image, and guess what? I found it on my computer in the first place I looked. Judy and I think he was resending it.
I write, erase, rewrite,
erase again, and then
a poppy blooms.
Hokushi (Hoffmann, 1986, p.190)

Ellen also remembered that while travelling, [unbeknown to her], one of her patient’s died. In the following extract, Ellen related how she received a message from her patient’s spirit, informing her that she had died:

During one of our last visits together we shared a lot and said things that were important to both of us. As our visit came to an end, Polly asked me, “If I die while you are away, how will you know?” I assured her that I would have contact with my supervisor and would be notified somehow, since Polly was such a special patient for me. I then added, “But Polly, YOU will let me know!” She looked at me with those beautiful eyes that twinkle, and a small smile appeared and she said strongly, “Yes, yes, I will!”...

Surprisingly, I did not think a lot about my patients while I was away, but one morning, two days before the end of my trip, I awakened early to a beautiful Australian morning. My friend and I were staying at a B&B and were the only visitors present. The main house was located a distance away and as my friend slept in, I made coffee, and took it out on the patio behind our suite.

It was a beautiful morning, filled with colourful clouds in the sky; flowers blooming and birds flitting about and singing. Suddenly, a large magpie and her new baby bird were sitting in the grass nearby. The baby magpie was crying out as momma magpie hopped closer and closer to me. I thought, “Oh, I should go get some crackers to feed these birds.” And [I] got up to go inside. Just as I passed through the sliding glass door, I was flooded with thoughts about Polly. I wondered how she was, and if she were still alive. I wondered if she had passed on, and if so, how would I know, as in actuality, I did not have contact with work at all during my trip away. Polly was so intensely on my mind for those few moments, as I grabbed the crackers and went back out on the patio. Sadly, the birds were no longer in the grass, so I sat and just enjoyed the beautiful morning.

Suddenly, a woman’s voice called from the other side of the sliding glass door, in a clear, bright and melodious manner, “Good Morning!” I peered in but could not see anyone, so I shouted back with equal energy, “Good Morning, Good Morning!”
A few moments later my friend appeared, sleepy headed and dishevelled and asked, “WHO are you talking to?” I looked at her and said, “Didn’t you just shout good morning to me?” “No,” she replied. “Then, perhaps it was Heather, our host,” I answered. “Ellen, there is no one here,” she responded.

In that moment, it dawned on me that perhaps it was Polly, letting me know she had passed on. I looked at my friend and asked her to remember today’s date, for I believed that my patient had just made contact with me.

When we returned to the US, I was not at all surprised to discover that Polly had passed on exactly 24 hours before I heard that beautiful voice. And it is interesting to note, that I never heard Polly’s actual voice, for by the time she and I came to meet one another she could only speak in a whisper …

... At Polly’s memorial service, the poem she chose to put on her memorial program stated clearly, that whenever a bird was present, it was really the spirit of her being close to us. Polly was a wonderful gift to me as a nurse, and to me, as a spiritual guide that we continue to live on the other side of the veil that separates this life from the others.

Blossoms scent the air
a carefree birdsong
Echoes truth
Gozan (Hoffmann, 1986, p.178)

In this story, Ellen recalled how she assisted a patient and who symbolically re-connected with her after her death:

Connie was a retired nurse, who had widely metastatic lung cancer and her biggest fears were dying in distress and being afraid at the time of her death. One day when she was very close to death I was off and took some time to do a relaxation and imagery for myself. I was also hoping that the spirit of Connie would intuitively connect to my desire to help her have a peaceful death.

In my imagery I saw Connie and I standing on earth, but up above us and off to the side was the afterlife, heaven, whatever you may believe is waiting for us after we die. These two places were connected by a beautiful rainbow bridge. Each of the colours of the rainbow was brilliant and crystalline. In my imagery I assured Connie that I would help her to move from this world to the next comfortably and peacefully. I saw myself escorting her across the rainbow bridge and as we reached the top of the arc I kissed her forehead and pointed her in the direction of the beautiful meadow of
wildflowers, birds and children at the base of the rainbow bridge. She smiled and finished crossing the rainbow bridge, turning briefly to wave goodbye to me before she travelled on. She was absolutely fearless and very peaceful.

The next day I visited Connie and she was barely conscious. During my visit, I gave her a hand massage with lavender essential oil and spoke quietly, asking her if I had ever told her about the beautiful rainbow bridge? She lifted her right eyebrow and tried to open her eyes, but it was too much for her. Without going into too much detail I simply said, “Connie, if you find the rainbow bridge, you be sure to cross it, for it is time for you to go home now.”

When I left the home that day I was certain she would pass in only a few hours. I went back to our offices and then left to stop by a store near where Connie lived. When I came out of the store, there in front of me was a beautiful full rainbow. I thought to myself, “O.K. Connie, there is your rainbow bridge. All you need to do is go across it and you will be home.”

But Connie did not die that night. The next day the family called and I went to Connie’s home, where in fact she was dying, and I stayed with her and her family until she passed. Two days later my husband and I were preparing dinner for some friends, it was lightly raining outside and suddenly my husband called me to come out and see “the most beautiful rainbow ending at the top of our house.” When I went outside, I could see that not only was this most intensely colourful rainbow but it was a double rainbow. I felt certain that this was a gift from Connie, to assure me that she had crossed the rainbow bridge and was safe and fine in her new life. I even had the sense to take a photo of Connie’s rainbow to always remind me of this special little lady I helped to die peacefully and free from fear.

And once the winged energy of delight
 carried you over childhood’s dark abysses,
 Now beyond your own life built the great
 Arch of unimagined bridges
 Rilke (Mitchell, 1989, p.133)

After death communication is also perceived as manifesting in the form of coincidences, that are particularly significant and validating for the experient/s. Frances related how she recognised her deceased friend, Phillip’s spiritual presence and assistance, for first couple of months following death:

Oh, he’s been around [since he died]. Well his wife is still living with us. That’s working really, really well. We get on very, very, well, her daughter doesn’t have a
spare room, we have a big house for her to live in, and financially she is not able to get her own place or pay rent or anything, full rent anyway ... Things have come up where she looked for things and she can't find them and she said “Well, I can't find them because Phillip looked after these things and he never let me know about this, that and the other” And there were quite a lot of things that she didn't know about and they had some laptops and bits and pieces all over the place and she would get quite cross because she would say, well Phillip knew which one plugged into which transformer and which went with this. He handled all of that and I had no idea.” And he had hidden all of his passwords and all the programs and internet things that he was involved with and he had been writing websites and was involved with some moneymaking things on the internet. And he had hidden his passwords on a file on his computer and she couldn’t find it. Nobody could find it and his wife got really cross one day and we yelled at him and said, “How dare you go and leave all this and blah, blah, blah and we need to know where these passwords are, and you've got to tell us where these passwords are.” And I didn't actually hear him and within minutes his son, who is Claire’s stepson [and] is interstate phoned and said, “Would you like me to take Dad’s computer and see if I can get this and this and this off it for you?” And I still think that Phillip did that and gave his son a bit of a prod because it was within half an hour of us actually screaming at him and saying “You've got to help us with this!” Because it was important information that was locked away that she needed so, we've had a few things like that.

Kelly also remembered some of the coincidences that occurred following her friend Madeleine’s death:

Well I think that [she] has done that [provided proof of the survival of her consciousness] with all of the different things that have happened since her dying. She was really into the environment and into the native plants and the drought broke after she died the whole drought in that area and people would say, “That was [her]!” Because she’d actually said [before she died], “I’ll go up there and bring rain, I’ll make them get some rain for you.” You know, that was a bit of a joke and when it happened, it was like - and there have been many little miracles like that out of that area [since her death].

The other big miracle was that the Tigers won. The Tigers won in the footy. She was a Tigers fan, they hadn’t won, and she said, “I'll make the Tigers win” and the Tigers won! And I mean, it had been seventy-six years since they’d won. The family actually were just over the moon. One of the boys, he threw his Tigers shirt into the crowd. That was what his thing was, his Tigers’ shirt. She was an amazing Tigers follower.
The whole family (and particularly the boys) were. One of them, who was sensitive and incredibly naive ... She did it for him. He would say, “It’s [her], if they’re going to win”. He had all his hopes up and we were a bit scared about that, you know.

What they undertook to do
They brought to pass
All things hang like a drop of dew
Upon a blade of grass
Yeats (Mitchell, 1989, p.125)

The theme, Enduring Consciousness, explored the multi-dimensional and multilayered, last phase of perimortality. Participants described their perceptions of the various ways that they experienced the survival of a person’s consciousness following biological death. They described their visual, auditory, kinaesthetic, and intuitive experience of the person’s spirit in the post-mortal realm, as well as the messages that they have received to verify the survival of a person’s spirit in the post-mortem domain. These experiences have also included symbolic communication.

**Summary**

In this chapter I explored the essential themes of perimortality as they were perceived by the participants. The three themes, Gathering-up, Giving-up and Enduring Consciousness describe the three phases of the perimortal process. Poetry, particularly the Japanese Haiku form, was used to reflect the embedded meanings in many accounts provided by the participants. Gathering-up reflects the phenomena associated with dying. Giving-up are the essential elements related to phenomena perceived at death. Enduring Consciousness relates to the essential phenomena within participants’ experiences of the post mortal domain.

Through explicating the essential themes related to the process of perimortality, the underlying message that the participants gave through their stories to those of us who are fearful of death, or who grieve the death of a loved one, is to:

Take hold of the hand of absence and let
it draw you through the Pleiades,
giving up wet and dry, hot and cold.
Rumi (Barks 2010, p.227)
CHAPTER NINE

DISCUSSION AND CONCLUSION

Now the sun begins to swing down. Under the peach-light,
I cross the fields and the dunes, I follow the ocean's edge,
I climb. I backtrack.
I float
I ramble my way home.
Mary Oliver (Housden, 2003, p.64)

The above verse continues the traveller metaphor employed throughout this thesis and heralds the end of this study. It describes the function of this chapter, which is to retrace my steps by way of an overview of the thesis. With the familiarity of the homebound traveller for the once untrodden terrain, I am now in a position to disclose the insights and implications gained from the analysis of the participants’ stories, to outline possibilities for future research and discuss the limitations of my chosen methodology. This chapter will close with a summary, conclusion and a final reflection.

Overview of the Thesis

The aim of this study was to explore the healers’ subtle perceptions of the transitional stages of perimortality; “nearing death,” “death” and “after death,” in order to provide a richer insight into the process of both dying and death, so that health professionals and carers may provide more appropriate assistance and support for the dying, and individuals within our culture will have the opportunity to experience their own dying process more consciously and with less fear. The background and the influences which contributed to the generation of this research project were discussed and the aims, objectives, research question and significance of the study were outlined. As my research question resonated both with phenomenological interests and my research aim, I chose this methodology for my study.

By exploring the perceptions of healers during their ministrations to the dying, as well as their experience of death, this study provided an alternative picture of death and dying, so that the dying person and those entrusted with their care may experience this process with less ambivalence and fear. Consequently, the literature chosen for review reflected both the mainstream and the ‘alternative’ views of death and dying. It aimed
to examine the various perspectives of death and dying and the implications of these views regarding the care of those who are terminally ill.

The literature related to the physical, psychological and sociological aspects of dying and death were reviewed and the dominant thinking and arguments as they are reflected in these major themes of thanatology literature were highlighted. The arguments concerning the biomedical determination and definition of death were presented. This section of the literature review exposed the inadequacies and consequences for the dying person and his or her caregivers, when death is perceived strictly as a biological phenomenon.

The literature associated with the spiritual and transpersonal aspects of perimortality was included for review. An account of the major spiritual traditions’ central beliefs about death, the various phenomena associated with dying and death and post mortem contact were presented and discussed. Near death experiences were examined, as they not only provide valuable insights into the dying process, but they also pose questions regarding the nature and location of consciousness. An examination of literature related to end of life experiences was included in the literature review. These phenomena included death-bed visions, terminal lucidity, death-bed coincidences and after-death communication, which were discussed in reference to their veracity, possible mechanisms for their occurrence and the transformative effect that these experiences had for those who witnessed them. These experiences also heralded an alternative view and experience of consciousness than the one proffered by mainstream medical science. The literature underpinning the various theories of consciousness and subtle energies and research related to healing were included and examined. Less familiar phenomena in the literature review were accompanied by a description, to facilitate the reader’s understanding of this literature and to contextualise the healers’ perceptions of similar phenomena presented later in the thesis.

van Manen’s adaptation of hermeneutic phenomenology to his so called, ‘phenomenology of practice’, was chosen to inform my study, and his six research activities were used to structure the methods and processes undertaken to complete the project. Fifteen self identified healers accepted my invitation to participate in the study. The sampling method for this project was purposive, with the aim of inviting participants, who could articulate rich descriptions of the perimortal phenomenon. The interviews were semi-structured and included face-to-face and phone interviews, plus emailed written accounts. The interviews were conversational in approach.
The participants’ personal accounts of the phenomena were audiotaped and transcribed. The transcriptions were returned to the participants to verify their accuracy and for further reflective dialogue, regarding the extent to which participants had explicated their perceptions of the phenomenon. The four criteria applied to this research project to demonstrate trustworthiness were credibility, fittingness, audibility and confirmability (Sandelowski 1986, 1998; Taylor, Kermode & Roberts, 2006). As well as fulfilling these criteria, the underlying intention was to create a phenomenological text that possessed “concreteness, evocativeness, intensity, tone and epiphany;” one which the reader would find “believable” (van Manen, 1997, p.368).

The process of analysis and interpretation was undertaken in order to explicate the subtlety, depth and richness of dying and death, as it was witnessed by healers in their care of people undergoing this transition. The participants’ interview transcripts were closely examined and the themes or “structures of experience,” that were inherent in each story were identified. The participants’ stories were summarized and my voice was interwoven with theirs in these summaries. These synopses provided the means to contextualize the healers’ experiences and illuminate the subthemes that were embedded in each story.

I explored the essential themes of perimortality as they were perceived by the participants. The three themes, Gathering-up, Giving-up and Enduring Consciousness described the three phases of the perimortal process. The theme Gathering-up reflected the phenomena associated with dying. Giving-up revealed the essential elements related to phenomena perceived at death and Enduring Consciousness illuminated the essential phenomena embedded in the participants’ experiences of the post mortal domain.

Relevant poetics and my own research experience and insights were incorporated with the thematic accounts in the text. This process was intended to amplify the thematic meaning and construct a unified explication of the perimortal process. I employed similar strategies of poetizing and integrating research insights when considering each chapter of the thesis. This was done with the intention of blending metaphor with the conceptual and analytic aspects of each chapter, so that the final construction of the thesis had strength, richness and depth and presented as a unified whole.

The study concluded with a discussion of the insights and implications gained from my thematic analysis and interpretation of perimortality. Finally, the limitations of using the chosen methodology to explicate the phenomenon, hermeneutic phenomenology, were
acknowledged and discussed and suggestions for further research were outlined. This chapter concludes with a chapter summary and my concluding reflections.

**Insights**

The phenomenon of perimortality, as perceived by the participants collectively, was revealed in three essential themes described as Gathering-up, Giving-up and Enduring Consciousness. The process of dying, was seen in energetic and psychospiritual terms as a preparatory phase; a stage of Gathering–up of the non-physical aspects of the person, in preparation for ‘giving up the ghost’ at death. One of the primary insights that I gained from my analysis of the participants’ perceptions of perimortality was that akin to the physical aspects of dying and death, the spiritual aspect of this transition demonstrates a precise pattern. When describing death, biologist Lewis Thomas (cited by Dowling Singh, 1999) declared in his book “Lives of a Cell”, that death is after all:

> the most ancient and fundamental of biologic functions with its mechanisms worked out with the same attention to detail, the same provision for the advantage of the organism, the same abundance of genetic information for guidance through the stages, that we have long since become accustomed to finding in all crucial acts of living (p.11).

A similar description could be applied to the non-visible, energetic aspect of dying and death; as the essential elements of Gathering-up of the energy prior to death and the Giving-up of the spirit at death presented an equally meticulous pattern or underlying intelligent plan.

What's more, the participants described how, during this preparatory phase of Gathering-up, energetic changes were perceived as a movement of the energetic field up the body, with a corresponding enlargement of the higher chakras in preparation for the evacuation of the spirit through one of these interdimensional portals (most commonly, the crown), at death. This similarity of the aspects of the ‘Giving-up’ of a new presence when birthing and Giving-up the spirit at death could be perceived as more literal than metaphorical. During the labor of birthing, the cervix opens and birth canal widens as a new life travels down through it to finally emerge through the opened and widened perineum. During ‘the labor’ of dying, the upper chakras widen, as the spirit migrates up through the energetic channels in the body to emerge through the opened and widened crown chakra at death.
The correlation between the breath and prana or subtle energy is well understood by practitioners of mediative practices, such as Yoga, Tai Chi, Qi Gong and Kum Nye, as well as martial art forms, and shamanic and subtle energy healing practices (Achterberg, 1984, 1985; Bottomley, 2009; Brennan, 1988, 1993; Castaneda, 1968, 1976; Chia, 1990; Grof, 2006; Grof & Halifax, 1977; Harner, 1982; Halifax, 1979; Jamal, 1987; Keeney, 1994, 2001, 2006; Kok Sui, 1990, 2002; Lambert, 1993; Lewis, 1998; Markides, 1985; Middendorf, 1990; Neihardt, 1972; Krippner & Villodo, 1986; Villodo, 2007). In these practices, breathing is consciously manipulated to bring subtle energy into the physical body and to facilitate a change in consciousness. This knowledge and application is also long standing in Eastern cultures and is found in Eastern spiritual texts (Muktananda, 1994a, 1994b, 2000; Nhat Hanh, 1990; Patanjali, 2003; Yogananda, 1972, 1975; Suzuki, 1988). However, within the biomedical model, the observation of respiration is usually related to pathological states. A notable exception to this is the management of the birthing process, where respiratory function and its application, as a facilitatory mechanism is well understood.

One of the physical indications of dying is the commencement of a Cheyne-Stokes respiratory pattern. Seen by witnesses to portend the proximity of death, the commencement of this breathing pattern may heighten the emotional intensity and sense of fear and apprehension at the death bed.

Significantly, one of the participants, with a highly developed skill in perceiving subtle energy, recognised this change in respiration correlated with the energetic aspect of dying and death. This interrelationship between breathing and dying seems similar to a change in the breathing pattern during the labour of giving birth, which similarly assists with the passage of the foetus down the birth canal.

This relationship between breathing and the Gathering-up of energy, as a preparation for death, was articulated by Kelly, a participant, who observed:

*The Cheyne-Stoking seemed to bring the energy into her body to leave … So there was this powerful experience of building the energy to leave … It takes energy to leave. It actually takes a lot of energy for some people to die.*

This stage of transition is reminiscent of thanatologist, Foos-Graber’s (1989) recollection of her spiritual teacher’s transition when she said:

*As Paul died, he labored with his breath in long-held exhalations, as I recall having done during childbirth’s labor. While I had concentrated on my breathing*
to help the birth, Paul breathed carefully to ease himself out of life. Slowly he performed what I now call consciousness withdrawal (p.24).

The metaphorical similarity between birth and death is relatively well known and is longstanding. However, the remarkable coincidence is that the normally imperceptible energetic aspect of dying and death mirrors the well known physical pattern of birthing. The implication is that this pattern is not random, but is purposeful and serves a specific function; that of the enduring aspect of ourselves, our consciousness, vacating the physical body.

During dying, there are also corresponding changes in colour, density and activity of the energetic bodies and energy field of the dying person. According to the participants’ perceptions and related literature (Brennan, 1988, 1993; Benor, 2001, 2004; Bruyere, 1994; Gerber, 2000; Karagulla & Kunz, 1989; Kok Sui, 1990, 2002; Lambillion, 2001; Leadbeater, 1927; Maheshwarananda, 2004; Smith, 2011), changes in the energy field reveal among other things (such as physical, mental and spiritual health), a person’s emotional response and interaction with his or her immediate environment.

This responsiveness in the energetic field of comatose, dying, people was expressed by Nick, who reflected that people who cannot see the dying person’s aura or its responsiveness, often think: “Oh, There’s no life in here!” However, Nick has observed that if someone communicates kindness or love to a comatose person, they respond energetically and, you see the change in the colour [of their aura]. They [dying people] respond to it! Similarly, negative emotions displayed by carers or relatives towards the dying person have the opposite effect. Nick perceived that:

If the anger is coming from the people [loved ones], who are mad because they’re leaving them, then the person who’s dying, also feels uncomfortable and become more solid in their colour. It also protects them from crossing over. It delays slightly in some way.

Other phenomena witnessed during this period of the Gathering-up phase were transient out-of-body episodes, which the participants perceived to be practice sessions for the final release of the spirit at death. During one of these episodes, Ellen described a telepathic experience of a comatose person’s responsiveness, when she described her friend Jimmy demonstrating a state of awareness and orienting her to his presence, while out of his body. She compared this experience to her former visit with him and then recalled that on later occasion:
When I walked into the room [this time], I felt very different. As I touched his arm and said, “Good morning Jimmy, it’s Ellen.” I distinctly heard his voice and felt his presence up in the north east corner of the room. He said, "Oh, I’m not down there, I am up here." It was weird!

The insights I gained from these and similar study participants’ accounts were that as people near death, they often seem deeply moribund to those witnessing their physical demise. However, they may be very much more aware of their external environment than we generally suppose, as in the above instance where Jimmy, who had suffered a massive stroke, was deeply comatose, but was still able to intentionally communicate with his friend Ellen. These responses suggest that a dying person may be exhibiting awareness and discrimination in their response to their external environment, in spite of the fact that there is no physical evidence of any response from the person at all. Both experiences suggest the manifestation of a non-cerebral and non-local aspect of the dying person’s consciousness. These phenomena have been reported in numerous studies of OBEs and NDEs (Athappilly, 2006; Blackmore, 1984; Fenwick & Fenwick, 2008; Greyson, 1999, 2000, 2003, 2007, 2009, 2010; Greyson & Stephenson. 1980; Howarth & Kellehear, 2001; Kellehear, 2009; Kelly, 2001; Lynn, 2010; Nahm, 2011; Parnia, 2007; Parnia & Fenwick, 2002; Parnia et al. 2001; LaGrand, 2005).

Deathbed visions (DBVs) were another aspect of the Gathering–up process of dying. This phenomenon has been researched by many scholars and researchers (Barrett, 1986; Barbato, 1999, 2000, 2009; Betty, 2006; Brayne, et al., 2006; Brayne, et al., 2008; Callanan & Kelley, 1997; Campbell, 2008; Ethier, 2005; Fenwick, et al., 2010; Fenwick & Brayne, 2011; Kubler-Ross, 1999; Kellehear, 2009; Krippner, 2006; Mazzarino-Willet, 2010; McConville, 2002; Morse, 1992, 1994; O’Connor, 2002; Osis, 1961; Osis & Haraldsson, 1997).

Towards the end of the terminal phase of illness, meeting and communicating with spiritual helpers was perceived by the healer participants. This aspect of Gathering-up may be misunderstood and misdiagnosed as delirium by medical staff (Barbato, 2009; Betty, 2006; Brayne et al., 2008; Fenwick & Brayne 2011; Fenwick et al., 2010). Consequently, the dying person is medicated or at the very least dismissed by relatives and caring staff. In an attempt to give themselves some light relief during this intense time, witnesses may unwittingly patronise the dying person and minimise or deny the reality of this vital experience.

Deathbed visions have been formally studied since the early 20th Century and mainly relate to the experience of a sense of peace and safety that they provide for the person
dying, as well as the transformative effect that they have on other witnesses at the bedside. The participants’ accounts in my study affirm this understanding as well as deepening it, by revealing the disruptive effect that misunderstanding these experiences has on the process of transition. Moreover, the benefit in assisting the dying person to recognise the presence of deceased relatives was evidenced by a number of healers, who identified these spiritual assistants by name for the dying person. For example, in the following account, Georgia recognised that providing her friend with this knowledge facilitated his transition. She recollected that:

> When I started to tell him the names of the relatives and friends in spirit, who were there to meet him, I could see him separating more rapidly, because there was this sense of “I'm safe,” like a child, who feels safe when there are parents to take them home … I actually saw his life force starting to separate.

Not only does this phenomenon seems to have a very important preparatory role in the dying process, but it brings into question the view that death, by its very nature, must be a solitary, lonely, alienating experience reflected poignantly in the following account by Simone de Beauvoir’s (1969) reflection of her mother’s death:

> Yes. We were taking part in the dress rehearsal for our own burial. The misfortune is that although everyone must come to this, each experiences the adventure in solitude. We never left Maman during those last days which she confused with convalescence and yet we were profoundly separated from her (p.87).

The climax of perimortality occurs with the detachment of the higher bodies and release of the spirit at death. These higher bodies and spirit were perceived variously as a luminous blanket, which lifted off the body and/or a white spirit or white smoke, and or a white cone, which vacated the physical body via an interdimensional portal, most commonly, but not exclusively, the crown chakra. This spirit was perceived to leave the earth plane through an interdimensional membrane or door and was perceived either visually or at times by a sudden change in temperature alerting the recipient to this metaphysical event, even if the person was not at the site of the person’s death. The descriptions of Giving-up the spirit phase of perimortality depicted these experiences as breathtakingly awesome, exemplified by Meghan, when she described her shock and dismay at the sight of her troubled father’s spirit.

> It just lifted upwards out of his body. I was so shocked ... was so shocked to see this enormous white body lifting out of this man. ... It sort of rolled out of the
body and hovered beside the body for the moment, like standing beside himself, and stayed in that position, as if standing on the floor ... [The spirit] was not formed, not recognisable, a white figure, not recognisable and not recognisable energetically. And it was the purity of the spirit that shocked me so dramatically ... it stayed in the room, it didn’t communicate with me, it just stayed present for maybe five or six minutes and then it just disappeared.

An awareness of this remarkable event and the meaning that it holds for those who witness it stands in stark contrast to the experiences familiar to many witnesses of death in the Western world, which give rise to such inconsolable remarks as those by well known author Joan Didion (2005), who wrote in her memoir, following her husband’s death:

The unending absence that follows, the void, [which is] the very opposite of meaning, the relentless succession of moments during which we will confront the experience of meaningless itself (p.188-189).

By contrast, Anya Foos Graber’s (1989) career as a teacher of conscious dying has provided deep insights and personal familiarity with the phenomena that my study participants portrayed. She provides the reader with a contrasting interpretation of the loss of a loved one. In the following passage she described her experience of the death of her beloved spiritual teacher, Paul:

It was like the ceasing of a song – and its absence made clear what his presence had meant. But in its place was a radiant harmony that permeated the room in a much vaster presence which has never left me (Foos Graber, 1989, p.24).

Consequently, the insight that I gained from the experience of the theme of Giving-up was that there is a potential for all of us to experience the moments of death of those who we deeply love in a less abject manner, if the possibility is more widely known by the general community that a more profound process is occurring during these seemingly final moments.

The third and final theme of my analysis of the essential aspects of perimortality was Enduring Consciousness. The unifying aspect of this theme is that following death, the consciousness of the person was perceived to survive and as spirit, it manifested in multiple ways and at different times. These manifestations included perceptions of the spirit in the room immediately after death, at the funeral parlour, and a perception of the presence and responsiveness of the deceased person’s spirit at the funeral. The post-mortem perception of the person was also experienced by some participants as an
auditory message, given by a deceased person, who identified himself or herself and
gave a message to the healer. The purpose of these communications was to verify to
the recipient, the deceased person’s spiritual survival of death. In addition, the
communicating spirit often passed information to be shared with their loved ones.

All of these accounts add to an understanding of the process of perimortality through
the phases of dying, death and the post-mortem state. This version of perimortality is
profoundly different from the predominant materialist, biomedical, secular
understanding and consequent management of this process within Western culture,
with its emphasis on “decline, sickness, decay and withdrawal” (Kellehear, 2009, p.18).

An important reflection regarding the ephemeral nature of these experiences, is that
although these phenomena are not at first accessible to our ordinary perceptions (any
more than subtle biological changes in the dying body are), an attitudinal change
occurs when the possibility exists that there is more to a process than meets the eye.
For instance, when one gazes at a seascape, one does not need literally to see what
lies beneath the surface to appreciate that there is much more beauty and complexity
beneath the surface than is available to our sensory perceptions. Poet, Mary Oliver
(2004), reminds us that the inaccessibility of the ocean floor does not obscure our
realization of its beauty, when she says,

Yet don’t we all know, the golden sand
   Is there at the bottom,
   though our eyes have never seen it,
   nor can our hands ever catch it

(p.5)

Similarly, the phenomena that were revealed by healers in my study may lead the
general community, health professionals and us as individuals, into a deeper
understanding of dying and death and thus facilitate an attitudinal change towards our
own death and our management of those in our care.

**Similar Studies**

An acknowledgment that there is a growing interest in some aspects of the phenomena
illuminated in this study has been demonstrated in the literature discussed in Chapter
Three and Four of this thesis. Furthermore, this increasing interest in death-bed
phenomena and post-death contact and their implications for the clinical management
of dying and post-death bereavement are reflected in a mounting number of studies
that have been undertaken by health researchers into these phenomena during this
decade.

For instance, as a partial requirement for her Master’s Degree, O’Connor (2002)
completed a phenomenological study into “Palliative care nurses’ experiences of
paranormal phenomena and their influence on nursing practice.” In this study, she
interviewed five palliative care nurses to “explore palliative care nurses’ experiences of
paranormal phenomena and the influence these experiences have on nursing practice”
(p.59). O’Connor (2002) found that the nurses she interviewed were not frightened by
the phenomena witnessed and that their “comfort with paranormal phenomena assisted
them to respond to patient reports and to communicate them positively to family and
friends of the dying person, normalising the experience in the palliative care setting”
(p.59).

To fulfil the requirements of her Master’s Degree, McConville (2000) undertook an in-
depth literature review, entitled “Ways of Knowing: Accounts of ‘Sense of Presence’
Experiences and Deathbed Visions, 1969-1999”. Her findings demonstrated that
research into deathbed phenomena and their effect on the experients was relatively
sparse, and that family members and nurses provided most of the accounts of DBP,
whereas there was very limited input from medical practitioners in the studies analysed.

Campbell (2004) undertook a hermeneutic phenomenological study entitled,
“Transitions in Death: The Lived Experience of Critical Care Nurses” for her Masters in
Science. Six critical care nurses were recruited from the Intensive Care Unit (ICU) of
the Lethbridge Regional Hospital in Lethbridge, Alberta, Canada, who had encountered
post-death experiences with their deceased patients. A qualitative research design
was chosen using Parse’s (1985) phenomenological research method “to assist in
discovering the meaning for critical care nurses of the experiences they had when their
patients died.” Campbell found that “these experiences brought a sense of peace and
comfort to each individual as well as reinforced their individual belief patterns about life
after death” and “the experiences of the phenomenon of death by critical care nurses
have a significant impact on each individual and that further research and
understanding of this impact is needed” (Campbell, 2004, p.iii).

For her doctoral dissertation, Drewry (2002) undertook a phenomenological study
entitled “Purported After-death Communication and its Role in the Recovery of
Bereaved Individuals”. This study explored how after-death communication (ADC)
“affects the grieving process of the bereaved, and more specifically, how ADC may
result in a sudden, complete, and spontaneous lifting of the burden of grief” (Drewry,
Seven participants fulfilling the inclusion criteria were recruited and the resultant semi-structured interviews were analysed using phenomenological reduction methods of Moustakas and Hycner to extract the essential constituents of the ADC experiences. Following the caveat regarding the inability to generalise her findings, Drewry claimed that to “varying degrees on a pragmatic/esoteric continuum, the participants experienced, as a result of their ADCs, long-term, liberating, transformational changes in awareness of self, relationship with the deceased and new understanding of the meaning of life, death, and the divine” (p.2).

Nowatzki and Grant-Kalischuk (2009) conducted a phenomenological hermeneutic study of post-death encounters “in the context of grieving, mourning and healing processes. Semi-structured, in-depth interviews were conducted with 23 individuals, who had reported a post-death encounter following the death of a loved one” (p.91). The researchers stated that “the encounters profoundly affected the participants’ beliefs in an afterlife and attitudes towards death and dying. As consequences of their experiences, the participants identified the concepts of peace without fear of death and comfort which significantly impacted on their grief.” The researchers concluded that “health care professionals and counsellors should be educated about post-death encounters so that the bereaved can share their experiences in a supportive and understanding atmosphere” (p.91).

Similarly, for her doctoral dissertation, Hill (2011) undertook a phenomenological study to explore “Synchronicity and Grief: The Phenomenology of Coincidence as it arises in Bereavement”. The outcome of the study arrived “at a description of the essence of participants’ experiences of meaningful coincidences related to dead loved ones” (p.iii). Following a period of active grief, Hill (2011) found that “a perception of a meaningful coincidence occurred, which led to an effective response of surprise, awe, or wonder. This was followed by a cognitive attribution as to the causality of the coincidence. Finally, participants experienced some meaningful change in their belief system or in their life direction” (p.iii). Her conclusions also pointed to the potential benefits that an understanding of this phenomenon would bring to health care professionals undertaking grief counselling with the bereaved.

Parker (2005) conducted a multiple case questionnaire/interview study with 12 bereaved participants, to investigate their reports of extraordinary experiences (EEs). The purpose of the study was to describe the participants’ grief processes from content analyses of their accounts. This study found that “despite some ongoing grief work and complicated grief patterns, 11 participants had reached an adaptive grief outcome.” Parker found that EEs played specific roles and fulfilled specific needs within and
outside of the context of bereavement, for these individuals and that EEs “also facilitated the assimilation/accommodation of death by reinforcing participants’ "personal mythologies" regarding death and an after-life. Furthermore, the findings of this study “support the emerging model of grief that posits that maintaining continuing bonds with the deceased can be adaptive” (Parker, 2005, p.257).

As the final example, Taylor (2005) undertook a qualitative study, using semi-structured interviews, with the intention of providing insights into the bereaved client's perspective on the content and process of their counselling experiences. Taylor stated that “this study aimed to identify whether or how counsellors facilitate exploration of clients’ ‘sense of presence’ of the deceased and which theories they use in client work.” Taylor (2005) found that “80% of the counsellors were not perceived by participants to have worked with them satisfactorily in relation to their sense of presence of the deceased or in relation to the story of the death itself” (p.53).

These studies are similar to mine in that they all explored some of the aspects of subtle phenomena that occur either before or after death. The major difference between mine and these others is that the above researchers explored the lived experience of witnessing phenomena either before or after death and the effect that such experiences had on the nurses, who witnessed these phenomena and/or their effect on the witnesses' subsequent nursing practice (Campbell 2004, McConville, 2000, O’Connor 2002). Alternatively, the studies explored the effect that the experience of such phenomena had on loved ones' experiences of bereavement and healing or the capacity of counsellors to adequately to facilitate their clients' sense of presence of the deceased and then to address such disclosures in a satisfactory manner (Drewry, 2002; Hill, 2011; Nowatzki and Grant-Kalischuk, 2009; Parker, 2005; Taylor, 2005).

In contrast to these studies and similar studies discussed in the literature review (Barbato, 1999, 2009; Barrett, 1986; Benor, 2006; Betty, 2006; Brayne, et al., 2006; Brayne, et al., 2008; Callanan & Kelley, 1997; Daggett, 2005; Ethier, 2005; Fenwick, et al., 2010; Fenwick & Brayne, 2011; Greeley, 1987; Grof, 1994; Kalish & Reynolds, 1973; Kellehear, 2007; LaGrand, 2005; Lovelace & Fenwick, 2008; Mazzarino-Willet, 2010; Morse, 1992, 1994; Nahm, 2009; Nahm, Greyson, Kelly & Haraldsson, 2011; Osis & Haraldsson, 1997), my study explored the three phases of perimortality. It aimed to illuminate, from the healers' perspectives, the essential elements that constitute the subtle non-physical aspects of this transitional process. It explored the phases of the phenomena and presented the perimortal process as a unified phenomenon, that of the transition of consciousness, when preparing to vacate the physical body (Gathering-up) during the dying process, followed by a “giving up the
ghost” at death (Giving-up) and finally, after-death phenomena, which suggested the survival of the person’s consciousness in the post mortal state (Enduring Consciousness).

The researchers in previously cited studies recruited or observed people (such as health workers, terminally ill individuals, or those witnessing this transition in others), who had spontaneous experiences of either pre-death or post–death phenomena. In contrast, a distinguishing characteristic of my study was the recruitment of self identified healers as participants, with skills and abilities, which allowed them to observe the phenomena, near, during and after death, that are outside the range of ordinary perception. As healers, these participants looked for, recognised and used the energetic changes that they perceived, to guide them in healing practices, which they utilized during their clients’ transitions, or alternatively, in their role as medium, to facilitate healing in the bereaved.

As with most abilities, the participants’ skills had developed to a fine degree with practice (mostly, at least 20 years). These abilities allowed them to report (often in exquisite detail) the phenomena that they perceived. Furthermore, this particular form of witnessing allowed these healers the capacity to move beyond the ‘visceral fear’ of the physical deterioration, which portends death, or the sense of astonishment at the unfolding phenomena that less experienced witnesses have communicated. Consequently, this sense of compassionate detachment that they employed as healers, permitted them to participate fully in their clients deaths, as well as to perceive and articulate the subtle phenomena manifesting during this perimortal period.

In summary, unlike the studies cited in this chapter or in the literature review, my study aimed to explicate the essential phenomena as they were perceived by healers to occur before, during and after death. Thus, it was the illumination of the essential elements of the phenomena themselves, which were of interest, rather than the participants’ responses to them. Therefore, I assert that this essential difference between my study and those cited in this and previous thesis chapters, justifies my claim that this study has added to the body of knowledge in this area of thanatology.

Implications

In spite of the efforts of researchers and clinicians to counter the biomedical view of dying and death and to provide more appropriate assistance for the terminally ill, the central beliefs that our culture holds towards all aspects of the perimortal process have
not shifted dramatically for the past couple of Centuries. Glenys Howarth (2007) summarised this situation when she reminded the reader that a major characteristic or “last taboo” of modern Western societies is “to avoid any consideration of death or recognition of the role of the dead” (p.19).

When undertaking my study, I endeavoured to add to the body of knowledge regarding the transformative aspects of perimortality, with the aim of redressing this cultural attitude towards dying, death and the post mortem state. My rationale was that our understanding of perimortality has profound consequences for our manner of living, ageing and dying and our behaviour towards others who are undergoing these life transitions.

The aim of this study was to explore the healers’ subtle perceptions of the transitional stages of perimortality “nearing death”, “death” and “after death” to provide a deeper insight into these processes, so that individuals within our culture have the possibility of anticipating their own dying and death with less fear and so they can experience this transition more consciously and peacefully. In addition, it aimed to present a richer and deeper understanding of the perimortal process to health professionals and carers, so that they might provide more appropriate assistance and support for the dying.

It is appropriate to discuss the implications that this study holds for individuals first, before proceeding to health professionals and carers, for no matter what descriptive designations we have such as nurse, psychologist, doctor or physio, relative or carer and the like, each of us are primarily individuals, whose life, if it is situated within a Western culture, privileges biomedical knowledge over the alternatives. Furthermore, as discussed in earlier chapters of this thesis, our understanding and interpretation our own lives and others is embedded and contextualized within this culture (Heidegger, 1962; Gadamer, 1976, 1989; Ricoeur, 1981, 2003; van Manen, 1997a) and as individuals, it is our personal approach to our own death that informs the way we approach the dying or death of those in our lives and in our care.

If dominant biomedical discourses regarding dying and death, which focus on suffering and dissolution, were juxtaposed with the transcendent aspects of perimortality, as they were described by the participants of my study, it is my belief that individuals in this culture would have the opportunity to temper their fear, abhorrence and anticipatory suffering regarding their own mortality. Furthermore, this alternative viewpoint would facilitate a cultural alternative to the current societal projection of disgust or fear onto those who represent mortality, (such as people who are aged and/or chronically or terminally ill), resulting in their stigmatisation and marginalisation. A different and
deeper knowledge of dying and death and post-mortality, with consequential attitudinal changes, could lead individuals within our culture to a more authentic acceptance of all of life’s transitions and most particularly, the final one. Moreover, individual epiphanies regarding perimortality may well result in more appropriate consideration and care for the individuals undergoing these experiences, who may be entrusted to our personal or professional care.

In considering the personal conditions necessary to facilitate these changes I have identified a number of ‘psychological orientations’ that are prerequisites for individuals, carers and health professionals to adopt in order to experience the transformative aspects of perimortality. These psychological orientations include openness, intention, quiet mind and attention. The consequences of these psychological orientations towards death are gratitude, reassurance, courage, authenticity, a sense of the sacred, leadership and transcendental meaning.

Openness

For individuals within our society to meet the inevitability of death with less fear and more curiosity and reflection, we need to allow the possibility that our own dying process is purposeful and transforming, that death is not synonymous with annihilation and that our consciousness endures, following biological death. This requires openness to the possibility that:

- There is a profound transformation of Gathering-up occurring during dying (although not readily perceptible to our physical senses), which is facilitated or impeded by the attitudes and behaviours of those involved in care giving.
- At the time of death there is an extraordinary phenomenon unfolding; that of the evacuation of the non-physical aspects of the self; a ‘giving-up’ of the spirit.
- Following death, the consciousness of the person endures and this ‘enduring consciousness’ allows for the prospect of experiencing some manifestation of continued connection with the deceased person, as has been described in this study and the studies cited in this and other chapters (Barbato, 1999; Daggett, 2005; Greeley, 1987; Haraldsson, 1988; Kalish & Reynolds, 1973; Krippner, 2006; LaGrand, 2005; Nowatzki & Grant-Kalischuk, 2009; O’Connor, 2002; Parker, 2005; Taylor, 2005).

Intention

To suspend one’s fears, personal anxieties or grief in order to assume a “listening gaze”; a gaze is required which looks at the ordinary, with the receptivity that intends to
invite the extraordinary. Even if there is no direct perception of subtle phenomena described in these and other studies, the psychological stance of setting the intention allows for the possibility of a deeper process occurring during this transition and brings the possibility of perceiving these experiences closer for each witnessing individual.

In their study entitled, “Believing is Seeing,” Langer et al (2010) conducted three different RCTs and successfully tested their hypothesis that visual acuity could be improved through psychological means, namely manipulating the subject’s mindset regarding his or her capacity to see. One could perhaps extrapolate these findings to my study and hypothesize that other higher perceptions are more available if one allows the mind to open to these possibilities. More importantly, most people with the ability to perceive subtle phenomena acknowledge that no matter how or when they acquired their gift, this perceptive ability is available at different levels to most who seek it. Therefore, no matter what level of skill one has, with practice (like all skills), this ability will develop.

Furthermore, other projects reviewed in the previously cited studies revealed that aspects of some of these experiences are not only accessible to clairvoyantly gifted healers, but also to energetically ‘naive’ individuals, such as nursing staff and relatives and carers (Barbato, 1999, 2009; Barrett, 1986; Benor, 2006; Betty, 2006; Brayne, et al., 2006; Brayne, et al., 2008; Callanan & Kelley, 1997; Daggett, 2005; Dowling-Singh, 1999; Ethier, 2005; Fenwick, et al., 2010; Fenwick & Brayne, 2011; Greeley, 1987; Grof, 1994; Kalish & Reynolds, 1973; Kellehear, 2007; LaGrand, 2005; Lovelace & Fenwick, 2008; Mazzarino-Willett, 2010; Morse, 1992, 1994; Nahm, 2009; Nahm, Greyson, Kelly & Haraldsson, 2011; Osis & Haraldsson, 1997).

Quiet Mind

When anxiety and fear are reduced, it is possible to acquire a quiet mind, which is necessary for the perception of subtle phenomena. In order to experience the transcendent experiences described during all stages of the perimortal process, one must obtain a certain emotional spaciousness, to be accessible to the experience. Just as subtle physical experiences are not available when there is an overstimulation or one’s neuromuscular system (Feldenkrais 1979, 1984; Rywerant, 1983), similarly, experiences such as those described by the participants are not possible, if one is constricted with strong emotions that dominate one’s physical and emotional experiences. Disturbing or fearful emotions, which often manifest around the deathbed, may result in an inward self focus, which makes other more subtle and transcendent experiences less available.
Attention

Attention to what unfolds in each phase of perimortality will allow the witness (such as a health professional or carer), to avoid self absorbed behaviours and assist him or her to be fully present and participatory in a more, peaceful, thoughtful manner, when witnessing or assisting with the deaths of others. The psychological orientation of attention is a particularly important characteristic for health professionals to adopt when undertaking care for the dying. Madjar & Walton (1999) coined the term the 'listening gaze', which they derived from novelist and ex-nurse, Elizabeth Jolley’s description of an observational characteristic, which she believes is often common to both professions. This ‘listening gaze’ has a searching, compassionate and detached quality and shares a commonality with the ‘phenomenological gaze’. These qualities of attention are also similar to a mindful approach described by Buddhists including Levine (1986, 1987) and Chodron (1991, 1997, 2001) and healers, such as Krieger (1992), Kunz & Krieger (2004), Kok Sui (1990, 2002), Brennan (1988, 1993) and Lambillion (2001), who describe this form of attention as a prerequisite for healing. This mindful or listening gaze transcends the “eyes of the flesh” and is in direct contrast to the objectifying and often depersonalising clinical gaze, cultivated and used by many health workers.

The consequences of these psychological orientations of openness, intention, quiet mind and attention towards death are gratitude, reassurance, courage, authenticity, a sense of the sacred, leadership and transcendental meaning.

Gratitude

Gratitude will be felt for the privilege of being in the presence (whether directly perceptible or not) of such an awe-inspiring event as another’s perimortal transition. Gratitude comes from knowing that the more one is respectfully and openly present as another person dies, the more recognition and reassurance one gains that there is nothing to fear regarding death.

Reassurance

No matter how apparently isolated or solitary a particular death may seem, the participants’ perceptions were that no one dies alone and each individual has the possibility of facing his or her death with the confidence that there is spiritual help and guidance. The reassurance that comes with this knowledge opens up the possibility for individuals to feel safer around the context of their own death and it offers reassurance
to relatives and carers who cannot or could not be present at the bedside to support their dying loved ones.

**Courage**

Courage is needed to give up the need to conceive of disease and dying with war metaphors, such as a “win or lose battle”, “fighting spirit” and “the war against cancer.” This contemporary conception of illness and its consequences causes needless emotional and physical suffering for those often conscripted unwillingly into such battles by zealous medical staff and/or fearful relatives, and it puts pressure on the terminally ill to ‘fight on’ even when they are actively dying. The alternative and deeper view of dying and death described in my study may provide a different context from that of personal annihilation for the dying person. Consequently, it may give them permission and encouragement to prepare for his or her death with more acceptance and peace, rather than what may seem to be the only option at present; that of “fighting to the death.”

**Authenticity**

One of the most significant influences of the phenomenology movement and particularly hermeneutic phenomenology came from the philosopher, Martin Heidegger. The central focus of Heidegger’s philosophical thinking was related to facing the inevitability of one’s own death, so it is relevant to acknowledge these ideas in this context. Heidegger (1962) claimed that, “for the most part ‘Dasein’ covers up its own Being-towards-death, fleeing in the face of it” (p.295). Furthermore, he concluded that rather than deflecting the phenomenon of one’s death onto the anonymous “other,” or being absorbed with everyday objects or endeavours as a means of distraction from serious contemplation of one’s death, the individual would be better served to consider more thoughtfully, the inevitability of his or her own death.

The benefit to the individual in following Heidegger’s (1962) counsel would be to live an authentic life. These insights are also reflected in the major spiritual traditions, particularly in Buddhism. However, given that the dominant story regarding death in Western culture is dismally pessimistic, regarding the process of dying and the outcome of death, one can perhaps understand the reluctance for individuals to follow these guidelines. The alternative perspective presented by the participants of my study, provide encouragement for individuals to approach the subject of perimortality more consciously and with less trepidation.
A Sense of the Sacred

Because of their experiences of perimortality, the participants of this study acknowledged that they had gained a sense of meaning and sacredness in their attitudes to dying and death. One could assume that with access to this knowledge and the potential for a similar experience, health workers, who reach a deeper understanding of the transcendent aspects of perimortality, by becoming more receptive to the subtle phenomena manifesting during this time, would also appreciate ‘a sense of the sacred’ related to perimortality. This awareness could increase their incentive and sense of professional responsibility, to provide a physically comfortable, quiet, and emotionally safe environment for all dying individuals, including those suffering from dementia of other chronic diseases, whose dying trajectories are less clear.

Leadership

As this knowledge of the deeper, more subtle aspects of dying and death allays an individual’s fear of death, the potential would exist for individuals who are health professionals, to provide more appropriate leadership, by guiding relatives and friends to act in the best interests of the dying person. This guidance may include affirming the dying person’s reality, about any phenomena reported to the relatives, and by assisting loved ones and other witnesses to suspend their personal beliefs about their dying relative’s conscious state. For, if communication in his or her presence remains respectful, the person’s transition is facilitated, rather than impeded.

Transcendental Meaning

Finally, the knowledge that something much more profound is occurring during the perimortal period, allows relatives and friends caring for the dying person to transcend their own feelings of sorrow, fear or anger and to respond to the dying person calmly and at all times kindly, in order to provide an optimal environment for the person to complete his or her transition.

Summary

In order to experience the transformative aspects of perimortality, described by the participants of my study, it is necessary to change the central beliefs that our culture holds towards all aspects of the perimortal process. This is important so that individuals within our culture regard the prospect of their death with less fear and can experience this transition more consciously and peacefully. As a consequence of this
individual attitudinal change, individuals in their professional and social roles might then provide more appropriate assistance and support for the dying in their care.

A number of ‘psychological orientations’ that could facilitate this attitudinal change were identified as an openness towards the possibility, that a profound spiritual transformation occurs during dying and death and that consciousness endures following biological death. The psychological stance of setting the intention to suspend one’s fears, personal anxieties or grief, in order to quieten one’s mind and assume a “listening gaze,” while assisting in another’s transition, brings the possibility of perceiving these experiences closer for each witnessing individual. Attention to the subtle aspects of each phase of perimortality, will allow the witness (such as a health professional or carer), to be fully present and to participate in a more peaceful, effective manner, when witnessing or assisting with the deaths of others.

The consequence of this attitudinal change is that it encourages a sense of gratitude for the privilege of being present; thereby, contributing in a meaningful way during the death of another person. It also brings reassurance that spiritual assistance is at hand, no matter what the context of one’s own or another’s death. This shift in mind-set promotes the courage for individuals in their various roles, to recognise the difference between ‘a time of illness’ and ‘a time of dying’ and consequently, to prepare for his or her death with more acceptance and peace. The alternative perspective presented by the participants in my study provide encouragement for individuals to live more authentic lives and instead of projecting the phenomenon of one’s death onto the anonymous “other,” to approach the subject of perimortality more consciously and with less foreboding.

A sense of meaning and sacredness in their attitudes to dying and death may allow health professionals to provide more appropriate leadership, by affirming the dying person’s reality and guiding relatives and friends in their care. Finally, the knowledge that dying and death has a transcendent meaning, would encourage relatives and friends caring for the dying person, to rise above their own feelings of sorrow, fear or anger, in order to provide an optimal environment for the person to complete his or her transition.

Further Research

As a prelude to discussing possible further research, it is pertinent to note that researchers in the fields of thanatology, palliative care and subtle energy research have acknowledged the methodological difficulties associated with gathering this type
of evidence with randomised control trials (RCTs). For instance, Wheeler, Teirman, Abenethy and Currow (2012) conducted a bibliographic study, to examine the topics and funding for palliative care studies. They found that of 189 eligible studies, approximately 50% were unfunded and only five RCTs were reported.

Because of complexities of the physical, psychological, existential and spiritual issues that face the dying person and practical issues including recruitment, retention, sample size and blinding problems, RCTs have been considered inappropriate and unethical in the palliative care setting and researchers have noted that it is problematic to implement traditional taxonomies, to assess and grade levels of evidence (Aoun & Kristjanson, 2005; Bennet, 2000; Grande, 2000; Kaasa & De Conno, 2001; Sigurdhardottir et al. 2010; Wheeler, Greene, Tieman, Abernethy, Currow, 2012). Consequently, as most palliative research is qualitative in nature, there is a growing petition for clinicians to accept evidence presented from qualitative research (Aoun & Kristjanson, 2005; Bennet, 2000; Grande, 2000). Similarly, researchers in thanatology (Caverhill, 2002; Jordan, 2002; Silverman, 2002; Wright & Flemons, 2002) have identified comparable difficulties in conducting quantitative research, including that of gaining access to participants.

Other issues exist in measuring the human energy field, not the least of which is the design of an instrument, that reliably captures the intricate subtleties of the multiple aspects of it. In the same way that quantum data are more accessible via mathematical hypothesis than instrumentation, the observation and quantification of the energy field remains problematic and is still evolving. Energy field researcher and theorist William Tiller (1993) argues that these energies “can only be converted to an observable in our present condition via an intermediate transducer ... [which currently] are primarily living systems” (p.303).

Therefore, given the current multiple ethical and practical complexities related to designing RCTs, to study the phenomena explored in my study, future research into this phenomenon would be better achieved using other methodological designs, until the identified issues have been resolved. However, case studies, which use a combination of orthodox assessment tools and a healer’s expert perceptions, could provide a means to explore the possible meaning underlying phenomena observed in ICU and Palliative Care at the end of life. One of the insights gained from this study, which invites further investigation, was in the perceived responsiveness of unconscious patients’ energy fields, to the interactions, activities and communications in their immediate environment.
Serendipitously, thanatology researcher Michael Barbato (2001) used a BIS index monitoring tool to gauge “the level of awareness in 12 patients who were tracked from the onset of unconsciousness until death, and the levels were then related to the patients’ clinical state and treatment” (p.102). This tool is an instrument used to assess the level of sedation or hypnosis, in anaesthetized or critically injured patients. Barbato (2001) noted that whereas the BIS score often fluctuated in response to uncontrolled pain, other fluctuations occurred, while the patient was seemingly at peace. Furthermore, a sharp increase in BIS was observed in 1/3 of the patients immediately before death.

Further research, using a multiple case study design could be done, to clarify what is occurring during these fluctuations, by combining this assessment tool with the observations of a healer, who is not only skilled at perceiving the energy field in detail, but is also able to perceive other deathbed phenomena; thereby, aiming for a deeper understanding of the subtleties occurring during these final moments of transition. Such a study would have to be very sensitively designed. The sample of patients recruited for such a study could possibly be terminally ill people, who are already having some form of spiritual healing and who have an understanding of dying, as well as the possible benefits the study, so that this potential intervention is in no way intrusive to the dying person or family members.

Whereas aspects of death bed phenomena and post death contact have been explored by a number of researchers, an area examined in my study, which requires further attention, are the subtle phenomena occurring at the time of death. Medical clinicians (Chawla, Akst, Junker, Jacobs & Seneff, 2009) reported that while monitoring levels of consciousness in seven patients, whose life support systems (ventilation and medication) were being withdrawn, there was drop in the monitor reading close to zero, with the cessation of blood flow and oxygen to the brain. However, following cardiac death and the formal pronouncement of death, an abrupt increase in EEG activity was recorded on the BIS monitor. This unexpected activity lasted approximately a minute or so, before abruptly dropping to zero. Although these authors have speculated that this discovery probably has an unrecognised physiological cause, they have noted that “the end of life is a poorly studied area of clinical medicine and deserves more attention” and that “this notion of an electrical signal that can be objectively measured at or near the time of death has been a source of comfort to many of the families of those patients who succumb in the ICU” (Chawla, Akst, Junker, Jacobs & Seneff, 2009, p.1099). Consciousness researchers, Hameroff and Chopra (2010), are less guarded in their speculations regarding the significance of this observation, claiming that this
“burst of synchronised, coherent bi-frontal brain activity ... indicative of consciousness”,
cannot be explained as “last gasp neuronal spasms throughout the brain” (p.3).

As the participants in my study described the evacuation of the spirit at the time of
death, case studies could possibly be designed, using the BIS monitor in combination
with a skilful healer, to explore the correlation between a healer’s subtle perceptions at
the time of death and the phenomena recorded and described in Chawla et al.’s study.
In order to protect the privacy and sensibilities of the dying person, the same caveats
regarding study design and implementation would apply, as described previously.

There is a precedent in combining an objective instrument, to give objective
physiological data, in combination with the subjective observations of a skilful healer,
as it was used by Dr. Valerie Hunt (1977). She used an oscilloscope in combination
with the observations of a gifted healer, to successfully record and correlate the
changes in the electromagnetic component of a person’s energy field, in response to a
Rolfing sessions. However, there are many more complexities involved and
sensitivities to be considered, in using this approach in palliative care or ICU settings.

One of the problems that has been identified in most studies pertaining to perimortality
or the observation of subtle energy phenomena, is the reluctance of witnesses
(including the participants in my study), to disclose their experiences to friends, family
or colleagues, for fear of ridicule and marginalisation. This has not only detrimental
consequences for the witness of the phenomena, but it means that these important
narratives remain unavailable in the public and professional domain. For this reason, I
believe that as many opportunities as possible should be given to so called ‘naive
witnesses’, to tell the stories of their experiences of aspects of the perimortal process.

In spite of Western biomedical denigration of the subjectivity of anecdotal evidence,
storytelling has been a potent force throughout the millennia, to give meaning to human
experience and to influence cultural change, as it informs and frames the questions of
both clinicians and researchers. This is evidenced by the evolving arguments, claims
and counter-claims and continuing research, that has occurred in response to the initial
stories of NDEs. Therefore, further research using qualitative designs will continue to
stimulate discussion and fulfil aims similar to those in this study.

From my perspective, based on the literature search, phenomena which are
experienced at the time of death are the least explored aspect of perimortality.
Therefore, further studies using phenomenological or narrative approaches, would
make valuable contributions in the exploration of the subtle phenomena perceived at
death. Furthermore, these studies would give non-healers, such as family members and loved ones, a voice to describe the transcendent experiences perceived at death. Studies such as this could add to the body of knowledge, regarding dying and death and make progress towards familiarizing the general community with these phenomena. The studies could provide a means for members of the general community to recount their experiences, as well as providing a means of acknowledging the validity of their accounts.

Other ways of deepening our understanding of the prevalence of spontaneous witnessing of subtle phenomena, at the time of and immediately after death, could be explored by constructing a survey similar to the one used by Haraldsson’s (1988) survey of claimed encounters with the dead.

Qualitative research into these phenomena do not resonate with researchers and members of the public, who are philosophically committed to research processes that set out to make refutable truth claims, and to prove or disapprove that the phenomena explicates in this or other studies exist. However, my study (and possibly future qualitative research), aims to explore the underlying meaning of perimortality, rather than the laws related to this important transition. This and other qualitative research will provide valuable information about phenomena, which are highly complex, elusive and are presently poorly understood within the context of Western scientific reductionist thought.

**Limitations**

In undertaking this phenomenological study, I have faithfully followed van Manen’s understanding of phenomenology and as such subscribe to his view that “every interpretation can be called into question; every inquiry can begin anew; every hermeneutic phenomenological conversation is unending” (1997, p.xv). By defining the limitations for all phenomenological studies in this manner, the implications of this statement for my study are self evident. However, it is still important to acknowledge, that in attempting to reveal the essence of the phenomenon of perimortality, I am aware the essences explicates in my study can only be a partial illumination of the profoundly multifaceted phenomena associated with perimortality. By their very nature, the subjective perceptions of the participants in my study are unique to them and are not necessarily identical to others' perceptions of this profound and complex phenomenon.
Although I have been as faithful as I can to van Manen’s precepts and to the best of my ability, I have given the participants’ accounts of their experiences and have worked with their data, without imposing my own assumptions or prejudices on them, a limitation of phenomenology is that these participants’ accounts and my interpretation of them can never fully explicate the full depth or richness of these phenomena, so there are always more possibilities for deeper or different understanding of these experiences.

Summary

This chapter integrated all of the aspects of my study, by giving an overview of the thesis chapters. I discussed the insights that I gained from the analysis of the participants’ interviews. In my discussion of projects similar to this study, I described the distinguishing characteristics between my study and those presented, and in so doing, submitted an argument for how my study has extended the existing body of knowledge in this area. The implications of the study were discussed in the light of how it would benefit the individuals within Western society, health workers, family members and/or carers. The possibilities for further research were outlined and the limitations of my chosen methodology were considered. This chapter ends with a conclusion and a final reflection.

Conclusion

The objectives of this study were to provide a richer insight into the process of both dying and death, so that health professionals and carers may provide more appropriate assistance and support for the dying; and Individuals within our culture will have the opportunity to experience their own dying process more consciously and with less fear. These objectives were realized by using a phenomenological hermeneutic approach, guided by van Manen’s elucidation of this methodology, to explore healers’ subtle perceptions of the transitional stages of perimortality.

An analysis and interpretation of the participants’ accounts of the subtle phenomena illuminated each transitional phase related to ‘dying’ (Gathering-up), ‘death’ (Giving-up) and ‘post mortality’ (Enduring Consciousness). A deeper understanding of the phenomenon of perimortality could influence individuals within our culture, to be less fearful of their own death. Furthermore, this knowledge could influence how health
professionals and carers respond to the needs of dying people and the bereaved in their care.

My study has contributed to the body of knowledge related to perimortality, by illuminating subtle phenomena related to this important transitional process. This alternative understanding of perimortality calls into question the dominant biomedical view of dying and death, which often results in anxiety and suffering within our Western culture. The study allows receptive individuals, health professionals and carers, to perceive death from a transcendent viewpoint and, consequently, it has the potential to contribute to a profound change of attitude towards one’s own and other people’s deaths.

Final Reflection

This study was conceived in the sorrow of hearing that my sister had advanced breast cancer. It has taken much longer to complete than I would have foreseen at its inception, because its progress has been punctuated with stops and starts related to the illnesses and deaths of a considerable number of much loved relatives and friends.

In retrospect, I recognise that my study had a timing which was independent of my needs or wishes, but which was directly related to my capacity as an apprentice thanatological/phenomenological researcher, to understand first-hand, the many issues related to the topic that I had committed to explore. Consequently, its sometimes tortuous progress allowed me to deepen my personal understanding of death and dying. Moreover, the grief and mourning that accompanied the deaths of my beloved relatives and friends, presented me with an opportunity to grow and deepen emotionally, so that I could make a more worthy contribution to this study.

The potential value of my research topic has been acknowledged by some of my colleagues and all of my friends. However, like most endeavours that stand outside of the safety of conventional knowledge, it has had its share of detractors. Although it presented its own set of challenges, this experience was valuable for me, as it gave me the clarity to understand the politics of truth claims, of what constitutes truth, and to appreciate the privilege of presenting this particular aspect of it. Mary Oliver’s (2009) verse from the poem, “Mysteries, Yes” summarises this insight. It is dedicated to my participants, who made this study possible and who have consequently, deeply enriched my life.
Let me keep my distance, always, from those who think they have the answers.
Let me keep company always with those who say “Look!” and laugh in astonishment, and bow their heads.

Mary Oliver (p.62)
References


Cameron, B. (2002). The Nursing "how are you?". In M. van Manen (Ed.), *Writing in the dark; Phenomenological studies in interpretative inquiry.* (pp. 10-26). London, ON: Althouse Press.


Dowling Singh, K. (1999). The grace in dying: How we are transformed spiritually as we die (2nd ed.). Dublin: Gill and Macmillan Ltd.


EXPLORING THE PERCEPTIONS OF ENERGY HEALERS WHO ARE WORKING WITH THE DYING: A HERMENEUTIC APPROACH.

My name is Kate Jackson. I am a physiotherapist and I am currently studying towards a Doctor of Philosophy in Health Science at Southern Cross University in Lismore, NSW. I am interested in exploring the perceptions of energy healers, working with people who are dying.

I wish to invite you to join me in this project. I hope that in doing this research, I will provide a richer insight into the process of dying and death, so that health professionals and carers may provide more appropriate assistance and support for the dying. Furthermore, individuals within our culture will also have the opportunity to experience their dying process more consciously and with less fear.

If you agree to participate in the project, I will meet with you to provide you with more details of the project. I will answer any of your questions and go through the consent form that is attached. You are free to withdraw from the research at any time without prejudice, and upon your request, your contributions will be destroyed. A pseudonym will be used to protect your identity, and all personal information will be kept confidential. Similarly, any information from the research will be kept in a locked cupboard and it will not be discussed with anyone apart from my university supervisor. This information will be kept in this manner for five years upon which time it will be destroyed. All participants will be requested to maintain the confidentiality of what they say in their interviews.

The research will involve up to three interviews, each of an hour’s duration. During these interviews I will ask you as an energy healer, to share your experiences of working with people who are dying. The interviews will take place at a venue of your choice. I will be taping these interviews and transcribing them myself. You may ask for the tape to be turned off at any stage during these interviews. Copies of the transcripts will be given back to you to check the accuracy of your contributions and to allow for any changes that you may care to make.

Because assisting people who are dying is intense work, which often results in the development of deep relationships with clients, the interviews may be emotionally demanding and unhappy memories may re-surface. If you have any unsettling emotions during the interviews, you will be free to take time out if you wish, and I will be available to talk with you. If you require further support, I will provide you with the names of counselors and the contact details of my supervisor, Professor Beverley Taylor. (See list attached)

I would be happy to discuss any questions that you may have about the research. Please feel free to contact me on 02- 66895664 or e-mail me at kjacks10@scu.edu.au

Thank you.

Kate Jackson
INTERVIEW – CAROLYN

K: You have identified as an energy healer...

C: I guess the first episode that comes to mind, is I used to work in [a city]. It was actually near a corner where there were quite often accidents and one particular day I was working on a client, and there was an accident. And you know, you could tell it was a bad one, and - when I'm working with a client, (this is the only time I've left a client in the middle of a session). I said, "Excuse me for a second; I just have to go and do something." And I got up and went to the window. And essentially what had happened is that someone had died in that accident and they'd got lost. So I reorientated them, cleared them and helped them cross over.

K: How did you know that they had got lost, how did you become aware that they had got lost.

C: Well that has to do with the energy. See, think about it this way. Probably, in many ways, death is just going astral travelling and not going back. But, there are two differences, primarily. One is that we have like different levels of our energetic field - (A good reference for that kind of stuff is Barbara Ann Brennan’s work). But, so you've got like the etheric, the emotional, the mental, the astral and so on...

Well, in Barbara Ann Brennan’s work she refers to the astral and so on. Barbara Ann Brennan basically calls the astral the first spiritual level. I disagree actually, because the level beyond that she calls the ketheric template, which is kind of like a three D mould.

In actual fact from my observations, what happens is that as you are incarnating, you are coming into a particular Universe ... you actually build for yourself a mould for your body out of the energy, space and time for that universe and you literally pour yourself into it... That's actually important if you're doing work around congenital stuff. If that's the level that you want to work on... So the thing is that when you go astral travelling, there are normally, two differences. One is that most people tend to just literally step out of the body. Now, if they're really good at it, they'll step out not just with the astral body, but with the mental and emotional body as well. Most people step out with just the astral body, which is why they don't have much consciousness recollection 'because if you don't take your mind with you, you're not going to remember too much consciously. Its still there you can still access it, but it's harder.

And the other thing is as I said. People step out, whereas what actually happens when you die, it's a little bit different. This is assuming you know how to do it properly; so ...Please don't make the mistake by thinking about rules. All I'm talking about is the ideal. There are always variations, but variations tend to be when people get stuck. Anyway, ideally what happens when you die, is that all your chakras open up, and I don't know if you read John Donne "the Flea" when you were at school but a lot of people did but anyway...

K: I've read a lot of John Donne but missed the flea...

C: I only mentioned that because they used to refer to orgasm as the little death ...There's actually energetically, a lot of sense to that, because what happens in orgasm, is that all your chakras open up and the kundalini energy is released out. The only difference between that and death is that as the kundalini energy is released, all of your energy goes with it, and so that's the difference. You actually go out that way when you die.

Secondly, what tends to happen is that some people say that the etheric energy dissipates or disconnects from the body. It really depends to what level the person is moving to. The more "highly evolved" (in inverted commas) the person is, the more energy levels dissipate such that if they...Essentially, if they are going fully back into the hologram... then they'll actually leave behind those first five bodies which all relate to this universe. If they don't then, they'll probably reincarnate back into this universe. If they keep their etheric body because their etheric body is set to the frequency of this planet then they will tend to reincarnate back onto this planet.

And there are reasons for why this kind of thing actually happens. But because when you die, you tend to drop some of those bodies. At the very least you drop the physical body, well there's a shift in energy, like the frequency knob has just got turned up. So you can feel it.

There is also a difference in the fact that when people die, to a greater or lesser extent, depending on the consciousness awareness of the person, they will (to use the old term that people use), cross over, and that is literally like having a door open. Now in that case that is what I felt, I felt the door open. And that door doesn't open for no reason. And if it opened, it meant that that person was meant to go, or it was a moment of choice for them; whether to go or stay, and it was interesting for that particular client, because I went and sorted the person out and they actually did chose to go, and I came back.

And I said, "Look, I'm sorry, but someone just died out there. And I said, (I wouldn't normally say that to somebody but, I was prompted to say), “You might have felt them leaving; the door opening. Some people feel it like a cold wind.” And she looked at me and said, “Oh my god! Is that what that feeling is?” She’s a person who’s had a lot of death in her family, and she felt it essentially sitting in the hospital. You know, she’s often had that feeling.

K: And So for the benefit of the tape, is it a cold wind? ... Just describe it a bit more fully

C: Well the reason why you physically feel a cold wind, well, you've got little hairs on you and you feel the air moving over your body and taking some body heat with you. The difference between here and out there is that here is like... An analogy would be, if you tried to be everywhere on the planet at once, or just at a particular co-ordinate of latitude and longitude. Now for each one of us, the interesting thing is, that the very reason why spiritual people have difficulty with this planet, and with their bodies is actually, the very reason why in learning stuff it is an advantage to be in a body, because, being in a body, holds a particular anchor for you in matter energy, space and time within the hologram.

So you know the truth is, all time is now. So at least in your consciousness, you are experiencing this moment, in this dimension, on this planet, on this universe, at this level of energy. All that they do, is either stimulate the psychic centres or they actually decrease the activity of those parts of your brain which are actually there. You know they’ve found that a lot of parts of your brain aren’t actually there to gather information. They’re there, to actually damp down information, to actually stop you from picking up stuff. Because that stops you from going crazy. Because if you are actually open to that sort of stuff, without actually training or being balanced with it, you do go crazy, because you know, you have the whole hologram in your head. And that is why people who have psychiatric problems, seem to be flipping from one reality to another, because all those realities are in their head.
Now, so the thing is, what happens when you die, your energy instead of being focused in one little spot in the hologram; all of a sudden it's everywhere. And that's why some people experience it as annihilation, because if they don't have the conscious awareness to actually be able to be everywhere, and be conscious...But the thing is it can be difficult, the thing is that its actually that spreading out of the energy, that people feel as a cold thing, because it actually dissipates the energy and when energy dissipates it actually cools down.

K: So when you talk about the door, it's actually metaphorical. What you're saying is that you basically felt the dissipation of the energy of that person.

C: Oh Yeah.

Kate: That's something! That's something that... when you think about it in terms of time, space. If you were up in wherever it was and you get the experience of the dissipation of the spirit. I mean it's quite a distance away from the spirit. The effect is not just located to the taxi driver next door... I guess what I'm saying...

C: Well, you basically go from being a local phenomenon, to a non-local phenomenon, which is what your soul is anyway. And you have at that moment a chance to connect fully back to your soul or... but you see most people can't manage that, so they just go to a different energetic level. So their spirit... In fact, a lot of people go to (its just a term I use), what I call astral hospital, because it can take people quite sometime to reorientate to the fact that they have disincarnated ... and so sometimes they are in astral hospital, but its really just a place for them to finish up anything that they haven't completed in life. This is why some people see dead people you know ...

K: Or feel them.

C: But why they've come back...like they'll often come back to complete something...

K: That's interesting! I've just had the experience of relatives around for sometime.

C: Well just because they're invisible, doesn't mean that you have to put up with them. You can always tell them to buzz off. But it's that thing of the energy going from here to here, and back again. It's like a lot of mythic stories and tales of gods and goddesses and stuff there were certain gods that were called ridiculous names such as psycho pomp...I can show you with a dictionary if you want! P-s-y-c-o-p-o-m-p. And a psychopomp was somebody who basically escorted people to the other side. Like a god or goddess who did that. Now, the thing is, if you know how to literally step into the hologram and back again, its not hard to do.

However, if you don't know what you're doing, it can actually be one of the most dangerous and silly things you can do. For the very simple reason that one of my students some years back; her dad had had Alzheimer's. You know, he was a nice old geezer, but he had lost it a bit, and she felt quite close to him, and anyway, he was going through the process of dying and you know, and she wanted to help him, and particularly as he wasn't very cognitive. And any way, she felt perhaps he wouldn't be able to do it very well, and she wanted to do it and I said well I can do it or I can teach you how to do it. And I did my best to teach her and she understood the whole fractal system which made it a hell of a lot easier.

But even so after he died, she needed to have a session with me. Because the thing is, if you're here, and you go to there, that's fine if your just crossing over. But if you're actually crossing over and coming back, and crossing over and coming back, if you don't know how to get to focus on all of that at once, and bring all of it back to here - (and that's what you have to do, to bring it back from the hologram back to the here and now,) is that you have to focus on all of that at once. And that takes practice. And so what had happened is that she felt quite dreadful, because she had left bits and pieces of her on the other side. Once she'd pulled all that back she was fine.

K: So, just getting back to that person who died...

C: Are we getting back to the accident...or my student?

K: No, the person who had the accident, because I want to clarify with you - How did you know - because I also want to clarify with you how these bits were left with this woman? What was your experience of knowing that the person was disoriented when crossing over, because you said to your client "I need to help this person?"

C: Well, to begin with I just felt something, O.K. So, I just went and had a look and there was a person standing there, and there was a body on the ground, so I just talked to him. And he was confused. I mean, how do you tell anyone is confused? Because they give you nonsensical answers!

K: Yeah, But I guess what we're talking about is not that you went down in the lift and wandered over to the scene of the accident, you actually did that in a psychic sense.

C: So, I went out there astrally. And, if people can see you astrally, they are usually not in their body. Some people can see you, even when they are in their body. And that's always interesting, but a lot of people can't, so if they can you know that they are either very, very asleep, because they're out of their bodies while they're asleep. And then you can see if they're still connected to their body or not. Because essentially, they wont have their body with them but if they're dead, they will, because the etheric body won't be on the body, it will be on them. And I said "Hi" and he went, "Urr..."

K: As you would!

C: He was a bit in shock! So, I cleared the shock for him, and I pointed out to him that he was dead, and that he now had the choice of actually dying, or sorting himself out, and getting back in his body and what did he want to do? And he wanted to go. So I said, "See that person over there?"

K: So when you're saying that, you're saying that were other disincarnated beings there?
K: mm... Just a diversion... How long have you had this capacity to do this?

C: I assume we are talking this lifetime.

K: Yes, we are talking this lifetime.

C: Well, there are two answers to that. One would be about fourteen years and maybe thirteen years and the other one would be my whole life time. Because when I was a little used to talk to invisible people and when I was seven or nine or something, my mother told me that I was too old to talk to imaginary people. I knew that she meant the invisible people, which were kind of weird, because I knew that they were real. But unfortunately, I didn't have the wisdom to understand that.

I had to be careful about whom I talked to about it, and that included my mother. I didn't have that wisdom, so, I basically told them they had to go away. And they argued with me about it for over an hour, because they said, "you're going to have a really hard time down here by yourself."

The bastards were quite right! (Laughs) and in actual fact, when the moment I pretty much told them to go away, I started slipping into depression, because people down here are in my view, insane. And I didn't have any sane people around to basically communicate with.

So I essentially I had to figure out who I was and who I wasn't. So, I told all the divas, fairy people, and tree spirits to go away. I told all the aliens to go away. I told all the people from other dimensions to go away; people from other times, other levels of reality. There were basically two people who I figured I could still talk to. One is actually a friend of mine, who is actually in a physical body. He lives up in northern NSW somewhere. If you want to talk about death and dying, he would actually be a good person if you can get hold of him. He tends to live his life on the principal of shamanic wandering. I think he lives up around Armidale, so it's not so far from you.

He's a very weird individual (laughs) W-y-r-d weird. He and I have been friends for a long time and ... Well, I figured he was real, because he had a human body somewhere, and we basically used to talk telepathically sometimes, when we were kids...like he's a couple of years younger than me, and I guess I was still looking for proof. An anyway he turned up and it took us about three days to figure who the other person was and then it was "oh my god, is that you?" And because people can sometimes look very different in the astral and he doesn't look anything like he does in the astral. In the astral, he's a big hulking guy, whereas in the physical, he's a really finely boned blond, short... but anyway, so I could still talk to him and that was fairly good for me, cause when I needed to prove ...like I could tell him all sorts of things about his life, when he was a kid because, well, I remembered those stories, and you know, various things that have happened.

One time about three or four years before we'd actually met, he was involved in a terrible car accident and I remembered a real astral event; like I was just sitting somewhere one day, and all of a sudden I was out of my body, and I actually pulled him clear of a car. I didn't get him clear all the way but because I could feel the impact, but you know he would have basically have died and that was it, he basically got his leg quite badly smashed. He was coming down and this woman should have given way to him, didn't see him, turned right and went straight into him and basically, if I hadn't pulled him clear she would have gone straight through his head.

And he remembers me pulling him clear. And stuff like that. Anyway, he was one person. The other person I could talk to was the Archangel Michael. Now why it ended up the Archangel Michael was because when I was telling everybody that I couldn't talk to them because they were supposedly imaginary, the angel said, "Well, what about us is imaginary?"

And with the reasoning of a child, (because I was also brought up Catholic,) I said to them, "well, I think that I'm supposed to have a guardian angel, so I think that I'm allowed to talk to one of you but not all of you." (laughter)

K: Very sweet!

C: Anyway, so they had a good talk amongst themselves, and decided that if I was only allowed to talk to one of them, then pretty much any kind of trouble that I might get myself into... So yeah, basically he's my mate. So, they were the only two people I was still talking to, and then what was happening was that a couple of years later, my friend up north went through some personal stuff. He became quite withdrawn and stopped talking to me.

And then when I was about seventeen I gave away Catholicism and because at that time I had Michael tied up with Catholicism. Then I got really, really depressed and then I got really ill. And then when I was twenty one, they got him to start talking to me again, and my friend up North started talking to me again, and it wasn't enough to decide to stay, but it was enough to decide not to go just yet, and then a couple of years after that I ... and that was when I was twenty one. And then when I was about twenty five, I completed my *** degree and I was working in Southern Australia and I was essentially doing ... ***.

And it was interesting, I mean I guess I didn't decide to stay until one day talked there was a guy called John ***, who came out to Australia. He was actually a gay guy... He and his partner had been living the quintessential gay life in San Francisco. Like the two of them had been advertising executives and doing all the things that gay guys with a lot of money do, in the eighties, and they both got AIDS, and his partner healed into death like he died very peacefully and John was very clear that his partner had left to leave John free to do what he needed to do, which was basically going around telling people that you don't need to die of AIDS.

It was interesting because he was perfectly healthy as far as you could tell, but he was supposed to have died about thirteen years before I talked to him. You know he had gotten down to class six or eight or whatever it is and basically he had got about six months to live. And somebody said to him once, well why you don't get rid of it completely out of his system. But it was like he had made a friend of the jolly thing, and it was like his guide, because if he ever got off track at all he would get a bit of pneumonia.

He was the first person I'd ever met... I mean by that time I'd been doing a bit of work and I met people who talked about the universe, and it was kind of like they didn't really have, you know, they talked about spiritual stuff but they didn't really have ... This is my perception ...they didn't really have a spiritual reality. They obviously had a spiritual desire, but not a spiritual reality, because they talked about it from theory. You can tell the difference. Its kind of like when I talk about invisible people as I do it's normal, its just a part of life, and ... you can tell that because when invisible people turn up I just go, "Oh yeah", you know I don't mean, I enjoy but its no different from when my other friends turn up and talk to me. Whereas, people who don't really have a spiritual reality kind of get more excited about that stuff.
K: Forgive us. (Laughs)

C: No, no, but what I’m saying is, he was the first person that I’d met on this planet, who genuinely had a spiritual reality. And that’s when I thought … You see, one of the other reasons that I had been depressed was I couldn’t see what was the point of coming to this planet, and going through this crap, when I didn’t see any chance of me getting done. What I had to come to do…whatever that was…

K: What was holding you back from doing that, by the way?

C: The lack of spiritual reality on this planet. I mean, that’s like trying to build a house on mud. You know it’s like … And there are people who can teach people how to have a spiritual reality, but I’m not very good at that. It’s not my job. Anyway, I guess I figured if there were a few people on this planet who did have a spiritual reality, even if there were only a few people there may not be a great chance of me doing what I’d come to do, but there was a chance. And maybe I might be able to make it enough. So, I guess a few other things happened then. I think it was a year or two after that, that I met the person who got me stable telepathically and once I got stable telepathically, I was able to open all that stuff up again and started talking to invisible people again and I said “Opps, sorry you were right. Do you want to come back and talk to me again?” … so yeah…

K: In your spiritual reality you can see, hear and communicate …

C: Yeah, I choose to see it with my minds eye, not my physical eye. There are times when I see it with my physical eye, but its terribly disorientating because you can find it very difficult to tell … Like I can see it but its like I can see it here, (Points to third eye), not here and I personally find it handy because (a) It doesn’t freak my body out and (b) it means I know what’s in this reality, without having to stop the frequency of it, I know what’s in this reality and what’s from another reality and sometimes that’s important. I mean I have a friend up your way, partially when she’s tired, she finds it difficult to tell what she’s seeing and so she’ll be driving and she’ll… like one night, she was driving with me and she slams her foot on the brake and I just looked at her and said “That was as invisible person” You know, so yeah…

So you have control over that process, whereas some people haven’t and it’s actually important to have control. Because, I personally think it’s important to switch it on and off, because sometimes you just have to be able to deal with this planet. You know, there are things that have to be done, that make no rhyme or reason on a spiritual level, but they have to be done to be able to deal with this level of reality. Paying taxes makes no sense spiritually…

K: Yeah… Have you any other experiences of people dying?

C: Well, I’ll just tell you the ones that come to mind. I’m not quite sure why this is coming to mind, but I had a client again in Southern Australia. She was fortyish and perfectly healthy and everything. I’m not sure why it switched on one day. She came to me one day and said “I don’t know why, but all of a sudden my issues around my mortality have come up and I’ve suddenly developed a huge fear of dying!” And I said to her “Well, death is nothing to be afraid of. If you knew what it was then you wouldn’t be afraid of it.” So that’s what the problem is its not that one day you’re going to die, but you just don’t know so a fear of death is just a specific form of fear of the unknown, that’s all that it is. I said, If you knew it, you wouldn’t be afraid of it.

So there are three solutions. You choose which one you want, I said “I can either take you on an astral excursion and we can go and have a look, or I can help you go back to a time where you were dead before… I mean death is not a big deal, you’ve been dead before and you got over it, sort of thing, and the third option is that when you are asleep, you can ask someone to get you and take you to the other side. Do remember to ask someone to bring you back” and I said “Then you’ll know or not whether it’s happened, because when you wake up the fear of death will be gone. Anyway, she took that soft option and she sure enough, I think it was about two or three days later… and she woke up and the fear of death had gone.

The other things that come to mind is that sometimes I’ve been called in to people pretty much at the last minute. I’m pretty good at what I do, but I’m not a miracle worker… well, I’m a minor miracle worker, I just don’t seem to be up to major miracles! (Laughs) … yet.

K: (Laughs) Yeah!

C: I can do minor miracles fairly easily … They’re not really miracles of course. It’s just that people call them that. Anyway, I’ve been called in for people who have been in the hospice and they’ve been having a hard time. So I go in and I pretty much check in with the spirit, whether they want to go or not and they say yes … But see one of the interesting things about our society is that people have actually forgotten how to die… It’s very weird. They don’t seem to have trouble getting born, in fact there’s too many people getting born really for the planet rather than from a spiritual perspective but, people have forgotten how to die and like if you look, I mean, a lot of traditions remember how to die and they are traditions that have been fairly well persecuted and I don’t just mean the native traditions. I mean the Western shamanic tradition, which is the Bardic tradition, was pretty well wiped out in the middle ages. So, people have forgotten how to die.

So, essentially when I’m called, I just set it up for people. So that when they’re ready to go they can go very simply, and those … and before you ask what’s that about… If you remember what I said like when you leave. Like if you get stuck, you can get stuck in transit and you don’t want to leave anything behind, and also… so obviously, if it all lined up neatly, it’s the difference between having something neatly folded and having it all crumpled up with knots in it. And things and you know one is easy to shake out and one is you know you have to do it an inch at a time. Most people, who die in our society at this time, die an inch at a time. Personally I believe from a spiritual point of view that’s why we have things like cancer, because people don’t know how to go so they have to go an inch at a time. I think it’s horrible! You know death is not an issue but a good death is important.

K: Are there?.. I mean, there are lots of metaphysical pronouncements around that period of dying. The physical changes, the dissolution of the ego, all of those sort of things that perhaps potenates that separation of physicality into spirit … I mean, I don’t know if that’s what cancer is about, whether its like being, you know, its like the stages of labour, which thank God, I haven’t had to experience this time around. But that sense that the tension that builds up before that explosion into life or that separation of two entities…you know and perhaps…
C: Perhaps that's not an unreasonable thing and only if you consider the only people, who don't have any trouble going are the people who have been doing that their whole life. I mean one of the things about the shamanic tradition is that you walk with death every day and it's true, you do. I mean I don't particularly follow the shamanic tradition, but I think that if you walk the spiritual path that is what you do every day. Not in the macabre sense that you are keenly aware of your mortality, but you are, because you do your best to be present every moment, which means that every moment, you are letting go of what was and that is like a death.

Secondly, I mean the reason why we call it 'ego death', is because our ego evolved because we had these beliefs that we developed; personality traits or whatever you want to call them. We develop them, so that we believe that we needed to be like that to survive and so letting go of those things, we believe that there is a part of you that there is a part of you that goes. "Oh my God, if I let go of that, I'm going to die." Now the bottom line is that if you are walking the spiritual path, you pretty much go through ego death every day, if not every week, because your awareness gets to a point where its exponential curve or what do they call it ...critical mass or its like you reach a point where simply because you're that aware, your awareness continues to grow, because you're aware when you're in you stuff, and you go, "Why am I reacting like that?" And because of that, you come to a realisation about yourself and because of that there's something else that you have to let go of. And so, by the time that you have to do it completely, I suppose you are pretty much done anyway.

K: That's one of the strengths of the Buddhist traditions and other traditions, where practices assist people to continually to refine, refine, refine, in those terms of those things that you're talking about.

C: Some of those traditions are interesting because they do it from a place ... you sort of wonder if they fully got into life in the first place. But that's just my perspective...

K: That's probably true, as once a catholic, one can certainly see some of those reiterations or distortions of dogma and those sorts of things, too. One of the advantages of at least being born a catholic is that it gives one a chance to get over some of that dogma. Anyway...So, when you've go into a hospice...

C: Oh, they never tell the doctors... (Laughs) The only time that I was actually brought into a hospital and they did tell the doctors, that was kind of fun, that was for someone who didn't want to die. He was actually the husband of one of my clients. He had never been to see me, but he was descending rapidly into coma. But you could tell that he didn't want to die. His etheric and his physical were clinging tightly to each other. His physical was actually a boy who didn't want to go anywhere...But the doctors, they just went. The doctor did not actually care. She said, "I'm going to bring in a healer" and they said, "Well, just don't tell us." And she said, "Fine." I don't know that he was actually at the point of intensive care, but you know he was in a private room and so they just...Everybody just cleared out of the room when I came in so they didn't have to...

K: Observe and make a judgement...

C: All that kind of stuff. Basically he had some form of viral meningitis and we didn't know why he was going into a coma and we couldn't get him out of it and he was ... I can't remember the Glasgow scale but ... he was at the point where ...he was still conscious but he would give totally nonsensical answers. And any light or sound was painful. Anyway, so I got called in and I took a look at him and said" yeah, he's got viral meningitis and the problem is that his brain's producing a whole lot of exudate and it's not draining," so it was actually pretty simple; I just started to get that draining, and the body seemed to have the meningitis under control. It was just the inflammatory product that was causing the problem.

So I went in I think; three times. The first time I saw him he was 'ga, ga'. The second time he was still...his answers were sensible but he was still clearly in a lot of difficulty. And the third time I saw him, he was practically normal, so there was no point in going back and the doctors were kind of ... but they never asked. They could see the radical difference between before I arrived and after I left. But anyway...

K: So, as that happened, as he returned to some sort of equilibrium, what happened to his energy field? You said it was clinging...

C: OK, you know how when sometimes things are sitting happily together and sometimes they are starting to move apart. Well when I first saw him that was how it was. They were like that. So, the only thing that was holding them together in some ways, was intention. He had no intention of going, so he was hanging on ...literally! And the second time I saw him it was as if it had started to relax and the third time ...

K: And with other people who you have seen, who haven't returned to health? In hospitals in that way... What happens to their field? What do you see? Do you ever see the field changing in their critical state, even if you haven't witnessed them dying...? Those people, who you've perhaps popped in to see...

C: Yeah, well...

K: Their chakras as an example or...

C: Oh Well, you see the chakras actually starting to ... because basically as I said, you see the Kundalini releases, so its like everything literally gets pulled into the kundalini channel and out, and so, you can actually almost see the chakras retracting into the body as the same time, that the etheric is separating from the body and sometimes the etheric can almost look patchy, because there're the bits where its stuck, so you just release those bits and ...

K: And if you don't release those bits as you said before, it can make for a more difficult transition ... are there blobs of their energy field still there, or still unable to dissipate, in that sense?

C: Well, have you heard of the thing called soul loss?

K: Soul loss? Yes.
C: Right. Well, essentially, that's what happens and if you work as a spiritual healer, essentially, what you have to do is to go and pick up bits that they've left behind. And death is one of the most common places for people to have lost bits. So you know what you're seeing when people go without taking all of them is... you're basically seeing someone who is in the process of soul loss.

K: OK.

C: The other interesting thing from that point of view is that point of view is most people talk about death and dying from the beings point of view. But there is somebody else involved, which is the body. See the body has energy or consciousness as well. It's a genetic or cellular consciousness, but there is that component to it... and what actually happens is that, when the person dies...because that consciousness is more like a group consciousness, so when the person dies, the energy is then redistributed among the family or the genetic group. I'm not entirely sure what would happen to my energy at this point in time... You might have to ask me in a few years time. Because I've done a lot of work genetically on myself, because there's a lot of family crap that I didn't want to carry. But as a consequence, my genetic resonance is quite a bit different from my family. So, I don't know when I die whether my body would choose to find a different group that is perhaps closer to the resonance that it now carries or not.

That's a question I haven't answered... just in the same way as when a being dies, if they don't have a tidy death... They'll experience soul loss, that will have to get cleaned up at some point, so can the group family and that can be a problem that is sudden or traumatic. It's actually one of the reasons why a whole family will go into so much shock, over things like suicide or sudden death. Its not just the emotional shock of expecting to see that person the next week and now you know you never will. It's also the fact that their body literally goes into shock. For instance, one of my friends, Jen, rang me one day and she said that her brother Mick had just committed suicide a couple of days before. But she said; she's a reasonably spiritual person, you know. She doesn't do a lot of work in this area, but she said, 'I can't understand it. I'm really distressed about it, I'm having difficulties about it. But I'm O.K. I know this was his choice. I know he has been very depressed for a long time and he has made a number of prior attempts. You know, I resolved it all in myself years ago. I'm clear in my mind that if that was his choice, that was O.K. I don't understand, what's going on.

I said, 'It's because you're O.K., but your body isn't. And I had a look and I said, 'Sure enough, the body's energy was stuck in the body. Because of the way it happened, the body's energy didn't have a chance to transition out and so I said... so I basically helped... I tuned into where Mick's body was, tuned into that energy, helped it to move onto whomever... in the family. I had her on the phone, so I could ask her and I could help the energy go to where it wanted to go. The energy was redistributed. It doesn't always go. It doesn't always distribute evenly, you know it's almost like a will, different people get different amounts.

K: Is that because of the different... the sense that the person has some sort of synchronicity with some person or just...  

C: I expect that that's what it is, I've certainly never read anything about this or I mean all I'm going on is my own observations and their not... and on that side of things my observations aren't particularly extensive. Anyway I did that and I said how do you feel and she said 'Oh, cool now!'

K: I think that this is going to be your area!

C: Death is no big deal...

K: No, it's no big deal but it needs to be... But our culture particularly needs to know that it's no big deal. It's so important...

C: Yeah... (End of formal interview)

1st INTERVIEW WITH ELLEN

Kate: Ellen, I'm interested in the energetic changes that occur in people, when they are dying and I understand that you're an energy healer, who works with people in transition. Would you mind thinking of someone whom you have worked with and elaborating on those experiences please?

Ellen: Well, you were just at my presentation, so probably Sam is a good person to talk about with that, because I did a lot of Reiki with him. And of course I would come in and he would say that he felt really, really bad. You know it seemed like, working with him energised him, and allowed him the ability to take the next step and do what he needed to do.

And, specifically that day, that I discussed in the presentation, where I just had the intuitive feeling, that something major was going to happen. And, in fact, it happened a day or two later. ... then, working with him that day, I was really able to give him the energy to focus on what had to be done.

I'm thinking also about another patient that I had some time ago, that was really struggling with [the question], "When am I going to die, when am I going to die?" And by all rights, I thought that he was going to pass on every day that I saw him, and I thought that I would not see him again. And in working with him, just allowing him... (I do Reiki and Therapeutic Touch with people) And those sessions allowed him to kind of rest and relax and let go... but it was a long process for him, and I have not really been with anyone at the exact moment that they've passed. But one of my colleagues shared with me what she experienced with someone. Unfortunately, I haven't had that experience at that moment. It's more the few days leading up to it.

K: So, do you notice any changes in people's energy fields, when you're working with them with therapeutic touch or reiki?

E: I do.

K: That's what I'm specifically interested in.

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E: You know and it’s different for everyone; just like when you’re working with someone and doing “energy”. Sometimes I’ll feel kind of… Oh I don’t know how to describe this stuff… I mean, how do you describe this stuff? But for me, a lot of times I’ll sense… I’ll get a pain in my hand. The energy is collecting here and it’s like, painful and so I will have to discard that, into my little violet flame, (laughs). But a lot of times, I pick up the… it’s kind of the draining off of what’s not necessary for them. I feel that a lot.

K: Does that change as they move towards death?

E: I can’t say that I’ve ever paid attention to that. But you know, you raise good questions because you know. I do what I do, and I haven’t used ‘the eye of a researcher’ to see, “is it this or is it that”? When you’re there, You’re just doing the work and just being in the moment… I don’t always think about, “is it different?” But I will noticed sometimes, differences from time to time. You know, recently, working with Sarah, who I also spoke about; I have noticed some differences in her the last couple of times, that I’ve seen her, more of a…more of what I was just describing; more of a collection of what’s not needed and being released, which I have never noticed with her before. I’ve worked with her for a year and a half and I’ve noticed it now, three times in the last couple of times, you know the last month or so. I’m not sure what that means. Because we know she’s getting older and we don’t know what going to happen with her.

K: So, I was interested when you were talking, just to move back to Sam, and you’d spent such a long time with him, hadn’t you…

E: Right, well the time that I’d met him… we did not do Reiki when I first met him, we were… we did primarily the imagery, and the Reiki came only when he came onto hospice, only for three weeks. But he knew that I was a Reiki Practitioner. I offered that to him, and he wanted it in combination, so it was a short period of time. There was a lot of… you know, in the areas where he had his pain, we both felt a lot of heat generation a lot of…but then a calming, a quiet. Again, that would be very visual and also very tactile, because I’d be working and I’d just feel his shoulder drop, two inches and I could feel the muscles soften in there, and you know I could feel the warmth spreading out as could he…

K: So, when you’re giving Reiki, you’re attention is focused on the physiological response as distinct from the energetic?

E: Yeah you’re pretty aware of it …

K: I was interested in you saying, that you felt that cold chill

E: That was really a phenomenal thing for me…yeah. I think that that was his energy… I mean he knew that I was coming…I mean, he didn’t know I was coming because nobody called him and said “Oh, by the way, I called Ellen and she’s coming to see you” but, I think that the connection that we all have… and the fact that why was it that of all the many patients that I have… my supervisor was going, “Oh, I’m just going to page her to see if she’s around,” and there I was.

On all my days off usually. I’m off doing something. So, who knows where that was, so there’s definitely something there and just, the whole thing…

It was a very dramatic day, and I remember driving there thinking, something is happening here, which is, I felt that we were connected and I had this sense of urgency which was, “I have to get there before he goes.”

I was thinking, I just want you to wait for me. And then, at that stop light, it was just…and I had heard… you know… that people had experienced that kind of thing before… I had never experienced anything…

K: Could you repeat it for the tape?…

E: O.K., sure… you know that morning, he had developed some breathing difficulties and it was pretty clear that things were changing for him, and it was my day of and my supervisor paged me because she knew that I had a long term relationship with him, and said, “you know, I think Sam might be dying. Do you want to come and see him?” And I said “Oh yes, I will.”

And as I drove to his house it was a very dramatic day. It was very stormy and I remember that there were black clouds over the sky and white clouds in the sky and blue clouds, which is something that I’ve never seen, and I remember driving and just thinking, “there’s something going on here; I just hope that you wait for me, ‘cause I’d like to say good bye to you.”

And at the stop light, a couple of miles from his home, there was just this, frigid, icy, colder than… it wasn’t like you know, sometimes you get this chill, chill… it wasn’t like that it was like a block of ice was moving through me, it was a very surreal thing, and in that moment I just had this sense that he had died.

And he had in fact, 20 minutes before that, and so there was some connection, there, something energetic going on there, I believe.

K: For the benefit of the tape, could you just give a précis of your time with Sam, so that I can put it into a context.

E: Yes, right. He came onto hospice, but I had met him years prior to that, when he came to see me, to do some imagery around…going through surgery, and hopefully, recovering. And I worked with him for two sessions and then didn’t have any contact with him, other than through mutual friends, in his church. Then I’d say, how’s he doing and they’d say “oh, he’s doing pretty good.” My friend saw him for Healing Touch and she’d update me on how he was doing and then…

As a hospice nurse, I don’t always go into the office and I’d sometimes get little faxes that would pop out of my machine and you know I’d have a voice mail saying “Oh, I’ve faxed you some documentation and that’s your patient for tomorrow. I went up to my fax machine and I pulled it off there and here was Sam, this person that I’d worked with three years ago. And I thought “Oh my gosh, this just can’t be the same person!” And I read through it and I realised that it was, and went to see him the next day and ended up as I mentioned in the presentation. You know, he was hoping that he would have at least a year left to live but in fact, it was less than four weeks that we worked together before he passed.

K: A very intense four weeks…
E: A very intense four weeks… Yes, and I saw him probably, two to three times a week, so maybe only eight or nine times that I was there. It seemed like so much more, because we did so much work at each of those visits. I’d be there about two hours on each of those visits…

K: I’m interested in the psycho-spiritual changes that you obviously elaborated on in your presentation, and I’m interested in the integration of those changes with the energetic changes, as people approach death and then pass over, die or whatever you like to call it. So, does anyone else come to mind, where there is a connection between those shifts, as people move into this transition…

E: Someone that I’ve worked with really recently. In fact, this person may be passing since I’ve gone, because we did our goodbye work before I left again. A woman, who was not ready to die, was a fighter, and over the past month… I’ve been seeing her for the past four months, but in the past month, there has just been this huge shift in the energy, that before, was tied up in her resistance to a shift, or just open, quiet accepting… again, it’s hard to describe it but just this sense that everything is as it should be and also, not needing to, you know; going beyond having to talk about that. You know, it’s more a kind of a physical…you can see it in someone, they just look more peaceful, look more ready, and that sense of… well, she said it, she said, "You know, I’ll be fine. I just have to do, what I have to do," where before it was very different,

K: So, as a palliative care nurse do you, do you go back and see the person after they’ve died? Do you go back to the family…?

Ellen: Oh, absolutely!

K: Do you notice anything energetically, when you walk into that room. Is there any sense of a shift in the energy in the room or a shift in the energy…?

E: It depends… sometimes I do. For me personally, I have always felt connected to the people that I’ve worked with, afterwards. For instance, one of the reasons that I enjoy working in my vineyard, is it gives me a place, to kind of call back to mind, that person and often, I feel as if they are right there with me. Now, is that just me on my own, just going in to do that?

K: How does that feel for you?

E: Oh, I love it!

K: But, what does that feel like?

E: Oh gosh, how do you explain that? That’s a hard question, because I’ve never had to put that into words… That’s a good question… I think sometimes this feels… I just feel that I’m encompassed by the spirit of that person there, like not being in a bubble, but like being in a cloud, a softness, a gentleness, an acceptance, you know… I think that what’s happening right now is that I’m recalling my best friend’s ten year old daughter, who died tragically and… I always had a good connection with her and we had gone round and round about things, on periodic occasions… And they were in a car accident, and she was on life support, and each night that I would lay in bed, I would kind of connect with her, and you know…”We really want you to be here with us, we really want you to stay. And I remember on one particular night, there was just blackness. I felt blackness, I saw blackness… There were no thoughts in my mind, there was total blackness. And the next day my friend called and said, “you know, for days I’ve wanted her to live but something happened last night and I don’t think that she’s going to come back to me”. And I said, “That’s really interesting, because I’ve been talking to her every night, and last night there was nothing there. And my friend told me many months later, because they did take her off life support. They did have to make that decision because they could not get a flat line EEG. But she was deteriorating, and it was just a matter of time before her systems shut down, and they did want to donate some of her organs, so they had to make that decision. And, she told me many months later… She said,” You know, she said, I believe that she left that night that you had that experience of the blackness. That’s the night that she really passed on. She was trying to hold on but couldn’t do it.” But then, I had dreams about her. And, I remember one dream in particular, of her tumbling. (She was a tumbler). Tumbling towards me, and she had these sparklers all around her, and she gave me the sparkles and she said “Whenever you see sparkles, that will be me.”

K: How lovely! What a great dream.

E: And so of course, I woke up and called my friend.

K: Yes, how lovely… Great for her Mum too.

E: Oh yeah, but the other part I didn’t tell you was that for years I dreamt that my friend had three children. And… After their second child, (this is the one they lost, her husband had a vasectomy. And then after their daughter died, they wanted to have another child, so they have three children. So, where does that come from?

K: Yes. When you start to work energetically with your patients, do you sense their field to start with? And I understand Reiki, (I did Reiki some years ago and my understanding is that it is different from healing touch and other energetic techniques, in that you put your hands on the body and channel the energy. Do you feel any changes as you are coming in to do that?

E: Well it depends. Sometimes, depending on what’s happened, I’ll feel drawn to do something, but most of the time that I’m going through the Reiki Session, I’ll feel drawn to go to a certain area, or I’ll feel, like I’ve said, I’ll feel different changes or a denseness or a coolness, or heat or pain, or whatever in different areas. So, it’s usually during the process that I feel these things.
Kate: So as you continue with that person, do those parameters change?

E: Oh, Yes.

K: And do you notice a shift as the person moves towards death?

E: Again, I haven’t always been real focused on that as we go along… I probably will be now! (Laughs)

K: I’ll have to phone you.

E: Is that why there are three interviews? (Laughter)

K: Well, it is difficult, because you are in the moment and there are so many other things happening, especially in the area that you are working in, but I would be interested when I do phone, to hear… My dog died this week and of course, this being my area of interest… and during his transition, I was so connected with him, that I didn’t focus on what was happening energetically, so it’s all very well to theorise…

E: Right, well you saying that reminded me of again my best friend. Her daughter’s dog, this was really interesting, developed paralysis, and couldn’t move, and they took the dog to have her euthanized, and sat with her during the process and a few moments before she passed, she started wagging her tail (and she was paralysed). That was a huge energetic shift, and of course my friend said, “Of course, that was because my daughter was there to greet her.” And I said “absolutely!” I’m sure that was what it was.

K: Gosh, How amazing! Must have been great for the family, too. Are there any other stories that you’d like to tell me now?”

E: Let me think… None right off the top of my head.

K: Well, that has been a wonderful start. Thank you!

E: Well, thank you for your interest.

INTERVIEW - ELLEN (2)

E: First of all one of the things that I think I shared with you was that I had never actually been present when a patient had transitioned so I have had that experience now, and it was very interesting because this was a gentleman that lived at home with his wife and it was kind of a chaotic household. I think there were probably a lot of mental health issues going on in the home and even some substance abuse issues going on in the home, and the thing that was really striking when he passed away, was that he had these, he had these birds in his room and the two times that I’d been there previously, those birds were chattering, chattering the entire time I was there. From the moment that his breathing changed and then through the next fifteen minutes, because it took him about fifteen minutes to pass away, those birds were silent. They remained silent until I left.

K: Oh, How interesting!

E: And I thought that was very interesting.

K: Yes, very interesting.

E: So that was the first thing that I wanted to share with you. Now, let’s see… Well, you and I spoke about baby Sophia…

K: yes…

E: And I wanted to let you know that she is still alive!

K: Oh, gosh!

E: This is actually amazing because in April, she developed bilateral pneumonia, and was extremely ill. In fact we thought that she was not going to make it through the night.

K: Yes

E: And that’s amazing, is that I’ve watched her kind of go from being present, to kind of moving into this other place where she doesn’t seem to have any connection with the people around her…

K: Yeah…

E: To actually coming back now and being present again.

K: Gosh!

E: When I first saw her a few years ago, she was doing a lot of tracking ;you know, she was responsive in her minimal way. I do not know if you recall; she has Niemann Pick disease, which is an accumulation of fat in the organs of the body, and when I came back from Australia, she developed hydrocephalus and again accumulating fats in her brain. Her head became extremely deformed and she really…
I think because of all the damage that was done because of the accumulation of fat in her liver, her spleen and now in her brain, doesn’t really connect with anyone intentionally like she used to do early on.

K: Yes.

E: But, I have seen her move, but you can still feel her being present; you know. However, those days in April, when we were concerned with her and she was really struggling.... She had bilateral pneumonia and was on lots of oxygen and um… you know, it seemed like she was in a different place, it seemed like she was somewhere else. And I don’t know how to describe how I saw that, other than when I feel that she’s present, even though there’s no ability to track or communicate, it’s almost as if you can see the essence of life thorough her eyes.

K: Yes...

E: That seemed to be absent during that time in April. Since then, of course her parents have continued to do all kind of Traditional Chinese Medicine with her, which is their treatment of choice and she was on about ten litres of oxygen you know and she went down to five. She’s now like back and at present… So, she’s just this amazing little life and uh, I wanted to talk about that, the changes that I’ve seen in her there. I think that I sent you the story of my patient Polly.

K: Yes. Thank you, Ellen

E: And I have to tell you, that story just continues. Her husband has since passed away and it was interesting because I had not spoken to him… let’s see. Polly passed away in October. I saw him in November, after I came home and saw him a second time.

I think it was the holidays because they were talking about getting a xmas tree. He also had cancer and was being treated and I don’t know if I shared with you, when I first brought Polly onto hospice, the two of them sat together on their king sized bed and said, ‘We’ve been married for fifty years and we do everything together. We’ve got cancer together and we’re going to die together.’

K: No you didn’t.

E: Well, she passed away in October and he continued to have treatment and probably from December on, I didn’t hear from him. I think that I sent him an email now and then to just kind of check in and he didn’t respond to that. On May 18th which is his birthday, he called me.

K: Oh, gosh

E: And he said, I’m doing O.K. but I need some advice on nutrition and he didn’t sound well to me and so we talked for quite a while. I asked if I could call his daughter. He said, “yes” and I called his daughter, and I said, “Your Dad called me and this is what he wanted but it sounds like he’s asking for something different. Is it time for hospice? And she said, “Yes, I think it is but Dad doesn’t want to go there.” I said, “I understand that, so what’s happening with him?” Her feeling was that no one had really said to him directly, “There’s no more that we can do. Hospice would be best for you.” That is what they did for Polly. So she and I talked about it and he had stopped his chemo because he hadn’t been able to tolerate it. He had stopped his radiation treatments earlier, because they were too much for him. But he wanted to have another scan in June and then possibly additional treatments. So I suggested to his daughter that she talk with his physician and just try to get a really clear picture on what was realistic, and that they talk with him, you know, honestly. And that I offer to come over to visit and acknowledge the change that I had heard over the phone and she said, “Well, you’ll definitely see a change in him physically.”

He’d got to the point where he couldn’t get out of bed. She had to pack him a little cooler and leave it at his bed side while she went and took care of his business dealings and so I offered to come over and do that but I was going away in June and she actually did go and speak to the doctor. And I said, “Knowing your dad and knowing that he didn’t want to be on hospice, I suggest that we get him on home care and try to get out somebody to talk to him about nutrition and get him a physical therapist and get him some extra help with the home the home health aide and a nurse, and just kind of keep track of how things are going. And if hospice is appropriate before its time for his scan, we’ll turn him over to hospice.”

He was on home care for less than a week. I was heading out of town on a Friday afternoon and I was teaching on Friday morning. I was on my way to the college to teach my class and I listened to my voicemail and there was a call from the home care nurse saying, “Lou’s taken a turn for the worse and I’ve ordered morphine, we’re admitting him to hospice this afternoon and I thought, ‘Oh my gosh, I’m leaving for the next three days!’ I knew that he would not make it through the weekend. I just had that sense, and I remembered my promise to Polly that I would check in on him and take care of him, when it was his turn to be on hospice and I thought, ‘I’ve got to go there before I go to the airport!’

K: Oh gosh, Ellen!

E: So on my way home to get my bag, I stopped off at their house, I gave him my little bundle of lavender, I gave him some little kisses and hugs. He knew... He acknowledged I was there but he never opened His eyes, and his daughter told me that the night before he had been talking to Polly and he told her in the morning that Polly told him that its time to come home.

K: OH...

E: And he died the next morning.

K: Amazing.

E: It was very amazing. And when I got back from my weekend away, the nurse who had actually gone out to admit him and then went out again the next morning said, “I have never seen a patient so peaceful and beautiful dead. He had the greatest look on his face.”
And I saw that when I went back the afternoon before. I saw that beautiful, peaceful expression. He just had this cute little smile like he knew something that I didn’t know...

K: Yes, How lovely!

E: It was very lovely, yes. And the other thing that’s funny about that is I think I shared with you in the story about the bird and then when I took the story to him and his daughter about the squirrel that came that the door?

K: Yes, yes.

E: Well, during my phone conversation, with his daughter one day. It was after she had spoken to the doctor and she called me to tell me what the plan was and they were going to put him on home care, and the background and it was so loud that I couldn’t hear her and I finally said, “Lesley, is that a bird in the background?” And she said, “you know, I’m sitting in the family room and you know, there’s this bird outside on the patio.” And she said, “Oh my God, it must be my mum!” And she said, “O.K. Mum, if you have something to say to us! And I said to her “You know Lesley, I just think that your mum doesn’t want him on home care, she wants him on hospice.”

K: How interesting, yes...

E: You know what’s really amazing, he didn’t want to be on home care, and he wanted to be on hospice. And it was not really... It was less than twenty four hours, I think... His admission was Friday afternoon. He died Saturday morning.

K: That’s amazing. That’s very, very interesting Ellen, it’s great!

E: Yeah, so I mean, he did it his way; that beautiful energetic way. So, that has happened. Let’s see, you asked about Psycho-spiritual changes. Uh, let’s see, I had another patient, John. And John was a gentleman. He was in his seventies, and had lung cancer was on huge amounts of morphine; like greater 300mg a day. And he was still able to get up, and he was functioning. This gentleman, that I had, taught me the most about going back and forth between this world an another world.

K: Yes...

E: He literally would spend periods of time somewhere else but talk about those while he was experiencing it. He did that with his family and I would come the next day and he would talk with me and he would say, “Remember where we went last night Dee? and he would say, you know the place with all the lights?” and she would say “Oh, yes!” And he started talking about all these lights. There were also times when I would come and visit and he would suddenly start saying to me, “Oh, did you see that place where there’s the building and there’s that big part that’s hanging out and there’s nothing underneath it? Don’t go under there because you could hurt yourself”. I mean, he was being somewhere else and I just thought it was so interesting because one of the things that happened was, he had two step daughters. And one of them was there assisting his wife and caring for him. She recognised that something was really special and she had two children, who were there and she was very encouraging of them to just listen to their grandfather and to observe what was happening. And she said to them, “He is showing you something that you will never see, until it’s your time to go.”.

K: Oh, how remarkable of her to pick that up. That’s great!

E: The children ended up, we had a social worker who did a lot of art work with them, because they were having a really difficult time, and especially the grandson who was extremely close to John. And a few days before John passed away, he said to me, “If I ever get home, its going to be a God damned miracle.” And I said, ‘Well, you know John, you’re going to go home you know, we’re trying to get you there. Now you’re going in the right direction. And he said, “I just want Billy to go with me.” And Billy was his grandson, and his daughter said, “Dad, Billy needs to stay with me for the time being.” But he just grabbed Billy and said, “Come on Billy, lets go fishing!” And I’ve heard this fishing metaphor before. Years and years ago I had a patient who used to talk about two girls who were over there, who wanted him to go fishing. And he would point to his closet, each time I’d come and he’d say, “Those girls want me to go fishing.” And I said, “Do you want to go fishing?” And he said, “I’m not sure I want to go fishing.” So it was interesting, that the fishing metaphor came up again.

K: Yes, Ellen.

E: So the other thing with John’s family that was going on was his wife and his stepdaughter, because they were his primary care givers. And they were both pretty headstrong, so they’ both tend to kind of get into it with each other, and so there was a lot of conflict going on between the two of them. And in spite of the fact that I tried to address that with each of them and Julie, our social worker, had tried to work with them, finally, when I came, John was extremely agitated, and the two of them were really going at it with each other and in fact when I arrived, his wife was out in the back yard, and the daughter was home and I actually did a little guided imagery with them. They wouldn’t sit together and I said “That’s fine but each of you must hold one of my hands.”

K: That’s great.

E: So I was like the little conduit. And we did this guided imagery where I had them just kind of focus on their heart just feel the love in their heart for John, to focus on the love that they had in their heart for each other, even though there were times when they weren’t in touch with that and I had them breathe into that for a little while, and then I asked each of them to individually say what they needed, right then. I then requested that the other person just listen without judgement. So they each took their turn, and then we did a little bit more breathing and we kind formed a beautiful bubble of love and protection around each of them individually and got them to include John and the house and everyone who was there.
E: And then kind of brought back from them and they were different and John was not agitated.

K: What a great practitioner you are Ellen, That is fabulous!

E: Thank you. You know, I just kind of did it intuitively. I didn’t know where I was going with that but I said, O.K. I’m getting out of the way! (Laughs)

K: Great healing!

E: Yeah, it was wonderful… So, that was a wonderful experience within those psycho spiritual changes that occurred but he took a long time going. But I learned a lot. It was wonderful!

There was another patient that one of our spiritual care practitioners shared with me. she had two patients, one patient and I wrote my notes here and I obviously didn’t write enough detail but I think that basically the upshot of this was …I know what it was… Each time that Emma had come to see her, she would talk about wanting to die. And you know, wanting to go to the next place. And Emma asked her one day, you know, "Well what’s holding you back?" And she said, "Well, it just seems too busy there. I think I need to go later when it’s less busy." And then a day or two later, she passed away. So, (laughs) she was kind of picking up a lot of activity going on.

Another patient that Emma had was a very elderly lady who kept asking her, “What is it going to be like?” And Emma is a Buddhist and she studies a lot of Buddhist traditions and meditations. So she shared with this person a meditation of the heart, again focusing on the heart and bringing the consciousness up to the third eye and then the time that she died suggesting that she move through that place through the forehead, the third eye and move toward the light and she did this meditation with the patient and the patient absolutely loved it. And she just… Emma said that she got down and put her hands on the side of my face and looked absolutely through me and said, “You know, you’re absolutely wonderful.” I’m going to do that meditation and practice. I don’t know what she got out of that but obviously it was something very powerful for her and each time that Emma went she reported that she had been practicing that technique.

K: How interesting, I’m a Buddhist and that’s the Phowa practice of the transmission of consciousness at death. Except that you then go through the crown of the head and shoot the consciousness…”

E: That’s exactly what I was going to tell you! Emma came to me a couple of weeks later and said, “I told her to go the wrong way!” It cracked me up!

K: Well the spirits probably helped her! Intention is all, though…

E: That’s true, that’s true!

I also had another patient that I was caring for when I last spoke with you. I don’t think we had talked about her. She was at home. She was very non compliant. We had a long history of her not following our recommendations. She had pulmonary fibrosis, lived alone, didn’t want any help, had a lot of difficulty breathing, didn’t want to take medications, didn’t want to turn her oxygen up higher than 2 litres, and didn’t want to take any medication for anxiety or shortness of breath. Did not want anybody in there to help her.

I had taught her some guided imagery techniques to help with her anxiety and of course she didn’t want to do any of those. She began to become very fearful and then got to the point where she wasn’t able to get out of bed, and we finally said to her, "You know you’re at a point where you must have someone with you." And she finally decided to go to a nursing home. Unfortunately, it was very sad; she had a niece and a grandniece who was her Durable Power of Attorney for health care.

Neither of them were interested in coming to see her. The niece came very reluctantly and it was quite obvious that she was put out, to have to move this patient to the nursing home. Once she was at the nursing home, even though she was there… she did a little bit better for a while and I showed up one day and she totally surprised me, by saying, “Doesn’t my room look like a state room on a cruise ship?” And it was a very nice nursing home that she was in and I said, “Yes, it sort of does.” And she said, “You know those guided imagery techniques that you taught me? I’ve been sitting here and closing my eyes and just imagining that I’m on a cruise ship, and I’m cruising along.”

K: That’s interesting!

E: So, I was very happy that she had remembered that. And she continued to decline, she became extremely fearful and of course being in a nursing home, she had care 24hrs a day, to provide you with assistance. But they weren’t in the room with you twenty four hours a day. In fact, one day she asked one of the nurses to kill her. And it was very disturbing to this nurse. I mean it really upset her, and so we decided that what she really needed was to hire someone to be with her and basically just hold her hand, so she wouldn’t be fearful. And of course the niece was in charge of her finances, refused to do that, so we set up with a plan so that each day, the nurse would visit, the social worker would visit, the health aide would visit, the spiritual care person would visit, and we kind of kept her. So as soon as one of us left, the other person would be there. So, during the last several days of her life, we were able to be with her a huge block of time, like 8-10 hrs. a day, which really helped to calm her. But one day I asked Emma, our spiritual care person, to go with her.

Emma is also a musician and she also uses a lot of music therapy in her work, and it was beautiful and she sang with us, even though she was in and out of consciousness. Again, she kept drifting back and forth she kept talking to her mother and kept asking for the baby. She wanted the baby. And I’m not sure what the baby was all about and I often wondered after she passed away… She was married and she and her husband never had any children and I don’t know if she ever lost a baby.

K: Yes.

E: But I sort of feel that that might have been her story on some level. That, you know, because there was this baby, that she wanted to hold, so we encouraged her to go and get the baby, and she actually had a very peaceful death, with the support that we gave her, after many, many months of not being compliant and being in so much distress. It was great to see that end result.
K: Yes, it’s a wonderful triumph, actually.
E: Yeah.
K: Well that is lovely, Ellen.
E: That’s O.K.. What other notes did I write for you? Oh Yeah, I thought I would talk to you a little bit about … you know, that phenomenon of the increased surge of energy that we sometimes see in patients before they die. That sometimes the last hurrah, the kind of marathoning of all the energy, within their spirit; the kind of do whatever. Sometimes, I’ve seen that as a sustained thing you know more than twenty four hours. I know that we tell people in hospice, that you might see within the last twenty four to forty eight hours that, but I’ve actually seen… some patients kind of sustain that energy.
I had a young woman in her late forties, who had HIV and Aids and renal disease and was in very high levels of pain, which was medicated with very high doses of morphine. We started her on methadone and she was to the point where she didn’t want to get out of bed. And I showed up one day and she said, “I’m going to the spa this week.” And I said “You are?” and she said, “Yes.” and I thought from just looking at her, “There’s no way you’re going to the spa.” And the following Monday morning, her Mum said, “Oh, Yeah. She went to the spa and she had a wonderful time and she and her friend travelled about fifty miles away and they spent the weekend in the hotel and she went to the spa and she went home and probably died about a week later.”
K: Oh!
E: The same thing happened with my patient Penny, who, I think we talked about. When she could not accept being on hospice, initially. She told me her goal was to get well and to go on another cruise. And you know again our hospice team felt that that wasn’t going to happen to her and we were quite surprised when she did go on a ten day cruise and she came back and she was now ready to be on hospice. Again that energy was quite sustained. I also see it sometimes with very highly resistant people. For instance, people whose primary coping mechanism is denial that they are sick, denial that they are going to die, and having lots of energy, being able to do their activities of living and then they hit the brick wall and then they die within a matter of hours.
K: MMM
E: I’ve had two patients since the last time that I spoke that that happened to… You know, just functioning, not wanting to talk with me about end of life issues. You know, everything’s fine, everything’s fine, trying to do their daily living the same way they always had and then hitting the wall, crashing and dying within twenty four hours.
K: Mmm, interesting…
E: And usually with those types of people, I really allow them to use that denial, as their coping strategy and just try to build the relationship, so that when the crash does occur, there’s a connection there and we’ve been able to help those families through those last twenty four, forty eight hours. Because many times that family is depending on that denial that the patient has, to get them through, too. They want to believe it. So, that’s happened twice, since you and I last spoke.
So, those were the primary things that I had written down to share with you.
K: Thank you Ellen. That is terrific.
Ellen’s story of Connie:
This is a story about how I used imagery for myself, as well as the patient, to help with a peaceful transition. Connie was a 67 year old retired nurse. She was Filipino, married and had a large and loving family. Connie had widely metastatic lung cancer and her biggest fears revolved around dying in distress and being afraid at the time of her death. She was very scared of being aware and breathless in her last moments in life. Connie and I had many conversations about medications for pain and breathlessness and it was my goal to assure her that we would not allow her to be in distress at the time of her death. We had to do a lot of teaching to the family and private caregivers. She had very strong spiritual beliefs. Connie declined very slowly and in the last 2 weeks of her life she and I had more conversations about God and peace at the time of death. One day when she was very close to death I was off and took some time to do a relaxation and imagery for myself. I was also hoping that the spirit of Connie would intuitively connect to my desire to help her have a peaceful death. In my imagery I saw Connie and I standing on earth, but up above us and off to the side was the afterlife, heaven, whatever you may believe is waiting for us after we die. Those two places were connected by a beautiful rainbow bridge. Each of the colors of the rainbow were brilliant and crystalline. In my imagery I assured Connie that I would help her to move from this world to the next comfortably and peacefully. I saw myself escorting her across the rainbow bridge and as we reached the top of the arc I kissed her forehead and pointed her in the direction of the beautiful meadow of wildflowers, birds and children at the base of the rainbow bridge. She smiled and finished crossing the rainbow bridge, turning briefly to wave goodbye to me before she traveled on. She was absolutely fearless and very peaceful. The next day I visited Connie and she was barely conscious. During my visit, I gave her a hand massage with lavender essential oil and spoke quietly asking her if I had ever told her about the beautiful rainbow bridge? She lifted her right eyebrow and tried to open her eyes, but it was too much for her. Without going into too much detail I simply said, “Connie, if you find the rainbow bridge, you be sure to cross it, for it is time for you to go home now”. When I left the home that day I was certain she would pass in only a few hours. I went back to our offices and then left to stop by a store near where Connie lived. When I got out of the store there in front of me was a beautiful full rainbow. I thought to myself, “Ok Connie, there is your rainbow bridge, all you need to do is go across it and you will be home.” But Connie did not die that night. The next day the family called and I went to Connie’s home, where in fact she was dying, and I stayed with her and her family until she passed. Two days later my husband and I were preparing dinner for some friends, it was lightly raining outside and suddenly my husband called me to come out and see “the most beautiful rainbow ending at the top of our house”. When I went outside I could see that not only was this the most intensely colorful rainbow but it was a double rainbow. I felt certain that this was a gift from Connie to
Ellen’s story of Jimmy's stroke

I have been thinking again about anything else I want to share with you. The biggest thing I wanted to tell you about was my own personal loss of my dear friend Jimmy, and the events around his death.

My husband, Keith and I spent a great deal of time with our best friends Judy and Jimmy. Jimmy was an engineer and a very practical and fastidious person. He did not believe in “woo woo” stuff. Very practical and very honest. He was not planning his death in any way. He had always intended to die with a Mac on his lap. He had been in a fatal car accident in 1997 when they were hit by a drunk driver that was killed at the scene. Jimmy suffered a crushed leg and after that had lots of pain and a bad limp. One time he did allow me to use my Acupuntic forks on him to see if it would affect any change in the level of pain he had. About an hour after the treatment he told me, “Oh, I feel better.” (he was usually very honest and straightforward)

Anyway, today is 6 months from the date of Jimmy's stroke. We miss him every day. I am sending you a photo of him. Judy and I think he was resending it.

Tuesday morning I looked one last time for the label image, and guess what? I found it on my computer in the first place I looked. Judy’s story of Jimmy’s stroke

Designed looked like. The night before we were to bottle Judy had her first dream about Jimmy (it was 3 months after his death). Jimmy and I were the blenders and the label designers. He had made a label for our own red wine that we make. We know that my husband was flying out of town on business that morning. The plane routes fly right over Judy and Jimmy's home and every time we fly we try to find their house. I always seem to find it but Keith never does. Well on this day, as he was flying over, about 9 AM he saw the house and was all excited about seeing it (I later found out). Judy had tried to call Jimmy all day and got no answer to the home phone, cell phone or email. And this was unusual as they spoke frequently when either of them was travelling. That evening she called her sister in law and asked her to go over to the house as she felt something was not right. Jimmy's sister found him lying on the floor behind the front door. He must have been there all day as he was in the midst of making coffee when he fell to the floor. (About the time Keith was flying over) They rushed Jimmy to the hospital, and Judy caught the next flight home arriving about noon on Tuesday. She saw Jimmy, who was still alert and able to recognize her, and he even tried to kiss her hand. He was totally paralysed on his left side and couldn’t speak, but they did let me hold his hand. For several hours the doctors told us there was a development, they had found a clot in the carotid artery and Judy would need to talk to the vascular surgeon as they were recommending surgery. He would not be available until 10 PM and Judy needed sleep so she went home. She called me shortly after 10 to say the surgeon said it was too dangerous to do the surgery and she would speak with him at the hospital on Wed to make another plan at what to do next. On Wed afternoon I got a call from another friend to tell me that Jimmy had taken a turn for the worst and was being moved to the neuro ICU and would most likely have surgery to remove part of his skull to allow the brain to swell. On Thursday I was with friends to visit Jimmy. After they left I spent time privately talking to him and letting him know how much I wanted him to live, but only if it were on his terms and that the decision was between him and God and I would accept whatever the outcome. I shared some other personal thoughts and feelings with him and asked him to help us all with what was to come. While talking with him I felt that he was still actually in his body and present. On Friday when I walked into the room I felt very different. As I touched his arm and said, “Good morning Jimmy, it’s Ellen” I distinctly heard his voice and felt his presence up in the north east corner of the room. He said, “Oh, I’m not down there, I am up here”. It was weird. As I stood there with my hand on his arm I could feel him up in that corner of the room. Judy arrived and all day I watched her as she cared for him and at times she would break down. Each time she would go to the very corner of the room I had felt him in and cry and then feel better. I asked her if she wanted to get in the bed with him and lay beside him. Being a very conservative woman she said that just was not her. At one point while she was standing in this corner I felt the urge to just encircle her with my arms and hold her. I actually felt the energy of Jimmy come into my body and hold her. It was a peaceful and unworlly feeling, but very loving and comforting. Judy (who up until now would not let me do any Reiki or hug her too often) just let me hold her for about 3 - 4 minutes. I really felt as if I was helping Jimmy to give her one final hug. That morning while I was home in bed ready to sleep I spoke to Jimmy and asked him to come to me in a dream and let me know how I could best help Judy through what was inevitably to come, his death. That night I had a dream that we were all in his room, all the machines abruptly stopped, and he was dead. I suddenly woke up and looked at the clock; it was 5:35 AM. I thought perhaps he had died, but did not receive a call. I met Judy at the hospital on Sat morning and he had developed a leak in his ventilator cuff. The docs needed to fix it, in order to keep him and his body working optimally until he was pronounced brain dead and they could harvest his organs for donation. As the day went on the docs were later and later and at 4 PM they began the procedure. At 5 PM Judy asked me to check to see if they were done so we could go back in. The ICU doc told me they were done but were now going to do the first test to see if Jimmy was brain dead, and if Judy wanted to be there she could come in. I went to get Judy and she returned at 5:25 telling me she decided she could not be there, they would come get her when the test was over. The test ran from 5:30 - 5:40 and it was positive, he was brain dead. So, he had given me a clue in my dream that the machines would be stopped at 5:35. It was weird. Another thing that happened was that Keith, my husband was in Michigan and unable to return. However, he had a dream on Tuesday night in which Jimmy came to him and said, “I sure didn’t plan for this to happen” Keith responded to him that it seemed he had reached the point of no return, and Jimmy replied that he had. Keith was also so spooked by the fact that of his many trips flying over the house he never saw it, and on that Monday he saw the house, and now knew Jimmy was lying on the floor, needing help. And finally, Judy, Jimmy, Keith, and I have a vineyard together. We all made wine for the past 8 years. Jimmy and I were the blenders and the label designers. He had made a label for our latest vintage 2004 that we planned to bottle in July. He had sent me the design via email but try as I may I could not find in in my computer files. I decided to try and create another label, similar to what I remembered the one he designed looked like. (The month before we were to bottle it, 1 year before he was dead). She saw him sitting at his computer, barefoot. This was significant because after his accident, he NEVER went barefoot. She asked him as he was doing and he said fine. He then returned to the computer to work. The next morning I looked one last time for the label image, and guess what? I found it on my computer in the first place I looked. Judy and I think he was resending it.

Anyway, today is 6 months from the date of Jimmy’s stroke. We miss him every day. I am sending you a photo of him and Judy so you will know who they are.
Well Kate, that is enough for now. I still have more stories for you that I have collected over the past 3 years. Please keep in touch and send me your finished research. I have so enjoyed sharing these events with you. And I feel privileged that my patients and my friend have allowed me to experience the events along with them. It is an honour to do this work.

**Polly's Farewell to Me**

Polly and I spent four months together as patient and nurse. She was a very special patient and she and I became quite close as she journeyed toward her new life away from all she had known. Polly especially liked the imagery we did together and would find these visits both relaxing and empowering. Polly was a fighter and worked hard to achieve the milestone of celebrating her 70th birthday. Her next goal was to reach November 1st when I would return from my trip to Australia. In the two weeks before I left for Australia Polly was weaker and we talked about saying goodbye before I left. While she did not want to say goodbye, and while she hoped she would be alive upon my return she knew this was an important part of our relationship. During one of our last visits together we shared a lot and said things that were important to both of us. As our visit came to an end, Polly asked me, “If I die while you are away, how will you know?” I assured her that I would have contact with my supervisor and would be notified somehow since Polly was such a special patient for me. I then added, “But Polly, YOU will let me know!” She looked at me with those beautiful eyes that twinkle, and a small smile appeared and she said strongly, “Yes, yes I will!” The last day I visited Polly she was very weak and unable to interact and I left for Australia wondering if I would see her again, or if the previous visit had been our official goodbye in this lifetime. Surprisingly, I did not think a lot about my patients while I was away, but one morning two days before the end of my trip I awakened early to a beautiful Australian morning. My friend and I were staying at a B&B and were the only visitors present. The main house was located a distance away and as my friend slept in I made coffee and took it out on the patio behind our suite. It was a beautiful morning filled with colourful clouds in the sky, flowers blooming and birds fitting about and singing. Suddenly a large Magpie and her new baby bird were sitting in the grass near our room. Baby Magpie was crying out and I thought, “Oh, I should go get some crackers to feed these birds”, and got up to go inside. Just as I passed through the sliding glass door I was flooded with thoughts about Polly. I wondered how she was, and if she were still alive. I wondered if she had passed on and if so how would I know, as in actuality I did not have contact with work at all during my trip away. Polly was so intensely on my mind for those few moments as I grabbed the crackers and went back out on the patio. Sadly, the birds were no longer in the grass, so I sat and just enjoyed the beautiful morning. Suddenly, a woman’s voice called from the other side of the sliding glass door, in a clear, bright and melodious manner, “Good Morning!” I peered in but could not see anyone so I shouted back with equal energy, “Good Morning, And Good Morning”. A few moments later my friend appeared, sleepy headed and dishevelled and asked, “WHO are you talking to?” I looked at her and said, “Didn’t you just shout good morning to me?” “No”, she replied. “Then perhaps it was Heather, our host”, I answered. “Ellen, there is no one here”, she responded. In that moment, it dawned on me that perhaps it was Polly, letting me know she had passed on. I looked at my friend and asked her to remember today’s date, for I believed that my patient had just made contact with me. When we returned to the US I was not at all surprised to discover that Polly had passed on exactly 24 hours before I heard that beautiful voice. And it is interesting to note that I never heard Polly’s actual voice, for by the time she and I came to meet one another she could only speak in a whisper. However, I know without a doubt that it was Polly for two reasons. The first was that when I initially shared this story with our hospice team, someone mentioned that it was right after I went to get crackers for the birds, and Polly’s last name is ****. Also, at Polly’s memorial service the poem she chose to put on her memorial program stated clearly that whenever a bird was present it was really the spirit of her being close to us. Polly was a wonderful gift to me as a nurse, and to me as a spiritual guide that we continue to live on the other side of the veil that separates this life from the others.

Addendum: While I was initially reading this story to Polly’s husband and daughter in their family room, a squirrel came up to the sliding glass door carrying with it a persimmon. The squirrel looked at each of us and then left the persimmon on the patio. Sadly, the birds were no longer in the grass, so I sat and just enjoyed the beautiful morning. Suddenly, a woman’s voice called from the other side of the sliding glass door, in a clear, bright and melodious manner, “Good Morning!” I peered in but could not see anyone so I shouted back with equal energy, “Good Morning, And Good Morning”. A few moments later my friend appeared, sleepy headed and dishevelled and asked, “WHO are you talking to?” I looked at her and said, “Didn’t you just shout good morning to me?” “No”, she replied. “Then perhaps it was Heather, our host”, I answered. “Ellen, there is no one here”, she responded. In that moment, it dawned on me that perhaps it was Polly, letting me know she had passed on. I looked at my friend and asked her to remember today’s date, for I believed that my patient had just made contact with me. When we returned to the US I was not at all surprised to discover that Polly had passed on exactly 24 hours before I heard that beautiful voice. And it is interesting to note that I never heard Polly’s actual voice, for by the time she and I came to meet one another she could only speak in a whisper. However, I know without a doubt that it was Polly for two reasons. The first was that when I initially shared this story with our hospice team, someone mentioned that it was right after I went to get crackers for the birds, and Polly’s last name is ****. Also, at Polly’s memorial service the poem she chose to put on her memorial program stated clearly that whenever a bird was present it was really the spirit of her being close to us. Polly was a wonderful gift to me as a nurse, and to me as a spiritual guide that we continue to live on the other side of the veil that separates this life from the others.
is sick, I see swirls of dark energy. The colour of dark brown or the aura becomes muted or slightly darker. It's the difference between the sun and the shade. You see things in the sunshine as a vibrant; vibrant colour and I always liken it to ocean. And if you have beautiful white sands, as you do in the pacific islands, the ocean looks a magnificent turquoise blue. And when the sun is not on it, you can still see it as a turquoise colour. But it doesn't have the vibrancy that it does when the sun shines, and I see the aura in exactly the same way as that. So when we saw this gentleman about three years ago, his aura looked more muted. And we spoke to him about what he was doing, and he had decided to change his diet. He was eating only raw food, and wasn't eating cooked food, and I was concerned that he was a bit protein deficient. But he said that he had lots of energy, and he certainly was doing lots of things, and he was very physical. And for all intents and purposes, he was well and happy, and so forth. But I still saw that his aura wasn't as bright. Now, they were living in Malaysia, and they returned August last year, which was a year and a half since I had last seen him. And I guess, I turn that gift on and off, so that if I'm not doing a reading for someone, or if I'm not deliberately needing to turn that part of my gift on, I just go about like a normal person and I don't notice it. I can't go around noticing it for everybody, or I would go nuts. I turn it on when I'm working, and I turn it off, and I can be starting to show some symptoms of not being 100% well, and he did look very grey. His energy body ... If you were to put a grey film over the top colour; that's what it was starting to look like. And when we saw him in August, the only thing that made me look in that way, was that he had lost again, an enormous amount of weight, and his energy again looked quite dull, and it didn't (unfinished sentence). When you are well, your energy body seems to radiate quite a distance from your physical body; the way I see it.

K: So how far?

F: Well, when someone is physically well, it probably goes on for further than I can see it. It's not unusual to see where someone is a vibrant, passionate person, who is doing what they want in the world, as having at least a meter of aura, and people who are unhappy in their lives, and not really allowing a lot of flow happening, or are very negative in their thinking; their aura may only extend about a third of that. So, this is a person, who normally has a good strong vibrant aura. And in August, he had a bit of a cough. Also, he was starting to show some symptoms of not being 100% well, and he did look very grey. His energy body ... If you were to put a grey film over the top colour; that's what it was starting to look like. And he went off and had tests and so forth, and by September, which was about a month later, he had been diagnosed with terminal cancer.

K: Oh! Where was it manifesting Frances?

F: He had a primary in the lung and secondaries in his back, the base of his spine and his abdomen, and in his bones, and some lesions around the kidney area. Yes, around the front in the liver, and around the back in the kidneys. It was a large cell cancer; it moved very, very fast. Over that time, exactly 7 weeks after he was diagnosed, he did die. In that time, his wife looked after him here, because they had nowhere to go. They had no money. They had lost all their money in investments overseas, and he and his wife came back to Australia with nothing. And they had been living with her daughter and family, camping in camp stretchers in the lounge room. Her daughter had two little children, and this gentleman found it really difficult, with the noisy kids and so forth, and so we said, "We've got a really big house, we've got to go to Queensland in September for a couple of weeks, and so why don't you come and move into our house, and you can look after the house while we go away." And that's what we organised in August, before we knew he was sick. So, they moved in here, looked after the house, and by the time we came home he had been diagnosed with that, so he ended up staying here.

K: Lucky him!

F: Well it was fortunate that he had somewhere, where he was comfortable to be, and over that period, he did have some radiotherapy to the lesion to his shoulder, and to the base of his spine area; mostly to the base of the spine, to try and alleviate the symptoms. So, at least he could be ambulant, and not be bed bound any earlier than he had to be. And he was a very, very positive man. And he was sure, even when he was bed bound; he was positive that he was going to beat it. When people think a lot, it's hard for me to explain this to you ... when people are meditating, if they are actually meditating, I see a coloured glow around them. It may be blue, it may be white, it may just become brighter, and when the person starts thinking lots of thoughts in a meditation, I'll see them as yellow flashes through their aura. And I'll know straight away, if I'm taking a group of people for a meditation, I can see immediately through their aura, whether they've gone to sleep, or whether they're thinking, or whether they are actually doing the meditation because their aura.

K: How un-nerving for them!

F: Because, your aura changes. And so what I did observe straight away, when we came back from Qld, in the middle of September, I really saw him. Every time he was being really positive, there was a lot of yellow around his head, so I really feel that he was being really positive in his head, but not in his heart. Do you know what I mean?

K: Yes, sure.

F: He was really trying to think being well, rather than working with it from a heart space. So, over a period of those next six weeks, even though four of those weeks he did fight it hard, including going to radiotherapy. And he went to a naturopath, and started taking those things, but it was really too little, too late. And over that period, I could literally see him having less and less energy body around him. Until it got to the last three weeks of his life, there didn't seem to be much difference. His energy seemed to shrink in a bit, and I could really only determine an energy body six to eight inches around the body. And that whole three weeks, I didn't see any change, because I'd look at him every day, to see if he was going to be better or worse. And physically, he'd have some good days, and physically, he'd have some really bad days. He was in a lot of pain, and it didn't really matter. And he was on morphine, and when he got to the parts of the days, where he was in a lot of pain, his aura was actually brighter, after he had the morphine, and that sort of dulled it down again. It might have dulled the pain, but it also dulled his life force as well. Does that make sense?

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K: Sure, sure.

F: It actually dulled it down, and actually I couldn’t tell the difference energetically, between a good day and a bad day at all. And so we had the palliative care; nurses coming in every day, and his wife was doing all of his personal care. And the last three weeks, he needed help getting in and out of bed. He needed help moving in the bed; he needed help to roll over, to be washed and so forth. And, I was physically handling this man with her, and so the palliative care people brought in a hospital bed, with all the moving bits, and he was able to use the hospital bed, did all the jobs that needed to be done, and I didn’t need to be helping to lift him. But I still saw him every single day, and in that last three weeks, I really didn’t see a great change in his energy body, until about two days before we went away, and that was four days before he died. And then, I don’t know how to describe it really. It was... I knew he was going to die, and it was like; was it going to be today? Was it going to be tomorrow? Was it going to be next week, because his energy body around him hadn’t really changed, and then around about four days before he did die, it suddenly shrunk in, and you could still see an energy body around him, but it was very muted and very slow to move. When you’re well, your energy moves out from you quite strongly, it’s vital, it moves out, and dissipates, and what I can see, into thin air, so to speak.

K: What colour was it Frances, when it got to this stage?

F: Mostly grey and brown, mostly browney–grey. He did, in the last week; go through a lot of emotion. We had lots of really hard conversations with him about what he wanted done after he died. Because he realised after he couldn’t get out of bed, that he wasn’t going to get up again, and that was really upsetting for him. And he was really, really, upset about dying in someone else’s house. And when we had those conversations, I said that we have spooks in this house all the time, I talk to spooks all the time, and we wouldn’t be upset if somebody had a baby in this house. If someone was born in our house, it would be a wonderful privilege. So what’s the difference, it’s still a privilege to have someone die in your house. Whether you’re coming or going from the world, what’s the difference?

We’re perfectly O.K. with it, and once we had had that conversation, it was like around his chest, wasn’t so grey, as dark. It was a big worry for him. There were a few personal things that he was worried about, a few personal things. He’d left his wife in a terrible financial position, and what was going to happen and how was the funeral going to be afforded? ... All that sort of stuff.

And we had those conversations with him and his wife, and he really wasn’t as dark across his throat, or across the rest of his body. He wasn’t quite as grey, not quite as heavy.

He actually died a day and a half after we left. We actually had to go to Queensland again in November. We saw him in the morning, and I was a bit surprised, because he wasn’t very with it, when we said good bye to him. He knew we were catching the plane, and I was surprised, because he wasn’t as cognitive, he really wasn’t in a good cognitive state, and he just seemed a little brighter, if anything, and thinking about it afterwards, he was gathering himself up, before he did go, and that morning he did look a little bit brighter, a little bit clearer, not quite as grey. And I didn’t know how to interpret that. I wondered whether he was going to go that day, whether he was going to pick up a little bit before he went, or what. But the following twenty four hours, he couldn’t speak and really lapsed. He couldn’t breathe, and he passed about thirty six hours after we left.

K: Have you had any connection with him since he died?

F: Oh, he’s been around. Well, his wife is still living with us. That’s working really, really well. We get on very, very, well, her daughter doesn’t have a spare room, we have a big house for her to live in, and financially she is not able to get her own place, or pay rent, or anything; full rent anyway. So she boards here with us, and it works really, really well. We talk about him a lot, and obviously she has gone through six months of grieving, which is really hard. We haven’t, not spoken about him. Things have come up, where she’s looked for things, and she can’t find them and she said, “Well, I can’t find them because Phillip looked after these things, and he never let me know about this, that, and this, and this off it for you?” And I still think that Phillip did that, and gave his son a bit of a prod, because it you’ve got to tell us where these passwords are. And I didn’t actually hear him, and within minutes, his son who is Claire’s stepson, who is interstate, phoned and said, “Would you like me to take Dad’s computer, and see if I can get this, and this, and this off it for you?” And I still think that Phillip did that, and gave his son a bit of a prod, because it was within half an hour of us actually screaming at him, and saying, “You’ve got to help us with this!” Because it was important information that was locked away, that she needed.

K: That’s very interesting.

F: So, we’ve had a few things like that. I haven’t actually seen him, but we’ve sort of known when he was in the house, and that was in the first couple of months. The last couple of months, I haven’t felt him here so much. But I think that Claire is a lot better. She was very distressed, because it was very quick.

K: Yes it must have been very traumatic, particularly on top of all the other issues.

F: Yes.

K: You said earlier, that you do communicate with people, who have passed...

F: Yes, that’s what I do. I do clairvoyant readings, and John Edwards style chats.

K: Do you see people or hear them?
F: I see things, I feel things, I hear things and I know things. Some people I can see very clearly, like seeing a person, and some people show themselves to me in my mind, part of themselves. When I'm communicating with somebody's child, who has passed in a car accident, the first thing that the child will usually show me, is which part of their body was most affected, and to tell their parents that that part is O.K. I see them patting their head, and, "Tell them that I'm O.K. from the top to the toe." And they are patting their head. If their chest was crushed, they will say, "Tell Mum I'm O.K." And they will be patting their chest, so I will know that it was an impact to the chest that caused them to go. And they will usually show me their body, or a part of their body, and I'll see a hand patting a part of the body, which will give me an indication or identify something that they are trying to tell me. If I have a gentleman with a bald head, I might not see their body, or a part of their body, and I'll see a hand patting a part of the body, which will give me a feeling in my own chest, with asthmatic breathing difficulty, or a heart problem. I'll get a pain in the neck, with neck pain somewhere. Or I usually get a feeling of blackness over the body, if someone has passed from cancer, or I get a tight feeling in my own chest, with asthmatic breathing difficulty, or a heart problem. I'll get a pain in the neck, with neck pain or a pain in the head with a head injury.

I will get a feeling in my body, so I will often know how the person passed. Sometimes, I'll hear sentences, and they'll be able to chat with me in my head. If people didn't speak English, they will show me things, because I don't speak another language, other than English. But, I do get a lot of people whose relatives, who have passed, are not Australian or English speaking, and they won't have any problem giving me information. Body language is 38% of our communication, and so words are very little, and so they are able to give me the feelings and show me things with pictures or gestures that very quickly give me accurate information.

K: What a wonderful gift!

F: It's mostly a gift, yes. It's mostly... I used to talk with people, who my mother did not think were there, when I was a child. She used to tell me to stop talking to myself, or the men in white coats would come and put me in the Looney-Bin. And I grew up terrified of rubbish bins; because I wasn't sure which one was a Looney-Bin.

K: Poor little darling!

F: You can laugh about it now, but its scary walking down the street near a rubbish bin; I would always walk way a way from it.

K: Yes, so it wasn't a familial gift.

F: No! And I didn't have a lot of contact with family beyond parents, so I'm sure none of them had this ability. And my children; my son is very intuitive. He just always knows what the right thing to do is, and when to do it. And so everything just falls into place for him. And my daughters; they're a little psychic. They often know things before they are going to happen, or they know things about people before people know it, but neither of them really work with it. Yeah, ones a teacher, and one is and office admin person, and they sort of use it in general in their lives, but they don't work with it.

K: Well I guess it's a hard act to follow their mum.

F: I suppose

K: They're lucky. They probably don't have to work with it, as they have you on tap!

F: Well it doesn't actually work that way. I can actually do less for my immediate family, than anyone else, because I have a vested interest in what I want to happen, I don't come to the places with a clear slate. I come with an emotional, vested interest in their well being. And so often, I can't see things as clearly for my children, my family. My step daughters, I have terrible difficulties with, and it is a little easier with their partners, but I know too much about them, and it's very difficult to separate my brain knowing, and my psychic knowing. If somebody comes to me, and I know nothing about them, then I can trust totally what I get, because I know it's not coming from my brain, because I know nothing about the person.

K: That's a very interesting story, and it's lovely to hear more of who you are and what you do.

F: I don't know if that helps you; I did quite a bit of aged care 16-17 years ago and I have been present seeing people, after they've died. I ran an aged care hostel, and the very last day before I left, and I gave up that to do this full time.

K: Did you have a nursing background?

F: No, no, an admin background. Yes, I started out as a part time receptionist, then I was the assistant supervisor, then I was the supervisor, then I was the manager, and I don't know how it happened.

K: I do, intelligence and destiny, I guess.

F: Look, I can't help organising people. You know, I like telling people what to do. I'm not very good at keeping my mouth shut; I think that's the trouble. So, the very last day, I had an elderly lady. I think that she was ninety or ninety-one, and I came in the morning, and she had died, probably six o'clock that morning. And the supervisor had attended to the first things, and we went in, and she had the oldest, tattiest night gown on. And I said," Oh my God, we cannot send her away from this place in this. It's so disgusting, that they will think that we don't care for these people!" (Even thought they were free to decide what they wore themselves, I just looked at how dirty and revolting it was, and said, "no, we cannot send this woman away," so we ended up taking it off her, and at least putting her in a fresh nightie before they took her away. And she had obviously passed, I don't know, early morning, and she had started to stiffen up a little bit, and one arm was sticking out and it wasn't easy, and I turned around and said, "Mrs. (whatever her name was, I can't remember), did you have to die on me today? Do you know how much work it is when somebody dies in one of these places? And it's my last day! Could you not have waited until tomorrow?"
And I turned around, and she was sitting in the chair laughing at me; just sitting in the chair laughing. Because I really said it in fun, not in the other way. I said “You did this deliberately to me! You just could have waited one more day.” And I turned around and she was sitting in her favourite chair and I got quite a fright.

K: What did she look like?

F: She looked like her physical self as I knew her, but certainly, a lot more energy, a lot brighter and able to move around freely, than she could in her physical body, as I knew her. She did present to me with a vision of how I would have expected her to look physically. And certainly, when I’ve done readings for people, they’ve always presented themselves to me in the way in which the person in front of them will recognise them, and sometimes they will show themselves to me, a lot younger and particularly say, “I had beautiful skin when I was younger, and this is how I looked, and my hair was this, and this, and this.” And they will show themselves to me in a slightly younger form, where they felt more comfortable.

Now I could probably tell you a million of those sorts of stories, but energetically, the people who are easiest to do readings for are the people who have big open clear auras. People that are really difficult to do readings for are the people who are really negative, and people who don’t have a lot of self confidence, or people who have negative expectations in life, and their auras are generally quite a bit smaller. Someone will walk in for a reading, I can tell them what their personality is like, and their relatives will tell me a little bit about them.

K: So you have many people leaving in tears do you?

F: Well it’s very validating stuff, and that’s what I do, mostly that’s what I do in my spare time.

K: So is that your vocation, or your avocation?

F: I don’t know, we run personal growth classes and retreats. I see that as our main work. I’ve been doing that for 16 years and because I don’t want to charge an arm and a leg for people to do those sorts of things, basically, I offset it by using my clairvoyant ability, to do a limited number of readings each week.

K: Which is a fabulous way of helping people too, I think.

F: It does undercut my intent in doing this sort of work which is to empower people, to enrich their lives in some way, or to create healing, and I don’t get bad messages. I say to people, that what I’m giving them is a paddle to paddle up their river, and if this is a rock coming, or a mountain that you do not need to hit, then I’ll get the information, which can give you choices not to hit that mountain, but if it is a mountain that you are meant to climb, then me telling you about it ahead of time, will only worry you, and that does not enrich your life, or empower you in any way. If it’s something that you are meant to climb no matter what, then I just wont get that information, because worrying about it won’t make your life better. The things that are avoidable, or that you can change, or that you’re heading towards, and you don’t need to do the hard way; that information, I do get.

K: This has been helpful, Frances. Thank you.

F: Well I hope that it helps. And as I said before. What you’re aiming to do is big, and I hope it all comes together for you. It’s a brave topic. It is good to hear people tackling this sort of thing on a bigger scale, or in an academic way.

K: Thanks a lot and I’ll send this over to you when I’ve transcribed it.

F: That’s not a worry, whenever, however and anything that I can help you with I’d be happy to do. And we will meet one day, for sure.

K: I’m glad. Thanks again! See you.

INTERVIEW - GEORGIA

Kate: Last time we spoke, you mentioned that as a healer you have observed the energetic process of people as they are terminally ill until after death. Would you like to elaborate on that, please by thinking of a person who’s dying you have witnessed?

Georgia: Yes, sure. There is a friend of mine who...actually they were a couple that I had married. They were in their sixties and they got married and he was a heavy smoker and I said, ‘Now that you’re married, you should give up cigarettes’ and he said, ‘The bloody things haven’t killed me yet! I’ve been a truck driver and...’ blah, blah, blah. Anyhow, a few weeks later, he did give up cigarettes and a week later he vomited blood and he went down very quickly with cancer of the lung. So he hung in and hung and I felt that there was a little bit of fear of dying, so when I started to tell him the names of the relatives and friends in spirit who were there to meet him, I could see him separating more
rapidly, because there was this sense of "I’m safe"; like a child, who feels safe when there are parents to take them home.

K: So when you say ‘separating’, what did you see?

G: Well, I actually saw his life force starting to separate.

K: How do you see that?

G: Well I actually see like a luminous light around people. See, when I hypnotise people and they are in a relaxed state, the spirit body, like the physical body, is confined like a bird in a cage. But when you are relaxed, that light will shine right out and with people who are hypnotised and relaxed, I see the aura more. And with people who are dying, you know, you can see that light starting to come out a little bit more until the light body, the spirit body then will separate and will be linked with the etheric chord for a short time, until that chord breaks and the etheric body or spirit body will separate.

K: So you said that you saw relatives and friends...

G: Yes, waiting...

K: And how does that manifest for you?

G: As more, not with my eyes open, but with my eyes shut, I can see the other dimension, right? I can feel the presence of people and I can hear them. When I say I can hear them it’s not with the physical ears, it’s more a telepathic thing. But when I can get the names of people and instances that they have lived through, it’s proof to them that these people are there. I’ve found with the death experience, towards the end, most people will become aware or open to a little bit of that psychic stuff themselves. Now a lot of people, who I’ve known have reached or called out and said "Someone’s here for me," you know. So that will happen.

K: So going back to the story, when you told him about his relatives and friends; what happened then?

G: Well I left his place at about a quarter past eleven, it was, and it took me half an hour to get home. And when I got home, his sister had rung. And she rang back again and said that a quarter of an hour after I left, that he let go, because he felt comfortable to let go.

K: That’s great, Georgia, great!

G: Would you like me to talk about my mother’s experience?

K: I’d like you to tell me anything that you can

G: Well my mother’s experience… Unfortunately I wasn’t there. I wanted to be there even though she had been a hard woman. I felt it was important for her to die in peace, even though she was fearful because she said, “I don’t want to die!” and I said, “Oh, come on Mum!” Even thought she was in her eighties. So I said, “Mum!” She said “I won’t to live to see my great-grandchildren grow up.” Well that was impossible and I could sense this terrible fear because she had done a lot of things that she felt bad about.

Anyway she was up in the local hospital and she had gone to the doctor complaining about her digestion and by August she had cancer of the bowel and had her bile duct nicked. So the doctor did that and it caused pancreatitis and other complications. So, she spent a ten day period in the hospital dying and my younger brother, who was the baby of the family… I wasn’t speaking to him at the time. So, I was talking to her soul at a distance, saying that it would be alright.

But my elder sister was there and Mum was so fearful, because of guilt. And it wasn’t religious; she wasn’t a devout Catholic or Protestant. It was more fear. She had some religious background, that she was screaming the hospital down. They had to sedate her. And she had my niece sitting beside the bed saying the 23rd psalm over and over and of course she was so full of fear to let go. I think that there is such indoctrination of religions, although Mum wasn’t terribly religious.

But I did remember this morning that Mum got confirmed when she was thirty eight at the Anglican Church. Well I feel at that stage, Mum had had an affair (I found out recently), which resulted in me the middle daughter and I think that the affair was over at that time and I think that she was trying to conform or overcome guilt things by being confirmed in the church.

You know it’s very unusual at thirty eight to be confirmed and walk down the aisle of the church when there are all teenagers being confirmed. So I feel that that was a fear factor with Mum. And for a long time Mum didn’t communicate with me and Mum’s been passed over now for ten years and it’s only recently that she has started to communicate with me.

K: And so what happened? You started to communicate with her on a soul level and…

G: Yes on a soul level and I was explaining to her, you know, “It’s ok, let go. You can’t hang on forever in this state.” Because she was in a very, very bad way. The body was swollen up and all that. But in the end, my sister said that the doctor said “I’ll give her more morphine.” And I think that the morphine helped her because she was screaming the hospital down not wanting to go. And that’s quite sad when someone gets to that.

K: And did she ever … So it went to the end… that she screamed.

G: Yes, until they knocked her out with morphine.

K: And did you have any sense of her passing?
G: Yes, I did and the same with my first husband too.

K: What did you experience?

G: When she was passing, I just felt this presence beside me and I had been mentally talking to her, although I was a long distance from her and I felt her presence.

But with my first husband I had absolute proof of when he passed. My first husband, we’d split up when I was thirty eight and he was forty. And, at fifty two he was dying of cancer. His second marriage had broken up and he had a girl, a nursing aid who took him in but at a cost and he wasn’t very happy with all this in the end, and he started to appear, his spirit would travel from Brisbane to where I was in NSW to me. And at night I’d wake up and his spirit would be standing beside the bed.

K: And how did that manifest to you?

G: Just a light form, but telepathically it kept coming to me, saying “Please come and help me, I’m afraid.” Because he’d been an atheist and I had been spiritual. So in the end I said to Luke, my husband, “Harry’s coming to me every night and waking me up in the night.”

So in the end I rang his parents, who were living in Brisbane and I said, “Look Mum, Harry’s appearing to me every night and saying, ‘Please come and help me!’ I want you to ask him physically, verbally, is this right?” And she went to him night and waking me up in the night.

So we had been divorced for about fourteen years and I had been married to Luke for quite a number of years. So I and he said, “yes!” He wanted me there.

And he’d been an atheist and I had been spiritual. So in the end I said to Luke, my husband, “Harry’s coming to me every night.”

K: And did that manifest in any way?

G: It came in different ways. One way was that he said, “I’m at peace at last!” And I woke up my present husband and said, “Harry has just passed at about two o’clock.” And about five minutes later, his mother rang me from the hospital and she said the last one that she was calling for was me. And he was at peace.

So I went to the funeral. At the funeral I saw him, and this quite often happens at funerals. You know, I’ve done many funerals as a spiritualist minister and I see the spirit of the person standing beside the coffin saying, “Hey, that’s not me in there, here I am!”

One rather funny one…A friend of mine died of a massive heart attack and he had two sets of families; one to an Italian woman, with daughters, who lived in Melbourne. They came up and later in life he married again and had this beautiful daughter, who was in her early twenties.

So, there was this big debate. So it got to the time in the crematorium, because it’s all pretty confined there. You have to flip them in and out pretty quickly, you can’t dilly dally when other people are waiting.

And the daughters from Melbourne handed the undertakers the sleeve with Pavarotti and the tenors and opened it and there was no CD’s in it. So they had to race down the street very quickly and get another CD. And Bill there was laughing his head off because neither had what they wanted; there was something in the middle of their wish.

I’ve got a theory on cot deaths. And I spoke to a man who does the ultrasound about this, I was having an ultrasound when I had a clot in my leg and I had a near death experience. I had a clot floating in my body. I was fifty eight. And it had come to me that when the little souls that comes into babies, the etheric chord is still fairly new, fairly thin. The soul is still not cemented in very strongly in a little babies’ physical body after physical birth. And if there’s a sudden noise or disturbance that chord can snap like that. And I asked because one of my daughters-in-law miscarried three babies in a row within days of having ultrasound. And I asked this ultrasound bloke whether it was like a high pitched whistle that a dog could hear and we can’t hear and he said, “That’s it exactly!”

K: Yes, I think that is very interesting, very interesting. My dog had an ultrasound the other day. She was under an anesthetic, and I could see that she was very uncomfortable. And the vet was holding it still, instead of moving it while he was showing me various aspects of her gut.

G: Speaking about animals, I held his head in my lap as he died. And he was a ex-pacer, from the Tweed Raceway. And somebody stole our saddles and tack. So he hadn’t been ridden for a while and it came to me that he had fat around the heart from not exercising when he had been used to exercising.

So I had him in the paddock across the road and I used to take him bread and bananas and he used to love that and he’d whiney and he would talk to me.

He was a beautiful big fellow with ginger and white markings on his forehead. So I said, “Feldspar!” and he came up to me and he went a bit shaky on his legs. So the next minute he toppled over and I went and put his head on my knee and said, “Feldspar, what’s the matter boy?” and it came to me telepathically, “I’ve had a heart attack and I’m leaving my body.”

K: Oh, Yes, Did you see what happened?

G: Yes, I just saw with him the life force just drift away. Like a luminous blanket drifting off the body and just ‘whist’ away.

K: And when you say ‘away’, then did it just disappear?

G: Yes.

K: That’s great, Georgia!

G: I’ve been with my dogs and that when they’ve died, too and it is a funny thing a few dogs that we’ve had to put down with people that I’ve read for and their dogs have come through. And I’ve said that you have had to put this animal down and it was very sick and the animal will thank the person for putting it out of pain… “Thank you for letting me go.”
K: Are there any other stories that you have for me, Georgia?

G: Yes, there was recently I saw a lady, who I did a mediumship for and I picked up that she had a son who had recently been killed. And she said, “that’s right!” And he’d been only eighteen and but had been a champion skateboard champion and had been all over the world doing it and was the Australian champion. And I picked up that he had accidents that way and that he had been on the back of a motorbike and killed. And the woman was so angry against the driver of the motorbike and this young guy came to me and said, “Tell Mum we’ve both had the same poison,(namely dope and alcohol), so don’t blame him, because it was my time to go.”

K: Wonderful, wonderful, that’s great.

G: And there were some young boys killed locally, and I’ve read for two of their sets of families of two of the boys, just recently. And they also said that they were in ‘the shenanigans’ and I ‘saw’ them (telepathically), outside the local pub. And they said, “Don’t blame the driver!” He was just the one who was meant to get them where they had to go at that time. He was popped out and just got scratches and bruises. And he’s been in court but they don’t blame him at all, because they have to live with that for the rest of their life.

K: I heard the parents interviewed and I think that you have done them a great service.

G: John was one of the fathers, who came here and two couples came in, one after the other. And there was a lot that came through about that, you know a lot of proof about what had happened. Yes, so other death experiences...A friend of mine’s son suicided four years ago. He gassed himself in his car. He was eighteen and I did his funeral. And earlier this year, a friend of mine came over and her kids had come home and said that a young girl had gassed herself in her car and her brother did it four years ago. And I thought, “Surely not!” It was, and by the time I got home, her mother had rung me and it was the daughter who had suicided. And the mother had asked me to go to a viewing and although I had been involved with death and dying, I never actually had seen anyone in a coffin before. And I went there for the viewing and the mother was kissing the daughter but it really shook me. I guess it was because it was too unrealistic. It was too contrived, with the body made up.

K: With the make up?

G: It was too contrived, that it wasn’t how it should have been. I guess I was also picking up the girl’s trauma. See, a lot of her friends there and her mum there and everybody trying to pretend that it was ok and it wasn’t. And her spirit was still in trauma.

K: Did you get any sense of her spirit?

G: Oh, yes. That’s why I was picking up trauma. The spirit was still going through trauma and the body laid out, as if it was perfection. There was a dichotomy. It was a couple of days after her death and her spirit was still traumatized and I spent time with her mother, after that and she was at peace. She comes through and laughs now. I was at the graveside and I was holding the mother there at the graveside. She was buried on top of her brother. The mother had another young son about fifteen about the mother and father had another baby who had died at nine weeks old, with heart problems. So, the father’s three children had died. And after he spent time at that graveside, he went to the infant’s graveside. Anyhow the daughter came to me in spirit had said, “It’s my dad’s birthday on Sunday. Make him a birthday cake.”

K: How lovely

G: So I had only met him once at the brother’s funeral and then at the sister’s funeral, so I made him a birthday cake and I was thinking, “What should I put on it?” and she said, “You’ve got something in a box in the pantry.” And I said, “Have I?” and she said, “Yep!” So, I went and looked in this little box of ornaments that I collect and here was this little baby angel with a bible between its legs and a halo and that went on. And from spirit, she dictated to do this cake.

K: So, she really came through from a much traumatised state into a calm almost happy state.

G: Exactly!

K: So, when she was in that traumatized state, did you converse with her at all?

G: Oh yes, I counselled her and I was saying to her, “you be at peace now, you’re past the pain, past the suffering.”

K: Did she say why she suicided?

G: Broken heart, like her brother; girlfriends, boyfriends, all that with a little bit of alcohol thrown in. She actually told me the day of the funeral...

K: And did she have any regrets about passing?

G: No, just sorry for her mother. Because this was a girl who I’d known, since she was a young kid and in her early teens had anorexia. Now anorexia, where the voice tell them that they are too fat, too fat, and it’s a form of demonic possession. Puberty, post natal, change of life are the most pertinent time that the psyche will open up. So kids in their early teens opening up to it and not understanding it makes what is happening to her - it’s very easy for this to happen; for malevolent spirits to get in and torment them. So this girl had been very, very sensitive, very psychic, since her teen years and had had a close death experience and got to a week off twenty, before she took her life.
INTERVIEW - HELENE

K: Helene I’m interested in your perceptions of the energetic changes that occur when people are in transition...

H: So, I’ll just tell you the story. This man, Ivan, had two sons. He was a drug addict - heroin. He used all the drugs for years. One of the boys was a son of a good friend of mine and the other son came from Melbourne, somewhere. He came from a good family and had a Russian background. His parents were migrants and fled during the war. So they were a very disturbed family, in that sense. He was a highly intelligent man, was educated and had degrees, but got into drugs and was then living by himself. So, the son, Jeff, was the only contact person.

were a very disturbed family, in that sense. He was a highly intelligent man, was educated and had degrees, but got into drugs and was then living by himself. So, the son, Jeff, was the only contact person.

So this man collapsed in the street and died of a heart attack. And so the police rang my friend, Penny, because she is the mother of one of the sons, who was 17 at the time. So, what happened then was that my friend had to get involved again, because he was the father of her child. The Melbourne family was contacted but they were not involved. So my friend got involved, because it was her past coming back. So, she rang me and said, “Look, can you support me and my son?” I did this and this is what happened… As I was primarily involved with my friend, so I didn’t think so much about it. We just had debriefing on the phone. I rang her every day, you know, or twice a day and said “what’s happening? Do you need anything?” The son was emotionally detached, because he had had a difficult time with his father going in and out of hospital, when he was on his drugs…

Anyway, the funeral was a cremation and there was a very, very, small community at it. There were only a few people there, when the coffin was in the crematorium. So, we were all sitting there and there was the ritual, of just walking past the coffin. And so, I did that too, just out of honour for my friend and her son. While that was happening, I could feel that this man’s soul was still there and the interesting thing was that he didn’t think that he was dead, because he thought that he was in a heroin trip. So he couldn’t distinguish the different states. Afterwards, we were driving home in separate cars to meet at my friend’s home. During that drive home, all of a sudden I could feel that his body was being burned, and that burning gave him the message that “Yes, I’m dead.” When I met my friend then at her house, she had felt the same thing, and she said to me, “Did you feel that, as we were going home?” So, when they burned the body he left his body, and that was the first time that I felt that this ritual was really important.

K: That is interesting!

H: Yes, that was very interesting.

K: How many days after he died?

H: That was three days after he died. But what happened then was full on! He then knew that he was not on a heroin trip, that his physical death was for real and that he was not coming back.

My friend rang me very distressed a night later, because she had all these entities around her house. Huge! So, I said, “I will see what I can do” … I have never experienced what is described in the mystic texts as “wrathful deities” stage. My friend was describing something like that happening at her house. She felt very distressed and scared. So we talked it all through and I said, “Look, do these rituals and I’ll see what I can do.” I had a quiet time and prayed for release of the soul and all persons attached to it. Then, as I was falling asleep… it was about midnight… I woke up as my whole house was shaking. My bed was shaking! It was like, just the psychic stuff, I have witnessed on other occasions. But I have never been in it to that extent, as it caught me by surprise. It was very wrathful energy! My conclusion was that he was a powerful soul, who was disturbed from his family’s war history and he had to get through the wrathful energy of the past, attached to his family and somehow I don’t know why, he came down to his ex-wife and his son, maybe for help?

His son was part of my clientele as well, so I thought, “I’ll just help.” It was going for about two or three days. It was full on. I had to set time aside to deal with it. So, I set time aside, and I asked all my helpers in the spiritual realm, to assist and help that soul, to remember the light and focused on the highest life sustaining source.

K: So you could feel the house shaking!

H: Yes!

K: And, it lasted two or three days!

H: Yes, off and on. And it might have been the grief, it might have been the wrathful deities described in Buddhist texts, I don’t know.

Now, the next story is about the horse’s transition, which was later. The interesting thing about her was and I don’t know if our consciousness creates this, but we might have a shared consciousness, because I didn’t have it until my friend rang me and I said, “I will help you,” that I was going into her reality. And I had to go there and through that it was created. We then focus our consciousness on that level of the wrathful deities which are there at that time and perhaps through the death of someone, get a doorway to tap into that

K: Yes, you know how the Buddhists describe the wrathful deities as an aspect of mind, as an aspect your own mind, I wonder if you both cued in to this person’s experience, if you both became a conduit, which is an amazing thing really, but not really in terms of what we know as energy.

H: And I’m really then having the experience with the horse a bit later. I agree with the Buddhists of course, when you say that. I’m thinking about this and I might have to go back to sit with them for a retreat.

You know, when my horse died; I could see her spirit leaving it was just unbelievable; through the head you know. And there before this the helpers came, to facilitate that [her passing]. They were already there and there was a change from this man who I was aware that she would die.

The first ten hours I thought that she would survive, but then I was… or no it was longer than that, I would say the first eighteen hours, we thought she would not die, and there was this incredible peace, between her and all the horse people there, who were very intuitive, you know. It was about four hours, before I realised, that there was no change and she would not stay in the body, because the body had a tumour or something.

And then, we invoked the [spiritual] helpers to facilitate her death. And after the invoking of a peaceful death, it started to happen automatically and there was this amazing strength in her and in everyone, when there was already a change
somehow, and then there was this big cone of light, just coming out and setting her free…and the separation of the soul aspect of her body, the soul aspect of that horse.

It was interesting and very cathartic … It was interesting to observe an amazing peace in the deceased body and at the same time you could still feel the chemistry doing its own energetic thing… you know, the sugars still… the body chemistry shutting down. There was a period of about an hour because she still had the bridal on… I sat with my son there… He came. And we were sitting there…witnessing and grieving and letting go and we couldn’t touch her, so it was as if …she was just lying there still … It was this separation process going for about an hour and then we could take the bridal off, after about an hour.

And her best mate was there, another horse … He was standing in meditation with her; you could see that other horse standing and facilitating that as well and he was standing there, the whole time, for longer than we did. And we were sitting and then we started to go and then her mate started to graze a bit, and he was just around her for another day. You know, over a day.

But what happened then … and that was the interesting thing about this mind stuff, because after that I got into a state where I had started to dream again. And it was dreams about, certain dream symbols, which I had before. And I was in contact with her. So, six months before I had dreams where she was in the dream and I was in the dream and was staying around snakes. Virtually and she was saying, “no I can’t come there, because there are these snakes” OK and then I started to get the snake dreams again and so we had to clear.

I was very shocked about this dream that I had wanted to call her into this snake pit, because we did a lot of clearing and then I got these snake dreams back and then I had to do … for a week after her death I had to do these rituals where I had to appease energies, that the snakes were standing for…

K: What did they stand for did you think?

H: They were standing for very powerful earth energies which… snake was normally sexual energy. So it’s the whole human realm, which is the life- death realm and the fear of this polarity and transcending the fear, to overcome the polarity through this other bit. And yes, yes, a snake can give you a deadly bite! Right? So virtually I had that parallel image. And I thought that was the part of the wrathful time. Still, that is part of our human experience, somehow. And we have to go through that again, to go to the light. And she was a very alert horse and she was very fidgety in her personality, so there must have been something coming back there. And I had to do a mandala and I had Charles help me … I called for help. And I think that it is good in that context to also call or help, from the people who work with that a bit…

K: Absolutely

H: You know not to deal with it yourself.

K: Yes, and I wonder what our animal companions… what aspect of ourselves they are … and I don’t mean that there are not discreet and yet none of us are discreet.

H: Oh yeah, yeah, they are!

K: Of course, they have their own souls and so forth and she sounded like she was a beautifully evolved spirit. The fact that her spirit went through her crown…

H: Yeah, yeah, yeah… and through her head … I don’t know where the crown is; it was where her ears were (pointing to the area between her ears) but it was not the third eye it was more where the ears were and it might be where the crown for the horse. I’ve never thought about it.

K: Well, otherwise what would it be? Some sort of minor chakra? And it’s hardly likely that she would leave through a minor chakra.

H: I learned a lot about being with death with that horse. It was such a gift for me to be involved. And you know, it is the transition of shedding the body. I mean, it doesn’t matter about whether it is a guinea pig or if it’s a horse or if it’s a human being. We have so separated our bodily existence from anyone else and think that we are different. Forget it!..

K: Absolutely! I agree.

H: I want to read it! [the thesis].

K: Don’t you worry, you will!

Break for general conversation

K: The reason that I’m asking that …go on finish…..

H: That is the stuff… I think what is also denied in our whole paradigm is the healthy coaching of the dying process, as if we do the healthy coaching of the birthing process. It is the transition and to coach that through is you know… And sometimes I get clients and they come from GP’s who might know me. Also, I had another person who had a brain tumour and no one was talking about death and dying and he came with his wife, and in the expectation that I would do miracle healing. And you know, I said, “You know, you need to prepare for death for this person.” And so they got the family together in a beautiful setting and he died. He had said good bye to everyone, had done what he had to do, and had let go in a beautiful way.

K: How did you know that he was dying, Helene?

H: That’s the hard bit, because he had every sign already that he wasn’t in his body, he was in his astral.

K: So what did you see?
INTERVIEW - JUDITH  

K: Would you say ethically or traditionally, because what constitutes ethics? Do ethics constitute what's commonly done within a profession? Because really, you've just said that business about different paradigms. If we were in an indigenous setting, what constitutes an ethical approach to death, would be quite different. It would be perhaps. "Yes, we know that this person is dying and lets take them into a this separation with as much integrity as we can."

H: Yes, knowing when and what will happen for a person can be hard. I have just now seen a person with an amazing history. She has advanced Breast cancer and decided to have surgery and try healing. She went to Germany to do that and she tried the most advanced therapies, which didn't do anything. She came back and she had metastasis in her bones already... So, it was an advanced cancer. Then she was run over by a car, in which four people died and she had major head injuries; fractures in both legs and stuff. She was the only survivor. After the accident, no cancer could be found in her body... and she walks now, a year and a half later, she walks into my clinic and she was totally cleared of that, with no metastases or anything and she has recovered from that near death experience. She had obviously a near death experience and is still in the body. And she was very conscious about her "being sent back". There were people saying what were so often described "Now you have to go back and care for your body." These experiences make me humble, in as much as, how can I judge who is going to die or not? And this is this ethical question, because in the medical profession it has been reduced to an obligation to care for the body at any cost. It's such an 'iffy' thing... It has been taken to a fear approach. "If you don’t do the chemotherapy you will die." And for me, that's not having the integrity. It's a complicated matter. And it's your personal integrity, to be as present as we can for the person. The dying person is spiritually equal to us. Being in touch with the spirit of a person and saying “Look, I'm here and what do you need from me?” As professionals, we have a certain amount of expertise. This expertise may be helpful, or it may be not. It's learning to be with the higher forces and we can do everything well, and people will die and we don’t expect it.

K: And it's absolutely beyond our control because when the soul has been called back... I guess what I'm saying is, that you somehow intuitively knew that that person was going to die, so you told the family that they needed to get together during that time. And I know that because you're so intuitive, there will be times when you've experienced this and I’m interested to know if you have had experience when somebody is dying either when you've come across them or when you've been treating them or some of those process that you've described. For instance, the process that you described with your horse. Is there a time, when you have come across an accident and you've seen an energetic change?

H: What I have seen is this interesting thing about people being bomed out by drugs... Being in theatre for instance and being bomed out by drugs and when I had time to look when I wasn't the surgeon, there is some people leave their body already and they hover around and some people stay closer to their body. What I have seen in accidents is that when people are in shock and injured, they leave; their main energy is outside the body hovering, "observing", in a somewhat fluent state. If one is in shock one is not in the body, one leaves and lets the body do its thing but somehow one is connected to higher realms. At the same time, I don’t know how it works....
And he did that and one of the things that I thought I was doing, (one never knows in these circumstances), was trying too keep a safe perimeter around him and encourage him. And he died right then in that guided imagery and his wife knew the minute he was gone and you could feel the room and he had made that journey and his face just took on an image of great peacefulness.

K: Wonderful!

J: It looked beautiful. And it took a few minutes before the breathing stopped. My sense is that people’s consciousness or soul or whatever you want to call it, makes its transition before the body actually quits. But it quits very shortly after. Now, some of the people that I’ve worked with, will have difficulty dying if anybody’s around. You have to get everybody out of the room and everybody, including the healer present and leave them alone and they will go. People are very different.

K: Yes, yes.

J: Some people want everybody around, some people want one or two but some people want no-one.

K: That’s very interesting; Judith. I’ve heard that from other healers, too. And I think that that is very interesting, that you can see what is happening on the other side as people are dying. It sounds very much like the Bardo in the Buddhist tradition ... The wrathful deities, that he’s seeing. But of course, the images that one sees would be specific to whatever tradition or culture he related to.

J: And you don’t know whether they are wrathful or what they are because even the wrathful deities, if you are Buddhist are protectors. They don’t scare the person, they scare everything else off.

K: Yes, yes.

J: Now, part of it is that it is discerning that. You know, if I felt that the images were really deities, that were actually protecting him on his journey, I would have spoken to them. But he had done a fair amount of marihuana, hash, whatever, in his past and I don’t know what his experiences were with that, but he could have had a biochemical set up or sensitivity to seeing things.

K: Yes...

J: Now, there is always stuff around, so it’s hard to interpret what it was that he actually saw, other than to work with what was very frightening to him. What I found also was to be very careful about not ascribing specific religious overlay or conceptual overlay to anyone’s experience.

K: Sure.

J: Because, especially when they are dying, they just get really mad and just come back and chew you out, if it doesn’t fit what they see, or what their construct is.

K: Yeah, of course, of course.

J: I’ve had an opportunity to study deeply in several faith traditions, so I’ve done quite a bit of study on the Bardo from their point of view in the passage and all that, as well as other faith traditions, so that I am hopefully as aware as I can with my clients and what their particular brand is. So I always try to use whatever is most familiar to them, as I’m talking to them, and try not to move any other kind of conceptual overlay, on what they see.

Like for example, I worked with a man, who was...a man who was very religious - both he and his wife. Ian was the crabbiest, grouchiest, scrooge person I’ve ever met. He was never a client of mine. However, his wife was. I was at their house once for some kind of gathering, where I was speaking and someone pushed a chair against a wooden piece of furniture. I thought he was absolutely going to take the head off the person who’d done that, as if they had done it intentionally, or they were stupid and clumsy or whatever. That was the kind of guy he was. So lan is in the hospital dying. His wife, Jill, calls me to come, and it’s another setting, where everybody else has disappeared and in his religion, the belief is that you go into some kind of suspended animation state. You’re not aware of what happens, until Jesus comes back, supposedly. And so, it’s a grim belief system, if you’re the one who is losing a loved one and they are just going to go into ‘cold storage’.

K: Yes, sure.

J: So his wife is just sitting there and pretty upset and he was in a coma. I was just sitting beside him and all of a sudden he wakes up and he opens his eyes and I’d never seen him look delighted and kind of glowing and smiling. But he still could speak and get something out so I said, “So have you been on the other side?” And he nods his head, really vigorously. So I just asked him a series of questions, trying to ask what I was seeing, so his wife could get it. I said, “So was it really wonderful?” And he said, “Yes.” So in this whole odd thing, the one thing that he wanted to do was communicate to his wife that he was in a wonderful place, he wasn’t in cold storage and that he loved her. And I don’t know how long it had been since he’d ever said anything like that. And so as soon as we finished this and it was a sense that everything that he had wanted to communicate had been communicated, his head dropped back on the pillow and that was his last breath.

K: How lovely, Judith.

J: And his wife; you can’t imagine how grateful she was. It was a true gift of comfort for her because; for one thing she saw this... I’m sure in her earlier days, she’d seen this loving, kind, side of him. Also, that he was... he’d gone to a really good place.

K: Yes, it’s a great gift, really.
J: Yes, and I’m always very thrilled, because I consider it a great honour to be there during those times. Sometimes, people just fade off and they go, but every once in a while, you get one of these peak events, which is like a birth, almost. People call me to come to births. I’m often present at births and the feeling in a room of welcoming a new life. Sometimes, cheering someone over in their death almost has the same feeling.

K: Yes, that’s great. It’s wonderful to have people with your abilities and graciousness to take people over.

J: Thank you. And it seems to be quite comforting for families. Most families - it’s never an easy time, even if the person’s a hundred and three, you know.

K: Yes, and it provides nourishment for them, for the rest of their lives and I think it’s great.

J: That’s true. How did you get interested in this area?

K: Well, I guess from my spiritual yearnings and general adventures over my life. I’ve always been interested in that process. I worked as a physio in a community setting in Adelaide, which is the capital of a Southern State of Australia and I did have experience of palliative care then. As I’m a Feldenkrais Practitioner as well as a physiotherapist, I’ve had to do some subtle work with people and that process started to develop my ability to perceive energy, kinaesthetically. I have had a close connection with animals, and I developed a capacity to feel the changes in their energy fields as they died, so I try to facilitate their transition, if given the opportunity. So, this abiding interest took form in the topic for my PhD. And although I had many straight topics that I could have worked on through my Feldenkrais or Physiotherapy background, this one opened my heart. My sister was then diagnosed with advanced breast cancer and my experience with her further clarified my desire to do this study.

J: It’s wonderful!

K: So, I know how you came to your experience of healing, because I was at your presentation, which I found really interesting. I’m looking forward to your book coming out.

J: Thank you, so am I!! It’s currently on track and will be out mid October.

K: Oh, well I’ll watch the spaces that I’m watching.

J: I just wish that I could hop in a plane and deliver it personally. That would be so much fun.

K: That would be great fun! Who knows what will happen in the future, Judith.

J: I have a twitch to get back over to Bali. I have for some years. You know, I spent ten years coming and going, working with my teacher there.

K: Yes, and I’m very interested in hearing those experiences, too.

J: And it has just not opened up to go, but, one of these days! Have you been over? I guess you would have.

K: I have been over. I went over about twenty years ago, so it was wonderfully untainted then.

J: Oh, right.

K: I really had a wonderful time and I’d love to go back there too, and specially to meet some of the healers over there at some stage. And the tragedy of having Bali being so brutalised and being the scapegoat for the follies of the world is almost too much to bear, frankly.

J: Yes.

K: So, to even go back as a show of strength is something that I’d like to do, as a Westerner. Now, feel free to tell me what ever you’d like to tell me.

J: Well, those are a couple of my favourite stories, so I’m kind of groping at anything else. You know, an experience that would be helpful...

K: Well, why don’t you tell me about your experiences in Bali or your teacher? That would be very interesting or anything that you’d like to tell me.

J: Well, you know, both of the healers that I’ve worked with, had near death experiences. My understanding is too that one of the reasons that I went there to find somebody to talk to, and work with is that how their healers originally come to healing, with some kind of death experience. And they believe that, that journey, and overcoming the fear of death, is essential to the kind of work they do in deep trance. And there are healers there, who do this so called massage, where they try and separate all the muscles from your bone. It’s terrible stuff. As Westerners, we are meatier - not necessarily fat. And I had a couple of those and I thought, “I don’t think I’m going to do that again!”

K: Sounds very much like Rolfing!

J: Yes, but all in one fell swoop. They’re in there walking on you, digging in you. Yeah, “thanks a lot!” So, there is that form of healing and there is herbal stuff, where they go out and chop various vines and roots and mash it up with a mortar and pestle, and extract it out with arak wine, and then you’re supposed to drink it and get well - I mean - if you don’t die in the mean time! But if you live, you might feel better the next morning. The third type of healing is the trance work, where the healer; what they told me is that they go into deep, deep trance. They go up and talk to their God. Their God talks to your God. Your God tells their God what to tell them to tell you.

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It still cracks me up. It sounds like working with corporate America! And so both the healers; I worked with two and the first one I had a very dramatic experience. She did all forms of healing and was very adept with all of them and I experience all the forms of healing with her. And then the second healer I worked with was just an adept trance medium and she worked exclusively in that arena. She was fabulous! And she took me through twenty trips to different temples. Each time a different one had extensive tests and initiation. And there were very profound changes for me and I could see when I came back to my office again and began working again, how much more I could know or see or understand in the subtle arena, and in the alternate realities. And I never would have, if I hadn’t done that. So those were very intense experiences for me and I have thousands of stories. What was interesting in the light of your interest in the gateway of death was that the bottom line of that was if you’re going to work with healing deeply, you cannot carry a fear of death. It needs to be dealt with, like in any shamanic culture. The shaman has faced his own mortality, leaves the door of death and comes away going, “OK, I’m not scared any more.” And I think that, that is the great value of near death experiences and so many people world wide have had those and, however that wisdom knowledge is applied, the consistent bottom line is that there is no longer any fear. You know, nobody wants to hang on and suffer and be really sick, if that still lingers there, but the actual go over to wherever it is, has lost its turf. K: Yes, that’s very interesting. Prior to your experience, your near death experience, did you have any psychic experience? What were you…?

J: That’s a good question and I used to say, I didn’t but I’ve been looking at this and writing again and I’m going “Well, you know what?” When I was a kid… So, the answer is, Yes, sort of - nothing is clear.

K: Oh, how interesting!

J: But it was so tangible an experience and even as a scientist, I ran a really active lab, and I had people working for me and all kinds of experimental work. So we’d be planning maybe three or four different approaches to a particular problem, we were trying to work on. And what we’d do is just kind of start them and after very little bit of working with it, I would get a sense of which was going to give good data and just shut what wasn’t and go for it, and have a publication. And everybody would go “I don’t get it. How come you…How come stuff works so well down there?”

So, when I look back on that, I see at least some form of intuition has been part of my life for some time. I listen now much better than I used to. I used to get those little nudges which would just go, “yeah” but I’ve really learnt to listen. And for example, I have a cabin two and a half hours north of Seattle, up at Mount Baker and when I’m up there, I like to leave the cabin really clean, so when I arrive after a couple of weeks in the city, I have nothing to do and so I’m vacuuming away and I get this nudge. Drop everything, get in the car and get out of here, right now!

K: Mmmm

J: And I went “oh, OK,” and I did. I mean, I just literally unplugged the vacuum and put the dog in the car and off I went. Well, it was last winter and I went a few minutes, if not seconds ahead of a freak storm that settled down I5. There were 40 car accidents, because when it settled, it brought freezing rain, mixed snow and almost zero visibility, I was right there at the front edge of it, and I popped right out of it. And if I’d waited another minute, I’d have been in the middle of it and so, it doesn’t make me at all happy that others were injured or cars were wrecked, but there’s no way I could have known that that was going to happen, logically.

K: Wow, that’s great! It’s a great acknowledgement of this ability...

J: You know how many times one disregards it. Like, “Nah”...

K: Yes!

J: So, it’s become a very active part of my life and my decision making process.

K: And Judith, How did you… When you had your near death experience, how did you decide on going to Bali to find those healers? You say that you’ve mixed with some Tibetan Lamas and various other people, too. I assume that you started to search, after that amazing experience...

J: Yes, I did and each of the trips I did came from a friend saying, “You know what, there is this cool stuff going on. This happened in the Philippines, also. So a friend of mine from one of the schools in Seattle…One of the Universities, had been to Bali and she said, Oh, Judith, you ought to think about going. It’s really cool! There are these wonderful healers and musicians and it opened a yearning that I could feel, that was physical. Like in my heart was a yearning and what I discovered was that if I decide that, it’s a really cool idea to go somewhere, but I’m not really guided there, nothing works out. There’s no money in the bank, you can’t make a connection on-line to get a plane ticket; Nothing works. And I don’t make a lot of money and Bingo! All of a sudden, low and behold, there is enough in the bank account to go to Bali.

And each of the subsequent trips just, I would wait until I got a nudge and the way would open and so it’s been a few years since the nudge has come and I’m crabby about that.

K: I understand that experience because that ISSEEEM conference that I went to, I got a nudge to go to and I had no money and so I borrowed money and I’m still struggling to pay it all back etc. But, I do understand the nudge and I so I understand the crabiness around the latency period too.
J: Yes, right.

K: So, Judith so although this wonderful gift has emerged, the down side is of course from a secure well paid job to itinerancy has its difficulties, I think.

J: Yes it does. Yes, well I’ve been provided for and suchlike and I make enough to do OK but not any extra. And I’ve finally realised that there is always enough to pay the bills. And you know, I went from a really secure job position, which I came to rely on each week, with all of the fringe benefits and all that and its been twenty two years since I’ve had that.

K: Well that interesting and if you have any other stories I would be interested to hear them but if you haven’t, that is OK This has been great talking to you and I really appreciate it.

J: Well it’s been fun talking to you and nothing pops up at the moment.

K: That’s fine.

J: Well I’m always happy to answer questions, so...

K: Well, what’d like to do is to transcribe this discussion that we have had and if I could get back in touch with you at some stage and I’d love to have some other connection with you at some stage, so...

J: You bet, love it!

K: Alright Judith, thanks for connecting with me today.

J: You’re more than welcome and you can always email me, if a question comes up and if you just want to make contact, I’m happy to write back.

Interview - Julie

K: Julie you’ve identified as an energy Healer...

J: Yeah, I was thinking, I’ve been thinking, I’ve experienced a lot of death, and in spite of my lack of qualification, I’ve always been sensitive to energy. Ah, like for as long as I can remember. Ah, but my intentional use of energy has only been recent, where I’ve decided that I have to be responsible, and use this ability. Whereas, I may have just sensed things and not have done anything about it.

So, I’ve had a lot of experience of people dying, and I’ve sensed life force in people, and to me the way, the way I’ve perceived people’s energy, which I interpret as their life force - is more a temperature. Sometimes, I get a sense of density. And this is what I’ve been thinking about, concerning my father, which is the story that I told you about last time. And to kind of unpack that really well, I’ll repeat the story in a minute in toto, but the addendum, which will begin this story is that I was thinking what it was like with the energy changes, as a person dies, and then after they’ve left, and it’s kind of an ineffable thing, and it’s not something that you usually give voice to, is it?

K: No, it’s not

J: And it’s kind of like, it’s a kinaesthetic thing, as well as a visual thing, but it’s like seeing through very clear water. So, I see things as temperature, and to me water is hot, so it’s not a cool energy that I’m talking about. Life energy; it’s a warm energy and like, I don’t actually see colours, but what I see is changes in the energy field around a person. It’s like they’ve got like a ‘water thing’ around them.

K: A bubble? Does it have a boundary of some sort??

J: Yeah, but it’s not a hard edged boundary. But this is how I see people. Periodically, you can perceive differences in their own internal energy, and pick up on [or] question on, how a person is. When they are fully energised, basically they fill the room. Basically they fill the room, and you can feel that you are walking into their field. So, when I walk into a room, it’s kind of like walking into their energy field. I start to see their energy and when people are dying, their energy field starts to shrink. I notice changes in people, based on this energy field, that shrinks and expands and things. And it has different temperatures, so, it’s quite viscous, it’s got a sense of texture and density. I don’t particularly see colours, though, sometimes I do. So some people get sepia colours, dark auras, and other people are really just blindingly light. As a rule I don’t see colours.

K: So, what did you perceive as your father went into his transition?

J: That’s where I’m leading to. So, we understand how I see things, and that’s what I perceived with Dad. I mean, I picked up there was something wrong with him months before he was diagnosed. There was some distress, there was some change in him.

K: Can you elaborate on that in an energetic way? Is that a possibility?

J: You know, I notice with some people they can be fully open. You can approach them and they can be fully open to you, and you can feel as though you are walking through an open window, and other people they are sort of blocked and a barrier, and what you’re perceiving is coming sideways its coming around something. Some impediment to the clear flow. He was more open than usual, once he had found out his diagnosis. So we all rallied; the whole family. But some haven’t opened themselves to you. Ah, and my father was like that. There was - he was distressed about something. I knew there was something distressing him. Ah, and that wasn’t just an energetic perception, you could see it in his behaviour. He was preoccupied. His energy was very scattered and so he was worrying about something, I didn’t know what it was and then I come over, to visit my grandmother, and picked up something was wrong then, and
didn’t know what it was. And then, later on, he actually had changes that actually happened before he was told, in that
he was actually developing a depression. He was working [in a senior position] in [the public service], and he was sent
to see a psychiatrist, who had actually suggested that he start antidepressants.
But there wasn’t that sort of feel to it. Anyway, I was travelling at the time with my partner, and we left the city, where
my father resides, and went over to Coffin Bay, which is near Port Lincoln. Anyway, he actually had an experience,
where he got this blinding headache, and lost his voice and he had that investigated, and found out that he had a brain
tumour the size of duck’s egg. And all the early symptoms of his brain tumour, they had interpreted as him being
depressed.

K: Oh, gosh!…

J: Yeah and so he only had a couple of months to live by then, and so I came back from my travels, to care for him at
that time.

K: What a terrible jolt for you all.

J: For Mum in particular, yeah. He opened himself, though. He knew that he opened himself, I think. I mentioned that
last time. He let those barriers down. He was gentle, and was hearing other people, and he was allowing other people
in close to him, which are something he had always protected himself from. We rallied around him, because he was frightened of going into hospital, and had expressed the wish that he wanted to
die at home. He didn’t want to go into hospital, so we all respected that, and my brother took time off his job. He was
working as an orderly at a hospital, and my sister came over from Canberra, and my partner and I, and mum. And we
all nursed him at home, for the last couple of months.

So, you could see in some way, his energy change from this fearful, something’s wrong, scattered energy, to this open,
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working as an orderly at a hospital, and my sister came over from Canberra, and my partner and I, and mum. And we
all nursed him at home, for the last couple of months.

J: Whatever you’re happiest with, is the main thing.” And what we all said to him was “That’s fine. You’re not going to
have treatment, then we’re not going to get cross at you for that.”

We were all really cross at the doctors, who misdiagnosed him, and had not picked the early signs a couple of years
earlier. And so, as he declined. It was interesting the way the brain tumour affected him. It gave him a slight stroke.
So there was progressive weakness, on the right side of his body.

So, he was a fairly independent man, so he still managed to get around. And the day he died (or the day before he
died, because he died at six in the morning, so this was the previous morning), he tucked in the sheet with his one good
hand; you know what I mean? Bits - kind of like he was really engaged in his life until he died. It was lovely.

K: Mmm

J: And so it was a slow motion time, his dying time. Because everything was, you know, that twilight that goes on
forever at the end of those summer days. You know? He was really fully present in every moment.

K: Yes…

J: And so that was great, and his energy was caught up in all of our energies, and there was a connection with all of us
there. And we all devoted our energies. Because we knew that it would be tiring. Near the end, we got Domiciliary
Care to come in for the night shift. And so his energy gradually got weaker, and weaker, and I could tell that through,
you know, he stopped filling the room. And it became smaller, you know, as our energy moved in. It wasn’t as though it
created a void, it shifted the balance of energy. So there was more of our energy going and bolstering.

K: And so when you say it was more of your energy, can you feel boundaries between peoples energies? For instance,
when you’re in a relationship with me, as we are sitting opposite each other, can you feel where your energy stops and
mine begins? When you’re talking about “filling” is that just an expression?

J: No, it’s not just an expression. People have a characteristic energy with different vibrations. So for instance, there
are some people I just can’t be around, because their energy is so full on and I really have to protect myself from them.
And [a family member] is [an anxious] person, and she was one of the ones who was helping. And you know, she
always unsettles me and unbalances me, because her energy is a very high frequency and scatty. It jumps around. So
I know people, and I know their energy. The quality is different for each person.

K: So, That’s what you perceive …

J: Yes, so my father had his own vibration, you know. His energy has its own vibration, you know, and so that’s how I
could tell the difference between his energy and our energy coming to fill the room. Because to me energy is just love,
pure unadulterated love. That to me is what energy is. That’s what my philosophy is. And so, as his energy and his life
force was gradually waning out, our love and our energy was coming in to bolster and support him. So, you know, if you
walked into the room, it wasn’t just all clear, all of his energy, it was a mixture.

K: Even after they had left, or while they were there?

J: No, no, people don’t have to be in the room to have an energy presence.

K: OK. And so you were talking about the last time that you were talking about your Dad, you were talking about the
heat that you felt.
J: Yes, and - that was a sideline talking about people's different vibrations, so his energy field got smaller. And it's like a pulse that gets thready, the energy field got a bit thready, if you know what I mean. And he was exhausted. You could feel that he was getting really tired and he was wracked by pain. And he really - he refused to have morphine and stuff like that - he preferred to have low key things 'cause he wanted to be fully aware. To not create any barriers to perceiving things. This in terms of a long term situation wasn't such a wise choice. But it was a choice he made, at the time, and it meant that he experienced a lot of pain, but it kept him clear. His consciousness, and his perceptions, so that was good. So he got weaker and spent more time in his own world.

So shape, shape of energy too... It's like the shape of someone's field [changes] as they are dying, because that's specifically what we're talking about. It's like, when someone is healthy, it feels really dense but it extends well past all parts of their body. But as they die, it shrinks and it kind of becomes more and more concentrated, around the upper body about the torso.

K: And you felt that in your Dad?

J: Yes, OK. He lost consciousness... He lapsed into a coma. Two days before he died, he started becoming really confused. He had secondaries... you could see the lumps under his skin, all over his body. But the cerebral secondaries [meant] he would have been coning... As a nurse, I would know, you know, his brain would have been forced out through his foramen magnum. So, that would have been affecting his consciousness. So, he was getting confused on the second last day. He lapsed into a coma - you know how I said he tuckered in the sheet? And that was about 8am, in the morning - Twelve o'clock, he lost consciousness. So, that was like four hours later. He became very congested and he started to Cheyne Stokes and was really, rattly. And gosh, you know, I went to bed. I mean we just all left. It was kind of like we had been there, we had been there, and we all just knew this was Mum's time. We weren't to be there. We all knew that. So we all went off. We were sent away and it was just Mum & Dad. And I didn't expect him to live very long; he was going into pulmonary congestion at about 8 o'clock at night. And ... as he slipped into a coma, I suppose he wasn't flaring at lunch time.

K: When you say 'flaring' you mean the colour of his energy field?

J: Yes, it goes red and also it's like an explosion.

K: Prior to this flaring, where it changes to red, what colour was it?

J: It wasn't a colour per se, it was like water, so you can see that there's a change in density, but you it's nothing that you can actually see.

K: So, there's a change in density during this period of time?

J: Yes, he became thready and weak

K: The energy field became thready and weak?

J: Yes, and more concentrated around the body, torso, head region and the edges weren't too defined. And then with the flaring, that kind of happened later on in the afternoon. It's almost like a volcano effect, you know, things just coming out

K: So how did that look or feel to you?

J: It was a feeling thing. That reddy, pinkie, colour that I described which [is] more like a tinge and it's not just a solid thing, so it was like a woof out [that] filled the whole room.

K: When?

J: Late afternoon. And that sustained, so it was like that - this heat and this concentrated energy and stuff - it had started about six and it was full on and I didn't expect him to be alive for very long. Just as a nurse, I could see, really, coning, showing all the signs that he was about to die. And Mum just lay in bed and cuddled him until he died. But he didn't die until six in the morning, so that was a long time. But then she had a lot of talking to do, that she needed to say. And Mum doesn't believe in energy or anything. To her, the environment is her spirit. She is a rationalist and a politically active person but very sceptical about anything energetic or touchy feely sort of thing. But even she said that she could feel things ...

K: It was lovely for her, that she could have that kind of experience.

J: I know... She was scared, that she would lose it. She was very frightened, so it was kind of like she was compelled. She knew she had to be there, but she was really frightened at the same time.
And it’s interesting, because I think that, that was part of her [karmic] lesson. Because she lost her sister… Her sister was ten and she was thirteen. She was there holding Dad when he died. She was there holding her mother [too], when she died. And Mum is the sort of person who doesn’t like death, doesn’t believe in energy. And the universe is making her deal with it in a very intimate way. And you know she could perceive the energy. And Jenny and I were going, “see, this is what we were talking about!”

**K:** So, you and your sister talked about the changes during that time?

**J:** Well, yeah. We did after Dad died. We said, “Could you feel him go?” That sort of thing. And, yes she could. Obviously it wasn’t just the absence of breath. But she didn’t like to admit it … But the other component of what I was saying was how his energy stayed in the room.

So my sister and I… as I said last week, my sister is a practicing Buddhist, who’s met the Dalai Lama quite a few times now and is an energetic healer. And she came to that by being healed, um. She was born with quite a bad scoliosis, and you know, chronic pain and problems. And she went through a period of healing with this group of friends in Canberra and she actually physically came back two inches taller. Her spine had been straightened, you know. When I talk about Mum being a sceptic, you know, she was going “bullshit, bullshit. But look at you, you’re two inches taller!” - So we both asked mum… you know, supporting her … this was still, when Dad was still there. He looked so peaceful, and Mum was too frightened to go back into the room, and so we were sitting being supportive of her. And we said “what did it feel like?” and she said - cause his breathing was stopping and starting, and you’d think that that was the last breath and then there’s one more - but it was like she could feel something flowing away. Because she was actually cuddling him, she felt this sense of movement, that’s kind of how she described it. And I’ve heard other people describe it like that too.

But his room still contained his energy, though his life had left his body per se. It was a hot energy, and it stayed in that house for a week at least. It was around and… that was for me, feeling a presence … that hot energy. And my partner described how, this was the day that Dad had died, and she went to walk into the room … - this was prior to us laying Dad out … Mary and I laid him out… and the energy pushed her out of the room… wouldn’t let her in…. And, cause Mum was in there, and she was going in to comfort Mum. And it’s like… bugger off, it’s not your turn…

So we laid him out and the Funeral Directors came and we sent them away and said to come back in the afternoon. He died and he had that grin, that cheeky grin… I know that he had the rictus mask, but it was more gentle than that. So, he was quite happy to be gone and without pain. But, yeah, he was a courageous man… And I guess with the energy sticking around, and it was that hot energy, what was it the colour of …? I guess I equated it with the colour of a volcano, but I guess it had the tinge of love, just that tinge of “it’s too soon!” anger. Like… you know, and I guess that he went through till six in the morning, but I guess that he could have gone anytime. Like, on one level I think he was glad to go, but at another level, at an overall thing, it was too soon [with] more to be done. You know what I mean? On one level there is a release from pain and at another level there was so much more living to be done. I don’t know whether I was projecting that onto him, you know, losing him too soon. He was only fifty five. Well, there you go.

**K:** Very young!

**J:** And I guess that was me perceiving the energy for about a week or so. It was also, he came to me a lot in my dreams … for about six months or so. It may have been a bit longer, “cause I remember one dream I had and it was like me letting him go. And I remember telling it to mum and I told her that I felt like a large cabbage lifted off my chest… how bizarre!

**K:** Not at all. One of my clients described a trolley being lifted off her chest, so, it’s amazing what gets onto your chest.

**J:** So, it was just like Dad… he had a great sense of humour… So, it was about a year. And like I think of him and periodically connect with him, and it’s not in the same way that I feel his energetic presence around me. But my sister Jenny says that she does, and she may well be… she was quite close with Dad. And closer than I was. I was closer to Mum… They did the ‘spoily’ things together, like eating chocolate. Whereas, I’m not really into chocolate in a big way…

**K:** You couldn’t bond over chocolate…

**J:** No, he was indulgent and liked caramel chocolate. So, so she felt that she felt his energy for longer than that and still could connect with that. But I guess she can, if she said she does, I guess she can. Mum has felt his presence, but she equates it in a different way. And she doesn’t perceive energy in the same way. And friends of hers have said that they have seen him walking behind her. I believe he’s stuck around mum, to support her cause they were such love changes in those around you. Like you perceive suffering, you know, imagine [if] you couldn’t perceive energy? You know, you see people around you and you think, “why didn’t you do something about that, how could you not notice” …this is me assuming that everyone [can]…

So um… I’ve worked in aged care. I like working with older people and I just find it really rewarding and I like being able to connect with people for a longer term. So there’s been a lot of death that I’ve been privy to.

**K:** Is there one in particular that you’d like to talk about?

**J:** Well actually there are two. This woman I’d known … She’d been a friend of my grandmother. She was a ‘spinster’ and had grown up in a local town. She was a pedantic woman, who’d had cousins, who’d come and see her ritualistically, once a month. On this particular day, and otherwise, she didn’t have any visitors. And so, I’m always
K: I think it’s a lovely thing to have people present and witnessing anyway, at whatever stage of the process they get to,

J: I feel compelled to tell you at the moment that I’m going to die soon… I don’t know - in a few years… I have a perception that I’m not going to live a long time. But that’s OK. That’s what made me pause, when I said that I’m not frightened to die alone

K: We’ll talk about that after, shall we?

J: Yes, so it’s not that I’m choosing to die but I just have this intuition that in five or six years, I’m not going to be around, but anyway, it’s fine. There are other people on the other side that I can look after.

J: (laughs)… It may be their turn to look after you… Might be a graduation…

K: Might be a graduation, that’s right. But anyway, going back to the story.

So this woman was very frightened of dying, and she was struggling and fighting and she had very frightened energy...

We’d do rounds and I was conscious [of her], and like checked her as soon as I came on to see how she was. I did [the] round that was compulsory to check the others, and then went back and spent some time with her… Just kept an eye on her, you know. I was doing that all night, spending time with her, and she actually died, after my knock off time. But I stayed with her. At handover time, I knew it would be anytime, so I spent a long time with her during the night, because I could spend time with her, stroking her and just kind of sending her love. And she had calmed, that’s when I knew it was at any time and [so] I actually did the handover and then went back and sat with her. No one had actually got to her from the handover. The RN had gone and started to get the equipment ready to start the morning round. The carers had come and they had their set rituals, so I was able to just be with her during that hiatus, before anyone. I could be with her and ease her away.

She was different from Dad. Energetically, she had a lot smaller presence. She was like the guttering out of a candle. It was just like she got dimmer. It was like there was a very thin thread, and you know that was hanging on to this very pale wispy energy… Just a pale thin thread that was holding her here.

K: This pale wisiness. Was that around the body?

J: It was above the body. This was at the end most of it had already left the body already. All there was this thin thread...

K: And where was this thread? Was it around any part of the body in particular?

J: It wasn’t a thready energy, it was a very pale, very thin, and there was a tinge of blue and it was over the body

K: So it had left her body but was still in the room.

J: It was still in the room but was over the top of her. And, I couldn’t discern an upper margin to it. So there’s her body lying there, this is the thread, and I couldn’t see the top margin. And so part of what I did was to just hold her hand and stroke it and I knew her story, so I said “you go home” and that sort of thing.

K: How lucky she was to have you there with her

J: I was also lucky to be there. It was such a privilege! And she was a lonely woman, you know, she was difficult in that she was very pedantic and things, so… But she was someone, who I’d always connected really well with… So, she was a bit of a quirky woman. So, I was really grateful that she allowed me to be there. She could have hung on and waited until morning, but she trusted me enough to let go. So, what happened then was that the energy then became general and diffused in the room. The thread was there, connecting to the physical form so the energy became… you know how I couldn’t discern the upper margins? Well I couldn’t discern any margins, when the thread had gone there was just a diffuse energy that was there. And it was a cool energy, and it had that slight bluish tinge, I don’t know why…

K: That’s interesting and! So, what was her physical status when the thread broke and her energy became diffused in the room? Was she physiologically dead? What was happening to her physically?

J: You know, its interesting isn’t it? I think the energy was still everywhere including in her body. But it wasn’t, it’s almost as if the purpose of energy is like… the energy is within us. Our life force energy is contained within us to a degree to function as some sort of enactment, our human potential, love whatever. It’s within us. And it fuels us, keeps us going and to do that it inhabits us. But when we die, its our energy but it ceases to have form, it ceases to have definition, it ceases to be within a container. It is a diffuse energy, that is around everywhere, but its not purposeful, if you know what I mean,

K: I do know what you mean but, what I’m wondering is there a correlation between physical, so called physical death as we understand it, and that shift [in energy]?

J: No. My shift was over but I went back…

K: I get it; so, you continued to sit with her as a companion …

J: [Yes.] Respirations had ceased, that’s all I could say, but I could see that the thread had released.
K: Great! O.K.

J: But that's a good question, because I think that the edges are blurred. Like we create sort of arbitrary measures of life and I think its too blurry.

K: Well, that's one of the major reasons that I want to do this research, because I think that people aren't dead often, when we pronounce them dead and certainly in many traditions, particularly the Buddhist tradition, one would subscribe to that notion. And other traditions... I think we think, oh yeah, that good enough... And so the notion of keeping the body quiet and giving the spirit time to transit, I think is pretty good.

J: And that's right, and you know the person's energy is still there, and it's not purposeful. And it's sad, because energy is like the collective; it's like every part of us. And we're not singular, we're a multiplicity. And so things like that happen and so... I guess that some parts... it's interesting. I don't actually believe, I'm not as stuck on the whole body thing per se... I believe in respect...

K: What do you...?

J: You know, you mustn't touch the body. I don't believe... In one way I understand what the Buddhists are saying, in that, OK, you have this concept of cellular memory and that you have to let the body decompose before the energy can truly release. Because as matter it has energy...

K: Well They don't go into ... They would probably deconstruct and theorise like that, what they're saying is they come from, a shamanic background, the Tibetans; the shamanic Bon tradition was subsumed into the Tibetan Buddhist one and its highly... it's amazing stuff and what they're saying is that when the body starts to decompose, that's when death occurs... they see energy at the subtlest of levels... and what they are saying is that there is still the subtlest of transmission that is going on... and that's why they are saying "let it alone, leave it" and they consciously chant the spirit home if you like, with the BardoThodol.

J: But I would see that differently. Can I... [clarify that when the thread that connects the person's individual energy, that purposeful life force energy, is detached, their energy starts to dissipate. It moves out of its container, the body and the body fields, and gradually mingles with the matrix of energy we live in. It becomes part of everything and gradually loses its specific vibration. I'm speaking about my perceptions here, not for everyone, just my experiences and beliefs. This takes quite a time, a week or so for my father, less for this friend as her energy was weaker to start with. There remains for longer than this the energy that is released from the cells of our body, the energy of matter. It too returns to the greater matrix of energy, and emanates from the body. The soul energy is not contained or restricted to the body, it surrounds it, the area, and the people connected in the room. I experience it as a different sort of energy. I can feel the residual cellular energy in the body, but it's not the same as the soul energy, that I feel around the body and the room. So, when I say about respect, it's about respecting the transition of the energy out of the body; the soul energy. And it can hang around for a while before it dissipates. The respect comes in how you relate to the body and the energy in the room after death.

K: Thanks, Julie. Our discussion was very interesting.

J: You're welcome, I enjoyed it.

INTERVIEW - KELLY

K: The baby that died was seven days old... I can't actually say why she died; she went through a post mortem and it came out that it was a cot death. Sophie [the baby], had actually been a water birth. We were hippies at the time and to describe the process; I was in the crisis from the baby dying... It was a sudden death.

Kate: Yes

K: Sophie had had a temperature the night before. She probably died around 11 o'clock in the day. We were called to the mum's house. Jackie was a single mum and the baby was limp but I would describe her as not having died at that point and why I can say, that I guess in looking at it energetically, she still had its outer energy field which is the blue field around the body. And there was still energy fluxes in the health rays and there was still I would say, a heart beat, although very weak, incredibly weak, and there was also an inner energy aura. But the three bodies (the etheric, emotional and mental bodies) weren't there anymore. There was just an opaque colour. So, yeah. There was a point in which it was imperative to get help for the baby immediately, instead of waiting for the ambulance.

At that point somebody left. She didn't have a phone at her place, so we had to use the phone at our house and I think my partner went down and rang for an ambulance and we left to meet the ambulance. We had to also change vehicles because we lived on the border of one state and there was a gate which stopped us going into the adjacent state and we had two vehicles and we went with one vehicle with the baby and we had to continue to do mouth to mouth and as the mother had done.

The baby would - there would be a response in the energy field of blue so when there was oxygen in the babies chest or lungs, it would show in the energy field as blue, when there was breathing out (she wasn't actually breathing at this stage for herself); when there was coming out of the baby's mouth, by I guess the collapsing of the lungs. It was interesting as it was quite the opposite from what often happens or what I usually see as somebody breathes. I see red in the body and blue when they breathe out.

At this point the baby's mechanism had shifted from blue to red. Blue on the in-breath and red on the out-breath, which was different to normal. As we went over the gate we had to stop for a little while, well on a few moments and the baby (was) to be passed back to its mother. At this stage I had to do mouth to mouth with the baby.

I can't remember when I remember it turned white. The field turned white. At that point I believe the baby was still alive. Then we went in our vehicle down to meet the ambulance and I know the baby was still alive, although she was starting to get whiter an whiter. All the colour on her was starting to get more opaque. Even around the body was starting to get more opaque.

You know, I've never talked to anyone about the death of this baby; I might have said that she died, but I've never talked about the process, Kate...
So, we were in the vehicle rushing down to meet the ambulance and every time we breathed into the baby, it would respond with this blue and red but we were failing in the process, we started to know that it was almost like... it was hopeless!

We felt helpless! We're not saving the baby but let's get to the ambulance, you know. That was our rescue. We met the ambulance about half way down the hill. I won't say where we were. But yeah. We were going towards the town and we were half way down the hill. We met the ambulance and we were still doing mouth to mouth.

We gave the baby over to the ambulance [driver] and as soon as the mother let go of the baby, there was what I could only describe as white smoke left the baby's head and I knew that the baby had died.

And the ambulance driver put the baby on the - I guess it was like an area near where he was sitting. It was like a little sitting place. He just put the baby there and he didn’t continue to do mouth to mouth. He didn’t say the baby was dead. He said, that if we bought the baby back from here, it would definitely have some mental incapacity

Basically, he made a decision, I think at that point, not to bring the baby back. And I... I feel that all of us let go and the baby had left, but hadn’t completed the leaving process. And when he said that, it was like everyone gave up.

It was like this was like the voice of authority! And, who wants a baby that’s... you know, mentally handicapped? So, the baby was... I think that he may have put some oxygen over the baby, but not for very long. Maybe less than a minute and then and now, looking at the baby. If I look back at the baby, the energy had gone quite black; actually; like, as though it didn’t have an aura at all. I believe the baby was conscious of what was happening. I believe she could no longer get back in the body. So, I think at that point, when it was black, (it was very dark), I think prior to that point, the baby could still have been resuscitated. I think that the baby couldn’t get back in the body but the baby was totally present.

Now, at that point I can’t tell you anymore, because at that point and this was horrific. The baby was strapped in the ambulance and she was put in the front of the ambulance and she was taken to the hospital. So, I can’t really say what happened anymore. That's all I saw of her.

And I only saw the baby again at the funeral. She was taken to the hospital. She was taken out of the hospital and the mother never saw it again.

Yeah, she was taken intensive care and we were there with her and that was it!

Kate: How horrendous for you and her mother!

K: It was terrible and I’ve never thought about that because the whole time that I was there, I had to be present for her and her grief. So, I couldn’t actual express the shock for me during that time.

Well, as I’ve said; I’ve never thought about this before, because no one’s ever asked me and there are some scary bits

as strong sense, of being held back, because of what people would say. But, what I recognised was that he hadn’t left. He was still very attached to the people at the funeral and he had not left the body. He was actually breathing in his coffin.

It was so freaky. It was really freaky! I guess, in the sense of giving back to the baby, I’m getting déjà vous, I’ve done this before; going back to the baby... After the baby left and was taken to the hospital, and she had an autopsy and I didn’t see the baby until she was in her coffin, and then it was really weird. I had this weird sense of seeing her in the coffin. But I think it must have been so overwhelming, that it’s become almost like a dream sense.

I know that I did physically go with the Mum, and my partner to the funeral parlour and we saw the baby there, and so looking her now I see the baby’s body and it’s a body but as opposed to the man, who was still attached to his body and his body was still pink and alive somehow, but, the baby’s body was very white. There was still a tiny... like, I think that all things have a particular energy movement, so there was a little tiny energy movement, but the baby was in no way connected, the baby was no longer connected to her body, whatsoever.

But she wasn’t gone. Her consciousness still hadn’t left, but she didn’t recognise her own body. She didn’t recognise who she was. She didn’t have any attachment to the body, but she was still in the funeral parlour, so I can only suspect that she had attached herself back to her mother.

She may not have, but all I can remember is that she was still in the room of the funeral parlour. She didn’t know where she belonged, so she was, I wouldn’t say distraught, but she was really confused and in a way, she was still in the mode of a baby. She didn’t have language and she still had the consciousness of a baby.

I understand the consciousness of a baby not to be very embodied in the physical body or very in touch with its body. It hasn’t really identified with its body and as it grows, it gets more identified with the ego of body, so the energy of the baby was still unconsciousness of her form. But she still had a form, but it wasn’t a baby any longer.

Her consciousness or her being wasn’t a baby. She was just like how I saw it, as a little circular vortex, really. Not a vortex, more like a circular little ball, not... It’s hard to describe...

Kate: Where was it? Was it somewhere in the room?

K: Even though it was a ball she wasn’t identified with that either. she was identified with her consciousness, so she was much vaster than that. Then, it started to merge... I guess not merge... Ah, this ball was her consciousness and that’s what it was. Her consciousness had its own destiny; I guess that what you’d call Karma. She had her own Karma to go through and that’s like something that doesn’t have a choice.

Kate: How long after the baby had died did you see her in the funeral parlour?
K: As far as dates are concerned I couldn’t say. I’d have to look that up but I’d say... as far as my feeling body is concerned, I’d say that it was two weeks, because it had taken some time, because there was a police enquiry. A doctor was involved and the father had come down, maybe the father was trying to sue the mother, I’m not sure. There was something legal going on, around the death of the baby.

You know, I can’t remember the funeral at all... I just can’t... I don’t know if I went. I can’t remember. I just remember walking out in the street and we were all crying and that is the last thing I can remember. I can’t remember. Maybe they had a private one...

Kate: How traumatic!

K: Yeah, it was all pretty big! But with this man, with this man breathing, I didn’t know my responsibility at that time you know... what to do. I did write a note. Like people were writing notes and putting them into the coffin, as goodbyes and “send offs.” He was really loved; this man. He had a really big heart, but seeing him breathe, it was really different! The energy of the man - I can’t call it consciousness. The energy of the man, was still really attached, to the body.

Kate: How did you see that?

K: Well, first of all, I saw the breathing and it was as though the energy field of the body. It didn’t have blue around it but it was all cloudy all around the body. So it was like, again a bit like smoke. But smoke has tendency to be different colours or thicknesses. But this was all the same. There was no inconsistency in colour or thickness. It was completely equal around the body and all around the body was smoke. You know, the colour of smoke. And I know smoke can be different colours but this was very grey, going to white but not white. Yeah, so it was like that. So I had a sense that over the next month the body and his ashes were out. So, I didn’t complete something. Maybe I should have... Maybe, I still should go back up there and see what I can see there... Yeah. But there was no colour around the body.

Kate: And when you saw you could see breathing, what do you mean?

Did you see the chest rising and falling?

K: That is exactly what I saw.

Kate: Oh!

K: I saw his physical body. Like, I almost fainted, because I thought, “Shit He’s still alive!”... And no one knows that he’s still alive! I freaked out in my head. I just freaked out and I made myself keep looking and it kept happening and I’d look away and I’d look back. But I knew that everyone else going up to the coffin... No one else saw it.

And I didn’t know what to do and then there was a queue going up to the coffin and I thought, “I’ve got to go up!” And I think what I wrote in the note was something like “You’re dead and you need to move on”. I think that I spoke to him in this way. But even when I looked at him up close to the coffin, I didn’t see a dead person, I didn’t see a... He looked completely alive to me. I saw somebody else in a coffin once and he looked waxy. With this man, it was like we had this heart connection and he wasn’t dead. He was dead as far as the medical profession went, but he wasn’t dead.

Kate: How amazing!

K: I wasn’t telling you about the energetics, I was telling you about how he died. Yeah... and it was amazing, because he died in the shower and he wasn’t found until the next morning and the shower was left running all the time and he was such a conscientious person, you know, he was a bodhisattva really, you know that he left no mess. It was like it was like he had chosen that, so that no one had to suffer in that way. But there was a point when he did leave the body as a body, when he was just a shape and a form but he quickly went back to the body.

Yeah, when people were talking about him, he actually left the body and was sort of interested in what they were saying. Yeah, there was an interest in what people were saying about him. Yeah, it was almost like he became more alive then, when they were talking about him.

Kate: Oh.

K: And the other man that I talked about who was waxy. He was lovely... He had quite a painful life, for quite a number of years. Not physical pain but more emotional pain, in aloneness and not knowing; really wanting to touch a spiritual path and exploring that for himself but not really knowing what - how to do that and how to release himself from emotional pain.

Nowhere to get help with emotional pain... and I saw him on two occasions, when he asked for me. The first occasion was when he was first diagnosed and he was in the hospital in ***** and he had been in incredible pain and he couldn’t use his legs. He had a tumour on his spine. He had cancer. It was throughout his body and another thing, he needed to confide in me. He had requested me to come. He was a local person, who knew of my work and I’d worked with him - I think, once before. He had great faith in me for some reason, and trust. And when I saw him energetically, his physical energies, his etheric, emotional and mental bodies were very close to his body, as was the spiritual body, in the sense of us being spiritual in a physical way. But his other spiritual body... uh, words are hard to describe. It’s hard to describe this, because there is not a language so much for it, but there was another body outside of his which was a ‘supporting body’, where he’d been endeavouring to be a lot of the time. It was like he was creating another self, another being. And it was waiting, it was basically waiting for him. It was also where he went as an escape from his physical and emotional pain.

It was like he had started to create another whole form for himself and he wanted to know what he had done for this to happen. And before he asked, he told me something. He’d actually identified it for himself, which often happens. When somebody is ready to disclose something and they asking you as question, they’ve actually just told the answer.
but they want to hear it back. They haven’t recognised what they have done to create the effect so its “cause and effect.”

So they open, with the cause. But I recognise it as the cause. I don’t need to talk about the cause here, as it does not need to be said. But it was very painful hearing what had created for him his escape from this body, without it being suicide, without it being something others would feel guilty about or blame him for.

He had two teenage sons, so he had created a way for dying, himself. Over quite a long period of time, to the point where his doctor, who was a friend, hadn’t diagnosed it for two years and he’d suffered in those two years with cancer. So, he had even been able to keep this from the doctor, who felt incredibly guilty.

And the second time I went to see him was in the Brisbane hospital and basically his family were wanting him to die and were willing him to die and were telling him it was time to go. And I spent time alone with him and we didn’t speak physically, but we spoke spiritually to each other and I was talking to his inner self. I can’t talk about this in terms of energetics or the aura but I can talk about this in terms of connecting to the heart of the person or “the beingness” of a person; having a conversation with that person, guiding that person and experiencing a lot of fear that, that person had.

And I’m saying person because this goes beyond the characteristics that I might have identified as this person as being. Although it’s still an identity, it’s beyond the identity of say, we call someone a name. When I’m talking of these aspects because it’s not separate but it’s … It’s not the consciousness. When I talked about the consciousness of the baby. It’s the inner working of somebody, it’s what they feel is important to them.

It’s something beyond the body, yeah.

Kate: Is it the soul that you’re talking about?

K: It’s interesting, but in the Buddhist philosophy, there isn’t a soul. No, what I’m talking about is something different from the soul. When I saw this man’s energy field prior to his chemo and radiotherapy and all of that, that he’d created, over probably five or years. This energy body, that he could move into and out of. That was like part of his soul. That was like something coming in him that was creating this, because it was time to move on. There was physical pain, there was emotional pain, and there was a timing thing, that’s the soul.

What I’m talking about is that there is something between the soul and the ego. There is an intermediary stage between leaving the body and being something else, creating a new form. See, with this other man, that I could see breathing, he hadn’t had time to create another form and the baby hadn’t come into the form enough to identify with it. It was a different experience, so this man had created a form to move into. It needed a form to move into, but there one thing too, which was an intermediate stage.

Kelly 2nd Interview

Kate: Kelly, since last spoke to you, you’ve had a number of experiences, where you’ve witnessed the passage of friends and I’d like to hear what you perceived during that time.

Kelly: Well, I think Madeleine’s passing was an extraordinary passing, in that she was a spiritual practitioner of a very high degree, so she had served her own passing in a way that was extraordinary. I’ll go on to say what I saw in that process, but I’ll go onto describe why her passing may be very different from other things that I may have seen before. But on the process of dying, she was detached. There was quite a lot of detachment, that wasn’t based on denial, but based on inner control and inner insight and inner peace. She wanted me to tell people that she didn’t suffer. She actually didn’t suffer physically, in that … She did suffer physically, sorry! But she didn’t experience pain, very often, and her form of cancer should have created a lot of pain. But she said that she didn’t and she said that she knew that it was from the prayers.

And she had many, many prayers, being said for her, even by different religions. But in that dying process, something that I saw that was unusual was a consciousness that stayed throughout the process, I guess and there was a greying of her energy, which [formerly] was very clear. And when I observed her in the sixth weeks prior to her dying, there was a grey element over her body. But, it wasn’t disturbed in any way. It was almost like a coat, a blanket around her. There were a couple of instances, where that got slightly disturbed and that was by a doctor.

Kate: An intervention or an interaction with a doctor?

K: An interaction with a doctor. The intervention she took control of, because she was very assertive woman, in a sense of her not taking any nonsense or stupidity from people. She couldn’t stand idiots (laughs) and if she found one…

Kate: She told them?

K: Yes, but her doctor was another story. He was an extreme idiot. He was worse than an idiot, really. Quite abusive! The only Karma that was happening at the time, negative karma actually, was the doctor, which she actually handled very well. So it was unusual, in that she wasn’t suffering a lot of pain, and that her mind was still. So that in the dying process, there was an extraordinary peace. She held everybody in that and her family were very protective of her at the same time. As she approached death, she was very conscious. Her mind was very alert, and that played itself as the unchanging veil, really. And then she died in the early hours of the morning, and what happened was that people had become very exhausted. We all had to the end of our tether, so to speak, and she also had…. This was the only way we could all let go - to be physically exhausted and unable to continue and she had to that point too. And then, (there was a name for it)... Cheyne -Stokes breathing started to happen, and even then that grey blanket was still around her. And one of her wishes was that everyone would be there, and we’d been doing prayers for many, many days. And the thing with the prayers is, I must say that I didn’t see this, but Bernadette had been there and she saw Mary come in.

Madeleine was a devotee of Mary, so Bernadette saw Mary actually come, prior to her death and I think at her death.

Kate: How did she manifest? How did Mary manifest?

K: What Bernadette said was that she just saw her.
Kate: Saw her or experienced her?

K: I don’t know. I didn’t question her. She just said, “I saw Mary and she was there”. A lot of them saw different things from what I saw. I didn’t see Mary but when she started the Cheyne-Stoking, it was obvious and everyone came around, and prayers were done for her then. No, actually, they were there and we were all a bit in awe of what was happening.

I knew she was passing and it was going to be very sudden, that was the unusual thing. I knew it was going to be very sudden, so I aroused everybody, because some people were sleeping, some people were in the waiting area, so I pulled everybody in and we stood holding hands around her bed and then she vacated incredibly quickly out the top of her head. And I journeyed with her for some way and this was unusual, because I actually did the Phowa practice without consciously thinking of doing that. It just happened that I shot out the top of my head the moment that she left as well and travelled with her some way and then I got to some gates or doors or something and I couldn’t go any further. You’d have to go beyond this way and she didn’t need me. I’d actually promised her verbally that I’d help her travel. I didn’t exactly say travel but I said that I’d be with her the whole way.

And that hadn’t happened to me before. I’d travelled with others but not where it was so definite. I could not go any further and it felt to me like she had entered her spiritual kingdom, which wasn’t mine you know, unless you die you can’t enter the spiritual kingdom and it did seem like this. But other people had amazing experiences at that point. It was like an explosion, when she left her head.

Kate: What did it look like?

K: I don’t know that it actually because it was happening to me physically as well. Other people would have seen it. I actually made a noise and went out the top of my head. I wasn’t observing what it looked like, because I wasn’t actually there. I didn’t actually. I don’t know if I actually had my eyes opened or closed.

But the experience was an amazing propulsion of an amazing velocity, you know it was incredibly ... the Cheyne Stoking seemed to bring the energy into her body to leave but just prior to that, I’d looked at her feet and they’d gone blue and I realised … because all the time her feet had been too hot. It often happens with cancer, that they actually get hot and she had been like that.

And probably only an hour before she died … I’m a bit mixed up with time, the others would probably know. At some point I knew that she couldn’t leave. The physical feeling of coldness in her feet - it was too cold for her - You know that physical sensation can keep you in the body. So I put socks on her and it wasn’t long after that, that she left.

But the strange thing was that Bernadette went to a psychic and she talked to Bernadette’s mum and she said, “My feet were cold.” You know, what a funny thing to have said; Madeleine telling her that her feet were cold. I put some socks on her, and she left. So it was a funny confirmation, but I don’t think of things that I do - I just see, so I saw her feet were cold and another thing that members of Bernadette’s family said, was that they didn’t how I knew what was going to happen and I think that, that is my thing. But until I articulate it, I’m just seeing it and reacting to what I seeing.

So, I’d say that now sitting down and talking to you, what I’d seen was, that she actually moved up her body, so her legs didn’t really exist any more after I did the (unfinished sentence)... So, there was this powerful experience of building the energy to leave. It takes energy to leave. It actually takes a lot of energy for some people to die.

About four days before she left, she actually said to Bernadette on the quiet. “Do you think they’ve got it right, I feel so well?”

Well, this was four days before. But, she had been feeling this, you see and this was the first time she had said it...

After she had died, we all did prayers for her and she was lying there. Still, actually. Even after this expulsion was complete, and I really think that she had reached some kingdom of heaven, that she had created and left and gone to. There were other aspects of her leaving. So that at a physical level, the breaking down of the five elements... I could see that happening, as a mist passing out of her body, like the heat was leaving. There were all sorts of other elements leaving. Like there was moisture and it was interesting, because I stayed in there, while they washed her. The staff came and I think that they do that fairly quickly and dressed her and clothed her and when they picked her body up, which had already started to go into rigor mortis, she was actually in her body again.

Kate: How did that manifest?

K: Well, when they sat her, up it was like a habit; the habit of being in the body was still there. And I was sitting in the chair and she was there, (K elly points to an imaginary bed in front of her) and they sat up and she just looked at me and I knew that she was looking at me and I knew she was dead also. If I hadn’t known it was habit, I probably would have screamed or I would have said “Hey, she’s still alive, but it was the habit of looking and the habit of looking and the habit of...

So, our consciousness contains so many different levels and so it didn’t actually form an aura. It was bodily consciousness and it didn’t give out an essence in the sense of an aura, because the consciousness had left but the habit was still present. I’ve never known that before. But being at that death gave me that insight, that being human is so strongly linked to our body, that it remains as a consciousness after death. The consciousness of movement or the consciousness (however you would like to summarise that consciousness), isn’t a habit of the body and yet there is a habit of the body that remains for a little bit, which you might see in the killing of animals, which I’ve seen my father do - that shaking that happens. But this was at the end after death, when the body - It was subtle, very subtle.

Kate: So there are different levels of consciousness?

K: Or different consciousnesses, not even different levels. Different consciousnesses and they die at different times. And they let go of the body at different times. And there is not one whole thing that we can call consciousness. There are actually lots of little things. I don’t know what that thing was that left. It seemed to be the major aspect of life and death. I don’t know what to call that. But after seeing that habit of bodily beingness, it was quite new for me. I hadn’t seen that before.

Kate: Very interesting, Kelly. Where you there for that period of time? You’re saying, that there was no energetic aspect after that; after that ‘shooting through’. There’s no energetic aspect, other than that experience that you had, which was quite profound. So you stayed for the funeral, and there was no aspect of her?
Kate: Well there was actually, because they came fairly quickly and put her into a bag to take her to the morgue and then we went up with her. Bernadette and I; we just sat with her then, in the chapel and there wasn’t anything then. It was like she had gone and then the next day (we kept coming back each day). But the next day, after she had been put in the morgue, and brought back out (they’d give you a viewing room), she was definitely present then. And she hadn’t left.

Kate: So, how did that manifest?

K: That was like a presence above her body, actually. You know how people come back and they look down. She was there, but she wasn’t in her body. The body was there, but she was around us.

Kate: And how was that?

K: There were a number of things, the consciousnesses again. There were three separate consciousnesses. There was the ‘form consciousness’ and that was like her own body above her body, and there was the ‘mind consciousness’ which actually related. There was something that related to me, that was grateful that we were there, talked, that had a sense that ‘this is all so new and so difficult, in a sense that “I’m glad that there is somebody to talk to. I’m glad that there is some familiarity, that there is something to relate to.” And I think that there was ‘hearing consciousness’ too. I felt that she could hear us and we were very conscious that with her body. We were very honourable with how we spoke about [her]. I just had a sense that she was present. So those two unseen elements of hearing and the speaking, but the body was actually above and she had the form of her old self.

Kate: Of her physical...

K: Of her physical body. It was just above the coffin, lying, but not so stiff, still clothed. So I guess that it would be like a mirror. But the clothing was a little bit different. It was light because it wasn’t substantial, so it was light.

Kate: So when you say that the clothing was light, was it identifiable as hers, or something else that concealed her body?

K: No, it was identifiable as hers; yes. Anyone walking in would have identified it as hers. It was a nightie, actually. It was one of the nighties that she wore before she died, so it was recognisable. The funny thing as I look back at it, she had slippers on. And I didn’t even think about that but she didn’t wear slippers of course, but she always did wear slippers at home.

Yes, but it was an amazing passing; a heroic passing of a life, that not many people saw, but which was incredibly deep and honourable. We don’t have to be heroes or famous to be actually great people. And she was a great person.

It was a funny thing, I got to the actual funeral, to the actual graveside late, and actually there was nothing really there either. She was completely gone by the time of the funeral.

Kate: How long was that?

K: Five days. They left it longer. She didn’t really want to be rushed, in that process and they wanted people to come so, it might have been five to seven days. But she was completely gone. There wasn’t anything that she was hanging around for anymore. So like they all felt very happy at the funeral, it was really the time for the family to actually celebrate. They did it perfectly. It was really like a public show of her life and really it was the family’s time to show their love for her, but she actually wasn’t there. They may not like to hear that, but it was an honouring of her, like the going of her, and she was gone, basically.

Kate: So you don’t think that there is an aspect of her, the purest consciousness of her would be there, rather than a layer...

K: No, I think I was seeing... The amount of prayers that were done for her and with her, right up to... Like, I’ve never seen people pray as much as her family prayed for her in their lives.

Kate: Which religious tradition did she belong to?

K: Catholic. None of the kids’ do that, themselves, in their lives, follow the Catholic tradition. Maybe one does and yet they did this for her. They would come and do prayers for her twice a day. And it would give her a lot of solace. But I think because of those prayers, and this is just hypothesis, that, because of those prayers and because of that practice, there wasn’t anything left, there was no karma left.

It was when she got to that kingdom; it was as if she went beyond and all the rest was sort of human things. Like, even above her, was a human. So another sort of consciousness that can die, like the bones going into the earth. There’s nothing left once the body decays. But it felt like those other things, like when I saw her sit up, like that and the habit of consciousness, it would go like the body, but the thing of importance, the thing of essence had already left and was final.

Kate: Yes. The reason I asked that was there was a lovely thing when Ramana was dying, people were gnashing their teeth, and he said words to the effect, “I don’t know where they think I’m going.” And I guess my thing is that he is such an enlightened being, that of course he’d be out of there quickly - bang, finished, ‘Good-Bye’. But then,also be part of the collective consciousnesses. Like, he’s laughing at our joke now, I would hope. So I guess that I’m saying that there is a level of refinement, where that spirit (I would think) would be right out of it, but would be there in an absolute - I don’t know how to describe it!

K: Concentrated.

Kate: Yes, yes.
K: Well, I think that Maddy has done that with all of the different things that have happened since her dying. She was really into the environment and into the native plants and the drought broke after she died, the whole drought in that area and people would say, “That was Maddy.”

Kate: How wonderful!

K: Because she’d actually said, I’ll go up there and bring rain. I’ll make them get some rain for you. You know that was a bit of a joke and when it happened, it was like... and there have been many little miracles like that out of that area. The other big miracle was that the Tigers won. The Tigers won in the footy! She was a tigers fan. They hadn’t won, and she said, “I’ll make the Tigers win” and the Tigers won!

Kate: How wonderful!

K: And I mean, it had been seventy six years since they’d won. The family actually were just over the moon. One of the boys, he threw his tigers shirt into the crowd. That was what his thing was, his tigers’ shirt. She was an amazing Tigers follower. The whole family (and particularly the boys) were.

One of them, who was sensitive and incredibly naïve; she did it for him. He would say, “It’s Maddy, if they’re going to win. He had all his hopes up and we were a bit scared about that, you know. And then the other weird thing... This is almost a year to her dying. She’d just gone into hospital. And we’ve just had the Cyclone [with the same name as hers].

Kate: Oh!

K: Well, one of her sons lives there, but the other son has never been to [that city] without her, was going two days ago, just after [ that cyclone] had been through, so we all said it was Madeleine. Actually Bob couldn’t go without Madeleine, so Madeleine was there. You know there have been these things; you talk about group consciousness. We associate our consciousness with ourselves but the group is greater than the individual person. There is no such thing as the individual person, on the bigger scheme of things, so that’s been true of all, I can’t say all, because I haven’t spoken to them all, but the family members that I have spoken to have all had experiences in some way. So, there’s not just one ending, there’s everyone’s experience of her. But that was my experience and with the death of her and her belief, I imagine that that would have happened to her.

Kate: Thank You, Kelly.

INTERVIEW - MARION

M: I remember the first child that I was asked directly to intervene with and I remember after he had died, I had no idea why. I had been asked to do what I did and he subsequently died, and left me feeling very guilty. I was very concerned that I had somehow, somehow, hastened his death as opposed to freeing him or, I guess, being of service or of help. Because in health care, we don’t, somehow... we don’t articulate that sometimes people get stuck in their physical bodies, and thank goodness, I was never asked to do this previously. I really had no idea; I was an observer and asked to do things.

So, this story. I’ll take you back and it actually evolved over probably about forty eight hours. I was working as an agency nurse. No, a casual pool nurse in one hospital, in paediatrics. It was a time I was developing my abilities and my sensitivities were quite high and I didn’t understand the things that I was experiencing. And yet, there was such a sense that this was what I was supposed to be doing. So I had begun an energy healing course. But my experiences were so much heightened to what was happening to the group as a whole, that it was difficult to seek reassurance for what was happening for me.

So it was kind of a lonely journey, and one that was happening faster than I could...and I think anyone should go through. So, this time was about... it was one day that the hospital was extremely short staffed. There was a Paediatric Casualty Unit that was attached to the adult unit and I remember being sent to Casualty. I remember thinking, “it’s not my speciality, but I’ll have a go.” I wasn’t feeling very comfortable and as I walked down towards it, I had an impending feeling, an agitated feeling and I thought that “gee!” And as I walked in, (it was the morning shift), there were three nurses there and one said,“Thank goodness you’re here!” And I said, “Oh, why?” And she said, “We can’t find staff. You have an enrolled nurse with you and you have thirty nine patients waiting.”

K: God!

M: And I just thought,” Oh my God!” I don’t know how to do half the paperwork! And she reassured me that the enrolled nurse was really good and that she had worked there for a long time, and that she would be able to handle that. They just needed an RN. But I thought, “Mmm!”

And I remember walking down the middle corridor and I thought “I’m never going to be able to do this!” I remember my higher self, or whom I recognised as being my spiritual guidance said to me, “Well then, why don’t you ask for help?” Oh, Oh, (laughs) “how will I ask for help?” “Ask, and we’ll help you. Just do what we say!” And I thought, “O.K.” It was like, “Oh, O.K.”

So I then began to think, to organise this. Somehow we need to triage this, and all of a sudden for whatever reason, about ten people were able to be discharged within about ten minutes. So it freed up and there was movement going and it was noticeably O.K. and I remember a little boy came in and he had the flu and he was about nine years old. He presented and I remember half thinking, Oh, that’s interesting… and I went back because there was some part of me… I don’t know whether it was the spiritual part or the nursing part that went back and said to his mother, “Tell me what your story is.” There was something not quite right.

He was certainly consciousness, in her arms but a bit sluggish. She said, “He was at home, he had a high temperature and he had a fit” And I thought, Oh, O.K. mm, alright. So, let’s put him on the bed. We were talking and he wasn’t very happy but he was co-operative and his mum was there and I remember leaving and sending the doctor in. And the doctor was in for a while, and I went back in, did some Obs, and went down the corridor.

A voice said to me ‘Go back to that room!’ And I said ‘I’ve just left, and the voice said ‘Go back to that room!’ and it was like, ‘Go back to the room’ and I went back and caught the child as he seized off the bed. And his mother was hysterical and I remember thinking, Thank goodness you said ‘Go!’
So the child had deteriorated and I remember my time to leave happened very shortly after that. It was my time to clock-off but he needed a CT scan, and there were no staff to go with him, so I stayed back and went down to CT with him, and I didn’t like - I had a feeling that whatever was happening, was not right. And I remember the doctor saying, “Oh, it’s an epileptic fit.” And I kept thinking, “No, this is not right, this something.” And I remember looking at his mother, and I remember looking at her heart break, and I remember looking at him and their connection that was intertwined by her heart, which was much more than that of a sick child. And I looked at it, and I thought, “Mmm…” So I asked her about her children, and this was her only child and I wondered whether what I was seeing, was ‘the only—child’ tangible connection between mother and son, or what that was. But I was still very conscious about that. And I was standing and a nurse came out to take over from me, and I kind of wished them well, knowing that their journey would be rocky and left…

The following morning, I came back to work and was sent to paediatric intensive care unit. It was a tiny six bed unit. Lovely! All the staff were there. And he was there. He had deteriorated and now they had thought that he had meningitis. And, throughout the day, I wasn’t looking after him, but I was in the same area as him. And throughout the day, I had watched him, I thought, “Mmm, you’re stable, but you’re not.” Then we couldn’t find any staff, to staff the night duty and someone said to me ‘Will you staff the night duty?’ and I said “No, I’m a bit tired”and a voice said to me “You must staff the night duty”. I said, “I haven’t had any sleep, what will I do?” And they said “Go home and staff the night duty, if you want”. So, having not really wanted to, I thought I had better. So, I agreed to do that and sure enough, when I come on (to the ward), who should I be looking after, but this little chap! He was intubated & ventilated and I remember thinking “O.K. Alright, I’ll look after him.” And so, we settled into the shift. I remember it was about one minute to midnight, and I was there and I was emptying the catheter bag as you do at midnight, doing all your sums… And I remember at the head of his bed, all of a sudden, the room heated up dramatically, and I remember someone from another bed said, “God, it’s hot in here!” and I said, “yeah!” And I looked up and here, honestly, was this hugest angelic spirit, that I have ever seen in my life. And I thought, (feeling very…), “Oh my goodness me! Can anybody see this?” And, “I’ll just keep my head down and write!” So, I went to write my urine output out, at the end of the bed chart. So I wrote that and I looked up, and the angel was looking at me, and I thought ‘well, what’s happening here?’ I didn’t know, but the angel then said, “Could you channel some ice blue into his head now?” and I thought, “That’s a reasonable request!” So, I stood at his feet and put my hands on his feet. I was just allowing some ice blue, crisp ice blue energy, that travelled up through him but settled enormously around his head. It went through his whole body, but it was particularly there. It swirled, almost like a cloud over his head. And then, the ice blue tuned to a kind of a silver and then to a white and then back to the blue. And I thought, “Oh, that’s nice!” I thought, “Oh, there you go!” —(Laughs) I said, “Oh, thank you!” And it said, “Do you think that you can channel some purple energy up through the whole of his body?” And I thought, “Oh, OK. Sure!” And hands on his feet again, one hand on there (indicating the sole of an imaginary foot). I was kind of channelling the energy through this magnificent (unfinished sentence). It started as lavender, and it went to a rich purple-indigo colour and then the silver drops came in. They were just amazing, so I kind of channelled it like in a kind of wave of it. It went up through him, and the angel said, “That’s very nice!” And the boy said, “Thank you, my head ache has gone. I feel much better!” I said, “Ah, fabuloust!” I wrote down another measurement and all of a sudden, the alarm started going. I thought, “Oh my god! Oh, no!” And a nurse came over and said, “He’s coning!” And I’m thinking, “What’s happening here?” And the angel had the boy with him; the boy’s spirit beside him. And I’m just looking, and I’m thinking, “What’s happening here?” Then all of a sudden, he was bradycardic. We were pumping drugs in, and they said, “We think he’s coned; he’s dead!” “Like, what?!” I still remember that with such, with such responsibility. It was just horrendous. And I remember thinking, “What have I done?” Not in any way, did I think that this was right. Somehow, I took the responsibility of “Look what I’ve done” and I remember not being able to talk to anybody about it. I remember feeling that there was no point in saying “well, actually, I did this!” And it was terrible, terrible… It was the aloneness! The aloneness to say I was asked to do this! It was very clear. I did it, and he coned! So there was that sense of responsibility and trying to figure out how a normal nurse reacts to this abnormal situation. But in nursing you would say, I turned him, he dropped his blood pressure… And we all go through that. But with energy work, there was nothing to do. There was no one to run this past. And I guess I then rang some of the teachers, who were teaching me. And they said, “Oh, yes that was very appropriate” and it was like, “How do you know? How do you know whether that was appropriate?” You know. And that really took a long time to clear…. The sense of responsibility and also it left me with a sense that this was very potent. work that I needed to make sure that I was on the right channel, getting the right information. But as the weeks went on, the trauma subsided, and I could sit with my own counselling and ask “Why on earth did you put me in that situation?” And it was about the pain kept him in his body and that no matter how much we upped his medication, because he was unconscious, (because we had sedated him), nobody would up the opioids for his headache because, there was no parameter that said that he had a headache. And yet, that was what he did have. He had brain swelling and meningitis. And that was the thing that kept him in his body. And it’s like, and I remember after he was brain dead and I remember as the hours went on watching his energy fields diminish, and watching his mother …the connection. She was so desperately trying to hang on. It was an unravelling but it was diminishing in the amount of energy going from him to her. It was like the connection was there but the energy flowing to it had dissipated. So, that was my first!

K: Wow!

M: Yeah, it was tough. I remember feeling very let down, by spirit, because I didn’t have to that level of understanding of the work that I was doing.

K: How did you resolve that? How did you resolve the experience of being let down by spirit? Did you get some assistance from spirit or…

M: No, I was pretty pissed off. I guess one of the things that happens in my experiences are sometimes extreme like that… There are a number of experiences like that… and I guess that it serves two purposes. The first purpose is if they’d have told me, I would
I was and here was this angel behind, and I thought, "It didn't work!" I said, "Oh, just excuse me." I went back to you see them, you end up in trouble! (Much laughter from us) But back to the story…

K: The energy connection to?

M: The second bit is insuring that you have a clear channel. And that takes work and at that time in my life I didn't have any children and it was… I could be a spiritual and ungrounded. As time has gone on and I'm now married with children. They ground me and the time that I need for them now, I find difficult to give to spiritual stuff. And up until January this year, I had walked away for two years from it because I couldn't… I had children twenty months apart and I found it so difficult.

K: Would you like more stories?

M: Yes!

K: The energy connection to spirit was there but it had no real input coming in like previously. So it was a bit daunting, really at first, but also nice to have a break. So you've caught up with me at a time when I think. Ah, are you sure that these stories are relevant now because they happened at a time that was different.

K: Well they're very relevant now because you are such a clear channel and whether they happened twenty years, fifty years, or hundred years ago or just yesterday, or today they have an authenticity that I'm interested in, so...

K: What did it look like?

M: Just like the typical angel, but very big. For me, they have a soft blue around them. These angels are big, they are big! In terms of size they would be about 5½-6 feet, and they are broad and they are bright, and there is no doubt about them. And they never come together. I have never seen them together. Whatever these ones are.

M: Do they have faces?

K: Yes, but not clear faces. Kind of, you can see their jaw line and it's in a flesh colour. A jaw line, but that's about it, and then it disappears. They certainly have wings, but the rest is kind of (pause). I try not to look! I now know when you see them, you end up in trouble! (Much laughter from us). But back to the story...

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K: How amazing! How amazing!

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Great idea I could manage that...

And it was the most amazing arrest that I have, the most visual arrest I have seen! So when I arrived with the trolley (and time had certainly slowed down), the angel was standing behind the bed. And the lady was out with the angel with a few more angels and they were chatting! And I was thinking, Oh that’s very interesting and I was writing down the drugs, Atropine, and thinking, ‘I don’t know what you guys are doing, but you need… adrenaline more adrenaline, bicarb, I’m thinking after the bicarb and the resident said, ‘I don’t think we’re going to get her back!’

And I thought… And they literally were chatting, they literally were chatting! And I thought and (it was all telepathic…) And I remember saying ‘I don’t mean to interrupt, but if you want to get back in you better hurry,’ ‘cause they’re going to stop this in a minute and you’re going to end up in big trouble!’

And she then looked at me, and said “Oh!” And I said, ‘you can hop out another time and stay out, but if you haven’t made up your mind hop in!’

And the next thing I looked at her and she was gone and the resident said ‘She’s back!’ And I thought ‘Oh’ O.K!

K: How amazing!!

M: So they all kind of left running into ICU, I was there with the crash cart thinking “Oh, Brother!” (Laughter) After they had left there were flowers everywhere. Literally her bed had flowers all around and I remember she had them; the main thing like peace Lilies. I remember looking at them and thinking “Wow!” They’re as white as the glow that is around this bed! It was amazing! And I then kept going for the rest of the shift thinking, “I wonder how she is, I wonder what she’s doing” Never knowing and, “I wonder if I made it all up.” Like, you know it seems an easy story to make up.

You know… I went home and all of a sudden, I don’t know how, but as I reached the back door and I looked out, there was one Peace Lilly. And I thought I’ve never grown a peace lily in my life!

K: Unbelievable!!

M: Then I thought, ‘Alright! Mmmn, so I kind of got that if one of those angels turns up, something is happening. It’s not just a matter of; if there is change happening or death is imminent. And I don’t know whether death is imminent or that an out of body experience, big out of body experience, or an energetic shift of big proportions happens. So I guess that that the kind of relevance of that.

Having had all of those experiences made me think I can’t go to the adult world anymore, its quite difficult. And the hard bit about the adult world… What I notice from those two experiences is that adults have a lot more grim around them. They are not as clear and not as light as children, so it makes it tougher, it makes it heavier, so they, when they need to go, there’s a lot more energetic work that occurs in their energy field than when a child goes. Does that make sense?

So with adult fields, they are different and that’s why I’m interested in your PhD in the difference between children and the difference between adults.

K: Can I distract you for a moment and ask you what your experience of the child’s field is? What do you see? Do you see children who are about to die? What do you see? How do their fields look to you?

M: Are you talking about well children or sick children?

K: Both.

M: Perhaps I can talk about well children. Because I have a living laboratory at home. Well children’s fields are robust. They are full there’s a fullness about them and the fullness is to do with their life force. Some children, a lot more now, come to this life now, not well grounded. And the anchoring is different and not like previous generations of children.

They have a different way of anchoring, or grounding to the earth in a much more conscious way and a much more deliberate way. It’s like a much more intuitive way. So if I ask for an image of what my parents, that generation anchored like, it was a much heavier anchoring and a much more immediate vicinity. Whereas the children that come now, have a much more refined anchoring, so that they’re not anchored so much but they a much more global tentacle.

So it’s almost like they are concerned with the information that they will process through their life is more of a global nature than the previous generations.

And when you see children like that, because of the way they ground, some of them have trouble identifying who they are, as opposed to who the planet is, and have great anxiety about life. Because they are aware of so much more energy. The anxiety seems to be one of their major limitations to their physical systems, because they are frightened about a number of things which they sense from a kind of planetary point of view.

I work with a number of anxious children in oncology and I don’t understand why some kids are anxious and some aren’t. And that’s how they are all different. So the kids are different and in that difference are their perception and their ability to remain contained, and deal with life as it unfolds for them, as opposed to what they might perceive might be happening. And that requires strong boundaries and parents with strong energy fields.

None of my children know what I know and I don’t let them know what I know. Because it’s so much nicer out there in the world, enjoying their friends, having a good time, but it really requires a clear ability to be grounded.

So, to introduce children early, to the flexibility of travelling out there in the spirit world, and coming back, negates what they need to do in this life which is to remain grounded.

Duringadolescence is when they are able to then experiment with moving in and out, much more not only with curiosity, but with determination to find out what’s on the other side. So that’s an appropriate time. But while they are little like mine there is no need to be fully aware of what’s there, until maturity. And it’s an emotional maturity, to be able to cope with a foot in both worlds. It’s an energetic maturity, for them. If they don’t get good footing, in this world, then they can’t sustain the dynamic between the worlds. So, I’ve very cautious not to introduce any of this purposefully. They know about angels, in terms of higher self, so, what I have said to them is that Dad and Mum have special angels that look after them, and that they do too, and any time they are in need of help, they are to ask their guardian angel. And their guardian and my guardian angels always talk, so I will always know if they need help.

K: Oh!

M: So there’s that security and knowing that they can ask through those channels, but that’s it. Full stop! That’s all they need to know. So, I think that their energy fields look wholesome! They have moving, and circulating energy fields.
They have integration between the physical body and their spiritual body, which I can see. And there sometimes, when I look at children, that integration is not there. Their integration is jagged, so its hard for them to hold either the spiritual identity, which I think is more like who am I and what am I here for, as distinct from, not so much as what am I here for, but how do I experience life? And their identity, which is on their physical body... I can have physical; experiences, chocolate –coffee, scary movies, you know all those wholesome things...

Some children, well children, have that integration as murky as jarred as Sean. And they’re the kids that you look at and think something is not quite right with their integration. So they’re the ones that are normally living out there with that, so, when you see children where there’s that identity between spiritual and physical, that, that jarring occurs with. And those kids have a tough time...

So when we look at sick kids - sick kid’s fields - children with cancer, which is my specialty; their fields are very different. They are splintered. There’s often a splintering that occurs. There is often a darkened area around where the cancer is. There is often a separation of the layers of the aura, so they are not communicating within the field itself. There is a gapping. There is not necessarily (pause). The field does not flow, like normal. And when I think about the children and I think what they tell me, I think they’ve always been different. Many parents will tell me. “This one is different! There is something about this one.”

I remember a mum, who had seven little boys and this was her seventh little boy and he had a cancer of his kidney and she said to me, “This one is different!” She said, “I always knew something was not right with him.” and he was now five. She said, “I always knew he was much more fragile, much more than the others.”

I think it’s the integration of the field that they pick up…that a mother instinctively knows or gives a mirror for that five. She said, “I always knew he was much more fragile, much more than the others.”

I think that’s the integration of the field that they pick up…that a mother instinctively knows or gives a mirror for that child. And I often hear mums talking about that. I guess I don’t know whether they would be the children that are the most sensitive on the planet... Whether what they are picking up is sensitivity or whether it is an abnormality that then develops into cancer, or as sensitivity that then goes on to refine to be a chronic disorder. I don’t know. And I don’t know how you find out. So they’re all different.

So, as they then progress and inform us as they progress in treatment. Their physical bodies, can be enormously depleted. Sometimes that then takes the energy they have for spirit, their spirit. And sometimes the energy for spirit stays, but the depletion to the physical body is so great, that the spirit recognises that the physical body will never return and they choose to go. But these are the children that don’t want to leave. Their spirit does not want to leave but their physical body is so debilitated that it would never recover, so they understand that they have to go.

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So when you’ve been in trouble, at other times, what stories come to mind about individuals?

M: Both! You find that the children are very clear to their parents that they will say, “I don’t want to die Mum, I don’t want to die!” Or, somehow, they communicate their reluctance to go. And the hard part about that is, sometimes for them, it’s easier to stay awake at night, and flat out then in the day. And the reason for that is because the energy at night is less draining than it is during the day. It’s also because of the amount of elementals, elemental spirits, around at night, it is also because of the moon which helps with fluid balance, and it’s also because the people who love them are the only ones around at night as opposed to all those others who are there. So they don’t have to be energetically impacted by the rest. So you often see children who are dying having a reversal of sleep patterns. You see lots of people having reversal of sleep patterns. Mmmm… (Marion, who is channelling this information, sounds surprised). And they’re saying, that we as health professionals think that is undesirable and we try to reverse that and have them be in a more agitated state… It’s true! So that’s why that happens…OK!

K: How interesting! So when you mention these elemental spirits that are around, are you to saying that they are benign spirits, that help to sustain them, or what’s the connection?

M: Well, I’ll go back and explain… Angelic energy tends to be the energy that is directive. It is the force, the creativity, whereas the ones who change the energy field, tend to be more elemental energies. So, water balance in the body is affected by Undines. Heat in the body is affected by different elemental energies and so what angelic energy does is be directive. Its like angels are the architects, they have the plan, and they have the knowing. Undines then change the physical body, in order to facilitate that energetic change. So, it’s facilitated by other elementals. When energy workers are asked to help, it’s because sometimes tis because the energy that is channelled, that is directed and channelled to elementals, lack a physical component. And sometimes, in order to refine it, it needs to go through a physical component to then be utilised by the body, in a much more rapid way. Its like, it’s a transforming energy and the healer acts as a transformer, to move the energy into that this sustainable for the body and the human energy field to use. Most times, most transitions happen regardless of physical and most energy workers are asked in my experience to facilitate the environment so that those spiritual beings can do their work to the best of their ability. Occasionally, then what happens is that you get stuck for whatever reason - like the boy with pain and those others, who I’ve been talking about. It’s that some things have happened to stop the process. Sometimes energy workers believe that they’re asked to do something to the one that is dying, when mostly, that has been taken care of. So, they are there to facilitate the environment for all to happen. They can express the intent that the appropriate energetic changes happen. Occasionally they are asked to intervene, but mostly you can watch it and bang, it just does happen. So, yes, mm.

K: So when you’ve been in trouble, at other times, what stories come to mind about individuals?

M: I remember one child and that was the most, the one death where I wanted to know what happens from their side. And I only did it once and I won’t do it again, because I don’t have a need to do it again. And it was a little boy who was dying. And he had been… He was little; he was maybe two, and he was dying from a failed bone marrow transplant, from an immunological problem. He - Both his parents were staying the night…And we knew that his death was imminent... he had deteriorated… and like all nurses I have an apprehension about death. No, I change the word, its not an apprehension about death, it’s an adrenaline surge or an anxiety that comes at the moment of death. And I think that no matter how much you’ve around it, no matter how comfortable you are about it, there is a big energetic, a big transition that is about to occur. And I think that we as nurses pick that up by feeling a bit nervous or not quite knowing quite when its going to happen, so there is an element if surprise … it could be five minutes it could be and hour… so I think that there’s always that and I’m no different. But I’m familiar with it, so it doesn’t bring the level of adrenaline rush that it used to. But I still worry. No, I still want everything to go as well as it possibly can. And sometimes the dying is about the ones who will go on living as apposed to because the boys upstairs will take care of the rest. And
know da, da, da…” And the father came into the room and they sat and I looked at the child and I looked at them and I was just there and she had been talking to him and she said “I'm sure I'll feel better after three hours sleep and you said, “I don't know, you've always cuddled him.” And she said,”Alright.” And I gave him to her and the angel was there him. It was more like the angel made a platform with his arms and the child sat in there. And the child was ‘as happy as back to sit with the angel. And he was sitting with his angel like you would do for a toddler. But the angel didn’t cuddle knowing to the child and a heartfelt connection with his parents. So it was quite amazing. He hopped out and went So I went back into the room and I was standing near the door and watching the child, who was by this time doing a bit “But, is this your wish?” And I’m thinking “Yeah”... “So, go back into the room!” room and my higher self said, “Are you ready for this?” Like, “Yeah, what am I supposed to do?” “Nothing, just watch!” under my breath, “I hope I get this right! ” So, she came and sat by the bed. I thought, and I said “Where is your wish. And as I expressed that the reply came back, “What would be your wish for yourself?” Well, I guess I could see between the worlds. I wish I could see what happened. OK., no more said and I thought, “OK”..... So about two o'clock in the morning, I remember thinking, “Oh, its been a long night!” And the rest of the shift would say, “How is he?” And I’d say,”Oh well, things are pretty much the same.” And they’d say,”Do you think death’s going to happen soon?” And I’d say,”I don’t know. You know, things happen.” And about a quarter past two, I walked down the corridor and a big angel arrived and I thought wow, God! By now I know what a big angel means... an energetic transition is happening. And I said to Samuel “what will I do?” And he said “The time is near, wake the mother. And I thought right, OK. And I went in and I counted the respbs and nothing had changed. And I thought, “Nothing’s changed!” And back I go to wake the mother! What will I say to the mother and he said just say, “Come, I’m here and I was hoping you would come.” And the mother said,”I think you should sit by the bed.” And she said,”Why, is something happening?”and I said “I think its just time to come and sit by the bed.” And I thought all the time under my breath, “I hope I get this right!” So, she came and sat by the bed. I thought, and I said “Where is your husband?” And she said, “he’s staying at the hostel” and I said “I’ll ring him.” So she came and sat by the bed.” She was just there and she just was there and she said”I’m sure I’ll feel better after three hours sleep and you know da, da, da”... And the father came into the room and they sat and I looked at the child and I looked at them and I looked at the child and he had gone quit blue. And I thought, “This might actually be it!” And I then walked out of the room and my higher self said, “Are you ready for this?” Like, “Yeah, what am I supposed to do?” “Nothing, just watch!” “But, is this your wish?” And I'm thinking “Yeah”... ”So, go back into the room!” So I went back into the room and I was standing near the door and watching the child, who was by this time doing a bit of grunting... I watched the mother, I watched the father and a nurse came in and said, “Oh my god, it's so hot in here!” And I said ”Yeah, I'm noticing its hot.” And it was amazing! The big angel turned up and was standing behind the bed, and I had been reading some spiritual books and I had read that children, people who die, leave by their solar plexus and I thought, “Oh, yeah!” This child, the angel was standing behind this child as well as any other spiritual being (he looked fabulous)... hopped out via his crown and I thought, “that’s unusual” I and all I was doing was watching, and the other nurse said, “I’d better get one of the doctors” and I said “whatever you want to do.” ... And he hopped and he sat in his mother’s aura. Not even in her aura, in her core. And at that point in time she stopped her crying and said,”I will always love you, no matter where you are in the world.” And she literally took her hands and placed them on her heart and I’m thinking, ”Oh, my God!” And he sat in her - I’ve seen a connection like a horizontal connection, but I’ve never seen a... It wasn’t even and overlay, it was an integrated thing. And all the time the big angel stood there holding hands out. And then the mother had gone bright pink, and I thought it was a flush from tears and the warmth in the room but the bright pink began to glow, she began to radiate and there was a moment that I was in awe of what happened and he hopped out and I thought, “Wow!” And he looked at the big angel and the big angel nodded and he sat in his father’s core and at that point his father said, “Me too! You’re the best thing and I’ve been privileged to be your dad and I’ll always be your dad.” All of this was said spontaneously as he integrated into them. And I remember thinking, “Oh, that’s amazing!” All the time I’m kind of between the worlds, so I kind of have a telepathic opening to the big angel and a telepathic knowing to the child and a heartfelt connection with his parents. So it was quite amazing. He hopped out and went back to sit with the angel. And he was sitting with his angel like you would do for a toddler. But the angel didn’t cuddle him. It was more like the angel made a platform with his arms and the child sat in there. And the child was ‘as happy as Harry’. And then almost and I don’t know how this happened, because I came back looking to his physical body, and I looked at his physical body and I looked in at his parents and his parents were still sitting beside the bed. And I said to his mother “would you like to cuddle him?” Now is the time to cuddle him.” And she said, “I don’t think I can.” And I said,” I don’t know, you’ve always cuddled him.” And she said,”Alright.” And I gave him to her and the angel was there but he needed a lot of support to move him, because he was almost gone energetically, so we gave him to his mother and his dad was there and his dad had his feet but his mum had him. And the next thing that happened was there was a tremendous vibration in the room and I thought, either the helicopter has landed on the roof but it wasn’t a thumping, it was a very refined feeling and it had a high pitched hum about it and when I looked back or something, I knew or other watched what was, because it was almost like I had moved back to the physical to give him to his mother, I had to get back to that energetic place and where that was happened. I watched and the solar plexus in him had opened and there was the light and, thank God there was the ‘light’! Because I always wanted to see it and it was huge and a doctor walked in and said “how are things?” And I said “There’re OK.” And he said “It’s awfully hot in here!” and I’m thinking, “Yeah, yeah, it’s awfully hot!” And it was the most amazing thing! The guardian angel, who had remained at the top of the bed, while his parents had him, now moved, while this white light this column of light surrounded pretty much the whole central area of the child. The big guardian angel began to move into that column. At that point his parents cried and I thought, ”I think He’s going.” And I think this is what this is: And sure enough the big guardian angel then took him, took his hand and kind of helped move him out through this collum of white light. And his Mum said “He’s stopped breathing!” And I said,”Yes, I think his time has come to go.” And she said, “I’ll miss you, I’ll miss you”, and they started crying.
And I remember thinking, "Oh, my goodness! And they didn’t go, go. They moved into the column and you’d imagine go, go. And they hung there for a while like minutes... Ten, fifteen minutes, just hanging, but he had clearly left his body and there were no respirations and whilst I didn’t take his pulse it was quite clear that he had stopped breathing and his father had got very emotional and was hugging his mum, who was hugging the child, who was involved in this huge light and the father and mum were part of it and the energy stayed for a long time and as the energy then folded, like folded up, went up, the guardian angel and the child left, and then the column almost left in a kind of formation from the bottom but kind of turned inside out and when that column left do you know it was a most amazing thing, I imagined it was only light. I had thought in my head, ‘It is only light but they were millions of angels. Millions of angels are what caused the column of light. And you could only see it as it dissipated and it had come as a mass and that’s what the light was and they were angelic beings, who’d had opened the pathway who had lined the pathway like a guard of honour.

K: how amazing!

M: And it was like... that’s what the light is! In paediatric deaths that’s what the light is! They are the keepers to the path to the spiritual world. And as they left, I remember thinking, “That’s amazing, that’s truly amazing!” And I remember by this stage, some nurses had come into the room and I had said to them, “I think we should leave the parents to have some time now.” So we all left, but I remember leaving the parents sitting with this child’s body, and I remember going outside of the room and I remember being absolutely shattered. And people assumed it was emotionally shattered, because one of my favourite patients had died. It was sad but it was energetically shattering. It was very energetically stretching. It was very difficult sustaining that energetic connection to that, over time and I’m sure that I missed lots of things that were happening energetically or maybe I didn’t, but it was almost like turning the volume up full-bore in terms of the energetic experience and I was exhausted. I was literally exhausted, energetically. It was a huge observation and I think that that was the first and the last time that I will have a need to do that, because it was so difficult energetically. And maybe and as I think about it now, maybe it was you ask what you wish for, and I didn’t ask about the consequences or if it were in my highest interest or anything like that but it was an amazing thing from that time on the white light is the beings that guide that.

K: It's astonishing!

M: I think it’s amazing! And what I know is that’s how this child died. It happens for others too.

K: And when you went back into the room, did you go back was there anything energetically left of that child?

M: There was like a physical glow energetically, like the physical glow which exists about 8-10 cms and it’s a softness of energy around the body. It has no movement. It doesn’t flow, it dissipates but there is no movement in it. It’s just kind of there. And that exists for a number of hours, hours and hours and the interesting part on some of the children, who choose to hang around a lot longer and continue to visit their parents energetically and stay in the room, that those parents often still think that their children are here. And often their children are and there comes a time for whatever reason, their parents will leave the room and its like the parents reset the dial and when they come the child has gone and they perceive that the child has gone now and many parents have told me that. But that time frame is usually around four to six hours. And that’s because the glow of the physical body gets less and less and probably... And from about that time it’s very close to the body. And that’s the sensing of difference and as the body gets to as few days then the energy fields becomes not there. And that’s the bit that makes it, that people notice. This is only the body. Its because the energy has gone. It has dissipated.

K: Interestingly, Buddhists believe that death doesn’t occur until the body starts to decay.

M: Isn’t that interesting because that’s what the boys [M’s guides] say that when the days go past when the body decays that’s when there is no energy surrounding the body. I didn’t tell you that. They say, “You should tell us what we tell you!” Yeah, yeah, that’s kind of what happens. So, in paediatrics I know that the structures are already there. The difficulty comes when there is not a structure. And sometimes children get concerned because their energetic structure has splintered, and sometimes they get glimpses... You can imagine that when you are out of your body, and I don’t know how to describe it. OK I’ll tell you what we did here. When I came to work here about four years ago now; one of the things we noticed was that when one of the children had an anaesthetic, they would come back absolutely distorted, have nightmares, be horrendously traumatised and look like they didn’t go to a safe place. So what I know is that every hospital has and angelic structure that is responsible for the healing so when people pray for the sick, it goes to the angelic healers who then go to disperse those prayers amongst the sick in a particular way. This hospital was not blessed for about a year after it opened, so it actually didn’t get a formal blessing. When that happens when the delay occurs there is nobody there to set up a structure, so therefore it has turmoil, because nobody asks for the structure be put in place. So it’s very important than the rituals of blessings of hospitals occur so that the angelic beings have been asked to set up their formal healing structures around that.

K: Is this non-denominational? Is this an invocation?

M: Its an invocation and this hospital didn’t do that. So one of the difficulties that they had was when the children were out of their bodies, there was not a specific... That was one of the other problems that we had, was for some reason, part to do with the elemental energy, when children hopped out of their bodies, some children had not often done that because they were so grounded. Remember that that was part of their purpose? They would become lost in the layers of the ethers, so they would see things that are not of the light. All murky!... They would then bring those things back into their physical body, experience disorientation and not land properly back into their bodies. And it would be terrible. So one of the things that I was asked in meditation to do, was to ask for a safe column of light so that an child that has an out of body experience has in this institution can be guided to this column to go to the safe place, so that they don’t have to experience the graininess of the realms. If they choose to walk off the path for what ever reason, that I don’t understand, that’s what they need to experience. But in general it will be so. So, that happens and the reason that I need to tell you this because in death, the structure is almost always there, so when people pray for the dying, they pray their prayers into a structure that governs those that are in hospitals. So, what about those that die at home? They are usually plugged into healing institutions. Those things also happen for those that are in a traumatic accident,
because there is usually a health professional in the form of an ambulance officer who has contact with the traumatized.
And they led out the structure of healing that is there for humanity.

K: What about the Iraq war and people in those plights?

M: Their own cultures will have developed rituals that deal with that so it's still intact and that's why everybody across all cultures have a sense that bombing a hospital or a place of healing, is on the scope of being not tolerable. Whereas, places of worship don't have that. So that all people who die, are usually supported by that. Some people choose to not take that path; and they then are the people who get trapped between the worlds and they often try to find their way back, to either places that are familiar, places where light occurs; churches, hospitals, so they try to find their way to the glow… people who meditate, those sort of places, trying to find their way.

K: How daunting!

M: So that's my experience.

K: that's wonderful! If we can leave it there and I can transcribe that and come back with it.

M: They asked me to tell you, they ask me to… You cant predict death, and they don't want people… it's not helpful for people to think, the aura is only six centimetres, you must be dying. Because there are many actions that we don't understand and there are many factors that pertain to that individual and that individual's life on earth that you cannot necessarily predict. But you must be respectful of it. So one of the things, even as an energetic worker, your aura looks like it only has a few days, or your aura looks like it only has a few hours isn't helpful because that's not necessarily how it is because it's a contract or if the contract that the individual needs to fulfill, if their aura dissipates quicker than their contract then their guardian angel will stand beside them, will go and filter their energy (That's why that happens!) because their guardian angel is part of their structure so it will channel the energy that will sustain them to do the work that they need to do even thought their physical energy will look to and energetic worker as not being there. They will sustain that. My higher self is saying that maybe there are some people who think that they will be able to predict death, in terms of looking at the aura and seeing that this is occurring, and he says "No" because there is this ability to sustain, based on energetic energy, based on what it needs to do. And that's why you hear of some extraordinary person, on the brink of death… everyone thinks it's going to happen… and then they come back. They are surviving on angelic energy in order to achieve, some of the things that they need to do.

K: MMM…Wonderful, Thank you!

INTERVIEW - MEGHAN

K: Meghan you’ve identified as an energy healer who works with dying people…

M: Well the person who I have had the closest experience with is my father, Jim and he had a major heart attack, unexpectedly. And I came back about two or three hours after he had had the heart attack, and he was in massive cardiac failure. I was with him. We summoned the physician for him, but we lived in the country, and it unfortunately took too long and he died while I was present.

He… if I recall in more detail, if I recall the actual process of death itself… As he lost consciousness, he slumped and his head went to his chest, his breathing slowed. It had been very laboured because of the cardiac failure but I was very aware that he could still hear me and I was more aware of that energetically, than I was physically. I was also aware of the presence of his two brothers, in spirit, close to him and I spoke to him and said to be aware of George and Terry, and that they had come for him.

K: You saw them?

M: I felt them, and saw them on internal vision. I did not see them externally, with my physical sight but I recognised the signature of their energies. I actually saw them in a different way as if they were distant but I knew that they were coming close. The next process passed very slowly and passed some very personal dialogue between my father and I because we'd had a very difficult relationship throughout our life and we went through a process of saying goodbye and forgiveness, hopefully, in both directions, though unidirectional from the speech point of view. And then came the most extraordinary piece for me…

His breathing had definitely slowed and then stopped, and then, as well as I can recall, (because this was fourteen years ago now), I recall the next piece dramatically because his breathing stopped and then there was a pause but it was only a matter of minutes but I can't tell you how long that was. The next thing I remember totally clearly is this enormous white spirit lifting out of him; upwards… it just lifted upwards out of his body. I was so shocked, I didn’t see which channel it lifted through. I was so shocked to see this enormous white body lifting out of this man. My jaw was on the floor and I said, “How on earth could that get in there?”

K: How big was it?

M: It was… my sense of it was that it was larger than the physical body… not by much, maybe by a quarter… but what stunned me so dramatically was the whiteness and the purity of the spirit in a man who had been profoundly troubled all his life… profoundly troubled, heavily addicted, psychologically disordered and quite emotionally violent. And it was the purity of the spirit that shocked me so dramatically and made me think of what some of the teachers talk about that it is only those who profoundly love you, who will profoundly challenge you. But that was my experience and it stayed in the room, it didn’t communicate with me it just stayed present for maybe five or six minutes and then it just disappeared, it just seemed not to be there, I don’t remember the process of disappearing, I’m afraid but it seemed not to be there.

K: Did it stay above its body or…

M: Above, behind and slightly to the side… it sort of rolled out of the body and hovered beside the body for the moment, like standing beside himself, and stayed in that position as if standing on the floor, definitely taller and larger by
About twenty five percent… Not formed, not recognisable… a white figure… not recognisable… and not recognisable energetically… The only time my jaw was literally on the floor… (Laughter)

M: You were saying what happens after that in the period after. I have a couple of more pieces. Would you like me to describe them… Well, about where things go.

My next one is a story about a rabbit. We lived in the country, and Henry, who you have now met and you’ve seen the size if his heart chakra! He came in off our property one day, cradling in his arms, close to his heart, this young rabbit. He’d found him tangled up in wire. Now the rabbits head was lolling sideways. It was still alive, its heart was beating fast and my first impression was of it being cradled incredibly lovingly, in its being, and the animals shock and pain setting in that energy. And both of us being healers; he held the animal, while I gave it healing. And I felt the pain in the animals energy. The energy was a bit hyper expanded again by about 30% larger than I would normally expect it. As if these photographs that you see of the animals hair standing on it end. There was that spiky kind of quality in the energy and it was quite a white energy, and it was very spiky in its quality). And as I gave it energy, I had the intuitive sense that this was going to kill it if I tried it… not that the healing would kill it but that the animal would go into transition or it would get better and it seemed to be hovering, making a decision for a while and then it decided to go… And what happened next, I was very touched by… The animal’s energy lifted out of its body. It seemed to lift straight up from its back but between my two hands, and my hands just followed as we would in the way that we’ve looked at together, and it just followed up and it rose about a metre above the body and it moved to the right and then it just slowly disappeared as if I’d just passed it through the wall of an envelope into another dimension. The energy just disappeared out of my hands and I had the sense that it had slipped out of one membrane into another and there was a very sacred sense of holding the spirit of this animal which was the same, interestingly. The spirit of the animal as it was still alive felt the same as it did when it actually lifted about and separated from the body. So there was no difference in these two things when it actually went through and then a definite sensation of it slipping through some article, as if through a membrane from one dimension to another.

There’s the early story I told you again about the animal, about the guinea pig, which died and again a huge sense of the thing lifting out of the body and of the body then being empty of that which animated it. And that which animated it being present and separate from the body. And then of that which animated it being present and remaining present in a dimension separate from the body, for a short period of minutes and then again transiting into another dimension.

K: When you see these things happening, can you see this spirit that’s moving out of the body, its obviously a discreet energy but what happens to the chakras and the aura?

M: The pieces that I can give you around that are from a separate time with two separate people, both cases that I… one of which I didn’t recognise. A young man was sent to me as a client. He was in his late thirties, had worked as a garage mechanic and had had abdominal pain for quite some time, which hadn’t been diagnosed physically and he was sent to me as a psychiatrist for the assessment of functional pain. Having examined him physically and then examined him energetically, and examined him psychologically, I really felt very sure that this pain was not functional; it was not psychological, that it was actually was actually physical in origin but the cause hadn’t been found. And I assessed him energetically and I remember that his chakras were much larger and wider than normal and he came back to me twice more for assistance with the pain and the chakras had gotten wider and then he didn’t come back again… They were much wider than normal. And I didn’t hear and I didn’t know what happened. And a number of months later, his wife contacted me for a receipt and I asked her very tentatively about her husband and she said, “Oh, you didn’t hear?” and I said, “No, I’ve had no contact with him and I didn’t think it ws appropriate to follow up.”… And she said, “He died!” And she said that he had Leukitis plastic, which is Leather-Bottle Cancer of the stomach. It is cancer of the stomach which occurs in between the two layers of the gastric lining. So it hadn’t been found but the man had cancer and in fact what was happening was that the chakras were getting larger and larger as he was dying, the man was dying. I saw this once another year a time later with an elderly woman whom I did see a number of weeks before her death; twice, maybe five weeks and then three weeks before her death. And again this pattern of abnormally - large chakras, which were abnormally large and abnormally energetic. So, there would have been a pattern of shutdown from the illness. And the chakras; because you know we scan the chakras and so there seems to be a process of preparation for death, which can occur, and also, in these people it occurred twice, it occurs larger and larger and seem to be very active and taking in energy and exchanging energy in the energy field as part of the preparation for death.

K: And so this spirit that moves out is nothing to do with the chakras in the field. It’s… when you were talking about your dad and the animals, you were talking about something that’s not…It’s something else… Is that what I understand?

M: This is what animates the being. Now to get you the data on the question that you are asking me, I will have to review the files so to speak. And do it in more detail. What is left behind? As you know, memory records all things on the ‘DVD’ and so I can put the ‘DVD’ back down on memory and ask the question. Now it may not be entirely accurate. I find it hard to do it with my dad, because, obviously, I’m emotionally involved. But what I see, if I put the ‘DVD’ back down is like some of the chakras being like an empty shell… it’s like… You know when a snake sheds its skin? That’s what I see - just like snakes’ skin of the chakra but none of the animating energy none of the dynamic energy. I know that two layers… From previous observation, two layers of energy field stay with the body… Its like a body doesn’t decompose immediately, so there is actually a separation, but I can’t tell you precisely where it is, I believe it to be somewhere in the layers of the physical etheric because in the system we use the are four layers; the physical, mental, emotional and spiritual. But within each of these layers are sub layers. So that there are at least two layers of the physical etheric that remain. And they hold the body together, but they do not last long… when the animating spirit is gone, they then begin to decay, decompose and the body follows that. I can’t give you anything further I mean, obviously I have noth, some funny pieces. My aunt died - my father’s sister, and we went to the funeral. In fact there were two sisters and when my aunt Angela died, my cousin and I (who are both healers and are regarded as the witchly lot of the family)… Bronwyn’s sister, Theresa, is very straight, very not into the witchy side of life, and has a daughter who is extremely psychic. And she was young, at that stage. She was ten, and as luck would have it, she would end up sitting between Bronwyn and myself at the funeral, and our aunt Angela was actually present, standing beside her coffin, for the funeral. And this young lassie said, “You know, but auntie is here!” and we went “Yes!” and she said, “She looks OK!” And they were everyone so scared “Because, Evelyn, they don’t see her.” And she said “Why can we see her?” And I said “Well, maybe we’ll tell you that someday!” and we wanted to be kind of
discreet and we advised her not to say anything to her mum because her mum might be a little upset” But it was a little… it struck us very profoundly, because the whole service… just the words of the service, spoke of life after death, but because of the grief, nobody actually believed it… and there was our aunt actually standing there looking at us!

K: And so, was she looking at you in a sense that you could exchange glances or was she looking at you in the sense that you were on different planes?

M: She was just looking in a slightly smiling way… slightly bemused. And she was much younger, interestingly she was much younger that she was when she died. She was a very elderly lady when she died. She was much in her fifties… what I remembered was that when I was a young child [she was] very, very gentle soft woman… with very lively, sparkly eyes. And it was with that flavour in her energy that she was looking at us… “What are they all doing here?” Ah, and I remember a slightly bemused quality as well, as if maybe she didn't quite understand. I didn’t have any sense of communicating at all and I have… My father came back to me once, when the same cousin was with me many years later and we both felt his presence very strongly, and we felt a kind of emotional connection with him. But not a verbal connection. And again he came, as if from a distance towards us, was present with us and then went back a distance…sort of a sense of distance… Ah, the experience with my father was extremely visual. I saw that as clearly as I see you. I mentioned to you about walking into the house and seeing the man present who had died but I've no history. But the house we went into was very derelict, so it would have been quite a while since anyone had lived there and he wasn’t as substantial as my father was, but he was very visually present. He’d be like a transparent form of normal, bright colours, bright clothes. And that was a very different state from what my father was in, which was much more like a spirit. This was much more physical and my aunt was much more physical as well. It was different again from my father’s situation. The rabbit was more like a spirit - just as in ordinary living, every single one of us has a very unique energy signature which is very, very unique, and at times I have felt signatures, which I can identify being present. No other thing other than the signature being very identifiable. I can’t remember any other things, Kate. If you ask me any other things.

K: Remember when you were staying [in a village near me] and the landlady was dying. Remember you did some assessment of her and then you went back to Brisbane...

M: Oh, yes, yes of course… Yes, now I know. Now what are you asking me about that?

K: Do you remember...

M: Yes, and I’d done healing for her in the hospital...

K: How had her field looked at that stage because by that stage she wasn’t by any stretch of the imagination dead. Yet it must have been about two or three weeks before she died?

M: Well that interests me, Kate, because I remember she was in hospital the first time we went to see her in hospital. She had a very light energy, very spiritual energy. She had a great desire to live and we went to hospital because she had ascites -she was that ill, she had ascites and had it drained but she had lived already extraordinarily beyond the predicted span, but she was becoming less and less well… but had a great desire to live overtly and a great plan for the future and what she wanted to do with this lovely B&B that she had created.

But there was a lot of grief in her; profound grief in her and when we went to see her the second time she had agreed to have treatment in hospital. Now it wasn’t chemotherapy. I think that she had steroids …I think it was to really to maintain her and she’d had steroid therapy and she’d had antibiotics but I remember when I saw her in hospital, two things struck me, that her energy had become very fragile. She also said, (and I thought of you at the time). She had a very light energy, very spiritual energy. She had a great desire to live and we went to hospital because she had ascites - she was that ill, she had ascites and had it drained but she had lived already extraordinarily beyond the predicted span, but she was becoming less and less well… but had a great desire to live overtly and a great plan for the future and what she wanted to do with this lovely B&B that she had created.

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I have to once or twice read these. I’m scanning back through my medical memory of times of being with those who have just died and have known at times that the spirit didn’t depart... There are times when you know that the spirit is still present. But I’d say that in the cases that I’ve given you, its departed quickly rather than stayed.

K: Did you hold your father … did you help to...

M: I didn’t help release it in any way. I just was more concerned with the emotional healing for both of us and the forgiveness aspect, which was very important and I asked for his forgiveness and forgave him.

K: When you were walking the room after that period, did you feel his imprint still there in spite of...

M: No, when it went away, it went away. It had gone. Yeah. Again, now that colour and consistency…you know we’ve been doing the chakra drawings, when people are spiritually well engaged, the crown chakra appears as very white and its that same white colour that composed my father’s spirit. That was what I found so shocking. Because psychologically and emotionally this man was very disordered! But yet (that was what my shock was, my sense was the difference … And that was how did that fit in there … It wasn’t the physical size, it was a spiritual size. Somewhere in me registered the spiritual positively in the being that I was looking at. But to me to my small incarnate mind was at gross variance with my experience of the being. So it’s certainly not something that I could have psychologically projected. I shocked the socks off me!!

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INITIAL SHORT INTERVIEW WITH MIRIAM

Kate: I'm interested in following up on our informal discussion the other day, regarding out of body experiences prior to death; those changes that you observed, where those people stay out of their body for longer and longer and finally don't come back, you know. How do you experience that? How do you witness that change, that leaving and coming and leaving and coming and finally leaving?

M: I've seen it in two ways... One way is that just before they totally leave, they gather all their energy around them and they look splendid and they do what they are and some of them can do it hours before they go and some of them can actually take three days before they actually leave that incarnation. And how we recognise in practice is... "Oh Mrs. Brown looks really good today and everyone thinks Mrs Brown is getting better and actually Mrs. Brown is getting ready to leave for the last time.

When my father died... (my understanding is that the soul has absolute dominion over when it is born and when it leaves the incarnation and nothing else has dominion over that in terms of when we when we come into the body and when we leave the body so I that's my understanding). So, when my father died, I had the most amazing experience. The afternoon before (he died through the night of Wednesday morning); the afternoon before he died on Tuesday, he came to visit me, and he hadn't been well for a couple of weeks. He had flu like symptoms and he arrived and he'd had a shower and a shave and he was dressed handsomely and he looked a million dollars. And my mother would go so far as to say that she saw stars coming out of his head. And he died through the night of the next morning. But on that Thursday, I had the most amazing experience, I was with the group of people that I do energy work with and this little voice just said, "look up, look up!", and all a sudden this big ball of light appeared and a smaller ball and they just merged, it was just absolutely spectacular to see that. And that was nine years ago and I had never seen that with my physical eyes before, but I had a real sense in our clock time. He would have been dead for ah, not quite forty eight hours but whatever had occurred in that forty eight hours, he had done what he needed to do through reviewing the lifetime.

K: Yes

M: Well, she spoke of that review and maybe meeting others, and I actually feel that that was quite accurate. There was some alternative she proposed, and I actually feel that he had been through that process and so the energy that he had brought down into the body of that particular incarnation was then going back to join his total energy. And that's what I physically saw with my eyes.

K: So, you were at his bedside at the time or you were somewhere else when you saw that...

M: I was somewhere else and he had been dead for thirty six hours. I just thought it was amazing and I had no doubt about what I saw. I thought that's that energy merging back with that energy and I'm privileged to witness it.

K: Yes, how amazing!

M: So, some people begin to gather the whatever they begin to gather - their energy, three or four days before they leave for the last time, cause we witness as M. talks about the coming in and the going out and I think maybe for some people that's to help them leave for the final time, so that their not frightened. O K.? And some people begin like three or four days before they die and You hear people say "Oh God, aren't they looking well," But I always get nervous and leaving and coming and finally leaving?

K: And when they go out, do you feel or see them go out? How do you actually know that they are gone?

M: Oh, it's a knowing. But there's an incredible assumption and the assumption is that when people leave their body where do they go? And I think what is assumed. I think people don't buy into the old argument heaven and hell anymore. A lot of people don't, but they believe that people go to some nice place and that's it. Now you get other people, who say, "We believe in reincarnation." [These people] believe yeah, they come back again. But what they don't acknowledge is that there are multiple levels of consciousness and so when my father died there was a period of about fifteen months perhaps, where I was advised that I could call him in if I needed to, but he had a lot of work to do and that he was working in Germany, so that was cool and I can feel his energy now when he's with me. I pulled his energy in on Sunday, to be there with me, for that event. But whatever he did in that time between when he left this incarnation and when I could feel him around the field again, he obviously needed to be somewhere to complete something that he needed to do for his evolution. And with my brother's energy; I could not even touch that energy for a long time, because I was too bound in my own levels of grief, and as soon as I was able to lift them off (and that was something that took me a 25 year process), I can actually call him in and connect with him now, and I could not do that for twenty five years. And then I remember when I was a paediatric ICU nurse, there was a little girl that I was very, very close to and we had her for a period of twenty two months and they were unable to medically diagnose her, and she just continued to systematically deteriorate physically and she was ventilated and she arrested and unfortunately she was resuscitated and she had this month in a comatose state.

Now during that month she was out there floating. OK? And I'd go to her body ad I'd say "OK, we're still out there." Then I came one night duty and I had a look at her and I said "Ah, we're coming back!" And I sat beside her and in she came, in she came, and ping! She was awake. I remember saying "Hullo Rohey, darling. How are you?" "Hello Miwiam" and I said, "Darling, where have you been?" "Oh, Miwiam it was so beautiful. I saw the lights and I crossed the water." And then she started reeling off every kid that had died around her over the 16 months. And it was gorgeous, because I said to her, "What would you call this place where you went to Rohey?" and she said, "Ahh...(she was on a ventilator) "Ahh, such a shame, Miwiam, I can't... tell you!" And I'll never forget that. But when you looked at her physical form (even though she was having oxygen pumped in and out via that ventilator), you knew she was out of her body. There's a change in the light. What I get is a change in the light grid. And there's a light grid when you're in and a light grid when you're out. I know (indicating her mother in another room) when she's in and out of her body and how much she's in and out of her body. I can sense it, I can see it, and I know it ...
K: So, going back to your dad when he comes to see you, what sensation… how do you access that? Is it a knowing, is it a feeling, is it a seeing?

M: It is recognition of a pattern of energy.

K: Right.

M: And you know exactly who’s there.

K: Yeah.

M: The thing is we could do that right now if we would allow ourselves to connect more fully. Because theoretically I could walk into a room blindfolded and say, “there’s M. over there, there’s Kate over there, there’s grandmother over there.” Because what you’re sensing, what you’re feeling not sensing is the energy pattern of that individual no different, whether they are incarnate or not incarnate.

K: And you’re speaking of course of your abilities of highly skilful individuals in that sense or practiced individuals or whatever you like to say.

M: I remember when I was a kid, coming back into my body at night and I didn’t have the language to articulate it so I’d cry and say the blankets are heavy, the blankets are heavy, that was the only way that I could convey it, the blankets are heavy and that’s a child and I used to cry, because I sensed such difference in the levels of density in terms of coming from there and coming into the physicality, and then it was almost like, I totally shut it all off, because I could not survive unless I shut it all off. And then I had to go around and play in the field of life. And then when I knew what to do with it, I could then begin to open it all up again. It’s not fair to say that I shut it all off, but I shut a lot of it off, because I could not cope and I wonder if that’s what happens to every child.

K: I suspect that, that is the case.

M: For example I have a colleague that has a grandchild and she’s very in tune and they were sitting there one day an she said “Grandma, can you see that?” And grandma said “what’s that?” “The blue around that bird.” And my mother was, when she was a child, she was marching in the garden one day and she saw the Virgin Mary standing in the garden and totally shut off her vision in response to having a spook walking around, you know? So, I think every child has a capacity and sees energy and it’s a struggle between here and here (head and heart) because there’s no language, there’s no conceptual thinking to do anything with it. And so what you learn is to create your conceptual language from the mob around you. And so you totally start to shut off the mechanisms from which you access the higher planes of consciousness. Then at a certain point, I think we/they all cut them off. Well, the majority of people do and children like M. are very rare… I’ve met very few, who have continued from childhood into adulthood, without shutting those mechanisms off. And I work with fifty very highly sensitive people. And each one of them, in journeying with them, will say they have all shut it off through childhood and yet in adulthood are beginning to work with energy again and they’re extraordinary in their capacity.

2nd INTERVIEW – MIRIAM

M: OK. I said to you that my clinical practice has been in intensive care unit and that I have worked from neonates through to adults, and … I think that one of the skills that you develop as an intensive care nurse, is to observe because you’ve got nobody telling you anything other than your eyes actually see. And while you’ve got numbers, monitors, and waves to look, you learn very quickly as an ICU nurse not to go with these but to go with looking at the human being in the bed. And because those people in the main are very, very ill, you don’t have many shades of graduation of seriously ill prior to death. But you actually develop skills, that actually distinguish between very ill and gravely ill, and almost dead, and dead. But when you look at it for as long as I did, it actually becomes very apparent to you.

The other level of clinical specialty that I can think of that level of discernment and it might make you laugh, is aged care, when they’re asleep because I tell you, I look at them in the nursing home, where my grandmother is and you really have to work to discern whether some of them are still alive. The night nurses tell me, it’s even better on night duty. (Laughs) So, I believe that my clinical skill came from that clinical practice. And it’s about… You know, I wouldn’t have had language then to tell you what I was looking at, but what I was actually looking at was luminosity, and you’re looking at flesh that is alive, rather than flesh that is dead. And flesh that is alive has a different shine to it. Because I didn’t know then that I was actually at the person’s aura. You know I was looking at how much they were able to radiate, OK? Because you don’t sit down and have this discussion with other people, and you make an assumption that everyone is seeing the same thing as you. But they’re not!

I can look back on my clinical practice and say that, one, that I never understood in my earlier years, why my patients never “went off” OK? That was the language. “They went off!” right? Or, two, that I knew when I was going to be with someone, who was going to die on the shift. There was no question of it. There was a group of patients I was there to help move to the other side, right, and cross over? And there were those that somehow when I connected with them, their energy kept them going, kept them there. And there was nothing in between for me and talk about your ego getting into it, but I used to think, “why doesn’t anyone arrest on me, or have, you know, a pneumothorax on me?” And then I started to say “Hey, maybe this is a good thing!” (Laughs) Because there is definitely there is a culture in ICU, the more equipment and the more drama that you can generate around you, the better nurse you are considered to be. And I was young and silly, and I came to appreciate years latter that somehow in my connection, with the patient at an energetic level, that my presence could help keep them grounded or help them cross. And I would not have had language to describe that, then but I certainly understand it now. And I know what it was doing. So, what I was doing was not coming from any known theory, it was innate. So that for me, speaks to the realness of it.
But if I think back, one of the most profound experiences for me was, one Saturday afternoon I came on to an afternoon shift, and when I walked into the unit, they were expecting this baby, from The Women’s Hospital. And the baby was all of five hundred and twenty four grams, and it was a twenty four weeks, and they weren’t sure whether it was going to live. And you were to admit the baby and look after the baby during the shift, and the baby’s just arrived and you take over the admission. I remember walking up and looking at this baby and I had never seen anything so small in my whole life. It was 534 Gms.

But I remember standing next to his father and consciously hearing his thoughts and the thought that nearly bowled me over was… (He was a Greek man and his marriage and his marriage had been arranged, and it was a traditional Greek family and he looked a bit haggard,) and what I heard him say was; “The rabbit that I’ve been out shooting last night are bigger than this, and this is my son?… No way!” And he totally rejected his infant at that point. The mother of course couldn’t come over till a day or so later and I remember that little, little thing. But I remember this light around him, and I remember this incredible feeling of preciousness. And, as the story unfolded, we used to work to a rotating roster and we’d do a seven nights on night shift, within a five week period. And as it turned out, I looked after this infant for three weeks straight, almost. And he hung in there. And he sailed through his prematurity and it was phenomenal and so after those three weeks I didn’t look after him for another two, three weeks very often. And then I came back to him again when he still needed to be tubed. The ventilatory mode was called CPAP so he was assisted but the machine wasn’t doing all the breathing for him. And I remember it was night shift and he was in a head box and he was so little, that the whole of him was in the head box. And I remember thinking he is only on twenty three% oxygen and there’s twenty one % oxygen in air as you know, and I think I can take him out a little bit of the head box. Anyway, so I had washed him and so I put the head box on the back shelf and I lifted him up in one hand to change his sheet with the other hand. It was actually my left hand I had him in. His little head was lying in my fingers there, each arm was draped over my hand, his two legs were draped over my wrist, and as I changed the sheet with my right hand, all of a sudden I stope’d and our eyes made contact, and I remember looking at him and that look was like, “I’m here and I’m staying, and I know who I am”. It was phenomenal, and the sense there was a further exchange relating to me about doing something, it was like… I remember even though I felt to that point that he would survive, in that instant, I knew that he was here for the long haul and there was no question of it. And I knew that my job was to help his family and that unfolded as it did. You know that is a story about living! I know you’re looking at dying, that’s a story about a choice.

Kate: Yes

M: About a choice to stay, and actually in my experience, you know that the soul has absolute dominion over two aspects; when we come and when we go. And that is a soul choice, and that cannot be overridden by the will. It comes from the soul. And I’m actually very clear about that, I actually believe that to be so, because I have seen people… For example, I had a woman just tell me yesterday afternoon, that her father died just eight months ago and he waited for the family to come down from an hours drive away, and when his wife decided that she did not want to see him, he then passed. And at some level, I know that because I have seen that practice where they wait, and there’s a part of them that hovers and that part that hovers is just enough that keeps them physically breathing, just enough to just be there. And when that part goes…”Chmmp!” It’s like when someone turns a light out. I told you last time that about the energies when my father died, very, very clearly. I can’t say that I saw that in my experience. I felt that my father’s spirit was right here and I could feel him, but the idea of him being physically breathing, that was not there, each arm was draped over my hand, his two legs were draped over my wrist, and as I changed the sheet with my right hand, all of a sudden I stoped and our eyes made contact, and I remember looking at him and that look was like, “I’m here and I’m staying, and I know who I am”. It was phenomenal, and the sense there was a further exchange relating to me about doing something, it was like… I remember even though I felt to that point that he would survive, in that instant, I knew that he was here for the long haul and there was no question of it. And I knew that my job was to help his family and that unfolded as it did. You know that is a story about living! I know you’re looking at dying, that’s a story about a choice.

And when I said that the mother was so relieved and said, “And can the grandparents come too?” “Absolutely!” I was on the next day, I had the family ready, the family came in, we went through this stuff, we took all the photographs, and about two days later, it was a Friday. I’ll never forget this… Despite the criticism I felt the connection with this soul. And, I could see that the soul was still present, even though the child was microcephalic and we were giving it morphine and it was going to die, ra, da, ra, ra… And I’ll never forget on this Friday, I said to this mother, I won’t be here until next Tuesday, because I’m going home and we’ve got school, so I’ll be back in the unit on Tuesday. At that point she said to me, “Where is home?” And I said, blah (because I came from a Rural area I would always use the next town to designate where I came from). And she said, “And can you tell me, Do you have family there?” And I know she wanted me to say yes, and I gave her some kind of an answer but I gave her the truth and I said, “I have family, but the next town was home.” And I looked at her and my heart just stopped. And she said, “My husband is Cathy’s step brother!” And Cathy was the woman who my brother was engaged to, who had been killed six months before they were due to be married. And they had called this baby after my brother! And I’m relaying that to show you that at one level there was a part of me that recognised that I needed to do for this infant what I needed to do because of compassion, but when it came from a sense of compassion that was understood by those around me because these babies at that time were usually left in a corner. And you know, they weren’t neglected but there wasn’t a lot done for them. And I would feed this baby and I would bath him, and I would dress this baby in fresh clothes every day, I needed to do for that family, but in doing for my family I gave myself a very grand gift, right? Because when she said “we named him after your brother, right? You know in any of the readings of mysticism you will find that souls that depart very suddenly from a body, usually due to traumatic incidences, sometimes need to come back for a very short time, because each of go through at the end of a lifetime is like a videotape, which is a review. And sometimes when we are thrown out of the body very, very quickly. So we come back and they’re usually the ones.
that die in infancy. I would even go so far as to say that that is what SIDS is all about. As well as a gift for that family, for that being comes into that family and it gives that family a gift. So it’s not just a review of that life time and get on, but it also has an implication for that family. This is also a gift. Now I had very clear sense of that. Very clear. And extraordinarily, last year,(so that would make it six years ago,) that this incident occurred. I went to the funeral of the mother, who would have been my sister-in-law, and I met that family for the first time, twenty six years later, and my future sister-in-law got me and got them and said “Here you are!” And those people said, “You have no idea what a gift you gave us, because that experience changed our lives for the better and we thought of you often, and so when you’re able to connect at that level, you never know what the outcome is going to be. You never know what the purpose is going to be. But you do is that you follow that trust and that inner knowing, that inner guidance will unfold as it is meant to unfold.

K: A wonderful story…

M: Yeah, but if I go back to the point, that the soul knows when it needs to go. Then the circumstances around the dying will be orchestrated to support that. And if I go back to my own work, I have a wonderful story about a male student, who had an experience where there were three brothers, and they hadn’t spoken in years and this man was dying. The student said that they came into see their brother on his death bed and he said, “And I don’t know why, but I felt very compelled to put one brother’s hand with the hand of the brother who was dying, the other brother’s hand with the man’s other hand and I held his feet and as the three of us stood there, the man died in front of us. I just smiled when he said that and as a facilitator, when I said to my student, “So you just went with your inner knowing.” And he said, “Yes”. “And what you did was to help create energy and the three of you and the man who was passing over. You created an energetic link to help support him move over. And you did a grand thing.”

So, there are no formulas and there are no rules and there is no, “this is how it is, and this is how it happens” And if you learn to listen to that inner guidance and you will allow that to unfold as it needs to unfold, and you know, people are frightened of death, but my God, I’ve seen such grand dying, that they are just as magnificent as births and I’ve heard it said that when you watch an infant come into the world these days, you have more than just the medical team around the person; you can have family there and there’s cheering and there’s happiness and there’s joy and the question that’s been asked is, “Do you not think that when someone crosses to the other side that there’s not a team waiting there clapping hands and welcoming them back from the journey to the other side?” And if we think of it like that, then maybe grief need not be such an all encompassing experience. Death might be seen as a normal transition. So and I’ve seen… You know, one of the things about being an ICU nurse, is that you see so many deaths. You know, I can remember a father and son from Tasmania and his little boy… the wife had left them, and there had only been the two of them for a number of years and this child had been around twelve at the time … He had Leukaemia and he had developed… he had been immuno-suppressed and had developed some grand infection, because of that. And I watched that relationship between that man and the son at the bedside, and I was looking after the little boy, and I remember working with it, and I remember, what you can feel if you can move beyond the sadness, is the love and I remember that bond, and I remember how gracefully that father let his son go. And how astounding I was because there’s a part of me that says, “this man has just lost his son.” and he came out to thank me for what I’d done and I remember being so taken aback that I should be thanking him for the privilege of being part of the preciousness of their lives. And so, all I’m left with is and having experienced it with with members of my family. You know, I have a one hundred and four year old grandmother and every time I look at her, I think “God the lights are on here. We’re still shining and she’s not ready to leave yet,” and you know, I can’t get distressed by it any more. There’s too much of me that believes that we are eternal and it’s just a journey and also that I think I told you the little girl

K: Yes.

M: When she came back, I said to her, “Rohey,” I said, “Do the children miss their Mummies and daddies?” “Oh, no. ‘Miwiam’, they can see them all! And I’m sitting there and I think, I will test this! And I said, “Who did you see Rohey?” She said, I saw Barry and I saw Lucy and she named all the children that had died in the same room over an eighteen month period, and she was as clear as clear. She had seen them all as clear as she said, “And Miwiam you can see your mummies and daddies; you don’t miss them, Miwiam!” You know, like I was an idiot! And what she was doing though was [explaining that] the veil between this world and the next is only as thick as we make it. You know, but from where she’d been, she’d seen the lot! And if we’d understood that, we really understood and appreciated that, I think that we could make death a much more graceful thing. And we could support people, the way we birth them into this world, we could die them into the next one.

K: Yes, and I’m interested in that last interview, when you talked about energy imprints, the fact that you talked about it theoretically that you could walk into a room blindfolded and you could say M is here, Kate is over there...

M: Yeah.

K: I think that if there is some sense… if there is some energetic connection that is post mortally sustained, then there could be a way of teaching people to develop a sensitivity, in a way that you are talking about, so that even though we can’t see the spirit of...

M: Grandma, yeah,

K: Or whomever, then you learn to experience some sort of communication, like when your Dad came back and you knew.

M: Yeah, you can do that. That’s exactly what my own work has been about. By taking the veils off yourself, clearing the connection… and, you know, I was only reading yesterday, and it was so clear. The author said that if you drop a pebble into the pond, the pebble will sink to the bottom of the pond, but the ripples will go out and out and out and in quanta, they go out forever. Well, his argument is that once we’re able to read thought, its possible to go back and think what Jesus was thinking and what Buddha was thinking because that thought is still in the universe and therefore as thought and I’m not thinking about intellectual thought, I’m talking about consciousness and consciousness exists
forever. And that being who was Uncle Freddy, isn’t Uncle Freddy, he only adopted Uncle Freddy as a name in that lifetime. That being still exists for all time, right?

K: Yes, of course.

M: So, it's possible to then communicate with that being and I, I certainly… Rohey has been dead for twenty five years and yet I still feel that I can talk to her. She still exists, she is not dead for me, I still feel my father, I still feel my brother. I met a young boy many years ago, who was instrumental in teaching me about healing, and I still feel him and I still feel his guidance. The only time I feel that I'm separate from them is when I'm in my own shit. No, when I have disconnected myself. But when I reconnect myself again, they're still here. They're not in that physical form… I thought about last time we spoke and what I didn’t say to you is - I hope you find this somewhere in your reading, but seeing energy can be interpreted as using your physical eyes, whereas in actual fact you can use any of the senses to actually interpret energy and in that sense you see it.

K: Oh, yes, yes…

M: OK. Because people get a sense that in looking into the non physical realm is like the physical realm and I would suggest that you make that distinction very clear. Because, while you can see colours, while you can see shapes, while you can see images, you can see black and white movies. I remember when I was younger, I used to get a lot of auditory, and I used to think that it was internal dialogue that everyone has, but I don’t get that as much anymore. What I get is this knowing, it is a sense of where to go, what to do, how it's shaped and the other thing is when I’m seeing energy, and if I miss it, it’s almost like if my heads put in a vice and everything around is stoped and one thing comes into prominence and everything around goes into slow motion and 'boom' that’s there, you know that that’s to be looked at.

And that’s very clear to me I remember years ago; a funny thing happened in a very big traffic jam, and all of a sudden this space opened up and all the cars seemed to just stop. Now I didn’t have enough where with me to just go into that space, but had I done, I would have saved myself two hours going around a loop. But I soon learned that when I do that, I’m actually locking into an energy that I need to put my focus at that point...

You know you learn as you go and if I look back at my own experiences it’s a growing thing, you know when I look at my early drawings as a child, I wouldn't have known what a charka was, but I actually would draw the charkas on the person and draw where the blockage was, and when my mother produced those drawings you know, thirty years down the track, I nearly fell over. So, obviously as a child, I could look and see where their problem was, but you don’t have the cognitive ability to process it as a child. But what you have as a child; children very acutely lock into an energy, and I remember using that aspect of that childhood phenomena, of I would walk into… Particularly when I first started doing Adult ICU, which was what I did after I finished general training. I would open the door, and I would say all hell has broken loose in here today and I would know exactly the lay of the land before I’d cleared the air locks. You would just tap into that energy, expand your own energy, feel it and know that you should run home… (Laughs) or get going. And my staff where I used to work at D**** would say, she’s got a microphone under the tea room table and she records it. But I intuitively knew whether to go in and deal with the problem and when to leave it to them and they never worked it out in six years. You know, it used to blow them away! They used to scratch their heads. But we’re all connected you know. And if you know you’re all connected…

You need to know where your boundaries are and you need to know… and that has been one of my challenges; to know where my boundary is and that I’d moved into another one’s energy. Because I used to get very confused, always feel the energy and take the others stuff on. And that’s something I had to hone in on as I’ve gotten older; to know which is mine and which is theirs, so I was then in a position to support a person. Whereas that distinction was not always clear for me and that I learnt from my mother. She’s right open and she lets anyone in her field. Like she just said to me today, like she was walking out of the supermarket, and there was a child in the pram. As soon as she walked out that child put her arms out to her and the man came up and said, “Would you mind if my daughter gave you a hug?” And she said, “Of course not!” and he said, “Her Mother died two weeks ago”. Right? See, my mother’s energy is a very loving energy and that child locked straight into it.

And while we all have that capacity, we all have to know where the boundaries are if we are able to work with a maximum advantage for the person. And very simplistically, it’s the definition between sympathy and empathy…it’s a whole lot more that. You are in a place of compassion when you know that. When you don’t know where your boundaries are, then you just fall in energetically and you get quite lost. So… yeah…so…

My first experience around death, yeah, because I don’t think I saw anyone dead while I was a student nurse, my first experience around death was pretty horrific! You know it was a windy night, something that could bony be described out of a horror movie…

K: Very gothic…

M: The thunder was clapping, the rain was pouring down, the wind was blowing a hurricane and there was my first year nursing student and myself along with the night super, taking this body to the morgue. And the bumps…it was an unpaved path and as we hit one, the body would jump on the bloody trolley and yet the extraordinary part about it was that even though from one perspective, it was straight out of a horror movie, from another, there was this incredible laughter all around and I tapped into the laughter, and while I didn’t laugh out loud, my girlfriend was absolutely moist. Anyway, the rule was you weren’t allowed to leave the Coronary care Unit until you were relieved and anyhow these two were leaving and I kept telling her to look at this man and she was looking!
And there was no way that these two could relieve me and the nurse's aide came up to me and she said, "Miriam, could you please come and have a look at this man as he has cobwebs in his mouth." And I said, "Cobwebs in his mouth?" And she said, "Cobwebs in his mouth!" And I thought, this man was fine and it wasn't too far up the corridor and I had this torch and I snapped up to his bed and there's a point in me saying that it wasn't just because it was night, it was black! And still it was black because what I was tuned into was the energy field.

And finally I got the torch and he was as dead as a doornail and the cobwebs in his mouth were... He had CCF and he had pulmonary oedema and the oxygen running down his nostrils had dried the cobwebs and there was fluffing around his mouth. And these two hadn't... and when I say it was black, it was an absolute void. I don't know how long... this was 3.30am - 4.00am and when he had died at ten o'clock in the night, they were taking a pulse and blood pressure I have no idea. He was cold he was so dead. But when I walked into that room it was black and it had nothing to do with the fact that it was night. 'Hasta la Vista' he's gone! He wasn't hanging around there at all. He was out of there, you know. So I remember that as a student...

So, what I suppose I learnt to listen and follow, and do what I could do with the families and relatives, and but I really feel that that was guided by the person, right at a soul level, to help them in that transition and I learnt to watch the light around them.

You know, dead flesh is very dead and one of the stories where I really sort of felt that was, when my brother was killed in a motor bike accident. He was killed on a Sunday afternoon and as by law, motor vehicle accident people are required to have an autopsy. So his body was released, probably three days after the accident and I said to my parents, that I would view his body and take clothes in to be dressed for the funeral. And I remember getting to the funeral home and saying to the funeral man, "I'm here to see my brother and here are some clothes." I remember the funeral man saying, "The body has just arrived and we have not cleaned him up at all." And I said, "Look, it's alright. I'm a nurse, I've seen plenty of dead bodies, and I would just like to have time alone with my brother." They looked at one another, they agreed, they brought him out on just an old gurney, and they had a sheet up to here on him [his neck]. And he was obviously naked underneath it and I remember walking down the pews of the chapel and they had a chair there and I sat beside his bod and I remember sitting beside him and I don't think that I have encountered in my nursing practice. But I looked at him and I looked at him and I looked at him and I looked at him and I absolutely looked like he was just asleep in bed; that's the only way I could see him. His flesh was still alive, he was surrounded in light, and I thought, "Wow! this is amazing!" And I sat and I talked with him and I thanked him for being my brother and I sat and exchanged and that was fine.

When I got home, my father (Because he'd been in a motor vehicle accident, my father said, "Well, how does he look?"") "He looks just like he's in bed asleep." I said. "He looks fantastic!" And my father said "Oh, that's good, because I was worried about your mother." Anyway, that night they dressed him and he was in his coffin and my mother and father and I went in to see him and when I walked in there I looked again, I looked again, I looked again. My father shot me the filthiest look... My mother was just beside herself... Anyway, when we were home he still didn't say anything. And the next day he said - He was so angry... He said, "I thought you said he looked alright!" He said, "I thought your mother was going to - we were going to need a coffin for her, too!" And I said "Dad, all I can say to you is how he looked in the evening and how he looked at lunch time; he did not look the same!" and I'll never forget that experience because in the evening, he looked worse than a piece of dead meat and at lunch time, that same day, he was totally surrounded, by light and yet by the evening, part of his face was caved in... and I ask myself ... (I was twenty four at the time), and I ask myself, "Was I delusional? Was I so distressed, that I didn't see what was before me? But in hindsight, what I think I saw was his etheric and I saw him in the second layer and not the first layer and so I saw how he was then and not how he was now. And I saw that with these two eyes and not this eye (gesturing to third eye). Yeah, it was amazing! I saw him etherically.

And I feel it was a real gift to me... uh, that was one of... one of the gifts he gave me in his death, and that said to me, that's the sight that you use. (the sight) that I had as a child, where I could look at a body and see where the energy disturbance was, and that was the sight that I was using to see that. And that's the sight that I don't use very often and I began to ask myself, "why?"

What stopped me from using that sight and if I had to answer that question now, I'd say, to use that [ sight] you have to be absolutely responsible and when I say that you have to know what you're looking at. Ah, because you have the capacity to harm people or to distress or to do more damage than good, and people like Caroline Myss that use the name medical intuitive, I wonder if that's the sight that she uses, but I actually wonder if that's the sight that most children have and that we shut off very early in life because I know that when I saw my brother, I hadn't experienced that in adulthood. And it was a mystery to me for years and I feel now that the other part of me has developed. I can now actually put the two back together again. I used to say...when I talk about how I was in the world because there were very few people who I could talk to... I used to say to a friend of mine "I can see into people's souls." And until you can look into someone's soul with true love, I actually don't think that you should be looking, because it's only with true love that you can look. Do you understand that?

K: Yes I do understand. Thanks, Miriam.

INTERVIEW – NICK

K: Nick, you've identified as an energy healer who works with dying people...

N: OK. When you say that I have somebody in mind, I only spoke to him and I never, ever met the man. However, I knew because of his energy field. When they're very close to going (and I talk in weeks), it changes, ready for preparation to the point of living and death. There's no line somehow, but there is a line because the energy changes and generally what changes before they pass over, is that their energy becomes very alive and its as if they're really well and fit and its absolutely spot on, Its in pure joy and its as if they...

You know, when people say you see the light, they see the light. Then, just prior to crossing over, when that happens, there is a beautiful deep colour that surrounds them. It's very deep pink. It always comes into pink and that's a very healing colour. And when they die, their body, there's no way that they can carry their energy. And yet it still goes on. And it goes in temperature. So it goes from the pink to the blue and then you know that they've transmuted over to the other side. Now when they get to the other side, I see and feel that energy and they become alive again.

K: Does this energy have a shape, does it take on...
N: Yes, it takes on a shape the way I describe it, the way I see it, it takes on a white light with ice in the middle of it. So it's clear but not clear, it's clearer than clear encased in this white light, and it's very much alive. It's as though they've crossed over into a new life and that's when I say and I said earlier, I like it when people are dying, because it's a celebration of the end of this life, which is form, which is colour, to the beginning of a new life, and that's when I see this other form. And it's like immediately they seem to be taken into a waiting room and then preparation, I guess, for rebirth in another life. That's how I see it and feel it. It's very clear.

K: So, when the person has taken their last breath, which is a Western perception of death, you then see this …

N: This form comes in…

K: Right. And how long after…Do you see it as a physical thing?

N: I see it as a physical thing.

K: And how long does it stay in the room?

N: That depends; it depends on the people that are grieving. And I've experienced people, who are not aware of my work. And I notice then, that the form will last a lot longer, because the person, who has crossed over, doesn't want to leave, because the family haven't come to terms with the death. I've been with people, say, for three or four weeks and the family are there. They get used to me being there and I work with the living and the person whose about to cross over. And once they go, the people that remain there… They're a lot more comfortable. They say, "Wow!" Now she's gone or he's gone. "They're on their new journey, and we're very sorry, we're very grieved." And you see that shape still in the room and you'll feel it go. And the funny thing is that it will return on the day of the funeral of the celebration of the passing of that body over.

K: How interesting! So when you see it on the day of the funeral or see it... And is it seeing or feeling on the day of the funeral?

N: Both see and feeling…

K: Where does it go? What does this spirit?...

N: My experience as a rule is, I see it stand at the side of the coffin. And when that coffin …well depending on how the service is done … If the coffin drops down and goes wherever it goes, I see it disappear. It seems to break away to nothing, just go into the atmosphere. And I say OK it's OK, it's gone. And that's when some people feel a strong sense of grief and relief, at the same time. This is what I see. But going back to before they die, the interesting thing about that is, you can walk into the room with the living people and there are all these other people around, waiting to help them cross over in spirit form. And when you see that and when they cross over, you see the very same people greeting them on the other side, which is an interesting…

K: Yes, so when you see these people, do they have a physical form. Do they?...

N: Yes, Absolutely! They're almost as clear as the people on this plane.

K: So what distinction would you make in terms of … are there any distinguishing characteristics … say, if you walked...

N: Yes, and it's slightly… There is a renaissance colour change with clothing. The clothing style is different. There could be many from a Victorian era to a modern era … to the eighteen hundreds or the seventeen hundreds. But its there and you see its one of those people and when they cross over, you see them in a different way too. They're virtually white. So there is a… it's like a veil - white and they lose their colour…

K: But they have the same facial characteristics?

N: Exactly the same.

K: How interesting!

N: For me, there is a physical picking up of that person and carrying them to the other side.

K: How interesting it's very…mmm

N: The energy does change between people. You know, somebody whose in fear of passing over. You generally will see this very deep red and there's a lot of anger there... And even though they may die with fear in their eyes... When that last silence - and then the lungs, "fffhhhh" (N makes expiration sound), you will see that change from red to a very soft pink.

K: mmmm…

N: But its still there. They will take some of it over with them. And my experience with those people - they don't leave too readily. They don't transmute too readily to the other side… And you will see them hanging around or being more present around the dead body, around the shell…

K: And when you see them hanging around the body, are they around the body, are they above the body or are they beside the body… Is there a sense of interaction with the body or is there just?…
N: There's a sense of them here (N gesticulates), like maybe looking at themselves down and not really wanting to go. And I find the experience... I know when that's going to happen, because I've spoken to them two or three weeks before hand and I say, "Why don't you go?" Why are you having these tests?" Because the hospital wants me to or "my family want me to and what about my daughter, she won't be able to cope?" I say "Your daughter is thirty seven, you've had your life, God has chosen you to go now, why don't you give yourself permission to leave this planet now?"

"Oh, I didn't think I could do that." And I said, "Of course you can!" and generally at the latest, 12 hours, they have crossed over. And generally, when that happens for me, I may be hundred of miles away and I will be told about the funeral two days past and somebody that I had previously never met will say, "I had a feeling somebody sat with us." And it was me! I know that because I was there at the point of funeral time.

So a lot goes on with this and we're chosen to help people cross over because... And there's not so many bad spirits around these days.

K: How fascinating. So what is the change and what's your theory about that?

N: I think what happened is, that there was a big build-up of mischievous spirits in my day, let's put it that way... say fifty years ago. Technology wasn't here to pump drugs into you and stick needles and so you passed away. It was a natural thing you were brought home, a lot of people died at home, you know. And that's another thing. I encourage people to move people out of hospital and take them home. Let them die in their own space. They want that. But the people who are looking after them don't want that. Their terrified of that. So you have to surround them with a good support system that says, "Hey, we'll be with you when they die or just prior to that. Let's take them into hospital when they need the messy bits looked after."

But it is important, in those days, we just passed away. Now, we're realising, we can say "Thank you very much, no more needles, I need to go!" instead of the medical profession saying, "We're going to keep you alive!" The ego of the medical profession is slowly disappearing and we're coming back to our spirituality. And fortunately, the medical profession are going to have to look at this. And they are doing that, because they're bringing healers into their system.

K: Yes, and so your role in this system in Austria, is it to...What is it?

What did the doctor want you to do specifically? Was he trying to make you prolong the life of these people or to make the transition easier, or none of the above...What was the story? What did he see your role as and what did you see your role as...

N: Well, he saw my role originally as this 'woo, woo' healer, that was promising the world. Everything! And I've never promised anything for anybody. My job, I feel, is to be there for who ever in which ever way they want to think. Either, "I want to die now." "I don't want to die now." "help me!" - whatever. And whatever I do, I will help them crossover. I will make their journey easier and assist them to make it easier. Not only them, but also, the people left behind. And I don't really do very much except be there.

K: So your energy facilitates, rather than you energetically intervening in that sort of way...

N: Well, let's look at this. Can we prevent somebody from being ill? There's somebody a bit bigger than us that says, "Hey, your time is up Flo, its time to go. However, there's somebody here who may be able to assist you in crossing over without your excess baggage." Because people do die and come into this world especially in Austria and Germany, people come in, in spirit form through a child, carrying excess baggage from a past life.

K: How does that manifest?

N: It manifests in not being able to relate to somebody, in attracting not good people around them, their behavioural patterns, not settling, a whole amount of things and once they recognise that, they can let it go, then they can get on with their life at the moment.

K: Do you see that in their energy field? Do you see that manifestation and what does that look like?

N: Yes, that comes in like a secondary person. So, when I see it come in, I as it did this week in Vancouver ...Somebody was on the table and I felt two people, and I said this person just can't settle. They seem to be moving around all the time. And I said it looks a gypsy or tinker, you know, with a cart selling wares and a horse and this was a very beautiful woman. And she told me she can't settle, she's had trouble all her life. And she was forty and she just felt that she was ready to put her head down on a pillow and say, "That's it!" She'd always been moving. And once I'd said that to her, she said , "That makes sense!" Three days later I get a phone call and she said, "You know, I'm now looking for a house to buy because I'm ready." It's that recognising...

K: And so you gave her that recognition that there was a vestige of a past life or past encounter, so what happened to the tinker? Did he just sort of "Phft?"

N: Yes, but what you see, what happened was that he must have gone around driving his little cart and thinking, "God, I'd love to be in a house." So he may have died quickly, been killed, shot, so that some bandits could get his goods. Whatever... So, he never completed his life. So she came in with it. So, she was part of his spirit.

K: That wasn't a past life of hers, was it?

N: Well, yes it was, because she took on the spirit form. And that's a funny thing, because I had another lady this week and she made a decision that she didn't want to have children. I saw a little girl with her and apparently, she had lost a foetus and her sister had a baby and the baby is so much like the woman, who couldn't have children, that she made the decision not to. And I immediately saw the spirit child and this spirit girl running around playing, saying, "isn't it nice I've arrived, I'm back, I'm back!" And her sister told only a few weeks ago "you know Jenice, I really believe that your daughter is my daughter." And that helps that woman now, because whereas she has gone through her life feeling, "I don't feel whole as a woman, I haven't done my child bit, she now feels solid. She's complete; she's this beautiful, juicy lady. She's in bliss.
And I said “Do it!” And he discovered that he’d got prostate cancer. And we talked about if it was treatable, and what six months?” And he said “No, I don’t like doing that. Men don’t like doing that.”

And I said “Do it!” And he discovered that he’d got prostate cancer. And we talked about if it was treatable, and what six months?” And he said “No, I don’t like doing that. Men don’t like doing that.”

And we talked about it and slowly, slowly, we became an energy bubble between us, so that when we were together, we were one and his energy was very beautiful.

He was very open to know more about his spirit, and his spirituality which he already had. We all have it but it takes us time to remember it. And we realised once the doctor had said,”Look it’s too far, it’s in the lymph nodes in here. Then we knew he was going to go and from then on, we had a great friendship and it was really nice and he could say, “Oh, I feel like crap today!” You know, so be it. [I would say] “You’re going to feel like this on many days. Have a good bitch at me, moan at me. Call me. Scream at me.” And when we’d finished, I’d say, “Let’s kick our heels up and have a party!” A party can be, having a scotch and water, which he’s not supposed to have. Who cares?

We encouraged him to prepare his own funeral and what needs to be said and it made it a lot easier. I lost friends with his family, because they didn’t like me being so blunt about his death and what was happening to him. Everybody didn’t want to speak about what was happening to him. It was only his body that was wasting away, and if you speak about it… I see the preparation going on, When I first met him, I may have seen… At that time he was doing quite a lot of energy work, so it was quite a bluey purple colour. Then it faded, and we all change. I mean, since I spoke to you earlier, your colour has changed, too.

It goes from this green, to a very fine soft pink now, and you most probably change again in the next five minutes, so his was… But when it comes to somebody crossing over, it becomes more definite and solid, as if it’s more a protection thing; I don’t know… I’m not quite sure why that is… Your field can go out a foot out or perhaps a little further. It’s like looking at trees. You can look at the leaves on a tree and you can see the outline of the etheric on them. And if it’s dying, it’s a bit denser and this is what’s happening with people. And this man went through various stages of colours like the rainbow; you know and moods. His unhappiness, his sadness, his joy. We all go through this gamut of emotions and colour around us. And, bit by bit, as it gets closer to the day, it becomes softer. You see the heart becomes softer and you see they start to see things and people think that they’re going mad; they’re seeing fairies… No they’ve seen the angels, don’t worry! Its spirits way of preparing them to see that on the other side.

And there are various stages of that. Once you accept that and you can either deny it to them and they don’t make a response. The only thing that responds is colour. If you say “Oh, Don’t be stupid” it goes solid. If you say “Oh, how were they today?” It just goes softer. If you see somebody in a coma, and you speak to him or her, you see the change in the colour. They respond to it and everybody thinks, “Oh, there’s no life in here!” and they’re just waiting for them to die. You know, they hear every word, every word that you have to say. And you see the change in the colour. And the more love you put into that being, the softer it becomes and it makes it much easier for that being to cross-over.

And if the anger is coming from the people that are mad, because they’re leaving them, then the person who is dying feels uncomfortable and more solid in their colour. It also protects them from crossing over. It delays slightly in some way. And in saying that, I don’t altogether believe what I’ve just said, because when the boss is ready to take you, you go. But there is some resistance that goes on there. And that’s what I do see with people. And the main thing is to be there, hold them, touch them, stroke their feet, their hands…. They respond so beautifully… you don’t think they’re doing anything. When you see the colour change the minute you pick their hand up, you know. You know they feel it. And you know once they take that last breath to the next life. I feel that energy still in that hand; still there. It’s very beautiful. It really is an amazing journey to have and to see. And everyone is different... Children are the hardest!..
K: Its almost like the kundalini, it's almost like the flow around the centre…

N: And once somebody crosses over, there's this stillness. The hands become still, as the energy becomes still.

K: Right. So the energy just stops…

N: Stays, and then you feel the energy dissipate and there's no longer anything in that body. There's no colour, there's nothing, only shell. And you know then, that that spirit-soul that was there a nano second ago has left. And sometimes it can leave the room immediately too. And it can change… I felt somebody leave the room icy cold and others it's gone with a warm breeze. Just so beautiful. It is so beautiful.

K: The difference between the icy cold and the warm breeze - is that anything to do with the person's psycho-spiritual state or is it idiosyncratic?

N: I feel that when that happens, the people that go with icy cold somehow have had trauma crossing over… and the softness to me is, "Ahh well, I'm ready and I've gone" and they're so beautiful. Kiddies do that all the time. It's lovely, light, and warm.

K: It would be lovely for children's parents to be with you during that time.

N: That's taken a long time to get to that stage, I have to tell you, because some people do not want you in that room… Some people don't want you near, even weeks beforehand. It's an intrusion and generally we become very selfish, because we want them to die with us, we don't want them to die, so… we interfere, we're frightened, so we interfere. People are terrified of death, you know. And people come to me and say, "I dreamt about death last night and I feel awful." And I say, "Joy! New life! New beginnings! Get out of this depression about death. Hello, it's beautiful! It's magic. Just go with it, accept it." What I feel when I go in those rooms with people and its proven now - the medical profession and staff say, "They're a lot different when you're there." And once you've been there they're OK And not all of the time, but a majority of the time at the funeral, if I don't go, they feel my presence there for some reason… And I'm not putting myself up on a pedestal, but…

K: I know Nick, it's my experience of you…

N: It's that feeling that they know I'm there… And I had a very beautiful one with a guy called Don. He was very beautiful and I spoke to him when he went into hospital that night and he said that he was worried about his wife Jen, who was going to be left. He said that he was worried, that if he died in the house, that she would make the house into a mausoleum and "I don't want that! It's her home"…

N: And I said, "What are you going to do about it, Don?" and he said, "I don't know." (He was very, very sick) The hospital is ringing me today: it was a Sunday, and they rang and said that they wanted him to go in for tests. And he rang me and said, "I'm going, but I'm not going for tests, Nick." And I said, "No, I know why you are going in Don." And he died that night in hospital. And Jen rang me the next day and said, "I'm so bloody, he died whithout me there." I said "Come on girlfriend, wake up to yourself! What would you have done? The room would have been left the same; you would have cried your eyeballs out for twenty-four hours a day for the next ten years… He got out of the way to allow you to have your home." The funny thing now is that lady is now a very, very famous painter. She does a lot of beautiful art work and she travels the world helping other people that are dying. Hello! And that was one of the nicest experiences I've ever had with somebody dying. He changed my life.

K: Did he?

N: Yes, he changed my life. He taught me to be humble - by his graciousness, absolute graciousness. And he was not worried about the beautiful woman, he was leaving. It wasn't him, he said "I'm ready." It was nice, very nice.

K: Love to…

N: I had a man ring me and said, "A friend of ours, right up [North] is very sick and he wants his daughter to become head of this big conglomerate, that he used to be head of" and he said, "Would you speak to him?" So I rang the guy and he said "Who are you?" and I said, "I'm [Nick Jones] and I do a bit of healing work. And he was quite rude to me. His name was Max. And I said "Oh, I'll ring you again, if you like. And he said, "Oh, I don't know about that, mate." I put the phone down and I rang him two nights later and said "How are you doing Max?" And he said, "I don't know what's happened but I quite like you now!" And I said, "Oh!" I said, "How's the daughter?" And he said, "She's got the job!" I said, "Isn't that great!" And I said, "I suppose you're ready to go." And he said, "I don't mind." I'm lying in bed the next morning. I admit like, three o'clock in the morning - and I lived in the country then and I had all of the tree ferns over the window, and I couldn't see much, but I saw all these beautiful fireworks.

And I woke up an eight o'clock and the phone rang and my friend from the north said, "Guess what!" and I said "Yes, Max passed away didn't he." And he said, "How did you know?" and I said, "well, I saw the fireworks outside my window and I knew it was him going." And he said, "You'll never believe this, but he loved fireworks and he created after every [cattle] show, a fireworks show."

K: So, he acknowledged you.

N: So, he let me know he'd gone and the funny thing is that his daughter and his wife said that "Nick is here. We can smell him." And I asked, "what could they smell?" And the daughter uses a men's cologne and it's called Bulgare and I've used it for years and everybody says, "What is that beautiful smell?" So, it's funny how all of these things happen. But his wife said, "I knew that you'd have to be here, after all that you did for him." And that lady was a very ordinary lady; not spiritual. But she knew and that for me says "Thank you for this incredible work that I have done and that I do." and believe, not disbelieve in what the hell do I do. Because I question, I have questioned you know - Am I
hearing this or seeing that, or am I taking myself for a ride? You know and it's spirit sticking it up me and saying, "you're
doing OK. Nick, thank you." I know a woman who had questions. She had a mastectomy and she was so angry that she didn't ask questions, she
developed cancer in the other breast and it's before I went away that time, about nine weeks ago. I said, "Well, what
are you going to do?" I said, "I'm going to do my homework." And she said, "I think my decision will be little bit different." And I said, "Well, you don't have to have the operation." And I then said to her "Go into meditation, clear that cancer
out. You don't have to look at the cancer, you've been told about it. You can't see it you can't feel it. So, if you can't see or feel it why have you got it? So, let's imagine then, that you have got it and you can see it going. All to gain,
nothing to lose!" And I rang the morning that I got home on Wednesday and said, "How are you going?" And she said, "I've still got it and its fine." So, and it's not everybody that will do that of course but we have to look at it and accept the
fact that we're given everything and we must embrace everything.

K: Yes, or we must embrace the possibility of having these things and make the choices, you say.

N: Exactly! And those choices, we don't have either in a way. Because we're given other things to look at and say
"Well, I've got a gut feeling"… It's a choice. But if we're ready to go, we're ready to go. It's OK. I just sometimes think
that chemo and radiotherapy make the journey more arduous, than other choices.

N: Well, what they do is make it sound as if it's all black or white. What the medical profession don't do is they don't
show you what the shades of black, grey to white are. And you know, you have the choice to do all those sections of
grey research and go through and try. You don't have to go to the black. The medical profession can go to the black.

N: You have cancer. Its terminal. They don't say, "look, there's cancer here, however you've got de, de, de"…

N: That's a better yes than a no. Not, "You have cancer and you're going to cark it." And it's an energetic thing.

N: Energetic, "yes" is a real light "yes" Energetic 'no', is what if but… And you know, we make the choice to say "no." Say
"yes" say "Yes." you've got nothing to lose. It's a magical word! Its joy, it's the word of love! It opens the heart. It's
beautiful. And where do you work. If you truly work, you can only work from the heart. If you only work from the head,
you've gone.

K: Yes

N: You have gone. And I know this from Frankfurt, in the world of banking. It's the headquarters of banking in
Germany. I work with bankers and they are so stuck in their head. Now, I have three of four that I've worked with for
four years who are telling me now that their staff actually like them.

K: Yes. How lovely that they've come to you in the first place.

N: Well that was like a chance in a lifetime and you can imagine me. Somebody come and says "I don't know what I'm
here for." I feel like saying “Do you want to go now?” I don't want them here. (Laughter). God, you know! And they
get off the table and they put their arms around you…

K: Great!

N: And I had a man five days ago in Vancouver. And his wife sent him and she came first. He came and he has cancer
and I went to shake his hand and eh, I thought this is going to be agony. Put him on the table, he got up. I gave him a
cuddle and said, "That's for you and that's for your wife." And this person was crying. And his wife tells me the next
day, although he'd fought with his daughter for years, he hung onto her, kissed her, told her how much he loved her, told
her that he was happy to die or to stay and he thought that he would make the decision to stay. I said "Fantastic!" and I
had to ring her two days later and she said "we're in bed cuddling." She said, "it's such a beautiful thing we haven't
done this for years!" And I said, "Well, there you go!" It's magical!

K: You are magical!

N: Thank You

INTERVIEW - PHILLIP

K: Phillip, I'm very interested in those questions that you put to me, the ones...

P: I can't remember now.

K: You started out with death and the impact on the energy body and centres and you went onto the process of death in
the emotional, astral aura and the lower mental bodies and their rays, and the causes and the higher bodies, lower
bodies etc. But what I'd like from you is to tell me about these things in a way that is most comfortable for you.

P: Ok, I think probably...Did you read one of my books or something?

K: Yes. ****, which I think is really interesting.

P: Now, yes, I'm sorry. I've just been flicking through to see how I can rewrite it. I think its due to be re-edited. I don't
know. For a Psychic or a clairvoyant, there are certain things when death is approaching, particularly, that become
apparent. One of them is, if we look at the colours in the aura first, or in the emotional field, which is the one that most
clairvoyants see. Most psychics tend to have a vision of the astral body and they tend to have a vision of the astral aura and
to have a vision of the astral body and they tend to have a vision of the astral aura and the lower mental bodies and their rays, and the causes and the higher bodies, lower bodies etc. But what I'd like from you is to tell me about these things in a way that is most comfortable for you.

P: Ok. I think probably...Did you read one of my books or something?

K: Yes. ****, which I think is really interesting.
width from vermillion right through to a crimson colour. When it is fairly active, the person is reasonably grounded and they stay alive. And they function and so on. What tends to happen as death is approaching - that colour tends to become paler, and the reds become fainter, so that you can see through them. They become more transparent. All the colours are transparent anyway, but they become even more transparent, slightly watery, and if the colour begins to seriously diminish in volume in the aura, if you see it disappearing and thinning. It’s like a butterfly’s wing that has become knocked and the same thing starts to happen in the astral body.

There is a kind of a critical mass point which I’ve never quite been able to work out, but there comes a point, that once that energy of ‘will to be’ (illustrated by the red), fades to a certain point, it suddenly rushes out. So it’s almost as if somebody pulls the plug out more fully, so there is a leak of colour and that is when the higher bodies in the person literally have been told to withdraw. And once that stage is reached, there’s absolutely nothing anyone on the could do to change it. You know, we could put lead weights on the higher bodies, but they would still withdraw, because there is nothing we could do. And that is one of the clearest signals that any clairvoyant will see. The red light in the astral body begins to fade. It also fragments, you get a phenomenon. I was talking to a doctor about this yesterday. You get a phenomenon, which is a bit like confetti. It often happens in the colours, and they break up into little patches, before they completely disappear, like little splotches and dots of colour. And they almost appear to come up the aura, oddly enough away from the bottom, which is where they are placed. And that is a sign that the higher bodies are leaving.

But as I say, at that point, nothing can be done and that is one of the easiest things to see. Another thing that often happens is around the top of the aura - you know that in the space around the crown charka, if you like, the funnel. Charkas can be funnel-like in their form, you know, like a funnel shape; narrower, towards the glands of the body but widening as they move through the aura. Some clairvoyants should put that differently, however, that is the way it appears to me.

And what also is often a very clear sign, (and I’ve known many clairvoyants, who have worked with people in hospital, for example, who see this) is the crown centre almost opens up. It appears bigger and clearer, almost as if someone’s hovered it over and widened it, and that is also a very fair sign that the person is approaching death. In one instance, I spotted it in someone who was walking around the town, here. She didn’t look very well, but she was walking around and it was perfectly obvious that she was not far from death; within weeks, I would have thought, probably days. Whether she knew that or not, I don’t know.

You see this often in a hospice; when I’ve been in to visit people in the local hospice. Oddly enough, as that is happening, in their face they can actually appear slightly well. They often appear fairly buoyant. I think again, I think I mentioned this in one of the books. Because the withdrawal is from bottom to top in a sense. You know what I mean, so that you get a late burst of energy, before it finally leaves. And in most people, the departure if you like, appears to be in that mode.

You do get exceptions to that. It’s almost like the charaks… I believe that the charkas are like inter-dimensional doorways. Because they’re quite a puzzle in a way, because you know we talk about them, as if they are attached to us, and they are in a sense, but there is something more mysterious to them. I know, just recently, from that one model of Stephen Hawkins’s universe, what we thought the universe looked like was actually like a charak. It was in the New Scientist. In fact, I could send you a picture of it. I don’t know if you get it out there.

K: Yes we do. Was it the latest one, Phillip?

P: No it was a while back; actually I’ll check it out and email you. It was an article about Stephen Hawkins and his view of the universe, and they did some diagrams of what the universe looked like, and they were all conical shapes, and to me, they looked like charaks.

But we see it as an appendage in the various bodies, you know. But not to waffle too much, it’s almost like when somebody’s dying, you get this clarity in the crown charka, allowing this point of transition. I think that is why, when people die, this is the tunnel; it’s the consciousness moving through the charak point. In effect and we travel in consciousness through that, and we do that when we sleep and all kinds of things.

Now it would seem to me these days, most people seem to come out that way, and particularly in a slow death. You know in a more tranquil death, or a death in sleep, it seems to me from what I’ve looked at, that is the root out. But there do seem to be exceptions, in some people seem to that. Sometimes, some people's bodies seem to move up from the physical body, near to the heart centre. Now, why people do that I don’t know - I can’t give you any reasonable explanation for it.

Also, I notice and I wasn’t actually present; I was watching a film of euthanasia in Holland. And you know there is quite a bit of acceptance of euthanasia in Holland over the years, even on an official basis. And I was watching it in Germany, and they said to me, ‘Can you see what is happening psychically, during this chaps assisted death?’ And I said, “Yes, I can.” I can tune in, just like a psychic can tune into a photograph and see the aura. So I had a look at it and what surprised me was - I hadn’t anticipated it at all, that when they administered the injection, something started to happen around the solar plexus. It was a bit like a tornado effect. You know, these twisters you suddenly emerging over the fields of Arkansas. It looked a little bit like that, and it was around the solar plexus, and there was a sense of turbulence about it. There was something that was going on that was being managed. It was not as clear as it could have been as a process, and it appeared that all the energies of this person; the higher light of this person kind of evacuated, almost through the solar plexus. And it was a bit odd, because afterwards, I got the impression, that adjustment in that death afterwards may have been a bit more difficult for the higher self of the person. Something else as well was that there was an impression, that there was a slight energy of conflict.

When you’re with someone who dies very peacefully, it is a very peaceful and shaking experience, and there is a wonderful sense of a journey completed, if it’s someone who has lived their life. But in this case it was a very different feeling. It was much more that it was a bit like using a shoe horn in reverse, to get a shoe on. It opened up my view of euthanasia and raised some questions in my mind, and it seemed as if it was not the most perfect solution to death. You know what I mean - apart from any moral issues. I’m trying to look at it from the sort of ‘psychic technology’ point of view, and it just seemed to me that it was not the best way to do it. And it seems almost as if there was a tussle going on between the intentions of the higher nature of the person, and the desires of the personality.

Now I would never condemn someone to an awful death, but it just - I noticed that, and I feel for example, when somebody comes out in an accident, when they are unconscious, its often a solar plexus entry and exit and sometimes when people have - we have a sudden waking in the night, and you can literally feel your solar plexus, sometimes vibrating. And you feel very wobbly and shaky. Those quick exits are made via the solar plexus.
My next door neighbour is an Anaesthetist, and he's at the hospital. And in anaesthetics, sometimes you get a movement through the solar plexus. Rather like you do on sleep, and so it appears to me that assisted death can often promote this movement in the solar plexus. It struck me as being not the highest way to encounter death. Those are a few things, now what do you want to ask me? I go on a bit you see.

K: You can go on all you like, Phillip, it's great. I'm just starting to see energy, but I can feel it and when my aunt died, the energy seemed to be streaming out of her crown and heart, simultaneously. She was very disturbed in later life and I don't know that her death was very peaceful.

P: But it wasn't traumatic though, was it?

K: Well, she died of cancer and she died... It wasn't a quick death but she had a minor tiff with my father about an hour or two prior to that happening. He thought she was unconscious, and made a comment that really disturbed her, and I just wondered what happened around that.

P: That's interesting, that's interesting. There's another side to this as well, which somebody pointed out to me. I can't remember where I heard this, but it makes sense to me. Another psychic, I think, or another healer mentioned that the level of departure from the body is connected with the evolution of the individual as well, and that makes sense to me. I have seen traumatic deaths where nonetheless...

K: Oh, how interesting...

P: And when I saw this chap. Actually as his body - he actually hit this bus and he came off his motorbike, like he'd been fired by a catapult...

K: Gosh!

P: And he went up in the air, almost 'loop the loop' really. He hit a car and bounced off it. But before he hit the car, I was aware of the higher bodies leaving him, before he hit the car; like a parachute coming out of his physical body. It was all very quick, but the energy field looked like a transparent bluey white parachute. Coming onto the edge of the body but coming onto it because he was still alive. So, if you can imagine something around the solar plexus, attached to the physical body, with a chord or a line, and then around it is there's a kind of whitish field, a transparent blue - whitish field. This is what it looked like and that's the thing that I noticed and as that happened (I didn't tune into his astral body, that was the thing that dominated my awareness), but it was like a parachute. It was quite odd. Yes, it looked like a parachute or a balloon that was only partly inflated.

And then what happened, he hit the car and then he bounced off this car. He must have died as he bounced off this car, because as he hit the car, there was an immediate detachment by this sort of bluey, whitishness. And as this happened, the one thing I do remember, is there was a burst of golden light. It was almost as if someone had taken a photograph, and there was a flash, and there was this golden; there was a range of golden light. I'll put it like that. I knew at that point he was dead. So he died before he hit the road. Then he hit the road and you know, they were doing all sorts of things, but whatever they did, it was too late - the guy had left. But what interested me was that what must have been at the point of death, there was this burst of golden light. And golden light I always associate with the soul or the higher self or the spiritual dimension and it was almost as if at that point the soul took over completely and dictated the play of what was happening and the only other thing I remember is that I was also aware of the crown chakra opening out, so although the energy seemed to rip away from the solar plexus, its actual departure was via the crown chakra. And that was a fairly traumatic situation - it all happened in a matter of seconds. And as I talk to you I can actually see it as if it was a video, and his actual exit was via the crown chakra. His higher mental self withdrew via the crown centre. But it was this big balloon thing that I remember and this flash of golden light. At that point there was a severing of the etheric energy from the body and at that point he was dying, you know it was finished.

K: Oh, that is very interesting. That's amazing!

P: It was kind of like a balloon; I'm just trying to visualise it again. You know, you see a hot air balloon.

K: Yes.

P: And as it's coming down, and they start to take the flame out...

K: Yes, wobbly.

P: Yes, it looked a little like that. And it kind of began to pull away, immediately. So, by the time he hit the car, he was either unconscious, or detached to such a point, that there wouldn't have been any real pain. The pain would have come, had the body stayed connected, and he begun to regain consciousness.

As I was struck by lightning, it was as I came into my body, that I felt pain, not as I left it. So, that is what seemed to happen here. Sorry, I'm bouncing around a bit aren't I?

K: No, it's just fine...

P: I'm trying to think of some other things that might be interesting to you. I don't know if this comes within the brief of what you're doing, but you know the business of the dead relative thing, where as people are approaching death, they start to talk about everyone who has died beforehand? That's a very common phenomenon and where their brothers and sisters have been dead for fifteen years and their great aunt or uncle. And I mean, you know, it is very common occurrence, particularly people who are getting on a bit who have lived their life and they have come to the end, and they're dying slowly. And it's usually put down to hallucinations, isn't it. Well they're not at all! Most clairvoyants will
say I'm sure, that in the room they will see projections of those souls. Like, when my mother was dying. When my wife's grandfather was dying, he was about eighty four and died very slowly over a weekend, and I think it was his brother and one or two people and you could see that his crown had become very active. There was extra movement there, and I said to my wife, 'I think he's going to pass, and then he started [talking] about his brother and various other people and you could quite clearly see their presence around the bed.

K: What form did they take, Phillip?

P: They would project themselves how they would be recognised. It seems to me that when mediums pick up on someone after they have died, what 'they see' is a transmission of a form. For example there was a very famous psychic artist. I did work with her once but she has now died. And she noticed that the drawings that she did of people who had passed over, were always of them slightly younger than they were when they died. I mean, for example, one chappie, the image of him was when he was about forty, and he died when he was about sixty. So, you know it's a projection, and they seem to project an image of themselves that the person is going to recognise. But I don't believe that for one minute, that is what they look like anymore. I think that we do become something else, like a ball of light or energy or something, so that we can create any form that we want. It's a bit like the old shape shifters. This is what they do. They project themselves in a way that is recognisable. But you can go through that, and see just a light form of some kind.

And usually, once people come out of their body, the colours of their aura, because they retain their emotional field for some time, the overall impact of that, to look at, is much more metallic, because the mind body or the mental body seems to have in it the same colours of the emotional body, but at a higher frequency. Sort of up a notch. I mean in some books, they talk about octaves sort of up a level. And as you go up a level in the colours, they seem to become - I use the word metallic. You know, shinier, more iridescent. And once the astral body and the mental body have pulled away from the physical body, then that seems to be the case. There is a vibrant almost overwhelming light, which begins to reflect more of the mental side of the person, and I think that's because after death, of course the big adjustment is the mental one, because we've got to understand what we've left behind, reacquaint ourselves with where we are, and go through an evaluation and so on. And so the mental body starts to take over, and you get this sort of metallic glow. That's the only way I can express it really, that appears around the higher bodies. So one of the reasons for that is, that the understanding that we have, is not intellectual in a very concrete sense, but in a much more realised mental thing, where we realise what's going on. When I was struck by lightening, although it caught me by surprise; when I was out of my body, I kind of understood what was going on, and I understood it was not an accident somehow, even though it appeared to be. And I think this is what happens to the mind of the person, when we've passed out of the body, that we start to go into the process of realising the bigger picture; what's going on. And the fear goes, absolutely, after a while. And I think that this sort of mentally glowing, (because you see through the higher bodies), is that process of realisation. And I think that is what the real self is like after death. I think that the real self is more like the aura, than the physical self, you know.

(Change of tape, some frivolity and change of topic.)

K: Now, Phillip, when you've seen a dead person, what do you see after the person has vacated their physical body, for moments, hours or whatever? Is there a sense of energy still...?

P: What an interesting question. Oh, this is fascinating really isn't it? We could write a book on it couldn't we.

K: (Laughs) Yes, you could say that.

P: One of the things that happen is that for a few days, I don't know how many days, as I haven't actually measured it. I had a friend, who was a mortician, at the American Air Base near here, and a mate of mine, he was the mortician. One of the things that will make you laugh is that he noticed that rigor mortis was taking longer and longer to set in, because people were eating so many chemical additives and preservatives in their diet.

K: Very believable!

P: Very believable! It gives him an extra day before he has to go panic. I'll be OK, because all the brandy in my body, I'll probably rot double quick.

What happens is around, he mentioned this because he was quite a sensitive bloke and his wife was mediumistic, and around the body you get a glow; it's a bit like a glow worm. You know, when you see a glow worm in a bush, you get this subtle glow, you know.

K: Yes.

P: You get a subtle bluish glow around the body. And this subtle bluish glow eventually breaks up, a little bit there again in fragments, and the more fragments, the more the body is moving into decomposition. Because any physical form has to have an energy counterpart, so what I think is happening, is that the energy is readjusting to the new physical state, that it's going to support and ultimately all the physical atoms degenerate into dust. So what is happening is that the energy is also fragmenting with the material that it supports. But that is a kind of residual energy that is there to give the matter presence because the real world, as I understand it, is energetic. And the material body is kind of an attracted body, isn't it?

In spiritual terms, the imprint of the soul is in the energy and not in the body. So that would make sense in a way. You've got this residual energy, that appears to disperse into the general energy field, as the body itself starts to fragment and go back into its parts. But it's kind of glow; like a bluey, white glow. And that does vary according to where the person dies. If the energy is high in the earth at that point, then the glow is brighter, and the person actually disperses more slowly. Quite apart from everything else, you do get this kind of glow. And if you look at it, it's like a kind of dust breaking up.
The other thing that I've been aware of on many occasions is that around the body, you suddenly see the equivalent of fairies. I mean they're not fairies, but they're like ... I jokingly say they're the human equivalent of a "Spiritual dung beetle." I once watched a programme on dung beetles and prior to that, I didn't know their importance. What you get are entities around the body.

Wherever there is light and form, there are beings. They're part of the angelic kingdom. They're Undines, Devas, and Nature Spirits. Call them what you like. And these elementals are intelligent forces that help with the transportation of matter from one state to another. And wherever you get anything like that, in a mortuary for example, they're very busy. And you can see these activities across the body, a bit like lots of lights running along channels.

And on one occasion, I remember watching a post mortem. And it was a bit like lots of - it was almost as if the meridians existed. The energy body was still somehow imprinted around the physical body, in a very light energy form. And the break up of the body was taking place according to this pattern. And just as the body builds itself in a particular way, via the meridians, it also breaks itself down that way. And you could see little dots of light, using the meridians as kind of roadways, to break up the structure.

K: Interesting, Gosh!

P: These are a kind of undine or elemental thing you know, that helps to break things down. Because, just as you need them to build things, you need them to recycle. And in effect, the body is being recycled. This is what they're doing.

K: Oh, that is fascinating.

P: Yeah, obviously there are one or two questions? Do we allow the body to rot or do we burn it? And some people say because of impurities, we should burn the body and that is the most sophisticated way. But equally, some traditions believe in just leaving the body to rot in a particular place, don't they. And let the birds eat and so, I don't know. I think what I'll do is that they can chop me in half and they can burn half of it and leave the rest for the crows. Then I've toadied to both options, haven't I really?

K: Yes, I'm still hedging my bets around it.

P: The jury is out around that isn't it?

K: Yes, the jury is certainly out. And the interesting thing that you said, about this preservative thing, with the body taking longer; I'm interested to know what happens to the energy in that, because the Buddhists believe that we are dead when we start to rot; basically; when we start to decompose. When the energy is gone...

P: Well there is still some residual energy, because you cannot have form, where there is no energy. The chair that I'm sitting on has got an energy field. In a way everything is alive in a sense. But I think what they mean is, my interpretation of what the Buddhists are saying there, is that the vitality of the higher bodies have been withdrawn and what you have is a residual energy that belongs to the earth energy field but it still has a form.

For example, if I go to where and old building has been, you still have the residual energy, that takes the shape of the original building, even after hundreds of years. So, there's residual energy. And in most belief systems, esoteric belief systems, there is a notion of a permanent vibration that remains here. For example, they call it the permanent atom, don't they? This aspect of you physically, that never leaves and when you come back, you reengage with it, and regenerate like 'Dr. Who', only a slightly different one.

And I actually subscribe to that. Because another - maybe this isn't particularly relevant, but another teaching that I feel very connected with, is that if we travel through space and time, which we can do, we do it in consciousness, rather than in a vehicle. And the reason is that we exist in every point in place and time anyway. There's a kind of little atom there and we can connect with that, and be in that place because we have a little foothold there.

And I think that even when the body is finally degenerated, there's a vibrational presence in the energy field of that individual, and it remains somehow.

K: Yes, and I went to the ISSSEEM conference in the USA about a month ago, and there were some physicist's who had taken photos of these imprints, if you like. They had taken photos of their famous battle fields, and so there was a photo taken at Gettysburg, or somewhere like that, and there was the hat of this soldier and his torso. I think it was above that area, where there was a really clear sky, and two dish-like shapes of flying saucers were seen on the photo. It was amazing!

P: Good graciousness me!

K: These guys have been doing this research on it. They were both physicists, as I recall.

P: Yes, most interesting, most interesting. Well almost onto eternity. Where I live here in Glastonbury, there's an ancient site - an Abbey, and it's on a very strong leyline, you know. It's purported to be the strongest leyline on the planet, it runs through Glastonbury, and it comes right through the Abbey here. And this was the most important Abbey in Britain, and part of Europe up until the fourteen hundreds. And most of it is demolished now. But when you walk around there, the energy is astounding, and I can actually see quite clearly what the abbey looked like when it stood there, because in the ether, the imprint is still there, and it still exists, and this is why some monks who were there, and this is why people are always seeing Monks around the town.

I can't go into a restaurant and have a quite meal without being pestered by these entities, which are still drawn back, part of them is still drawn back to here and they can't materialise themselves but there is still an imprint of them here. It's like putting on an old glove or something and you can put it on, and energise it somehow. Not fully, but a little bit. Enough to be present for yourself, to reveal again where you were to someone, who is very sensitive; to be conscious that you're energising that little bit of yourself again.

So we leave an imprint and I mean its like, this is how psychometry works. You know, when a psychic reads an object. It's because the object obtains an imprint of anything it has contact with. And the more contact it has, the more imprint it's got in a more subtle, energetic way. This is where all the memories are contained.
Did you ever see “The Stone Tapes” by Nigel Kneale? It was on the BBC. It was interesting because it was to do with this idea. They went to this old building and tried to tap into the memory of the stones and in fact they stirred up all sorts of things. It went all sort of a bit esoteric, but it had Michael Bryant in it and Jane Asher. It’s quite a good programme and it was in these stones in this old place and the theory was that they retained everything that had gone on before, like an historical document. Well, I think that that is absolutely true.

And people do this as well. And when the body is dying or degenerating, you see this glow. But when you look at it closely, it like lots of little points of light joined together, and bits of them appearing to break off almost, and dissipate into the common ether, if you like.

K: Now Phillip, what happens then, for instance, after cremation? Obviously there would still be some energetic experience around the remains of the person, in those funny little rocky things that you get. Is there energy that comes from the urns of those remains … in same way that the chair and the table and the filing table that I’m leaning on at the moment, have an energetic expression. What changes when people transmute in that way?

P: You mean after death?

K: After death, when people have the choice of either being buried and rotting, with a chance for a biological and an energetic change to occur slowly, or when the process is sped up, when someone is cremated. Is there still a sense of the energy of that person being around in the urn full of ‘ashes’, as they call them?

P: Yes, because they have a connection with it. For an example, if somebody gave me an urn with ashes that I’d known, not only is there an energetic connection with those ashes, but there is an emotional one. And this is important because it’s often the emotional vibration that is significant here. The energy does ultimately, what it is told. The energy of our bodies is basically a servant of the higher self, and it tries to do what the higher self wants it to do. But the great interferer is the emotional body, which develops attachments therefore it’s the emotional body that we have to wrestle with – the astral body, if you like, when we first die, because there is a bit of us that does not want to die. Our belief system is such that we are not sure what’s going to happen, if anything at all. And it’s only when we come to, (in a higher state) that we come to recognise, “Well, this is a damn side better than what I’ve left behind. What was I worried about?”

But, there is still this attachment to what we have left behind, because of the emotional body’s attachment to the emotional energy that these things have, and you can only resonate with something that is at the same level as you. But because we have an emotional field, there is an emotional field around the urn, and around the ashes. Do you see?

There is an emotional identity. So, somehow we can attach ourselves to that, and relate to it. And this is why I think that hauntings occur, or where there are strong presences. One of the reasons I think, is because the entity may have such a strong attachment, that it had a great difficulty relinquishing that connection. And I went to a haunting, so called, the other day, in the town here, where this young teacher and her husband were having experiences. And it was the old boy, who used to live there. And he died there, and they had been told all sorts of spooky stuff, that he had come back because he didn’t like what they had done to the house, which was not true. But he’d lived all his life and died there, and he still had a strong emotional attachment to the energetic energy in that house, and so he was coming back to them, to visit. And once we’d had a nice chat to him; it was all jolly nice, and everyone was happy. He just pops in every now and again to see if everything is OK. And it was his emotional body, still very attached, to the emotional energy, that is still in the house. So, the urn for example. I mean a good example of this is - I don’t know if you get this in Australia; you’re a much younger country, but in England, you get the old village pub, and there would be the chair in the corner, where the colonel would have sat every night with his pint of Guinness, and you wouldn’t sit in his chair, and if you did, you felt that he was there anyway. And it’s a bit like Grandad’s chair. If you sit in it, you can still feel Grandad. There still seems to be for a long time, because of the way energy exchanges, from one form to another, there still seem to be attached to the chair, some energy which was in the energy body who sat on it, there is this continuous process of exchange, and also some emotional vibration, from the emotional body of the person who sat on it.

K: We do have that in the sense that obviously we’ve had our massacres of the indigenous people etc etc. And there are places where you can feel the trauma there. And there are certain sites, where the same thing occurs on mountains etc., where I guess there have been not only rituals that were held, but there are the spirits of either the male or the female people from a particular tribe, and its not as familiar to us culturally, but it’s still there.

P: I believe that the planet is like an enormous filing system, and it has all the layers, like the physical layer, the energetic layer, the emotional layer and the mental layer. It has all of these. The earth has all of these layers and levels and everything in it does, and so it is possible for us to relate to any of them, and the imprints made in these fields remain. They remain forever, I think. But the actual individualisation form that is constituted by these substances changes and develops over time.

I mean for example, everywhere you go; you leave a bit of yourself behind. I call it psychic dandruff. Everywhere we go we leave a bit of ourselves. And this is why from a spiritual point of view, I suppose, we should always leave a good vibration around. You know, in spiritual circles, we shouldn’t pollute through our thoughts and our actions. Well, that is the greatest pollution of all. And in a sense, it’s true. And, I think that I mean this individual chair that I’m sitting on at this time, has an emotional field. And if I was always in a bad mood when I was sitting on it, no one would like to sit on it after me, because I would leave that imprint in that emotional field.

But the thing to remember is that everything that is real physically is in a process of continual exchange. So my energy body is continually absorbing energy and returning energy, anyway with the energy field of the planet. And the same is true of any object. So, there is a continuous process of exchange going on. And this is why when you move from one part of the world to another, something in you changes, because you’re then drawing your energy from a different area. I’m fascinated by accents. You know, voice accents and it always amazes me that you can get someone who has lived in a place for years, and suddenly they go somewhere else, and their voice changes. And you think now, why is that? And I think that it is something to do with the energy of the place.

K: I just thought they had a musical ear and they just pick up the accent.

P: Well, they have a musical ear, but what is it? Music works through the ether anyway. Sound needs ether to move, and is carried by the ether, and so, I’m just fascinated by that.
And in death, you see this exchange becoming much more of a one way ticket, with the soul saying to the energy body, “I don’t need you anymore. This incarnation is finished. You can therefore disperse.” And once it disperses its no longer magnetic because the energy body is highly magnetic and as it loses its magnetism, its attraction, so the physical body breaks up with it. See what I mean?

K: Yes, that’s great.

P: It is a bit of a puzzle to me, and I’ve never quite worked this out. I’ve done a bit of work on people with amputations, like diabetics and what is amazing, is that the energetic limb remains in place. So if I have my leg chopped off tomorrow, I’ll still have an energetic leg and this is why these people still have what they call phantom pain. There is a syndrome isn’t there, where people get pains in limbs that they no longer have. And I think it’s very real. I think the energy body is still very active at that circuit.

K: I agree with you. I’m a Physio and a Feldenkrais Practitioner, and I worked with a woman who lost the whole of her arm. She had TB of the bone, and her phantom limb was stuck in a particular position with her elbow bent, and her hand was in a particular position and was really cramping, and she couldn’t stand it. I just worked with the energy field and…

P: You must work with the energy that is there, even if the limbs not there.

K: Yes, I did, and she’s fine. She’s great now.

P: I know a reflexologist who does both feet of a guy who only has one foot.

K: Yes, I’d run with that.

P: And he works with both feet and when I used to work with this guy, I would deliberately come and caress the energy where the leg was, because the guy used to complain about pains in it. And he’d lost his leg some two or three years prior, so it wasn’t a recent thing. So, the information in the matrix if you like, remains for some time after the amputation. This is why I believe that the reason that we don’t regenerate limbs is more to do with our belief system, rather than an actual biological constraint. Because I believe that we could regenerate anything, and it’s almost been proven now with sonic stuff, you know when they can regenerate nerve tissue. So, I think that there will come a time that instead of transplants, we will just regenerate something

K: Yes, I agree.

P: My wife is looking forward to that because instead of some seedy old bloke, she could have a very young Paul Newman look alike, you know, and I could regenerate into that.

K: You’ve got a wonderful Paul Newman type voice, Phillip.

P: Yes, but I can’t do the accent I’m afraid. But she lives in hope, she lives in hope. I’ll give it a go. I’m not that old yet. Maybe by that time, if I’m still around, we might have hacked it then, but there you go.

K: Oh, that’s lovely! One more question. I’m interested in your comments about cities having energy fields and the colours etc. I wonder what your feelings about Lebanon now that it has been turned into rubble. I assume its mutable, this energy that’s when the collective consciousness of the people in the city, as well as life forms in the city itself change in response to what’s happening.

P: You see that in London. But there is another side to that actually, that people are attracted to a location, by the energy that it has. So there are two sides to this. As I came to live in Suffolk, which is a lovely country area. I’m a Cockney from London, you know. Yes, I brought with me my cockney- ness. And that energy and that light and so on. But equally, I was attracted to the realness of where I live, and I’m influenced by that too, so it’s kind of a mutuality thing occurs. And, whereas this place has changed since people like me have moved in, we’ve changed in keeping with its overall quality. The dominant vibration is the planetary one, and not the human one.

K: Yes, fine, that’s fair enough.

P: For example, if I came to live where you live, within no time at all I would be speaking like Bob Hawke and you know...

K: Heaven forbid!

P: I’d become Australian in about two weeks. You know, I’d be surfing and all the rest of it, and that would be a miracle, believe me. You know, there’s a mutuality involved, because there’s an exchange, and the energy… if cities - I mean; I haven’t been to Frankfurt for a while, but I go to Munich regularly and the emotional energy of the city is very much how it was fifteen years ago. But it’s changed a little bit, and the reason it’s changed a little bit, is that there are more Polish people there now. You have more other Europeans living there now, because of the European Union. You know, we all move around a bit more. So there has been a change, but they have also been influenced by Munich, so I think that the change is organic. It’s a lovely organic process; a bit like a recipe, you know. I have to go now but go through this lot, and if you think of some other questions or else we can fix up another call.

K: I’ll transcribe this and then send it to you. It’s been fabulous, Phillip. Thank you very much for your time.

P: That’s all right, that’s OK and I hope it all goes well.
One of the things with this particular lady was that she had had a consistently compromised sacral and solar plexus. Her and it was a period of over 12 months, between when she got the diagnosis of the secondary and when she died. Probably I started noticing energetic changes after eight weeks before her death. She had things she wanted to do... She wanted to change her relationship with her sister, so that was probably one of the reasons that she stayed around. But during those 8 weeks anything to me was the most fascinating things actually changed. So, we have in Healing Touch an energy technique called 'charka spread', specifically for transitions. So, it was interesting that I started doing ‘charka spread’ round about - it was around about the seven or eight weeks before she died. I didn’t do it every visit. I saw her approximately twice a week up until about three weeks before she died and then I came three times a week to help with the pain management.

But anyway, I’m going the long way round but I tend to need to do this when I’m talking about the work that I do. You know, I remember going in one day and she had that smell about her, that smell of somebody that is not long for this world and I thought, “that’s interesting!” Anyway, as I use the pendulum as well as my hands, I put into the energy field around the bottom of her feet and nothing happened. And she was always a person who was very grounded, so that sort of gave me a bit of a surprise. So, and that pattern actually continued, but it started to come up her body. But that time when visited, I put the pendulum below her feet and it was actually still and I actually put my hands in and it was actually like... you know when you’re expecting to feel something and you know when a balloon is blown up and it just keeps going. Well, that’s like when I put my hand in, it was drawing me in, which was interesting. And what I noticed was this pattern, that each time that I went to see her or every second time, the energy was further up the body. And, the second time I started asking questions like, “do I need to work in that area.” But I got the answer that I still needed to work in that area even though, no, there wasn’t a lot happening energetically. Of course I then started reading, thinking that there was something that I was missing. But, this is a pattern that energy workers have confirmed, that actually, the energy starts to move up the body. So that, with this particular lady (I won’t theorise, I’ll get back to what happened).

It was interesting that even though I was spreading the energy, in the areas that I wasn’t feeling a lot of energy, it still relieved her pain. So, I thought that that was a really interesting thing. It still relieved her pain even in areas where I couldn’t feel energy. And whether that was because of the aura, but then I get into these philosophical discussions, I’ll keep with exactly what happened.

(Laughter.) ...
Looking at the way he wrote the book and the things that he’d said, I thought well, having a little hop and particularly out of the crown, just to sort of have a little sense of it. And since that time, I’ve worked with another half dozen people, who I have been actively involved in their process and I don’t see any particular pattern. I mean, I see a pattern in that the energy does come up the body. That’s a pattern I do see. Obviously, as I get more visuals, I get more of a sense of what’s happening and I get more sense of where people want to go energetically with this process. That’s one of the things, as an energy healer that I think is really important to do. I noticed as a nurse, when I was working in oncology, I wanted everyone to have a ‘good death’. And I’d get really distressed - like I remember that there was one man who had 98% blasts and he still had chemo going in him and I just got so distressed. I thought, “He is going to bleed to death.” You know, and the experience now of knowing what’s happening energetically for the person, of course, it’s their process, it’s not my process. So, what I’d call a ‘good death’ with that lady that I talked about because it was a gentle process. Then, I thought that was a good death. The people that I’ve been involved with since - where I’ve been involved with their whole process since, of course - it’s not the same - that’s where I don’t see a pattern. Just because you’re working with an energy healer, during that process, then that doesn’t mean that it’s going to make it any easier or any harder, if that makes any sense.

There was one husband, who was sort of dragged kicking and screaming into this whole thing, in that his wife was very interested in energy healing and one of daughters was also very interested in energy healing and the other daughter thought it was all Satan’s work. So, this poor husband was caught in the middle of all this, and he eventually just wrote everyone a letter saying that what his wife wanted was what was going to happen, regardless of anyone’s beliefs. And to me, that was an energetic message to everybody involved. So, I thought that that was wonderful!

So, you asked me to tell you about one...

K: Just before you finish with that first person, did you see her when she died? When was your final experience with her?

R: OK, so, I did the last session probably with her - I’m trying to think of who called me. I think it might have been her niece. A niece had called me and asked me to come, and I was probably around about 10.30pm, which was late for me. We Capricorns are into bed with bed with the owls. So I did a ‘chakra spread’… She was a little bit restless, so I think that the family were concerned that she had some pain. That wasn’t my sense of it at all, that it was purely the physicality, you know. So the chakra spread was in three rounds, so you spread each chakra very gently and really what that is doing of course is just getting rid of any excess stuff, so people can do what they need to do. And it was interesting, because it was on the second round, that I sort of looked up and there was sort of like these little wisps and I thought, “Oh!” And I think that she just popped out for a little look see, then popped back in again. I saw the wisp go this way and the wisp go back again.

So I thought that was fascinating. Anyway, so I did the third round and it was interesting. It was like, even though she was seemingly unconsciousness, it was like she was witnessing. It was like she was a witness to what was happening to her physical body and my sense was there wasn’t any physical pain. There was just this getting used to what that is doing of course is just getting rid of any excess stuff, so people can do what they need to do. And it was interesting, because it was on the second round, that I sort of looked up and there was sort of like these little wisps and I thought, “Oh!” And I think that she just popped out for a little look see, then popped back in again. I saw the wisp go this way and the wisp go back again. But also something that I picked up straight away was his resistance to even having the diagnosis, was why he didn’t seek help when he did. It was like he wasn’t a drinker and if you’re not a drinker, then you don’t have any problems with your liver, other than the huge amount of malarial drugs when he was in New Guinea; you know, the whole stuff, that really helps livers and he was a smoker as well.

So why was I talking about him? Oh, yes, because I was there with him when he died. And, it was interesting, because he was totally different to the other lady, in the fact that the energy did come up. But it did come in first, so the energy was quite tight. Anyway because of his resistance, the energy was quite tight, but it actually came in, except for around the liver area, where there was a great spike, because of the amount of pain that he had, initially. It was interesting that the energy field started to come in. I was a little bit concerned about that from the point of view of his pain, because you know what that was doing. It was really pressing on that spike area. So, I used a number of different techniques... I didn’t work with ‘chakra spread’. I did quite a number of different techniques, just to balance, so that his field needed to do whatever it needed to do. And it was interesting that as the pain started to reduce, so the field started to relax little bit.

So I thought, “Oh this is interesting. Maybe what I’m seeing is just resistance.” I saw him once a week in the beginning I wanted to see him more often just to get on top of this pain thing but...
He said that he felt better after I'd been and that the reduction in pain lasted about 48 hours. It would build up to a crescendo again and I'd come again after it had built up to a crescendo. I think energetically the spike started to soften. So, how I feel a spike its quite often like fibreglass, it has a sense of hard sharpness of fibreglass and I remember particularly in this case because I thought it must be particularly severe.

K: And you feel those spikes, Rebecca, in response to a pain situation of some sort.

R: Some say if you've got somebody who's fallen over or whatever, then quite often it will take a little while to come out. Or if there is a long term thing like migraine, the spike sort of shoots out through the field. But anyway, one of the things that I noticed was over about three weeks, was that the field seemed relaxed, and it didn't seem so ‘porcupiney’; like there are porcupine spikes and there are big spikes that are pain spikes. You know, we all know porcupines. Most of us have them in our lives somewhere.

K: Yes, Absolutely!

R: (Laughs) Anyway, I noticed that the edge started to soften, so I checked out with him what he was doing medication wise, to see if he had any changes, and it was interesting because he said, "Well, seeing that I'm seeing you, I'm cutting down on the medications.” His daughter was a nurse, so I told her if he were to have long term relief to have a little chat with the palliative care nurses. Anyway, getting back to the field, oh well, things were starting to soften a bit, but the two areas that were most compromised were the solar plexus, and that makes perfect sense, really and the circle we are looking at the chakra being open but if it does anything else that's what I call compromise. So, they weren't still, which is often like, you know when I was talking about that lady, with the energy under her feet? It was just little chat with the palliative care nurses. Anyway, getting back to the field, oh well, things were starting to soften a bit, but the two areas that were most compromised were the solar plexus, and that makes perfect sense, really and the heart. So, there was nothing much happening in the sacral area. I mean it was fine... The energy start to come up but these areas just maintained their compromise.

K: Now when you say compromise, what did they feel like?

R: well, if, oh well, I don't have a pendulum; I will have to do the pendulum thing next time. if the pendulum is going in a circle we are looking at the chakra being open but if it does anything else that's what I call compromise. So, they weren't still, which is often like, you know when I was talking about that lady, with the energy under her feet? It was just still, there was nothing, no reaction at all. And different theorists have different ideas about what each of those things mean. You know for me, it's like, it's not going, it's not in its best state, in its optimum state. So, as I started working a little bit closer to his body... so in the beginning, I tended to work out a little bit. I did hands on his legs, but the trunk of his body, I felt that I needed to keep my hands off, but started to work little bit closer and closer and closer to his body and in areas where his energy field had disappeared, it came back again. Actually, the word resistance came up on the beginning, but I'm actually thinking about the word 'guarding' now. You know, it's like guarding, and that was the sense I got up here and here was the guarding.

K: So, when you started to move in, to work closer to his body that's when...

R: Yeah, When I started to move in he started to relax. I thought I could get a little bit closer, and I was working on this part of his body [mid torso]. It was interesting because I actually saw his charts for the first time in ages... I was sorting through charts ... that are why he came to mind... When I was working on this part of his body, I'd actually have my hands out, about two feet away from his body and when he'd relax I'd start to move them in again and that's when I got a really strong sense of "choo" (some hand signal) I got a really strong sense of tightening and defending, and I started asking just a few gentle little questions, like ‘How do you feel having a woman who you hardly know, working in your energy field?’ And of course that was a mistake to say ‘energy field’... And when I was looking at those notes, I thought 'what a twerp!'...but anyway, that's what I said to him... And of course he said, "Well, you're alright, you're OK. You're not after me!” that sort of stuff and I thought OK., I had better leave this one alone.

K: Where was he? Hospice? Home?

R: He was at home. He wasn't going near those “F'n” hospitals! You know the style... (Laughs) So, I'm pretty sure that he did have palliative care nurses coming to give him his medication. He was fine still, with showering. I don't think he ever had help with showers or anything of that sort of stuff. I guess that what it did was that it gave him something to think about. You know it's a bit like those people, who you see across the pub and you think 'if that person comes near me, it will really annoy me," and he was very strong minded so he knew who he did want and who he didn’t want near him.
I said "That's what I mean by the energy, so it's like two people coming together and meeting and being quite close that's what I mean by the energy. You know when I've got my hand in your field, it's quite close". Anyway it gave him something to think about.
Anyway, when I came back next time he said "you know that stuff you said? Actually, I don't feel really comfortable with your not with me but with a woman caring for me.

K: Mmn

R: Anyway, so I thought what do I do with these charts? It was real scary stuff. Anyway, that is beside the point and I know that they will be safe because there's an angel sitting on them... The ‘document angel’. Anyway, so I said, well so I talked about trying to see things in a different way I said that I wasn’t caring for him per say.. What we were doing was entering into a sort of a business relationship... partnership...

You know that he was paying me, so that I could help with my energy to help with the pain and really what he and I were looking for was to help his process with his illness, whatever the outcome might be. And I think what really did it for him was the fact that I said "whatever the outcome might be.” because he was assuming that everyone was assuming that he was going to die... So, I thought that that was really interesting and after that, the field started to relax. I mean, I still didn’t come into this close area for a while, because I thought he just needs some space. And there was a concern that being a fairly old fashioned man, who been in the second world war and stuff, where he'd never had women folk taking care of him. I mean he'd never been injured...he'd had malaria but he'd never been injured, which I thought was interesting. And this was the first time he’d ever been sick in his life.
So again, I did suggest that... he wasn’t a religious man but his wife was, so I did suggest that he call the priest who might come and have a chat with him. You know, ‘man to man’... the stuff about getting sick and how you know you’re not weak because you get sick and that sort of stuff.

So, that was a very interesting lesson for me in the whole thing of the energy field responding to... well, to see not weak because you get sick and that sort of stuff. You know, ‘man to man’... the stuff about getting sick and how you know you’re... You know the nasty stuff. So, I think that he thought, “I’m out of here!”

He was still fairly robust, in that he occasionally needed help to go to the toilet and he sort of had showers in bed, but I don’t think that he ever used any type of excretory thing in bed. I think that he always somehow got to the toilet. I know, it’s amazing! It’s that absolute determination and... Yeah, so I started doing the ‘chakra spread’ and I think it was about two weeks before he died and I remember once he opened one eye and he looked at me and he said “Mmm...” I said, “Have you got some experience, that you want to tell me about?” And he said, “well it’s like somebody’s taking (and he wasn’t a person who talked a lot but) it’s like somebody’s taking some water, somehow and cleaning” and I thought, “Isn’t that interesting!” You know, ‘the gritty bits’. And when he said that, it was like little shell gritty bits; like when you have to get the sand out of your hair, so his defences had come down enough to be able to say that and know that I wouldn’t think he was potty, and it was interesting, because he said each time I came, “Are you going to do that water one again?”

So, again the energy did actually come up the body and it did stop around the solar plexus and, after reading that book, I thought I hope he doesn’t do that! You know... I think that it would be horrible wandering around looking for someone to help you out, but anyway, it started to move and his relationship, because he had softened a bit; his relationship particularly with this one daughter. Because they were so alike, I can imagine the relationship... It was like, you know, I know you are asking about energy but, one day I saw them and they were both looking at each other with soft eyes. And I thought, “Yeah, there is a change here.”

K: Well, I am interested in those sorts of things because it’s all...

R: It’s all part of the process... It’s very difficult, because what was changing energetically for them, as they felt more at ease with each other. I think looking at any transition process, whether it be death or and process for people to be able to soften their stance or their feelings, or their defences, then the process becomes a little easier for them. So, that was the thing.

So, once he got past that and the guarding. The guarding was mainly here (gesturing to the solar plexus area). As that eased, it was like the heart chakra was... I’m just thinking... I think that his heart chakra was always open, because he was a kind man. But again, it was like a relaxation of the petals, instead of being like so, they’d relaxed out so, I suppose when he was having his ‘chakra spread baths’... when the chakra was actually being bathed with that relaxation, it was possible to get any ‘gritty bits’ out from around the petals of the chakra. So, and I was going to say about the experience when he actually died... His wife... I think I was going for a regular session and his wife called and asked me to come a bit earlier, so I came and he was... it was funny, it wasn’t quite a cheyne stokes. He wasn’t quite conscious and he wasn’t quite unconsciousness. It was just that twilight zone. Anyway, I told him who I was and what I was doing and that I would be doing the ‘chakra spread’, and was there anything else he wanted to do, or say? And it didn’t have to be in words and it was also fine to let go, because that was the thing.

When I walked in there it was... “I have to breathe it’s my job to breathe!” Anyway, as I did the chakra spread and I came into the heart chakra and I came in really, really, close and spread it once and then twice and then on the third time (this was the first round) he took this great big deep breath and one side of his face smiled and he died.

K: Oh, how wonderful!

R: Mmmm... so it was like, I feel confident enough to let go now.

K: And did you feel what happened when he died?

R: Yes, I feel for him, it was more around the heart. It was sideways... Yeah I’m getting goosy on this side and latter on, I actually saw, because I was not so involved in the process. Because I suppose that I was so involved in the process and I was wondering, should I keep going and I asked myself, “should I keep going?” And I got the answer “yes.” I needed to do at least one full round and then decide whether I wanted to do the rest, because I was looking out of the corner of my eye and I just had a feeling of stardust, very fine stardust coming out of the right side and I just saw it out of the corner of my eye... yeah... So, because I decided to keep going, because I think that it helped the family.

Well, that was my major question to myself. “Do I need to keep going?” And I got the answer, “Yes.” I don’t know if the answer came from here or up there but it was, “You need to finish the process.” He started the process of letting go so it was up to me to help him to finish it.

R: Enough??

K: That great...Thanks, Rebecca.
INTERVIEW – REBECCA (2)

K: I don’t know, you’re the tour guide. There’s nowhere that I want to go other than to stay within the framework of your experiences as a healer, with people who are dying and who have died. So, whatever comes from that would be great.

R: OK. Umm… So, with people who have died, we’re talking about some sort of experience that I’ve had with people who have died?

K: Well, what I’m most interested in are the energetic changes that occur during the peri-mortal process… before, during and after death. Because, I’m really keen to explore the notion that dying is a longer process than we think and that physiological process is just the beginning, and that there is transference of consciousness, which we call the spirit or the soul… And so forth…

R: And I think that it’s really interesting that Rosalyn Bruyere talks about the fact that death itself is really a process within our whole conscious experience, like we are before life, we are before birth, and we are before death, we are after death. It’s like that consciousness process and I think that one person that I worked with, who was very aware of this process, didn’t have a lot of those fears, anxieties and questions. That was a different experience, because I didn’t need to use my energy to support their anxiety and to put… I didn’t have to put boundaries around what I said or how I was. Not that I would ever tell untruths, but…

K: You have to pace people…

R: Yes, that’s right. Yes, so… With this person, Joan, the death was sudden. It was within a period of I think that the person had a diagnosis and they were dead in three months. So it was a fairly rapid progress of this disease process and towards death. And right from the very beginning, they had embraced the holistic experience and decided that there were certain things that had to be done and they weren’t practical hands-on things, they were more like releasing any angst; sorting out disordered relationships, was the way she put it and to have her chakras as clear as she could for the journey. Because she realised that when there are blockages in the chakras, it makes the death process more uncomfortable for people.

This was her take on it. I don’t know that, that is so, but the work that she did on it with me as her healing touch person, she had a spiritual mentor, and she was doing some chi gong, so she was doing the physical healing and a whole lot of meditation and prayer as well. So that process was quite different for me. I wasn’t… I didn’t see her… I think it was uncomfortable for people.

R: Yes, so when I looked,… so we’re standing at the end of the table, at her feet. I could actually see it over the whole body and then I think that last time again with the pendulum. Even though I could see that smokey haze, it was up around from the root upwards, that the pendulum was still around those lower chakras. And it was actually when I read that when we were talking about that, that I remembered the experience. And I suppose the other thing that I really was very aware of with her was the presence of other beings in the room. Very much around her head. Being very much a thinking person, I think she needed support to be in the process instead of thinking what she needed to do to get herself clear.

K: And how did they manifest, those beings?

R: Well it was interesting. I can’t remember, exactly. And I can’t remember exactly, if that was the first time that I saw angel wings or not, but it was around about that time. So I saw the outline, I didn’t see his face or any colours, except for the white tips of the wings. There were two… in each corner, very large with these big wings and the beings in the centre, I couldn’t say if they had wings or not.

K: How amazing!

R: And the other thing too is that I started to see so much more, so it was such a gift that this woman gave me. There was more of a golden edge around beings when they are in that situation. And more it was like that support and holding… that was the sense I had of it. So… rather mind blowing, really.

K: Wonderful, a milestone in your journey, heh?

R: Yeah, and I think that one of the things and there have been so many. And one of the things that I have been getting pushes about is to write this stuff down because…
R: Yes, so with her there weren't boundaries around and also with what I did either. And also I would do healing touch technique, and we do have an out, because we have a thing called spiritual surgery, which is one of Brennan's techniques. So, we do have an out, when we do intuitive techniques. But I'd say most of the times say 60-70% of the time, my hands were doing something, that I didn't understand.

K: What sort of things?

R: Well, like there was once when I started off and I thought I'd do something and my hands were stuck and I'm trying to think where they were... and my hands were going here... so heart and sacral chakras, and what happens with those is that my hands get stick and then I feel as if my hands have gone into the body. Then the energy of the guides comes through my hands, as they do the work that needs to be done. And then my hands... I mean that I had control, but I didn't have control. I would have had to really force them to change them, so but my hand on the heart stayed there, my hand on the sacral raised up and started doing like these spirals over both the sacral and the heart chakras and I don't know what that was about...

K: Mmm

R: But it was almost like, quite often, I'll just go with the flow, but this was like what you actually need to be doing, and you just do it and it would have been hard not to do it.

K: Mmm

R: And the thing that I wondered, because as I'm told by spiritual guides] a lot of the time to mind my own business, because I want to know what's going on. [It's] like "Mind your own business because you're... we're doing the work you're just the facilitator". Ah, I wanted to check out and see if the beings had anything to do with this. But their job wasn't that, their job was in supporting her with whatever her process was. That was interesting, so whether these were mine or extra... So I suppose what I was going to say was that working with someone who was in that space I think, wasn't that, their job was in supporting her with whatever her process was. That was interesting, so whether these were mine or extra... So I suppose what I was going to say was that working with someone who was in that space I think, allowed me that freedom.

K: Yes...

R: To go with the flow a lot more than because of the family, because of the person, or because of the hospital or whatever. I'd need to stick to Healing Touch techniques per say. Not that things don't happen within Healing Touch techniques that you know I've said to them, 'Now look guys, you're going to have to do it through whatever I'm doing, so, that was quite a different experience working with her. I suppose there was one other, that I really wanted to talk about that at the time was actually a little bit difficult and I'm going right back now, I'm going right back to very early days.

My business partner, Helen and I were asked to see this lady, who was dying at a hospital and this was the first one ever and you can imagine, we galloped on and got on our horses and we raced off to that hospital and of course this poor lady... Mary was not old she was between fifty eight and sixty. She was quite a chokey! And she was picking the bed clothes and was very restless and that was why we were called in because of her restlessness. And you know we were sort of looking at each other and looking very pleased with ourselves and I put my hand in her energy and she got so agitated and she just could not tolerate and so I stepped outside of the field again. And I thought "Is this about my ego or what?"

And it actually wasn't. It was that my energy needed to be turned down and this is one of my teacher's things and I remember that in 1993 or so she had said to us that "When you're working with the dying, you need to turn your energy down, turn your energy down" and of course I think then that my energy came out with a lot more force then, than it does now, cause I think there are a lot more filters... My energy is finer, so there are a lot more filters on it now.

So, because then it was. I wasn't seeing a great deal then but what I did see was that her young grandson, Stephen, was there. He was about ten. And it was like this glow coming from him, and I thought, "OK". So, what I suggested to Helen was that we actually taught him how to do some stuff and what we taught him to do, because we knew that her energy needed to come back, because it was so agitated. So, we taught him how to do 'Brazilian Toe Massage'.

K: 'Brazilian toe massage'?

It's really like a holding. It's holding the toes very gently with your fingers. And you start with the middle toe and then work down to the little toe and then come back to the second toe and the big toe last. And of course, that works on the meridians. Anyway, so that was very easy for him to learn. And we just vocally guided him through it, really. And our energy supported him and she started to settle. Just amazing it was just like, this agitated energy and her head and around her heart and it was like this. I felt this heaviness around her heart and I suppose leaving this grandson. Anyway, it was like this flow. I just had a sense it was like honey and it was like this golden honey coming through her field and settling all of that down and going all the way down. And I did actually see it flow into his hands and just at that moment because I started crying of course. And just at that moment, her daughter put her hand over her heart and it was It was really... Oh, heck! It was a very different, but it taught me so much...

K: What did it teach you specifically?

R: I think, it reminded me to keep, to turn the energy down. It reminded me to really get a sense of what's happening to that person before I put my hands in their field. And I think I was doing the gung ho 'nursey let's fix it', type thing and it was also the joy of knowing it didn't have to be my energy.

K: Yes, I think it was a lovely thing to do, to take the innocence and the beauty of the child, as a conduit for the energy.

R: And her daughter's distress - I mean this little grandchild knew on one level but didn't know on the consciousness level. Yeah and of course he was really happy to be doing something, other than sitting there with Mum crying and grandma plucking the bed sheets. And she actually stopped plucking the bed sheets and she died the next morning, quite comfortably, so...
K: It's a great story.

R: Yes, I don't know why I was reminded to tell that one

K: It was a good story for me too, because I find that when I'm working with people, if they're frailer, whatever I have to...

R: MMM, MMM... And I think that what does happen as our energy becomes finer, even though it is as powerful it's more filtered... I get that word 'filtered'. And it's like a couple of people, whom I'm working with at the moment, who have chronic fatigue. It's something I haven't had much to do with, and there's a part of me, that hasn't much patience with it.

K: I've worked with many people with chronic fatigue...

R: Yeah, yeah... but it's interesting cause I thought, I must keep my energy down, but I don't need to. It's really interesting and it's not if their sucking more, it's that I don't need to turn it down and I'm thinking OK its different than what I've felt previously and I know this is not about people, with chronic fatigue, but I suppose that what we're talking about. I suppose that when you turn the energy down, I think that's one of the things with people who are agitated, people who are in the dying process and are very agitated. It probably does behove us to spend a lot more time observing and looking and just being in the room, so to speak and I've done that. I did that with a person who had been in a car accident, and they had... I'm just trying to think... I think it was a closed head injury, and they had induced a coma, waiting for the swelling to go down and I only saw this person once, but it was like I was warned to stay on the perimeter of the room, as far away as I could get and just scan the edge of the field, because there was something...

Well, there were lot things not right with the field. A whole lot of jagged edges. And trying to get past the induced coma to establish contact with the soul, as much as I could, with what was going on with the soul, for the person inside this body; wherever they were. And I had a sense that this person was already out of their body and just letting me know that there wasn't anything that they really required, so I didn't actually do anything. I mean, hands on anything, I mean really. I just said, "Well, call me in the morning, I'm happy to come back if you'd like me to. And of course they turned the respirator off and they weren't on a respirator and of course they died before the morning. So, it was like, "No, don't intervene." And I think that the person was very disappointed, the person who called me was very disappointed, so...

K: I wonder now how much we need to do after death, given...

R: Yeah... And I have no doubt that... That is one of the reasons that I asked how much you want to hear about that

K: Plenty.

R: Oh, right, OK, because... And I think that it is like in that case, where I couldn't get a sense of whether the soul required anything of me, whereas, it was because the person was in a coma and the soul is at a distance, but I got a sense that I was falling down a tunnel, falling! And you know it was just like this little whisper at the end, this little tiny whisper saying, 'It's alright, and you can go away.' Yeah, so I have no doubt, because I certainly had that experience. That quite often people can... Even though there are beings to help them, whoever they are, the physical is often less scary, and there are probably two personal experiences.

One was my Dad, just before he died. It was very interesting. He was in hospital and I went to see him the day before he died. It was in the afternoon, sitting up in bed as chipper as chipper. I said, 'What have you been doing?' And he said, 'I've just been to lunch with Pete.' And we had roast lamb and mint sauce. Much better mint sauce than Joan could make." (That was his wife.) 'Mint sauce, roast potatoes, pumpkin,'cause that was really good, 'cause your mother wasn't there, (Mum hates pumpkin) and beans." and I said "Oh, that's really good, Dad and how was Pete?" And he said, "Oh, he was the best he's looked in fifteen years!" (Because he's been dead for fifteen years, you see). He'd gone and had lunch with his brother ,who had been dead for all this time, just before he'd died and I said "Isn't that interesting, because"... And he and I could talk about Pete and those things. He had one brother alive and he had quite a few brothers who were dead but he didn't remember them; he only remembered Pete. Pete was the only one whom he remembered. But I suppose that was part of my role and I didn't know then because I wasn't even in this work. But my role then was really around just really talking to him and helping to prepare him for that.

K: So, you weren't doing healing work, then?

R: And I know that I thought that was the preparation. It was the preparation.

K: Yes, and there is an interesting book about that, about the metaphors, about the signals that people give just prior to death...

R: MMM, yes, and I suppose that the other personal one was after, and this was the really personal work my mother did after she died. I think she died in the May, and I had this session in the August, so it was quite a few months. And there was a lady, "Kit," who's not giving any personal sessions now, which is sad. I'd be sending everyone I know off to see her. I think you need to have one session from her in a lifetime. Anyway, she was doing some work with me and she came to ask me what was happening with my mother. Was she present or was she 'over the other side' and I said "I don't know if she's over the other side but she'd dead." She asked me why she died and she made a number of observations about them carrying some things from my mother. But then she said, "Listen to what your mother is telling because she hasn't gone to the other side, she's here. And she needs you to hear what she's saying." And of course my last sense is my hearing. I'm getting some things but it's not like visual or sensing or feeling. It's the last one to get going, and I said, "look..." And of course at this stage I had ears full of water so I couldn't hear much and... Or that was my excuse to Kit.
Anyway, so, she said to me, she was there with angels and it had to do with my brother and something that my mum had done that she was really embarrassed about and she was concerned about your brother was doing and so that the work that I need to do on the energetic level was... yes, and it was sexual. So it's the work that I needed to do on the energetic level, on the absent level, to work with my brother to resolve whatever it was.

She didn't give me any details, I had some guesses... at what it was... interesting, because Kit was saying that Mum was standing there as red as a beetroot, the whole time she was talking and that she was really relieved once that was done - and that she could not do it, which was interesting, from the other side. It needed me to be the conduit to do what needed to be done and it was interesting, too, because I rang my brother; I left it about a month, to ring my brother to see what was going on and how he was going and it was interesting because he said, "I feel really settled now", and I thought, "Oh!"

And it was interesting, because one of the things that she needed me to know was that she loved me as much as she loved my brother, but he needed her more that I did,

K: Oh, Gosh... That must have been...

R: I know .... And then she went to the other side.

K: Oh, Rebecca. How long after her death?...

R: Her death was in May. It was August... So that was a personal one but I know that with other beings, there is still quite a lot of work to be done for the person who's died; for the spirit of the person, who has died. Yeah, to help them through that process and I think or my sense of it is and I think that I know, that I've read a bit about it but my sense of it is that we as healers and spiritual beings do a lot of that work, anyway.

INTERVIEW - ROSA

K: Rosa I'm interested in your perceptions of the energetic changes that occur when people are dying...

R: OK. First I'll speak about the patterns that I see in the responses to the balance that I do. The balance seems to shift the physical level of energy, to the stage that the person is clearer in their mind and...

K: How do you see that? What is your experience of that?

R: Upon the second visit, a lot of the symptoms will shift, not the condition but the symptoms. An example would be, one man, Theo, who I was treating had cancer. His home was two storey. Before he came to me, it would take him ½ hour to climb those steps. After he came to see me, it would take him five minutes. The physical symptoms that were presenting themselves were a lot of coughing, not being able to breathe properly, a lot of reflux symptoms, shortness of breath... After the first treatment, I would say on a scale of 1-10, that those symptoms went down to a three. The man was very energised and found that he could then do things, that he had lost his expectation of possibly being able to achieve again. It gave him a renewal, and a return of something that had been lost. So, that was after the first treatment.

K: That's great!

R: After the second treatment, those symptoms subsided even further. When this takes place, I see that we are giving people more time, to get closure, to complete what they need to complete. I don't believe that we heal people, I believe that we assist them, to receive more time in getting closure and completing and renewing time with their family, so that the family can feel that the person maybe, well... 'dying,living', not 'living, dying'. We can use this terminology. And, I've had people that have been quite active, umm... even though the cancer has continued to progress, the quality of life is better and because of receiving the balance, they're able to 'die, living'.

Now the physical shifts that take place are the impact on things, that reflect the energetic changes that take place.

K: When you see your clients, do you see their energy field, or do you feel it?

R: Both. I feel it sometimes, as heaviness that is around the body - darkness. Sometimes, I see both, sometimes, I won't; I'll only feel... And when I'm feeling a good energised field, my hands tingle a lot, and I feel warmth in their energy field.

K: So, when you're working with a person, over a period of time, towards their transition, do you notice changes that occur in their energy field, as that process concludes; their dying process, if you like?

R: Definitely, because their mind energy changes.

K: And what do you see in the field?

R: What I see, is a soul that's passing over, that's far stronger, because it's been able to achieve a lot more and in doing that, the body seems to emanate more strength and more warmth in the energy fields, rather than passing over with the blocked energy, that I see. It's like Swiss cheese with holes in it, and often as they're passing, there's a lot more peace and the radiation in the energy fields which is from that, and from their acceptance. It's very strong.

K: Great! Can you think of a person that you have worked with, to describe the changes that you've seen?

R: At all levels?

K: Yes, but particularly at the energetic level. The psycho spiritual level of course, because there's so much, and it's so important.
R: What comes to mind is one elderly man. He was in his seventies, and the way he came to me - his daughter was a magistrate, and she received my number from someone who had referred and she brought him to me. He was physically depleted, emotionally and spiritually. Now, he's the man who had the cough...

K: Mmmn.

R: He had shortness of breath. He'd given up any kind of hope for the future, and I saw progressively, they brought him down and he stayed here for three weeks of intensive treatments, and his body lost all its symptoms. He just once again was living and on some levels. I gave him a goal to focus on other than his illness, so that he wasn’t ‘in the illness’, he was beyond that, so that his body was in a denial state. So, his mind was in a denial state, also. And I believed that when working with the mind, we create a different belief system in the body, so that we were able to discuss with him, that he never had a wedding; he married by proxy from Italy. His wife was over there, he was in Australia, and they had a surrogate and a proxy wedding over the phone. So, I therefore started to plan with him and his family, to have a wedding ceremony, so that he could feel that he had done that in his life, which gave the whole family another focus. It shifted into another form of living. Now, in doing that, I saw that the mind changed the energy and was sending the message from brain to body. In doing that, I feel that he had a far more fulfilled life, and he passed over. But in doing that, they had given him three weeks to live and he had probably had eight months longer, and a lot of the cancer stopped growing. And I had many lessons in that, because the cancer stopped growing, from the work that was taking place. And they operated on him, and I can't remember what that was for, but they phoned me from Brisbane hospital to go up. And when I went up, their concern was that a clot had formed during the operation and they were concerned that it was going to lodge very close to the heart. And they wanted me to see if I could resolve the clot. So I stayed up there and I started balancing him constantly every hour and the clot did dissolve...

K: Now when you say “They” whom are you referring to?

R: The family and the doctors; they allowed me to work in intensive care with him, so I was able to monitor that and yes, he was placed on warfarin, but within two days the clot had dissolved and he was once again safe. They monitored him, to try to stop clots, but they continued to form. Now, in the end he actually died from the clot, not the cancer, which showed me he was ready to go. It showed me that the work could do what we were trying to do. But if that soul made a choice, it would create something else to help it to go.

K: And did you see or feel the soul leaving or any part of that energetic change, that occurs during the dying process? Did you see or feel, as he was getting closer to what we call physical death, the transition of energy?

R: No, he wouldn’t stop fighting… No I saw... sorry! I saw energetically, a soul but not with the body. His mind had become so strong, that he continued to fight and his light was still quite bright and he kept saying, "I'm going to beat this; I'm going to beat this!"… And I spoke to him about feeling peaceful and he said he did and was very peaceful. I spoke to him about going and about God and he spoke about his perception after that, and I felt his soul. It wasn’t so much his soul that I saw changing. The soul remained the same, his acceptance changed. The soul is always the same. It's only the spirit I communicate with. And, if that spirit has had a good close connection with me, when I've been there, and most people do, during the process of healing, they're in my energy field anyway, so its very easy for them to communicate with me.

K: Where do you see that? Do you see that in your minds eye?

R: No, I see it around his body, and its very hard for me, when someone becomes as integrated as they do, to see their physical body as separate from their soul. When that integration takes place, it seems to be just a flow. The light I sometimes see the essence move up and out… you know, from the heart...

K: Can you tell me a little more about that?

R: Yes, I’ve seen just a very small light from the heart, like a fairy light, just gently move out of the body. Just gently move and there’s always been peace as this takes place and the person takes a deep breath, and it will be one of “Thank God, finally!” Its that kind of feeling and a feeling of, “I've done what I’ve had to do.” Even though they fight to the end to stay in that physical body, I see in that moment a let go and acceptance

K: And what happens to that glow around their body? When you see that light, what happens?

R: I see that fade. I just see it fade. It tends to just become nothing. It doesn’t go anywhere, it just fades.

K: Does it fade over a period of hours, days?

R: No, possibly thirty seconds to fade and it just diffuses, becomes nothing.

K: And do you feel any sense of them being there after that transition?

R: Definitely, definitely. And sometimes I’ll just stay and say "Now, do you need to speak with me, is there anything that you need to say? And quite often they do. And the spirit speaks, because the spirit is still there, but the soul is gone. It's only the spirit I communicate with. And, if that spirit has had a good close connection with me, when I've been there, and most people do, during the process of healing, they're in my energy field anyway, so its very easy for them to communicate with me. The man that I spoke of a moment ago, he stayed around. I left the hospital. His daughter stayed with him and I left. And the family said, that he still remained peaceful after all had gone but I was talking to him while driving, home in the car. And then within two days, he came through clearly. He told me that he was with his mother, gave me his mother’s name. Things that I guess were proof for the family. He said to me about his daughter and about the man that was coming, and that she would marry[him]. And, that happened within six months and that was a surprise to us all.
K: How lovely!

R: Yes, total surprise! She’d never met the man before and she was married within three months. So he had orchestrated a lot of that. It is a great comfort, when they pass over, if they continue to communicate, because that says to the family that they are OK. And that has happened quite often. If the family aren’t at a level of accepting then I don’t pass that on, because they can’t move from one mode to another. Because I am - I allow time, and then often times the spirit will impress the people to come to me to talk to me and then, if they are ready, I’ll pass that on too. Not everyone who comes is terminally ill. Their family is not always accepting of what the work does. They’re just grasping. And because they come to me doesn’t mean that they’re ready to know what I do. But that person’s soul needs it or they wouldn’t be there, and my main concern is what I have been told - that I build their light body, so that when they pass over, they can just be in the light. My goal is not to have an outcome. When I’m working with people to simply be with that person, with whatever is required, and then just maintain acceptance with the momentous things, that take place. Now, energetically, the main thing that I do in not holding a goal, other than being in the moment, is whatever we get is that person, with whatever is required, and then just maintain acceptance with the momentous things, that take place. When you talk to them Rosa, when you communicate with them, after they have died, does that communication go on for some months or does it?.. That obviously would depend on the relationship, of course, but how long do you think that soul stays in that state of being able to communicate?

R: Always, always. The spirit always continues… It’s a different connection to all of the spirits, depending on what they have to do. With the man - Theo was his name; I only have to call him in, and he’s there. And occasionally I’ll say, “Are you around Theo?” and I’ll hear him very clearly and there’s always a little password I have with them, to make sure it’s member and I’ll know nothing about what’s going on and so I’ll phone them and they’ll confirm what’s going on, and that confirms what he said. So I always seek confirmation and I looking for the validity in what’s given.

K: And do you make that... Do you organise that password, prior to death or do you?..  

R: Once they can give me proof and I know that its authentic, then I might allow... and I say ‘allow’, because I need to take responsibility for what’s coming and going, and make sure there [are] no psychoses there. So, you know, there’s always a “how are you?” He always calls me Rosey and when he speaks to me, I hear the Italian, and that energy and I feel the love. He was like a Dad. It was that kind of energy. And you know, when he speaks ,it’s always about a family member and I’ll know nothing about what’s going on and so I’ll phone them and they’ll confirm what’s going on, and that confirms what he said. So I always seek confirmation and I looking for the validity in what’s given.

K: How long have you been able to experience people in the way that you do?

R: I was born seeing and hearing spirit and I was very confused as a child. But I had no fear. I just didn’t have anyone to share it with. But I’d see people, who were sick and I’d say to my mother “Their light’s not on!” And she’d say, “Its OK., don’t worry about it and wouldn’t understand what I was saying. And I’d always tell if someone was sick, because his or her light wouldn’t be there. And... I also had psychokinetic ability as a child, and didn’t understand that everyone didn’t have that. So therefore, it was a very lonely childhood in relating spiritually. I was raised as a catholic, attended mass 3-4 days a week and would walk to mass in the frost. [It was]freezing cold and the nuns would give me breakfast at the school and I lived at the convent a little while, so I’ve had an installation of God I guess, at a very young age. But I was also raised.. I went to school with the Aborigines, so I had that spiritual aspect there, as far as their energy. I travelled as a Gypsy in my childhood, lived in caravans on riverbanks and I’ve had a very - what would you say - a very ‘multi’ life, as far as
experiences are concerned. I never really felt settled as a child, I always felt secure... Never felt lack, even though there may have been; it wasn’t in my reality. And something was always reassuring me that it was OK. I think the biggest thing that I have sadness over in my life - that was obviously meant for my soul, was the loneliness, as a child, because it was a lonely space to be in. And not only that, but I was overprotected as a child, didn’t have friends, wasn’t allowed to share birthday parties, or very set in my parent’s fear, so therefore, my spirituality was limited externally. It was something that was my world inside of me. But I’ve always had the gift that I have. I guess that it has been about twenty five years that I’ve been working on this level and I have been able to express what my gift is about. So many people have these abilities but they fear them and they don’t know how to express it. So, they live in that limitation. But you only have to look at the trees blowing in the wind, to see that there’s energy that exists, that moves without a form, and that’s what the etheric is and the energy around us. It just doesn’t have a form unless you tap into it.

K: Is there anything else that you would like to share with me about this work today?

R: Trust... I think the biggest thing, as a healer is to get out of your own way; just trust what you’re doing, without having to understand it. When you try to understand it, you get into limitation of the ego, and the physical and I believe that you are in fear, and it doesn’t allow you to let the energy flow through you.

R: I see that very often, that’s what stops assistance for many people. You know, it’s a very common thing with healers that prevents them from assisting more. And I think it’s because we have a dynamic of living consciously, but unconsciously, living consciously. And I think...

K: very well put

R: Yeah, if we can understand, that we really don’t know what we’re doing - don’t have a clue! We don’t - we can’t make mistakes. I think that fear is what... See, we’re so programmed through society to be responsible, and then we’re asked to step into a position of trust, where we can’t explain what we’re doing. How do we know that we’re being responsible, when we can’t explain it, and we don’t understand it ourselves?

K: Is there anything more that you would like to tell me Rosa? Have you anymore stories?

R: Well, I’ve had a few people with cancer. Would you like me to tell you about them now?

K: Yes, that would be great!

R: Well there’s Daniel, who came to me. When he came originally, it was via an acupuncturist, who felt I could assist him and he was in remission with his cancer. Ah, the doctors had felt it had cleared. I started treating him, and I could feel through his body, that there were blocks in his energy field. So, I spoke to his parents and I asked them to take him to the doctor, please, and have another MRI and they said, "Well, he’s in remission, and everything’s fine". When he went to the doctor the doctor simply said, "Just give him a Panadol, he’s probably pulled a muscle surfing and they wouldn’t do the MRI and then they brought him back to me and I was a little bit triggered. I went into a little bit of fear; because I knew that the cancer had metastasised in other areas. I could feel it in his body. It was just a knowing and I said to the family, No, that’s not good enough! I want you to take him back and have a total body scan, regardless of what the doctor says. Please insist!

So, they did. And when they came back to me, they’d found it in his pelvis, in his lung, in his brain, in his cervical spine, in his knee,

K: Oh, how awful.

R: And the family went into total shock. If I hadn’t have insisted, as I did, he wouldn’t have had the time he had.

Now, I started to work on him immediately. They went through their process medically; I said "look, do whatever the doctors will do; I’ll just work on him every day.

So, then I commenced working on him, every day. Either he would come out to see me, or I’d go to his home, or I’d do it long distance, or even both. Now, they’d given him about three weeks. They said at that stage; not very long at all.

But, about that, they said, they didn’t even know that it was any good doing the chemotherapy. And I said to them, "Well, I’m not giving up and I’m just going to keep working on him."

So, I think that they did start some chemo - I can’t quite remember. I think they did. But I just continued to stay focused. Now, after a while, they took him up to Brisbane to the doctor and the mother rang from Brisbane and said, “It’s just a miracle, it’s just cleared from all areas. There’s a spot in the lung. The neck’s cleared, cervical spine has cleared, and the knee’s cleared, the pelvis. He still had some in the brain and a spot in the lung. But they were saying it was a miracle. Now I said, “When he gets home, I’ll just start to keep working with him again, and he progressed to the stage that they then wanted to do stem cell therapy. So, then they chose to go ahead and do that, with a belief that it was almost clear. They could get him to that stage, and then unfortunately after opening him up... They did the stem cell, and because of the loss of strength in his knee, and the loss of muscle... I think it was bone, because he’d lost length in his leg from his pelvis. They decided that they would operate on the knee.

Well, once they had operated on the knee, it returned, and when they said to the family... And then something started to happen around the crown chakra, and his head actually formed a peak as a Buddha has, and they was a growth coming from his brain; I could see that. Well that was a very small lump. He showed me that, when he came to me, just after the stem cell treatment. About a month after the knee operation, within a month it started to grow, and he said, “I don’t know what this is.” And he kept touching it. A tiny lump... It began like a very, very small thing, the size of my fingernail. I could see it growing daily, and I was concerned.

And probably within three months of the stem cell therapy, they spoke to the family and said, “Well, you know, it’s the cancer. And they said. ‘What cancer?’ They hadn’t informed the family, that he had gone into regression. Something wasn’t clear, so the family were quite shocked. They couldn’t get the specialists to return their calls. They were quite traumatised, and Daniel chose to die, living until the day that he passed over, he believed he was going to beat it.

I continued to go to the house. He wouldn’t speak to me about dying. We spoke about many, many things. We spoke about living on. He didn’t see it as dying. He was always going to live on, in some form. And I spoke to him about the soul. There were energetic exchanges between us on a very deep level, there were no words. There was a knowing that he had. He had just a trust, that he was going to come and keep coming, without seeking an outcome, to do what he
needed daily, to get the energy that he needed and to keep a check on his soul, to do whatever it had to do. So there were no deep discussions about dying. When I spoke to him the day before he passed on, I said to him “Do you have any fear?” and he said “No” and I said, “Do you know how to let go?” and he said, “I don't know that I know how to let go.” I spoke to him about the process of the light and looking towards the light when the time came and I said, “If you don’t believe that you may pass over, you know there will be a transition. He said, “Yes.” and I said, “In that transition, tell me that you’ll walk to the light.” “If that does take place,” he said, “I will.” So that was the level that I was able to speak to him on; not on the level of dying, but on the level of changing form.

K: After he died, did you have a sense of that? Did you communicate?

R: The family phoned me, minutes after he passed over. I was on my way to him and they phoned me and said he had just gone, and could I go up and see him? So, he was in the room and he was standing there… I’m going to cry… He filled the room with light… its so humbling… to work with souls as his… to see the transition of passing… and put that essence into that soul, as they pass…how strong they are, how powerful they are. He was so clear and he was there to heal everyone else, and I said to him, “Are you OK?” and he said to me, “Just make sure they’re OK.” And he said, “Feel me” and I asked “Why do you want me to feel you?” And he said, “So I can feel me.” And he wanted me to touch him, so he could feel his body. He could see himself lying there and I just put my hand on his body, and he said “I’m so cold.” And I said “It’s only your body,” and he said “I understand that.” And he said, “I’ve got no pain!” and he said, “I’m concerned about their pain.” And he then said, “I’m happy with my choice.” And he was. He was happy with his choice. He said, “I’ll stay with them. And I said “you just do what you need to do.” And he said, “I’ll just stay here and help them.” So, he remained there and I went back the next day and I could still feel his energy in the room, but the light had gone. I felt his essence remaining. When I went back the next day to the room, and then when he[he's body] came out here, I went on to do his funeral, and the funeral was here at my healing centre and he was laid out for people to see him, and he really enjoyed that. He enjoyed being there and he was once again a very bright light in that room. His friends found it very difficult, but he said that he wanted to stay to give them comfort, and very much enjoyed being the centre of attention, very much - he enjoyed that and he was very proud about what they felt about him. He could see that he had been loved, by his friends and he took pride in them, to see that. I said to him, “How will I know to identify you in the future?” And he said “Look to the sky, and whenever he’s around, he always presents as a very bright orange sunset.”

K: Oh…

R: I have a photo of him in the garden with me, and the photo shows the orange sunset in the background. He had his crutches there and he was helping me build a circle here at ******, and the sky went really orange and we took a photo and he’s recently had his brother’s wedding here and both Joan and myself were there, and we haven’t had an orange sunset for months and I got the photo and I held it and I said “if you’re here give us a sunset.” And within fifteen minutes, the whole sky changed to a beautiful orange sunset, and it was just so powerful and I just found it very hard to believe he could change it just like that, and I said to Joan, “We haven’t had an orange sunset for many, many months and he just did it on cue.”

K: How amazing!

R: It is amazing. It is so powerful, and the things I see that they do like that. You can’t… Only we create our reality but I can’t dispute things like that, they’re very real. They’re very real. But I’d say that Daniel was probably the most powerful teacher that I’ve ever had, as proof of the balance, in many, many ways. And on a selfish level, I feel he came to prove to me what was possible, what the energy could do, through the balance, and I believe he did that. Yeah. And after he finished, he went. People come into our lives for a reason, and it’s so difficult though, when you work from your heart and soul and the attachment that you make to people. I don’t believe that healing takes place without an attachment. There has to be love involved in healing; not love from your emotions, but love from your heart. You risk so many things, you know. You risk a level of grief, you know. You risk losing your boundaries - so many things. But quite honestly, you’d risk anything to do it. And to know that you can make a difference, on that soul level. So, its not always easy and its a very long process, and it may only be a week, but it’s a long process, because your energy is so connected, even when you’re not there, even when they’re not present, you know from your mind, you’re constantly trying to hold the light for them and on a level you don’t take it on, but you do. You don’t take it on to a degree that you become sick or your energy diminishes, because I believe that you get some kind of energy higher, that tops you up and when you work in that level of light. If you’re helping a soul as special as Daniel is, the rewards are always there and the reward is to see that soul change and if you work with that, it just continues, and it doesn’t deplete. I believe you need to create boundaries, to maintain balance and let go of perhaps other things, so that you’re not fractured on another levels. If you focus strongly on something like…

K: Other things like what for example…

R: Reduce your clientele, people that are not… Not that they’re not as important but there are other priorities, and to remain topped up, you need to prioritize and refer them to other people just for a short time, other practitioners so that you can maintain your focus. But it’s alright, when they pass over, they’re always available to you, to support family members if they need it. And often times, I have been to other people occasionally for a reading, something like that and someone like Daniel has popped in through that reading with someone, who doesn’t know he exists. And I went to a psychic reader in Byron Bay, six months ago, and she named him and said, “He stands here with a bouqet of flowers and says that he honours you, and can’t thank you enough and you don’t know what you did for his soul.” So, it’s not only myself he connects with, its others that don’t understand or have an agenda.

K: I’m sure.
K: Because the grief is each individual's grief but it is allowed some sense of expression.

R: A oneness, a oneness that's there. Sometimes as a healer, you put your grief away, until an appropriate time because you continue to support those that have more right to grieve than you.

K: Family, yes

R: Yes, family who seem to have more of a need and because on a practitioner level, of a boundary, you really do need to put that aside. To support others in their grief, because it's not always appropriate.

K: So there is a huge store of unexpressed grief, I'd imagine.

R: And I again move at appropriate times and in authenticity. But I believe a connection possibly with Daniel's soul. I don't say this in arrogance but I believe I knew his soul possibly at a level that possibly no one had had that connection with. And it wasn't a human connection. I think that it was on a level that everybody was focused on a different level to what I was and I was able to reach that soul level which said that I possibly didn't know him as a human, as well as many others, but I knew his soul. And I feel with many clients with cancer, ummm... Cancer is something energetically - we try to support carers as well, to help them to cope, if the other person isn't coping. I usually have a code of instruction that I do give people, with steps to take to maintain their energy as a carer. Things to talk about... Because they don't know how to talk to a person who is sick. You know, getting the person to speak about their dreams, their goals; you know to talk about unresolved issues. So that they're able to move on that issue also, because they forget about them as 'people' and the cancer becomes the person, and I nearly always speak to them on that level and give them a written list that I could pass onto you.

K: That would be great...

R: Yes, on that because the cancer consumes them and we forget about the person, and the person and the person's needs and they want to just fix them and them ... then the person loses sight of the love as far as... because it becomes fear. I've had so many people with cancer and it is a real comfort when you can continue to communicate. An example after another lady passed over, her daughter is a hairdresser and she came to me every week for balances. Now, with cancer people, I don't charge for therapy. I gift all of that, because they have got to pay for their medication and doctors... Well, I always give that without cost.

K: That's very generous Rosa!

R: And one lady was coming to me twice a week and she passed over within a month of Daniel passing, actually. And she came back to me a few days later and said to her daughter to go to this box, as there is a ring there from Bill. Now when I did, the daughter knew nothing about it. She said: "Mum never spoke about a Bill." Anyway, she found it, in the ring it had, "with love from Bill," and she spoke to her father and said "Who was Bill?" And he said, "that was an old boyfriend of your mothers." And last week I went to see her at the hairdressers and the mother came through while I was sitting there, and said, "Go and tell her that she needs to put a yellow rose in the garden." So I went to her and I hadn't spoken to her for months about her mother and I said, "Look, your mum is here and she said, you need to put a yellow rose in the garden and she just shook her head and she said, "My auntie's just doing a rose garden and up in Cairns and she spoke to me the other night about putting a rose there for Mum." I said "Well she wants a yellow one." You know, you get that sort of thing and it's too authentic to dismiss by chance and I guess knowing that they're still there, they're still O.K.

K: I think that that is such a gift for people to give them that connection. I think it's just stunning!

R: Yeah, it gives them a breath of air and it makes you feel as though its not a thankless job. You do see something happen, that does make a difference to people. They are still helped. It's a comfort. It's very, very rewarding, but it can also be on one level. "God, I know I'm going to give all this energy and physically I know I won't be here, its only going to be the soul that's going to continue to grow and heal."

K: How does that feel for you, does that feel arduous?

R: No it's not arduous, just a knowing of I have to deal with this family again and they're going through all this grief. I know that it'll be OK...I know he'll be OK... but what do you do to help the family. It's that kind of thing.

K: In a sense, you help the family more than most people I know and that would include many healers, because you have that ability to connect after death and give them this wonderful information that's verifiable. And its being a midwife truly in the fact that you 'build' their soul. The difficulty is that you know that, but the relatives are in such intense grief often, that they don't understand the deep level of your connection, and in a sense they see it as a failure at death, which is hard for you to have to deal with, with your knowing. I think. you know the failure is that they don't live, which is the culture that we come from, a sense that someone dies and what have we done wrong? Its crazy!

R: You really have to believe that what you know is the truth, not let others invalidate that, by their lack of knowledge and fears. And sometimes, just keep to yourself what you're hearing. You'd love to tell them and help them, but they're not ready for it. They'd be in grief, and as I say to them, look, my receptionist called up to me yesterday. She had a baby, who is walking now, so that she's out of the desk, for a while. She came up yesterday. Last week while I was driving home... Now, she lost her best friend from a heart attack, three months ago and Alyson was only sixty five. I'm driving up the hill from having a cup of coffee the other day and this little voice said, "Hello"
said, “Who are you?” She said, “I’m Alyson.” I said, “How are you going?” She said “I want you to go to Larry and Jess and tell Larry, he’s got to read those papers before he signs the contract.” and I thought, “Oh, what’s she on about?” Anyway, I went to Larry and he said “Oh, Jess’s not here. I need to talk to you.” Look this is what I just have from Alyson. He said, “That’s amazing! He said, I’m just about to go to Hong Kong and I have this contract I was thinking I think I’ll get legal advice this time. And I said “She wants you to really read the contract, before you sign anything.”

She had been here once for dinner and I spoke to her once, at the hospital, when Jess had the baby. But she just knows that I can see. And Jess came to me yesterday, about three weeks after I spoke to Larry and said, “I’m just feeling so abandoned by Alyson. I can’t hear her, I’m just so abandoned.” You know, and I didn’t even know the woman and she was communicating with me and all I can do is just pass onto the family what I get. And another night I was sitting in a Chinese restaurant and she came through and said “oh I love this; I used to love the curry, tell the girls I’m not missing out on anything and I enjoy the Chinese every time they go.” So I thought, a little bit of trivia! So I phoned Jess and I said, “Alyson popped in and she said “Oh, she used to love Chinese.” I said Oh, OK... So there. you go! She just wants you to know.”

But you really have to be decisive in who you tell. You don’t want to appear to have psychoses. You don’t want to overwhelm people, and the medical society would say, “This is psychotic, and that’s OK,” but it works for me.

K: Yes, it works for me and it works for everyone, who you work with. But it’s arduous to be continually defamed and...

R: You never get closure, so you can’t look for reinforcement. You’re not going to get it, so you have to find it within yourself, and those who communicate with you. Don’t think it’s outside of who you are, because if you do, you don’t believe in who you are. You really need to stop helping people. I’ll stop doing it and I’ll believe that it’s a lot of useless information, but while ever I see that it helps those to feel better, while I’m doing it, and gives someone direction, I have to believe that its good and that its in the light. I won’t stop doing it. But it is a very alone place sometimes.
CAROLYN
Carolyn’s healing practice was in a building, on the corner of a major city intersection, where there were frequent car accidents.

Story 1
Assisting person to realize that he was dead, clearing shock and seeking help from discarnate being
And one particular day, I was working on a client, and there was an accident. And you know, you could tell it was a bad one. And I (unfinished sentence), when I’m working with a client; this is the only time I’ve left a client in the middle of a session - I said, “Excuse me for a second, I just have to go and do something.” And I basically got up, and went to the window. And essentially what had happened is, that someone had died in that accident, and he had got lost. So I reoriented him, cleared him and helped him cross over. Well, (I knew that the dead person was disoriented because) to begin with, I just felt something, OK.? So I just went and had a look, and there was a person standing there [pointing to an imaginary place] and there was [his] body on the ground. So, I just talked to him. And he was confused; I mean, how do you tell anyone is confused? Because they give you nonsensical answers! So, (I didn’t go physically). I went out there astrally, and if people can see you astrally, they are usually not in their body. Some people can see you, even when they are in their body, and that’s always interesting, but a lot of people can’t. So, if they can, you know that they are either very, very asleep, because they’re out of their bodies, while they’re asleep. And then you can see if they’re still connected to their body or not, because essentially, they won’t have their body with them. But if they’re dead, they will, because the ethereal body won’t be on the body; it will be on them. And I said, “Hi!” and he went, “Er?” - He was a bit in shock. So, I cleared the shock for him, and I pointed out to him that he was dead, and that he now had the choice of actually dying, or sorting himself out, and getting back in his body. “And, what did he want to do?” And, he wanted to go. So I said, “See that person over there?” (A discarnate being). I didn’t have the time to run out of the ‘shop’ (clinic), and I didn’t really have the time to do everything for him, so I just yelled for help as I do, and someone (a discarnate being) turned up, as they usually do.

Feeling the door open like a cold wind as person crossed over
When people die, to a greater or lesser extent, depending on the consciousness awareness of the person - I like to use the old term that people use; ‘cross over’. And that is literally like having a door open. Now, in that case, that is what I felt; I felt the ‘door’ open. And that door doesn’t open for no reason. And if it opened, it meant that that person was meant to go, or it was a moment of choice for them; whether to go or stay. And it was interesting for that particular client, because, I went and sorted the person out, and they actually did choose to go. And I came back (into the clinic). And I said, (to my client) ‘Look, I’m sorry, but someone just died out there. And I said, (I wouldn’t normally say that to somebody but, I was prompted to say), “You might have felt them leaving; the door opening. Some people feel it like a cold wind.” And she looked at me and said, “Oh my God! Is that what that feeling is?” She’s a person who’s had a lot of death in her family, and she felt it (the cold wind) essentially sitting in the hospital. You know, she’s often had that feeling. So, now the thing is, what happens when you die, you tend to drop some of those [energy] bodies, at the very least you drop the physical body, well there’s a shift in energy, like the frequency knob has just got turned up. So you can feel it … Your energy, instead of being focused in one little spot in the hologram; all of a sudden it’s everywhere. And that’s why some people experience it as annihilation. Because, if they don’t have the conscious awareness to actually be able to be everywhere, and be conscious (unfinished sentence). But the thing is, (that) can be difficult. But the thing is, that it’s actually that spreading out of the energy, that people feel as a cold thing, because the energy actually dissipates. And when energy dissipates, it actually cools down… Well, you go from being a local phenomenon to a non-local phenomenon, which is what your soul is anyway.

General perceptions
Seeing patches of etheric energy left during death as process of soul loss
Oh well, [as a person is dying], you see the chakras actually starting to … because basically as I said, you see the Kundalini release, so its like everything literally gets pulled into the Kundalini channel and out, so you can actually almost see the chakras retracting into the body as the same time, that the ethic is separating from the body and sometimes the ethereal can almost look patchy, because there’re the bits where its stuck so you just release those bits and … Right, well essentially that’s what happens and if you work as a spiritual healer essentially what you have to do is to go and pick up bits that they’ve left behind hither and yon, and death is one of the most common places for people to have lost bits. So you know what you’re seeing when people go without taking all of them is - you’re seeing someone who is in the process of soul loss.

Perceiving the body having cellular consciousness that is redistributed to family group after death
The other interesting thing from that point of view is that point of view is most people talk about death and dying from the beings point of view. But there is somebody else involved, which is a body. See, the body has energy or consciousness as well. It’s a genetic or cellular consciousness, but there is that component to it. And what actually happens is that when the person dies - that consciousness is more like a group consciousness – so, when the person dies, the energy is then redistributed among the family or the genetic group.

Perceiving that the family experience ‘physical’ shock following traumatic death of family member
Just in the same way as when a being dies, if they don’t have a tidy death. They’ll experience soul loss that will have to get cleaned up at some point, so can the group family and that can be a problem [it] that is sudden or traumatic. It’s actually one of the reasons why a whole family will go into so much shock, over things like suicide or sudden death. It’s not just the emotional shock of expecting to see that person the next week, and now you know you never will; it’s also the fact that their body literally goes into shock.
Feeling a frigid, icy chill - like a block of ice and recognising client had died

For instance, one of my friends rang me one day and she said that her brother had just committed suicide. Well not just (unfinished sentence). A couple of days before or something, but she said - she’s a reasonably spiritual person you know; she doesn’t do a lot of work in this area, but she said, “I can’t understand it. I’m distressed about it, I’m having difficulties about. But I’m o.k. I know this was his choice. I know he has been very depressed for a long time. He has made a number of prior attempts. You know, I resolved it all in myself years ago. I’m clear in my mind that if that was his choice, that was OK. I don’t understand, what’s going on.” I said, “It’s because you’re OK, but your body isn’t.” And I had a look and I said, “Sure enough!” The [brother’s] body’s energy was stuck in the body, because of the way it happened, the body’s energy didn’t have a chance to transition out. And so I said, (unfinished sentence). So, I helped - I tuned into where his body was, tuned into that energy, helped it to move onto whomever in the family. I had her on the phone, so I could ask her, and I could help the energy go to where it wanted to go. The energy was redistributed. It doesn’t always go; it doesn’t always distribute evenly, you know. It’s almost like a will - different people get different amounts … Anyway I did that and I said, “How do you feel?” and she said,”Oh, cool, now!”

ELLEN

Story 1

Ellen recalled her work with a young man, Sam, who she had known socially for some years, and who was dying of cancer. Sam was admitted into Ellen’s nursing care during the last four weeks of his life. Ellen worked with Sam very intensively during that period, and they developed a close bond.

Feeling a frigid, icy chill - like a block of ice and recognising client had died

You know, that morning, he had developed some breathing difficulties and it was clear that things were changing for him. And it was my day off, and my supervisor paged me, because she knew that I had a long-term relationship with him, and said, “You know, I think Sam might be dying. Do you want to come and see him?” And I said, “Oh yes, I will.” And as I drove to his house, it was a very dramatic day. It was very stormy, and I remember that there were black clouds over the sky and white clouds in the sky, and blue clouds, which is something that I’ve never seen. And I remember driving and just thinking, “There’s something going on here! I just hope that you wait for me, because I’d like to say good bye to you.” And at the stop light, a couple of miles from his home, there was just this frigid, icy - colder than; it wasn’t like you know, sometimes you get this chill, chill. It wasn’t like that. It was like a block of ice was moving through me. It was a very surreal thing, and in that moment, I just had this sense that he had died. And he had in fact; twenty minutes before that, and so there was some connection there; something energetic going on there, I believe … That [cold chill] was really a phenomenal thing for me, yeah. I think that, that was his energy; I mean he knew that he was coming; I mean, he didn’t know I was coming, because nobody called him and said, “Oh, by the way, I called Ellen and she’s coming to see you.” But, I think that the connection that we all have, and the fact that why was it that, of all the many patients that I have, my supervisor was going, “Oh, I’m just going to page her to see if she’s around.” And there I was! On all my days off, usually I’m off doing something, so who knows where that was. So, there’s definitely something there and just, the whole thing.

Story 2

Heidi, Ellen’s best friend’s ten year old daughter, was critically injured and on life support, following a car accident.

Seeing and feeling a blackness when communicating with comatose child and realising spirit had departed

And they were in a car accident, and she was on life support, and each night that I would lay in bed, I would kind of connect with her, and you know … “We really want you to be here with us, we really want you to stay. And I remember on one particular night, there was just blackness, I felt blackness, I saw blackness. There were no thoughts in my mind. There was total blackness. And the next day my friend called and said, “You know, for days, I’ve wanted her to live, but something happened last night, and I don’t think that she’s going to come back to me.” And I said, “That’s really interesting, because I’ve been telling her every night, and last night there was nothing there.” And my friend told me many months later, because they did take her off life support. (They did have to make that decision, because they could not get a flat line EEG.) But she was deteriorating, and it was just a matter of time before her systems shut down, and they did want to donate some of her organs. So, they had to make that decision. And, she told me many months later: She said,”You know,” she said, “I believe that she left that night that you had that experience of the blackness. She really passed on that night. She was trying to hold on, but couldn’t do it.”

Believing that spirit manifested in dream and gave sign of future visitations

But then I had dreams about her. And, I remember one dream in particular, of her tumbling, (she was a tumbling, tumbling towards me. And she had these sparklers all around her, and she gave me the sparklers and she said, “Whenever you see sparks that will be me.” And so, of course, I woke up and called my friend. So, those are sometimes the energetic connections that I think, that I feel with people afterwards (after death).

ELLEN (Interview 2)

Story 1

Noticing that pet birds fell silent during client’s transition

This was a gentleman that I worked at home with his wife and it was kind of a chaotic household. I think there were probably a lot of mental health issues going on in the home, and even some substance abuse issues going on in the home. And the thing that was really striking when he passed away was that … he had these birds in his room, and the two times that I’d been there previously, those birds were chattering, chattering the entire time I was there. From the moment that his breathing changed and then through the next fifteen minutes - because it took him about fifteen minutes to pass away, those birds were silent. They remained silent until I left.
**Story 2**

**Jim, a man in his seventies, was dying of lung cancer.**

**Witnessing death-bed visions**

He literally would spend periods of time somewhere else, but talk about those [places], while he was experiencing them. He did that with his family, I would come the next day, he would talk with me, and he would say, "Remember where we went last night, Deirdre?" And he would say, you know the place with all the lights?" And she would say, "Oh, yes!"

And he started talking about all these lights.

There were also times, when I would come and visit and he would suddenly start saying to me, "Oh, did you see that place where there's the building and there's that big part that's hanging out and there's nothing underneath it? Don't go under there, because you could hurt yourself". I mean, he was being somewhere else and I just thought it was so interesting, because one of the things that happened was, he had two step-daughters, and one of them was there assisting his wife, and caring for him. She recognised that something was really special, and she had two children that were there, and she was very encouraging of them to just listen to their grandfather, and to observe what was happening, and she said to them, "He is showing you something that you will never see, until it's your time to go."

The children ended up, we had a social worker, who did a lot of art work with them, because they were having a difficult time, and especially the grandson, who was extremely close to George. And a few days before George passed away, he said to me, "If I ever get home, it's going to be a God damned miracle." And I said, "Well, you know George, you're going to go home; you know we're trying to get you there. Now, you're going in the right direction." And he said, "I just want Cory to go with me." And Cory was his grandson, and his daughter said, "Dad, Cory needs to stay with me for the time being." But he just grabbed Cory and said, "Come on Cory, let's go fishing!" And I've heard this fishing metaphor before. Years and years ago, I had a patient who used to talk about two girls, who were over there, who wanted him to go fishing. And he would point to his closet, each time I'd come and he'd say, 'Those girls want me to go fishing.' And I'd say, 'Do you want to go fishing?' And he said, 'I'm not sure I want to go fishing!' So, it was interesting that the fishing metaphor came up again.

**Story 2 (emailed) - “Polly's Farewell to Me”**

Ellen emailed, telling me of her experience following the death of a client, who she had briefly mentioned, during her first interview. Ellen nursed Polly for four months, prior to leaving for a visit to Australia. During their time together, Ellen introduced Polly to guided imagery. Before she left, they said goodbye, and Polly agreed to let Ellen know, if she died while Ellen was away.

**Receiving messages of client’s death and continued closeness**

Surprisingly, I did not think a lot about my patients while I was away, but one morning, two days before the end of my trip, I awakened early to a beautiful Australian morning. My friend and I were staying at a B&B and were the only visitors present. The main house was located a distance away and as my friend slept in, I made coffee, and took it out on the patio behind our suite. It was a beautiful morning, filled with colourfull clouds in the sky; flowers blooming and birds flitting about and singing. Suddenly, a large magpie and her new baby bird were sitting in the grass nearby. Baby magpie was crying out as Momma magpie hopped closer and closer to me. I thought, "Oh, I should go get some crackers to feed these birds." And (I) got up to go inside. Just as I passed through the sliding glass door, I was flooded with thoughts about Polly. I wondered how she was, and if she were still alive. I wondered if she had passed on, and if so, how would I know, as in actuality, I did not have contact with work at all during my trip away. Polly was so intensely on my mind for those few moments, as I grabbed the crackers and went back out on the patio. Sadly, the birds were no longer in the grass, so I sat and just enjoyed the beautiful morning. Suddenly, a woman's voice called from the other side of the sliding glass door, in a clear, bright and melodious manner, "Good morning!" I peered in, but could not see anyone, so I shouted back with equal energy, "Good morning, good morning". A few moments later, my friend appeared, sleepy headed and dishevelled and asked, "WHO are you talking to?" I looked at her and said, "Didn't you just shout good morning to me?" "No," she replied. "Then, perhaps it was Heather, our host," I answered. "Ellen, there is no one here," she responded. In that moment, it dawned on me that perhaps it was Polly, letting me know she had passed on. I looked at my friend and asked her to remember today's date, for I believed that my patient had just made contact with me. When we returned to the US, I was not at all surprised to discover that Polly had passed on exactly 24 hours before I heard that beautiful voice. And it is interesting to note, that I never heard Polly's actual voice, for by the time she and I came to meet one another she could only speak in a whisper … At Polly's memorial service, the poem she chose to put on her memorial program stated clearly, that whenever a bird was present, it was really the spirit of her being close to us. Polly was a wonderful gift to me as a nurse, and to me, as a spiritual guide that we continue to live on the other side of the veil that separates this life from the others.

While I was initially reading this story to Polly's husband and daughter in their family room, a squirrel came up to the sliding glass door, carrying with it a persimmon. The squirrel looked at each of us and then left the persimmon at the door. We were all certain that this was one additional validation by Polly, that she is still nearby.

**Polly’s husband’s story**

Polly’s husband, Jack, was also ill with cancer and died shortly after his wife. The day before he died, Ellen had to travel out of town, so visited Jack and said goodbye.

**Recognising messages from recently deceased wife**

Well, during my phone conversation, with his daughter one day, it was after she had spoken to the doctor, and she called me to tell me what the plan was, and they were going to put him on home care, and (there was noise in) the background and it was so loud, that I couldn’t hear her and I finally said, “Louise, is that a bird in the background?” And she said, “You know, I'm sitting in the family room, and you know, there's this bird outside on the patio and she said, “Oh my god, it must be a magpie, O.K. Mum, if you have to say to us.” And I said to her, “You know Louise, I just think that your mum doesn't want him on home care, she wants him on hospice.” You know what’s amazing, he didn’t want to be on home care, and he wanted to be on hospice. And it was not really - It was less than twenty four hours I think. His admission was Friday afternoon. He died Saturday morning … And his daughter told me that the night before, he had been talking to Polly, and he told her, (this daughter) in the morning, that Polly told him, “It's time to come home.” And he died the next morning.
Emailed story - Connie and the Rainbow Bridge
Connie had widely metastatic lung cancer. She was a 67 years old retired nurse, and was married with a large and loving family. She was Filipina, and had very strong spiritual beliefs, but was very fearful of being breathless and distressed at the moment of her death. Ellen’s goal was to assist Connie to have a peaceful transition. When she was off duty, Ellen did some imagery for her relaxation, where she saw the earth and the afterlife connected by a beautiful rainbow bridge. During her visualisation, Ellen assured Connie that she would help her have a safe and peaceful transition. She saw herself escort Connie to the arc of the bridge where she bade her farewell. Connie finished her journey over the bridge and turned briefly to wave goodbye, before travelling on. She was ‘absolutely fearless and very peaceful.’

Receiving a sign that client made a safe and peaceful transition
The next day I visited Connie and she was barely conscious. During my visit, I gave her a hand massage with lavender essential oil and spoke quietly, asking her if I had ever told her about the beautiful rainbow bridge. She lifted her right eyebrow and tried to open her eyes, but it was too much for her. Without going into too much detail, I simply said, “Connie, if you find the rainbow bridge, you be sure to cross it, for it is time for you to go home now”. While I left the room that day I was certain she would pass in only a few hours. I went back to our offices and then left to stop by a store near where Connie lived. When I came out of the store, there in front of me was a beautiful full rainbow. I thought to myself, “Oh Connie, there is your rainbow bridge. All you need to do is go across it and you will be home.” But Connie did not die that night. The next day the family called and I went to Connie’s home, where in fact she was dying, and I stayed with her and her family until she passed. Two days later, my husband and I were preparing dinner for some friends, it was lightly raining outside and suddenly my husband called me to come out and see “the most beautiful rainbow ending at the top of our house”. When I went outside, I could see that not only was the most intensely colourful rainbow, but it was a double rainbow. I felt certain that this was a gift from Connie, to assure me that she had crossed the rainbow bridge and was safe and fine in her new life. I even had the sense to take a photo of Connie’s rainbow, to always remind me of this special little lady I helped to die peacefully and free from fear.

Emailed story - Death of Jim
Ellen wrote, telling me of the loss of her dear friend Jim, and the events around his death. Jim, a 54 year old man, suffered a massive stroke early one morning, as he was making coffee, while his wife Judy, was back east, dealing with a family emergency. Judy had tried to call Jim all day and got no answer. That evening, she called her sister-in-law, who went to their house, where she found her brother lying on the floor. He was rushed to hospital and was found to be totally paralysed on his right side, and unable to speak. Jim’s prognosis was grave, and he was nursed in ICU, where for the next 3 days, Jim’s friends and family witnessed his transition.

Hearing and feeling dying person, out of body and present in room
On Thursday I was with friends to visit Jim. After they left, I spent time privately talking to him and letting him know how much I wanted him to live, but only if it were on his terms and that the decision was between him and God and I would accept whatever the outcome. I shared some other personal thoughts and feelings with him and asked him to help us all with what was to come. While talking with him I felt that he was still actually in his body and present. On Friday, when I walked into the room, I felt very different. As I touched his arm and said, “Good morning Jimmy, it’s Ellen.” I distinctly heard his voice and felt his presence up in the north east corner of the room. He said, “Oh, I’m not down there, I am up here.” It was weird. As I stood there with my hand on his arm, I could feel him up in that corner of the room.

Feeling the energy of dying friend enter healer’s body – to give wife final hug
Judy arrived and all day I watched her as she cared for him and at times she would break down. Each time she would go to the very corner of the room I had felt him in, and cry and then feel better. I asked her if she wanted to get in the bed with him and lay beside him. Being a very conservative woman, she said that just was not her. At one point while she was standing in this corner, I felt the urge to just encircle her with my arms and hold her. I actually felt the energy of Jim come into my body and hold her. It was a peaceful and unworldly feeling, but very loving and comforting. Judy, (who up until now would not let me do any Reiki or hug her too often) just let me hold her for about 3 - 4 minutes. I really felt as if I were helping Jim to give her one final hug.

Receiving portentous dreams
That night, while I was home in bed getting ready to sleep, I spoke to Jim, and asked him to come to me in a dream and let me know how I could best help Judy through what was inevitably to come: his death. That night I had a dream that we were all in his room, and all the machines abruptly stopped and he was dead. I suddenly woke up and looked at the clock, it was 5:35 AM. I thought perhaps he had died, but did not receive a call. I met Judy at the hospital on Saturday we were all in his room, and all the machines abruptly stopped and he was dead. I suddenly woke up and looked at the clock, it was 5:35 AM. I thought perhaps he had died, but did not receive a call. I met Judy at the hospital on Saturday morning and he had developed a leak in his ventilator cuff. The ‘Docs’ needed to fix it, in order to keep him and his body working optimally, until he was pronounced brain dead and they could harvest his organs, for donation. As the day went on, the docs were later and later, and at 4pm they began the procedure. At 5pm Judy asked me to check to see if they were done, so we could go back in. The ICU doc told me they were done, but were now going to do the first test to see if Jim was brain dead, and if Judy wanted to be there she could come in. I went to get Judy and she returned at 5:25pm, telling me she decided she could not be there, they would come get her when the test was over. The test ran from 5:30 - 5:40pm and it was positive, he was brain dead. So, he had given me a clue in my dream that the machines would be stopped at 5:35. It was weird.

And finally, Judy, Jim, Ken (Ellen’s husband), and I have a vineyard together. We all made wine for the past 8 years. Jim and I were the blenders and the label designers. He had made a label for our latest vintage 2004, that we planned to bottle in July. He had sent me the design via email, but try as I may, I could not find it in my computer files. I decided to try and create another label, similar to what I remembered the one he designed looked like. The night before we were to bottle, Judy had her first dream about Jim (it was 3 months after his death). She saw him sitting at his computer, barefoot. This was significant, because before his accident, he NEVER went barefoot. She asked him how he was doing, and he said “Fine.” He then returned to the computer to work. The next morning, I looked one last time for the label image, and guess what? I found it on my computer in the first place I looked. Judy and I think he was resending it.

FRANCES
Perceiving the person’s aura as less vibrant three years prior to physical illness and death

When we saw him three years ago he had physically lost weight and though physically he appeared to be very vital, energetically he seemed tired. That’s the only way I can put it. His aura looked less vibrant. When a person looks well, really happy and passionate about what’s going on in their life and they’re physically well, their aura is clear and any colours around them are very clear and they’re very strong. I don’t see an aura as a static thing, I see it as a movement of energy that moves from the body outwards and if the body is sick I see swirls of dark energy. The colour of dark brown or the aura becomes slightly darker. It’s the difference between slightly darker. You see things in the sunshine as a vibrant, vibrant colour and I always liken it to the ocean and if you have beautiful white sands like you do in the pacific islands, the ocean looks a magnificent turquoise blue and when the sun is not on it you can still see it as a turquoise colour but it doesn’t have the vibrancy that it does when the sun shines and I see the aura in exactly the same way as that … So when we saw this gentleman about three years ago his aura looked more muted … But he said that he had lots of energy and he certainly was doing lots of things and he was very physical and for all intents and purposes he was well and happy and so forth. But I still saw that his aura wasn’t as bright.

Now they were living in Malaysia and they returned August last year which was a year and a half since I had last seen him and I guess I turn that gift on and off so that if I’m not doing a reading for someone or if I’m not deliberately needing to turn that part of my gift on I just go about like a normal person and I don’t notice it. I can’t go around noticing it for everybody or I would go nuts. I turn it on when I’m working and I turn it off and I can be as dumb as everybody else and not notice it. It’s a terrible thing to say but…

Perceiving yellow aura around person’s head denoting intellectual attempts at combating illness

And so what I did observe straight away when we came back from Queensland, in the middle of September, I really saw him every time he was being really positive, there was a lot of yellow around his head so I really feel that he was being really positive in his head but not in his heart … He was really trying to brain, being well rather than work with it from a heart space. So over a period of those next 6 weeks, even though four of those weeks he did fight it really hard including going to radiotherapy and he went to a naturopath and started taking those things but it was really too little too late.

Perceiving diminishing energy body, 6-8 inches remained static 3 weeks before death

And over that period I could literally see him having less and less energy body around him, until it got to the last three weeks of his life there didn’t seem to be much difference. His energy seemed to shrink in a bit and I could really only determine an energy body six to eight inches around the body and that whole three weeks I didn’t see any change, because I’d look at him every day to see if he was going to be better or worse and physically, he’d have some really good days and physically he’d have some really bad days.

Perceiving shrinking, muting and slowing of energy body four days before person’s death

But I still saw him every single day and in that last three weeks, I really didn’t see a great change in his energy body until about two days before I went away and that was four days before he died. And then, I don’t know how to describe it really. It was - I knew he was going to die and it was like was it going to be today? Was it going to be tomorrow? Was it going to be next week because his energy body around him hadn’t really changed and then around about four days
before he did die, it suddenly shrunk in and you could still see an energy body around him but it was very muted and very slow to move. When you’re well, your energy moves out from you quite strongly and it’s vital and it moves out and dissipates, from what I can see, into thin air, so to speak.

Perceiving grey brown colour in person’s aura related to emotional concerns
(The colour was) mostly grey and brown, mostly browny – grey. He did in the last week; go through a lot of emotion. We had lots of really hard conversations with him about what he wanted done after he died. Because he realised after he couldn’t get out of bed that he wasn’t going to get up again, and that was really upset. And he was really, really upset about dying in someone else’s house. And when we had those conversations, I said that “we have spooks in this house all the time. I talk to spooks all the time and we wouldn’t be upset if somebody had a baby in this house. If someone was born in our house it would be a wonderful privilege, so what’s the difference, it’s still a privilege to have someone die in your house. Whether you’re coming or going from the world, what’s the difference?”

Noticing the lightening of colour and density of grey aura around throat and chest in response to resolution of emotional concerns
We’re perfectly OK with it, and once we had had that conversation, it was like around his chest wasn’t so grey as dark. It was a really big worry for him. There were a few personal things that he was worried about, a few personal things. Finances with his wife - He’d left her in a terrible financial position, and what was going to happen and how was the funeral going to be afforded? - all that sort of stuff. And we had those conversations with him and his wife and he really wasn’t as dark across his throat and across the rest of him. He wasn’t quite as grey, not quite as heavy.

Perceiving a brightening and clearing of the energy field in preparation for transition
He actually died a day and a half after we left. We actually had to go to QLD again in November, and we saw him in the morning and I was a bit surprised, because he wasn’t very with it when we said good bye to him. He knew we were catching the plane and he wasn’t as cognitive, he was much surprised, because he wasn’t in a good cognitive state and he just seemed a little brighter, if anything and thinking about it afterwards he was gathering himself up before he did die and that morning he did look a little bit brighter, a little bit clearer. Not quite as grey and I didn’t know how to interpret that; whether he was going to go that day, whether he was going to pick up a little bit before he went, or what. But the following twenty four he couldn’t speak and really lapsed. He couldn’t breathe and he passed about thirty six hours after we left.

Perceiving person’s spiritual presence and assistance, for first couple of months following death
Oh, he’s been around [since he died]. Well, his wife is still living with us. That’s working really, really well. We get on very, very, well. Her daughter doesn’t have a spare room, we have a big house for her to live in, and financially, she is not able to get her own place or pay rent or anything, full rent anyway. So she boards here with us and it works really, really well. We talk about him a lot and obviously she has gone through six months of grieving, which is really hard. We haven’t not spoken about him. Things have come up where she looked for things and she can’t find them and she said “Well, I can’t find them because Paul looked after these things and he never let me know about this, that and the other.” And there were quite a lot of things that she didn’t know about and they had some laptops and bits and pieces all over the place and she would get quite cross because she would say, well “Paul knew which one plugged into which transformer and which went with this. He handled all of that and I had no idea.” And he had hidden all of his passwords and all the programs and internet things that he was involved with and he had been writing websites and was involved with some moneymaking things on the internet.

And he had hidden his passwords on a file on his computer and she couldn’t find it. Nobody could find it and his wife got really cross one day and we yelled at him and said, “How dare you go and leave all this and blah, blah, blah and we need to know where these passwords are, and you’ve got to tell us where these passwords are.” And I didn’t actually hear him and within minutes his son, who is Carol’s stepson [and is] interstate phoned and said, “Would you like me to take Dad’s computer and see if I can get this and this and this off it for you?” And I still think that Paul did that and gave his son a bit of a prod because it was within half an hour of us actually screaming at him and saying “You’ve got to help us with this!” Because it was important information that was locked away that she needed so, we’ve had a few things like that. I haven’t actually seen him, but we’ve sort of known when he was in the house and that was I the first couple of months.

Feeling a lessening of deceased person’s energetic presence as his wife becomes less emotionally distressed
The last couple of months I haven’t felt him here so much. But I think that Carol is a lot better. She was very distressed because it was very quick.

Describing ability to communicate with people who have passed using the higher senses
Yes, (I do communicate with people who have passed). That’s what I do. I do clairvoyant readings and John Edwards’s style chats. I see things, I feel things, I hear things and I know things. Some people I can see very clearly, like seeing a person and some people show themselves to me in my mind, part of themselves. I’m communicating with somebody’s child, who has passed in a car accident. The first thing that the child will usually show me is which part of their body was most affected and to tell their parents that that part is ok. I see them patting their head and tell them that I’m ok from top to the toe and they are patting their head. If their chest was crushed they will say, “Tell Mum I’m ok.” And they will be patting their chest so I will know that it was an impact to the chest that caused them to go. And they will usually show me their body or a part of their body and I’ll see a hand patting a part of the body, which will give me an indication or identify something that they are trying to tell me. If I have a gentleman with a bald head, I might not see his face; I will just see a hand patting a bald head.

And I will just get the feeling of a sore knee or a pain in the chest or somewhere, or I usually get a feeling of blackness over the body if someone has passed from cancer, or I get a tight feeling in my own chest with an asthma breathing difficulty or a heart problem. I’ll get a pain in the neck with or a pain in the heart with or a feeling of aocurrency. I will get feelings in my body so I will often know how the person passed. Sometimes I’ll hear sentences and they’ll be able to chat with me in my head. If people don’t speak English they will show me things because I don’t speak and other language other than English. But I do get a lot of people whose relatives who have passed are not Australian or English speaking and they won’t have any problem giving me information. Body language is 38% of our communication, so words are very little, and so they are able to give me the feelings and show me things with pictures or gestures that very quickly give me accurate information. It’s mostly a gift, yes. It’s mostly - I used to talk with people who my mother did not think were
there when I was a child. She used to tell me to stop talking to myself or the men in white coats would come and put me in the Looney bin. And I grew up terrified of rubbish bins because I wasn’t sure which one was a Looney bin.

**Story 2**

**Seeing the presence of the spirit of person who had died the same morning**

I had an elderly lady. I think that she was ninety - one and I came in the morning and she had died probably six o’clock that morning and the supervisor had attended to the first things and we went in and she had on the oldest, tattiest night gown on and I said, “Oh my God! We cannot send her away from this place in this. It’s so disgusting that they will think that we don’t care for these people!” (Even thought they were free to decide what they wore themselves), I just looked at how dirty and revolting it was and said, “No, we cannot send this woman away, so we ended up taking it off her and at least putting her in a fresh nightie before they took her away. And she had obviously passed, I don’t know early morning, and she had started to stiffen up a little bit and one arm was sticking out and it wasn’t easy and I turned around and said, “Mrs. (whatever her name was, I can’t remember), “Did you hear me, I’m on my way today? Do you know how much work it is when somebody dies in one of these places and it’s my last day! Could you not have waited until tomorrow?” And I turned around and she was sitting in the chair laughing at me; just sitting in the chair laughing. Because I really said it in fun, not in the other way. And I said, “You did this deliberately to me! You just could have waited one more day,” I turned around, she was sitting in her favourite chair, and I got quite a fright.

**Seeing the spirit as a more energetic version of the person’s physical self**

She looked like her physical self, as I knew her but certainly a lot more energy, a lot brighter and able to move around freely than she could in her physical body as I knew her. She did present to me with a vision of how I would have expected her to look physically.

**Seeing spirits manifesting as slightly younger than the age they were when they died**

And certainly when I’ve done readings for people, they’ve always presented themselves to me in the way in which the person in front of them will recognise them, and sometimes they will show themselves to me a lot younger and particularly say, “I had beautiful skin when I was younger, and this is how I looked and my hair was this and this and this.” And they will show themselves to me in a slightly younger form where they felt more comfortable.

**Recognising the value of confirming the survival of the spirit for loved ones**

But it’s very healing when you can give people information that confirms that they (the deceased loved ones) are OK. It’s the little things that they tell you, that people are healed by, and feel better with. For example, what [parents] wrote in the letter to [their] daughter that [they] put in the coffin with her … or that [they] put her [the child’s] favourite teddy bear with her or [things] like that. I had one gentleman who laughed and said, (he’s got lovely clothes in spirit) and “despite not having clothes when you buried me,” he wants you to know that he’s wearing lovely clothes and good shoes. Shoes were very important to him and they looked at me and they blinked and said, “Well, he wasn’t buried in any clothes!” and I said, “Was he not buried in any clothes?” and they said, “Well no, we’re Jewish and Jewish people don’t bury our dead in clothes.” But he came through and said he’s got clothes where he is and he’s got very good shoes. And apparently he ran a shoe factory [when he was alive]. Well it’s very validating stuff and that’s what I do, mostly that’s what I do in my spare time.

**GEORGIA**

**Story 1**

One of Georgia’s friends was in his sixties when he remarried. He was a heavy smoker and soon after his marriage, he became ill and was diagnosed with lung cancer.

**Providing a sense of safety, by identifying presence of friends and relatives in spirit at bedside, allowing life force, seen as a luminous light, to separate from body more rapidly, and death to occur**

Anyhow, a few weeks later, he did give up cigarettes and a week later he vomited blood and he went down very quickly with cancer of the lung. So he hung in and hung in, and I felt that there was a little bit of fear of dying, so when I started to tell him the names of the relatives and friends in spirit, who were there to meet him, I could see him separating more rapidly, because there was this sense of ‘I’m safe’; like a child, who feels safe when there are parents to take them home … I actually saw his life force starting to separate.

Well, I actually see like a luminous light around people. See, when I hypnotise people and they are in a relaxed state, the spirit body, like the physical body, is confined like a bird in a cage. But when you are relaxed, that light will shine right out and with people, who are hypnotised and relaxed, I see the aura more. And with people who are dying, you know, you can see that light starting to come out a little bit more, until the light body, the spirit body, then will separate, and will be linked with the etheric chord, for a short time, until that chord breaks and the etheric body or spirit body will separate … Well I left his place … at about a quarter past eleven, it was. And it took me half an hour to get home. And when I got home, his sister had rung. And she rang back again and said that a quarter of an hour after I left, that he let go, because he felt comfortable to let go.

**Recognising people perceiving the presence of spirits as they are dying**

(I see the spirits of relatives and friends) waiting. Not with my eyes open, but with my eyes shut, I can see the other dimension, right? I can feel the presence of people and I can hear them. When I say, I can hear them, it’s not with the physical ears, and it’s more a telepathic thing. But when I can get the names of people and instances that they have lived through, it’s proof to them [the dying person] that these people are there. I’ve found with the death experience, towards the end, most people will become aware, or open to a little bit of that psychic stuff themselves. Now a lot of people who I’ve known, have reached or called out, and said, “Someone’s here for me.” You know. So that will happen.

**Story 2**

Georgia had been divorced from her first husband for many years, when his spirit appeared at her bedside, told her that he was ill, and requested her help, as he was afraid of dying.

**Experiencing presence spirit standing beside bed - appearing as a light form, requesting assistance with dying**
His spirit would travel from [his home] to [my home] down … to me. And at night I’d wake up and his spirit would be standing beside the bed. [It appeared as] just a light form, but telepathically, it kept coming to me [and saying], “Please come and help me, I’m afraid.” Because he’d been an atheist and I had been spiritual. So in the end, I said to Mark, my husband, “David’s coming to me every night and waking me up in the night.” So, in the end I rang his parents, who were living in [a large city] and I said, “Look Mum, David’s appearing to me every night and saying, ‘Please come and help me!’ I want you to ask him physically, verbally, ‘Is this right?’” And she went to him and he said yes, he wanted me there.

Hearing spirit communicate immediately after death
So (I visited him and) I sat on the bed and held him and kissed him on the forehead, and forgave him and started to explain the death process to him. And anyhow, he was in that house for about a week or so, and then he asked to be put into hospital. And one night I woke up at two o’clock in the morning, and I heard him say very loudly in my consciousness, “I’m at peace at last!” And I woke up my present husband and said, “David has just passed at about two o’clock.” And about five minutes later, his mother rang me from the hospital, and she said the last one that she was calling for was me, and he was at peace.

Seeing the spirit at the funeral
So, I went to the funeral, and at the funeral I saw him, and this quite often happens at funerals. You know, I’ve done many funerals as a spiritualist minister, and I see the spirit of the person standing beside the coffin saying, “Hey, that’s not me in there, here I am!”

Story 3 (Animal story)
Georgia owned a horse, which she was attempting to feed when he collapsed and later died in her arms.

Seeing the life force like a luminous blanket drift off the body and whist away
So I said, “Feldspar!” and he [the horse] came up to me, and he went a bit shaky on his legs. So the next minute, he toppled over, and I went, and put his head on my knee and said, “Feldspar, what’s the matter, boy?” And it came to me telepathically, “I’ve had a heart attack, and I’m leaving my body.” [Then], I just saw with him, the life force just drift away, like a luminous blanket drifting off the body and just “whist” away.

Story 4
Acting as a medium—relaying reconciling messages to family members
Recently, I saw a lady, who I did a mediumship for, and I picked up that she had a son, who had recently been killed and she said, “That’s right!” And he’d been only 18 and had been a champion skateboard champion, and had been all over the world, doing it and was the Australian champion. And I picked up that he had (an) accident that way, and that he had been on the back of a motorbike and killed. And the woman was so angry against the driver of the motorbike. And this young guy came to me and said, “Tell mum we’ve both had the same poison, namely dope and alcohol, so don’t blame him, because it was my time to go”.

Story 5
Georgia, communicated clairvoyantly with teenage boys, who had recently been killed in a car accident, and she relayed their messages to family members.

Acting as a medium—relaying reconciling messages to family members
And they [the dead boys] also said that they were “in the shenanigans” (making mischief), and I saw them [telepathically], outside [a local] pub and they said, “Don’t blame the driver!” He was just the one, who was meant to get them there where they had to go at that time. He was popped out [was thrown out of the car and survived] and just got scratches and bruises. And he’d been in court, but they [the dead boys] don’t blame him at all, because they [the family], have to live with that [the boys’ death] for the rest of their lives. John was one of the fathers who came here, and two couples came in, one after the other and there was a lot [of information that] came through about that. You know a lot of proof about what had happened.

Story 6
A friend of Georgia’s son, suicided and four years later, his sister also killed herself. Georgia’s friend asked her to accompany her to a viewing of her daughter.

Perceiving spirit traumatized a couple of days after suiciding
And I went there for the viewing, and the mother was kissing the daughter, but it really shook me. I guess it was because it was too unrealistic. It was too contrived with the body made up. It was too contrived and it wasn’t how it should have been. I guess I was also picking up the girl’s trauma. See, a lot of her friends there, and her Mum [was] there, and everybody [was] trying to pretend that it was OK, and it wasn’t. And her spirit was still in trauma … The spirit was still going through trauma, and the body laid out, as if it was perfection. There was a dichotomy. It was a couple of days after her death, and her spirit was still traumatized, and I spent time with her mother after that, and she was at peace.

Communicating with spirit after recovery from trauma and receiving guidance to support grieving father
She [the spirit of the dead girl] comes through and laughs now. I was at the graveside and I was holding the mother there at the graveside. She was buried on top of her brother. The mother had another young son, about fifteen, but the mother and father had another baby, who had died at nine weeks old with heart problems. So, the father’s three children had died. And after he spent time at that graveside, he went to the infant’s graveside. Anyhow, the daughter said to me in spirit, “It’s my dad’s birthday on Sunday, make him a birthday cake.” So, I had only met him once, at the brother’s funeral, and then at the sister’s funeral. So, I made him a birthday cake and I was thinking, “What should I put on it?” And she said, “You’ve got something, in a box in the pantry.” And I said, “Have I?” And she said, “Yep.” So, I went and looked in this little box of ornaments that I collect, and here was this little baby angel, with a bible between its legs, and a halo, and that went on and from spirit she dictated to do this cake.
Counselling spirit and recognising a transition from a state of trauma to calm

Exactly, (she really came through from a much traumatised state into a calm almost happy state). [I conversed with her when she was in a traumatized state] and I was saying to her, "You be at peace now, you’re past the pain, past the suffering.” [She said that she had suicided], because of a broken heart, like her brother: girlfriends, boyfriends, all that, with a little bit of alcohol thrown in. She actually told me the day of the funeral. [She didn’t regret suiciding, but was] just sorry for her mother. Because this was a girl who I’d known since she was a young kid, and in her early teens had anorexia … Puberty, postnatal, change of life is the time of most pertinent time that the psyche will open up. So, kids in their early teens opening up to it, and not understanding it, makes what is happening to her (pause) it’s very easy for this to happen; for malevolent spirits to get in, and torment them. So, this girl had been very, very sensitive, very psychic since her teen years, and had had a close death experience, and got to a week off twenty, before she took her life.

HELENE

Helene spoke of her friend, Penny. Penny’s ex husband, Ivan, collapsed in the street, and died from a heart attack. He had become a drug addict and was estranged from his family. After his death, the police contacted Ivan’s 17-year-old son, Jeff who was next of kin. Penny helped her son arrange the funeral, and Helene, Penny’s friend, supported her.

Feeling presence of soul near coffin

Anyway, the funeral was a cremation and so, it was a very, very small community at it. There were only a few people there, when the coffin was in the crematorium, so we were all sitting there, and there was the ritual of just walking past the coffin. And so I did that too, just out of honour of my friend and her son, and while that was happening, I could feel the soul of this man still there.

Perceiving that soul confused physical death with drug induced state

And the interesting thing was that he didn’t think that he was dead, because he thought that he was on a heroin trip. So, he couldn’t distinguish that, that was it [he was dead].

Sensing that as body burned, soul acknowledged physical death

When we were driving home, all in separate cars to meet, and during that driving home, all of a sudden, I could feel that his body was, burning and that gave him the message that, “Yes I’m dead.” And his wife felt the same thing and she said “Did you feel that, as we were going home?” So, when they burned the body he was leaving so, that was the first time that I felt that this ritual was important.

Experiencing presence and disturbing influence of wrathful entities

That was three days after he died. But, what happened was, that it was ‘full on’ [because], knowing that he was not on a heroin trip, and knowing that it [his death] was for real, and that he was not coming back. And then what happened was Penny rang me very distressed a night later, because she had all these entities around her house. [It was] huge! And I said, “I will see what I can do.” And I have never experienced what is described [by] the mystics as ‘wrathful deities’. And what happened was, we [Helene and Penny] had a chat on the phone and I said, “Look do these and these rituals, and I’ll see what I can do”. And I had a quiet time [at work] and prayed for [the resolution of] it. Then, [as] I was falling asleep (it was about midnight), [and] I woke up and my whole house was shaking. My bed was shaking! It was like... just the psychic stuff I have witnessed, but I have never been involved to that extent. And it was the wrathful deities. He was known to be a powerful soul, from his family history, but he had to get through the wrathful deities [after death], and somehow, I don’t know why, he came down to his ex-wife and his son. His son was part of my clientele as deities. He was known to be a powerful soul, from his family history, but he had to get through the wrathful deities [after death], and somehow, I don’t know why, he came down to his ex-wife and his son. His son was part of my clientele as well, so I thought I’ll just help. It was going on for about two or three days. It was full on! I had to set time aside from work, and the way I deal with spiritual crises is: I set time aside and I ask all my helpers to help, as well as remembering the light and remembering the highest life sustaining source. I could feel the house shaking, and it lasted two or three days, off and on. And, it might have been the grief, it might have been the wrathful deities, I don’t know. I don’t know if our consciousness creates this, but we might have a shared consciousness [it’s friend and her], because I didn’t have it [an experience of the wrathful entities], until my friend rang me, and I said, “I will help you.” And I was going into her reality, and had to go there, and through that, it [my experience of the phenomena] was created. We then focus our consciousness on that level, of the wrathful deities, which are there at that time [at death], and perhaps through the death of someone, get a doorway to tap into that [metaphysical experience].

Story 2

Helene told the story of the death of her horse.

Seeing the horse’s spirit leave as a cone of light through the crown at death

You know when my horse died; I could see her spirit leaving. It was just unbelievable! [Her spirit left], through the head you know, and there was before this - already the helpers came, to facilitate that [her death]. They were already there [and there] was a change, from when I was aware that she would die. The first ten hours, I thought that she would survive, but then I was - or no, it was longer than that. I would say the first eighteen hours, we thought she would not die, and there was this incredible peace, between her and all the horse people there, who were very intuitive, you know. It was about four hours before I realised, that there was no change, and she would not stay in the body, because the body had a tumour or something. And then, we invoked the helpers to facilitate her death. And after making an invocation for a peaceful death, it started to happen automatically, and there was this amazing strength in her and in everyone, and there was already a change somehow. And then, there was this big cone of light, just coming out and settling her free. And the separation of the soul aspect of the body and the soul aspect of that horse - it was interesting and very cathartic. It was interesting because there was an amazing peace in the [horse’s] body and you could still feel the chemistry doing its own energetic thing - you know, the sugars still - the body chemistry - and there was a period of about an hour, because she still had the bridle still on. We were not allowed [to disturb her]. I sat with my son there. He came, we were sitting there, witnessing and grieving, and letting go, and we couldn’t touch her, so it was like she was just lying there still. It was this separation process going for about an hour, and then we could take the bridle off after about and hour … I learned a lot about being with death, with that horse. It is such a gift for me to be involved and you know, it is the transition of shedding of the body. I mean, it doesn’t matter about whether it is a guinea pig, or if
it's a human being. We have so separated our bodily existence from anyone else and think that we are
different [from other life forms], forget it!

JUDITH

Story 1

A client asked Judith to work with her husband. He was a relatively young man, who was dying from cancer, and was in
a hospice unit at a local hospital.

Travelling out of body with dying person, seeing his fearful images

And so, his wife and I went and he appeared to be quite comatose [with] changes in breath, limbs were a little cool,
although his fingernails were not blue yet, and he'd just choke and shake and act as if he was very frightened. And then,
he would be conscious again. So what I ascertained, not so much from words that I could say, because he
couldn't speak a lot at that point, but from being able to go with him, and see the images that he was seeing, which is
one of the gifts of many of us in the healing work, was that he would kind of float out of his body, and see some very
fearsome, frightening images, and wham back into his body, because it was too terrifying … And you don’t know
whether they, [the frightening images] are wrathful, or what they are, because even the wrathful deities, if you are
Buddhist, are protectors. They don’t scare the person, they scare everything else off.

Being non interpretive of discarnate images when assisting with out of body experiences

Now, part of it is that – it is discerning that, [what the entities or images are] you know, if I felt that the images were really
deities, that were actually protecting him on his journey, I would have spoken to them. But he had done a fair amount of
marihuana, hash, whatever, in his past, and I don't know what his experiences were with that, but he could have had a
biochemical set up, or sensitivity to seeing things … Now, there is always stuff [discarnate manifestations] around, so it’s
hard to interpret what it was that he actually saw, other than to work with what was very frightening to him. What I
found also was to be very careful about not ascribing a specific religious [or conceptual even], overlay, to anyone’s
experience. Because, especially when they are dying. They [the dying person] just get really mad, and just come back
and chew you out, if it doesn’t fit what they see, or what their construct is.

Explaining illusionary images and guiding the person towards the light

So what I started doing with him then was where we just sat there and one of the times that I experienced him taking off,
I just started talking to him. And I said “Can you see a light?” And I got a grunt, a nod, or some indication. I said, “All
around you are illusions. They cannot hurt you and just keep your focus on the light and just moving towards it.”

Maintaining a safe perimeter around person to facilitate a peaceful death

And he did that and one of the things that I thought I was doing - one never knows in these circumstances - was trying
to keep a safe perimeter around him and encourage him. And he died right then in that guided imagery, and his wife
knew the minute he was gone, and you could feel the room, and he had made that journey and his face just took on an
image of great peacefulness.

Sensing consciousness leaves just before body dies

It looked beautiful. And it took a few minutes before the breathing stopped. My sense is that people’s consciousness,
or soul, or whatever you want to call it, makes its transition before the body actually quits. But it quits very shortly after.

Story 2

Judith worked with a man, who was dying in hospital. He had a particularly unpleasant personality, was emotionally
unavailable to his wife, and was very critical of others. His wife and he belonged to a fundamentalist spiritual tradition,
whose stated beliefs to Judith were, that following death, the soul remains in a state of void or suspended unawaresness,
which lasts until the second coming of Christ.

Perceiving and interpreting person’s wonderful visions of the other side

So his wife is just sitting there and pretty upset and he was in a coma and I was just sitting beside him and all of a
sudden he comes back and he opens his eyes and I'd never seen him look delighted before, and he was kind of glowing
and smiling, but he still couldn’t speak and get out, so I said, “So, have you been on the other side?” And he nods his
head really vigorously. So I just asked him as series of questions, trying to ask what I was seeing, so his wife could get
it. I said,” So was it really wonderful?” And he said, “Yes”.

Perceiving patient died after communicating love and survival in a wonderful place

So in this whole odd thing, the one thing that he wanted to do, was communicate to his wife that he was in a wonderful
place, he wasn’t in cold storage, and that he loved her. And I don’t know how long it had been since he’d ever said
anything like that. And so as soon as we finished this and it was a sense that everything that he had wanted to
communicate had been communicated, his head dropped back on the pillow and that was his last breath. And his wife,
you can’t imagine how grateful she was. It was a true gift of comfort for her because, for one thing, she saw this - I’m
sure in her earlier days she’d seen this loving kind side of him. Also that he was … he’d gone to a really good place.

Likening peak events at death to welcoming a new life at birth

I’m always very thrilled, because I consider it a great honour to be there during those times. Sometimes people just
fade off and they go, but every once in a while you get one of these peak events, which is like a birth, almost. People
call me to come to births. I’m often present at births and the feeling in a room of welcoming a new life. Sometimes
cheering someone over in their death almost has the same feeling.

Recognising to heal deeply the healer cannot carry a fear of death

What was interesting in the light of your interest in the gateway of death was that the bottom line of that, [extensive tests
and initiations, experienced when training with Balinese healers] was if you’re going to work with healing deeply, you
cannot carry a fear of death. It needs to be dealt with, like in any shamanic culture. The shaman has faced his own
mortality, leaves the door of death, and comes away going, “O.K. I’m not scared anymore.” And I think that, that is the
great value of near death experiences. And so many people worldwide have had those, and however that wisdom
knowledge is applied, the consistent bottom line is that there is no longer any fear. You know, nobody wants to hang on and suffer and be really sick if that still lingers there, but the actual go over to wherever it is, has lost its turf.

JULIE

Perceiving energy shrinking when person is dying
I start to see their energy and when people are dying their energy field starts to shrink. I notice changes in people based on this energy field that shrinks and expands and things.

Noticing impediment to the clear flow and scattering of energy field with emotional distress prior to diagnosis of illness
I picked up there was something wrong with him [Dad] months before he got diagnosed. There was some distress; there was some change in him. [Energistically], you know, I notice with some people they can be fully open. You can approach them and they can be fully open to you, and you can feel as though you are walking through an open window, and other people, they are sort of blocked and a barrier and what you [are] perceiving is coming sideways, it's coming around something. Some impediment to the clear flow … He was distressed about something. I knew there was something distressing him. Ah and that wasn't just an energetic perception, you could see it in his behaviour, he was preoccupied. His energy was very scattered and so he was worrying about something … Anyway, he actually had an experience, where he got this blinding headache, and lost his voice and he had that investigated and found out that he had a brain tumour the size of duck's egg, and all the early symptoms of his brain tumour, which they had interpreted as him being depressed.

Noticing emotional and energetic opening following terminal diagnosis
He was more open than usual, once he had found that out his diagnosis. So, we all rallied, the whole family … He opened himself though. He knew that he opened himself, I think. I mentioned that last time. He let those barriers down. He was really gentle and was hearing other people, and he was allowing other people in close to him, which [was] something he had always protected himself from … we rallied around him, because he was frightened of going into hospital and had expressed the wish that he wanted to die at home. He didn’t want to go into hospital, so we all respected that and my brother took time off his job. He was working as an orderly at a hospital, my sister came over from Canberra and my partner and I and mum, and we all nursed him at home for the last couple of months. So, you could see in someway his energy change from this fearful, something’s wrong, scattered energy, to this open, I'm drinking it up.

Perceiving weakening, diminishing energy field as disease progressed
And so his energy gradually got weaker and weaker and I could tell that through … you know … he stopped filling the room. And it became smaller. You know, as our energy moved in. It wasn’t as though it created a void; it shifted the balance of energy. So, there was more of our energy going and bolstering.

Perceiving the quality and vibrational frequency of energy differs between people differentiating patient’s and support people’s energies
People have a characteristic energy with different vibrations. So, for instance, I just can’t be because their energy is so full on and I really have to protect myself from them around, some people. [A relative] is a scatty person and she was one of the ones who were helping. And, you know, she always unsettles me and unbalances me, because her energy is a very high frequency and scatty. It jumps around. So, I know people, and I know their energy. The quality is different for each person. So, my father had his own vibration, you know. His energy has its own vibration, you know, and so that’s how I could tell the difference between his energy and our energy coming to fill the room.

Perceiving relatives’ energy bolstering and supporting dying person’s waning energy
Because to me, energy is just love, pure unadulterated love. That, to me, is what energy is. That’s what my philosophy is. And so, as his energy and his life force was gradually waning, our love and our energy was coming in to bolster and support him. So, you know, if you walked into the room, it wasn’t just all clear, all of his energy. it was a mixture … people don’t have to be in the room to have an energy presence.

Feeling a connecting channel of energy
And you can feel, I can feel, my connection with him, and you know, it’s kind of … again, it’s like a channel of energy that connects. And I could feel a change in that connection. There’s kind of like, with his energy and my energy, kind of like a strong rhythm between us. It was more and more directional coming from me to him. And the connection was more being sustained by my energy, more and more as his energy faded … Not from any wish from him, but just because his energy was being depleted and he had limited resources that he was prioritising for my mum … You know, it was just the way it should be, they were such a love match.

Perceiving a threadiness of energy field
And it’s like a pulse that gets thready, the energy field got a bit thready, if you know what I mean. And he was exhausted. You could feel that he was getting really tired and he was wracked by pain. And he really - he refused to have morphine and stuff like that - he preferred to have low key things 'cause he wanted to be fully aware. To not create any barriers to perceiving things. This in terms of a longterm situation wasn’t such a wise choice. But it was a choice he made, at the time, and it meant that he experienced a lot of pain but it kept him clear. His consciousness, and his perceptions, so that was good. So he got weaker and spent more time in his own world …

Perceiving shrinking and concentration of field around the upper body
It’s like the shape of someone’s field changes as they are dying, because that’s specifically what we’re talking about. It’s like, when someone is healthy, it feels really dense, but it extends well past all parts of their body. But as they die, it shrinks and it kind of becomes more and more concentrated, around the upper body about the torso … So, not so much down in his feet at all, in that last day or two … And [Dad’s energy field] was more concentrated around the body, torso, head region and the edges weren’t too defined.
Perceiving hot, brilliant red-pink flare of energy filling the room as person neared death
And the temperature changed [as] he died. Um … he, it was almost like a combustion … He did get congested, but it’s almost like something … It’s like going out with a bang … You know what I mean? As it fades … as the energy fades, it has its last brilliant flare … It was a feeling thing. That reddly, pinkie colour that I described, which is more like a tinge and it’s not just a solid thing, so it was like a woof out that filled the whole room … it goes red and also it’s like an explosion … [It was] late afternoon. And that sustained, so it was like that - this heat and this concentrated energy and stuff - it had started about six and it was full on and I didn’t expect him to be alive for very long … Just as a nurse, you could see, really, convening, showing all the signs that he was about to die.

Perceiving hot energy remaining in the house for a week after death
So we both asked Mum … you know, supporting her … this was still, when Dad was still there. He looked so peaceful, and Mum was too frightened to go back into the room, and so we were sitting being supportive of her. But his room still contained his energy, though his life had left his body per se. It was a hot energy, and it stayed in that house for a week at least. It was around and … that was for me feeling a presence … that hot energy.

Perceiving communication in dreams for six months after death
And I guess that was me, perceiving the energy for about a week or so. It was also, he came to me a lot on my dreams … for about six months or so. It may have been a bit longer, because I remember one dream I had and it was like me letting him go. And I remember telling it to Mum and I told her that I felt like a large cabbage lifted off my chest… how bizarre!

Story 2
Perceiving very frightened energy corresponding with fear and struggle
So this woman was very frightened of dying, and she was struggling and fighting and she had very frightened energy … We’d do [nursing] rounds and I was conscious of her, and like checked her as soon as I came on to see how she was. I did the round that was compulsory to check the others, and then went back and spent some time with her … Just kept and eye on her, you know. I was doing that all night, spending time with her, and she actually died after my knock off time, but I stayed with her.

Perceiving a calming at approach of death
At handover time I knew it would be anytime, so I spent a long time with her during the night, because I could spend time with her, and just kind of sending her love. And she had calmed, that’s when I knew it was at any time and so, I actually did the handover and then went back and sat with her.

Sensing a pale, blue, wispy, thin thread of energy above the body prior to death
She was different from Dad. Energetically, she had a lot smaller presence. She was like the guttering out of a candle. It was just like she got dimmer; it was like there was a very thin thread, and you know that was hanging on to this very pale wispy energy. Just a pale thin thread that was holding her here. It was above the body. This was at the end most of it had already left the body already. All there was, was this thin thread … It wasn’t a thread energy, it was a very pale, very thin, and there was a tinge of blue and it was over the body. It was still in the room, but was over the top of her and I couldn’t discern an upper margin to it. So, there’s her body lying there, and this is the thread, [gestures above her head] and I couldn’t see the top margin. And so part of what I did, was to just hold her hand and stroke it, and I knew her story, so I said, “You go home.” And that sort of thing.

Perceiving a diffuse, cool, bluish energy following disconnection of thread
So, what happened then, was that the energy then became general and diffused in the room. The thread was there, connecting to the physical form so, the energy became (pause). You know how I couldn’t discern the upper margins. Well, I couldn’t discern any margins, when the thread had gone. There was just a diffuse energy that was there. And it was a cool energy, and it had that slight bluish tinge. I don’t know why.

Perceiving energy ceases to have form and definition after death
I think the energy was still everywhere, including in her body [after her death]. But it wasn’t, it’s almost like the purpose of energy is like (pause). The energy is within us. Our life force energy is contained within us to a degree to function as some sort of enactment, our human potential, and love whatever. It’s within us. And it fuels us, keeps us going and, to do that, it inhabits us. But when we die, it’s our energy, but it ceases to have form, it ceases to have definition; it ceases to be within a container. It is a diffuse energy that is around everywhere, but it’s not purposeful, if you know what I mean.

Perceiving the soul energy moves out of the body and the field and mingles with the matrix of energy in which we live, losing its specific vibration.
When the thread that connects the person’s individual energy, that purposeful life force energy, is detached, their energy starts to dissipate. It moves out of its container, the body and the body fields, and gradually mingles with the matrix of energy we live in. It becomes part of everything and gradually loses its specific vibration. I’m speaking about my perceptions here, not for everyone, just my experiences and beliefs. This takes quite a time, a week or so for my father, less for this friend as her energy was weaker to start with … The soul energy is not contained or restricted to the body. It surrounds it, the area, the people connected, the room. I experience it as a different sort of energy. I can feel the residual cellular energy in the body, but it’s not the same as the soul energy that I feel around the body and the room.

Perceiving that the energy of matter remains longer, emanating from the body and returning to the greater matrix of energy
There remains for longer than this, the energy that is released from the cells of our body; the energy of matter. It too, returns to the greater matrix of energy, and emanates from the body.
Observing need to respect the body and the energy in the room after death

So when I say about respect, it's about respecting the transition of the energy out of the body, the soul energy. And it can hang around for a while before it dissipates. The respect comes in how you relate to the body and the energy in the room after death.

KELLY (Interview 1)

Story 1

Kelly and her partner were living in a remote rural area. They called in to assist their neighbour, whose 7-day-old baby was critically ill.

Seeing blue outer energy field around body, energy fluxes in health rays in critically ill baby

Jackie was a single mum and the baby was limp, but I would describe the baby as not having died at that point, and why I can say that, I guess, is looking at her energetically, she still had her outer energy field, which is the blue field around the body. And there was still energy fluxes in the health rays and there was still, I would say, a heartbeat, although very weak incredibly weak.

Inner energy aura and opaque colour in absence of etheric, emotional and mental bodies

There was also an inner energy aura, but the three bodies or the etheric, emotional and mental bodies weren't there anymore. There was just an opaque colour. So, yeah, there was a point in which it was imperative to get help for the baby immediately, and instead of waiting for the ambulance, I think my partner went down and rang for an ambulance and we left to meet the ambulance.

Seeing reversal in usual energy field pattern - blue on inspiration, red on expiration

We went with one vehicle with the baby, and we had to continue to do mouth-to-mouth, as the mother had done. The baby would - there would be a response in the energy field of blue, so when there was oxygen in the baby's chest or lungs, it would show in the energy field as blue. When there was breathing out [she wasn't actually breathing at this stage, for herself]: when there was air coming out of the baby's mouth, by I guess, the collapsing of the lungs. It was interesting, as it was quite the opposite to what often happens or what I usually see, as somebody breathe. You see red in the body and blue when they breathe out. At this point, the baby's mechanism had shifted from blue to red; blue on the in breath, and red on the out breath, which was different to normal.

Observing energy field turning white, near death

As we went over the border, we had to stop for a little while, well on a few moments, and the baby [was] to be passed back to her mother. At this stage, I had to do mouth-to-mouth, with the baby. I can't remember when … it turned white; the field turned white. At that point, I believe the baby was still alive. Then, we went in our vehicle down to meet the ambulance, and I know the baby was still alive, although it [the energy field] was starting to get whiter and whiter; all the colour on the baby was starting to get more opaque. Even around the body was starting to get more opaque. You know, I've never talked to anyone about the death of this baby. I might have said that it died, but I've never talked about the process, Kate.

Seeing white smoke leaving head as baby died

So, we were in the vehicle, rushing down to meet the ambulance, and every time we breathed into the baby, it would respond with this blue and red, but we were failing in the process, we started to know that it was almost like - it was hopeless. We felt helpless - we're not saving the baby, but [we thought], "let's do to the ambulance." You know, that was our rescue. We met the ambulance, about half way down the hill. I won't say where we were, but yeah, we were going towards the town, and we were half way down the hill. We met the ambulance and we were still doing mouth to mouth. We gave the baby over to the ambulance and as soon as the mother let go of the baby, there was what I could only describe as white smoke left the baby's head and I knew that the baby had died.

Perceiving spirit present, energy black and aura absent

And the ambulance driver put the baby on the - I guess it was like an area near where he was sitting; it was like a little sitting place. He just put the baby there and he didn't continue to do mouth to mouth. He didn't say the baby was dead, he said that if we brought the baby back from here, it would definitely have some mental incapacity. Basically, he made a decision, I think, at that point, not to bring the baby back, and I feel, that all of us let go. And the baby had left, but hadn't completed the leaving process. And when he said that, it was like, everyone gave up. It was like this was like the voice of authority, and who wants a baby that you know, is mentally handicapped? So, the baby was - I think that he may have put some oxygen over the baby, but not for very long; maybe less than a minute and then and now, looking at the baby; if I look back at the baby, the energy had gone quite black. Actually, like as though she didn't have an aura at all. I believe the baby was conscious of what was happening to her, but she could no longer get back in the body. So, I think at that point when it was black; it was very dark, I think, prior to that point, the baby could still have been resuscitated.

Perceiving that baby's consciousness was still present and unable to get back into her body

I think that the baby couldn't get back in the body, but the baby was totally present. Now, at that point, I can't tell you anymore, because at that point; and this was really horrific: the baby was strapped in the ambulance and ... She was put in the front of the ambulance and the baby was taken to the hospital and so, I can't really say what happened anymore. That's all I saw of the baby.

Perceiving consciousness in the form of little circular ball - disconnected from body reconnected to mother and identified with a vaster consciousness

And I only saw the baby again at the funeral parlour ... I'd say that it was two weeks [after her death, when we saw her in the funeral parlour]. The baby's body was very white. There was still a tiny -- like, I think that all things have a particular energy movement, so there was a little tiny energy movement, but the baby was no way connected; the baby was no longer connected to the body, whatsoever. But [she] wasn't gone. But the baby's consciousness still hadn't left, but she didn't recognise her own body. She didn't recognise who she was, she didn't have any attachment to the body, but she was still in the funeral parlour, so I can only suspect that she had attached herself back to the mother. She may
not have, but all I can remember is that she was still in the room of the funeral parlour. She didn’t know where she belonged, so she was - I wouldn’t say distraught, but she was confused, and in a way she was still in the mode of a baby. She didn’t have language and she still had the consciousness of a baby. I understand the consciousness of a baby, not to be very embodied, very in touch with the physical body, not to be very strongly identified with its body. And as it grows, it gets more identified with the ego of body. So, the energy of the baby was still unconsciousness of its form. But she still had a form, but it wasn’t a baby any longer. Her consciousness or her being wasn’t a baby, it was as just like - how I saw it as a little circular vortex, really not a vortex, more like a circular little ball. Even though it was a ball, it wasn’t identified with that either. It was identified with its consciousness so it was much vaster than that...  

Story 2  
Kelly attended the funeral of a friend, who died unexpectedly, from heart disease.  

Seeing person in coffin pink, alive, breathing - energy still attached to body  
And at his funeral I actually saw him breathing in the coffin. That was really, really, freaky. I just really wanted to scream out and tell everybody. It was really overpowering, to tell everybody, when we got there. [There] was such as strong sense, of being held back, because what people would say? But, what I recognised was, that he hadn’t left. He was still very attached to the people at the funeral, and he had not left the body. He was actually breathing in his coffin. [He] was still attached to his body and his body, was still pink and alive somehow. Yeah, it was all pretty big! But with this man - with this man breathing, I didn’t know my responsibility at that time, you know, what to do. I did write a note. Like, people were writing notes, and putting them into the coffin, as goodbyes and ‘send offs.’ He was really loved, this man. He had a big heart. But seeing him breathe, it was different. The energy of the man, I can’t call it consciousness. The energy of the man, was still really attached, to the body … And I didn’t know what to do and then there was a queue going up to the coffin and I thought I’ve got to go up and I think what I wrote in the note was something like, ‘You’re dead and you need to move on’… I think that you’re dead and you need to move on … But then when I looked at him, up close to the coffin, I didn’t see a dead person, I didn’t see a - He looked completely alive to me. I saw somebody else in a coffin once, and he looked waxy. With this man, it was like we had this heart connection and he wasn’t dead. He was dead as far as the medical profession went, but he wasn’t dead … [I saw his chest rising and falling] I saw his physical body, like, I almost fainted, because I thought, ‘Shit! He’s still alive!’… And no one knows that he’s still alive! I freaked out in my head. I just freaked out and I made myself keep looking and it kept happening and I’d look away and I’d look back, but I knew that everyone else going up to the coffin - no one else saw it.  

Energy field grey-white smoky cloud - consistent colour and thickness surrounding body  
First of all, I saw the breathing and it was as though the energy field of the body, it didn’t have blue around it, but it was all cloudy all around the body, so it was like again a bit like smoke, but, smoke had a tendency to be different colours or thicknesses, but this was all then same. There was no inconsistency in colour or thickness, it was completely equal around the body, and all around the body was smoke, you know, the colour of smoke. (I know smoke can be different colours) but this was very grey, going to white, but not white. Yeah, so it was like that. So I had a sense that over the next month the body and his ashes were out [at the crematorium], so I didn’t complete something. Maybe I should have - maybe I still should go back up there and see what I can see there. Yeah, but there was no colour around the body.  

Spirit in form leaving and returning to body  
But there was a point when he did leave the body as a body, when he was just a shape and a form, but he quickly went back to the body. Yeah when people were talking about him, he actually left the body and was sort of interested in what they were saying. Yeah, there was an interest in what people were saying about him. Yeah, it was almost like he became more alive then when they were talking about him.  

Story 3  
A client of Kelly’s, who was terminally ill with cancer, requested that she visit him in hospital for healing and counselling, as he was in intense physical and emotional pain.  

Perceiving etheric, emotional, mental and spiritual energy bodies close to body  
And when I saw him energetically, his physical energies; his etheric, emotional and mental and spiritual bodies, were very close to his body, as was the spiritual body, in the sense of us being spiritual in a physical way.  

Seeing the creation of supporting energy body – another self - used as a refuge from pain – an intermediary body  
But his other spiritual body - uh, words are hard to describe. It's hard to describe this, because there is not a language so much for it, but there was another body, outside of his, which was a supporting body, where he’d been endeavouring to be a lot of the time. It was as if he was creating another self, another being, and it was wailing, it was basically wailing for him. It was also where he went as an escape from his physical and emotional pain. It was like he had started to create another whole form for himself, and he wanted to know what he had done for this to happen, and before he asked, he told me something. He'd actually identified it for himself, which often happens ... This energy body that he could move into and out of, that was like part of his soul. That was like something coming in that was creating this, because it was time to move on. There was physical pain, there was emotional pain, and there was a timing thing that's the soul … What I'm talking about is there is something between the soul and the ego. There is an intermediary stage, between leaving the body, and being something else, creating a new form. See, with this other man, that I could see breathing, he hadn’t had time to create another form and the baby hadn’t come into the form enough to identify with it. It was a different experience, so this man had created a form to move into. He needed a form to move into, but that one thing too, was an intermediate stage.  

Connecting to ‘beingness’ of person - beyond body  
And the second time, I went to see him was in hospital, and basically his family were wanting him to die, and were willing him too die, and were telling him (that) it was time to go. And I spent time alone with him, and we didn’t speak physically, but we spoke spiritually to each other. And I was talking to his inner self. I can’t talk about this in terms of energetics, or the aura, but I can talk about this in terms of connecting to the heart of the person, or the ‘beingness’ of a person. Having a conversation with that person, guiding that person and experiencing a lot of fear that that, that person had. And I’m saying person, because this goes beyond the characteristics that I might have identified as this person as...
being. Although it's still an identity, it's beyond the identity of say - we call someone a name. When I'm talking of these aspects, because it's not separate, but it's not the consciousness. When I talked about the consciousness of the baby, it's the inner working of somebody, it's what they feel is important to them. It's something beyond the body, yeah.

KELLY (Interview 2)
Kelly described the passing of a person who she perceives to be a spiritual practitioner of very high degree.

Perceiving the person's emotional detachment to her pending death due to inner control, insight and inner peace
But [during] the process of dying she was detached. There was quite a lot of detachment that wasn't based on denial but based on inner control and inner insight and inner peace.

Understanding that the person's lack of pain resulted from her faith in prayers being said for her
She wanted me to tell people that she didn't suffer. She actually didn't suffer physically, in that - she did suffer physically, sorry! But she didn't experience pain, very often, [and] her form of cancer should have created a lot of pain. But she said that she didn't and she said that she knew that it was from the prayers. And she had many, many prayers, being said for her, even by different religions.

Perceiving a state of consciousness and peace that remained throughout the dying process
But in that dying process, something that I saw that was unusual was a consciousness that stayed throughout the process ... So that in the dying process, there was an extraordinary peace. She held everybody in that and her family were very protective of her at the same time. As she approached death, she was very conscious, her mind was very alert, and that played itself as the unchanging veil, really.

Seeing a clear undisturbed, greying of energy, surrounding the person like a blanket, six weeks prior to death
And there was a greying of her energy which was very clear and when I observed her in the sixth weeks prior to her dying there was a grey element over her body but, it wasn't disturbed in any way. It was almost like a coat, a blanket around her.

Noticing a disturbance in energy field resulting from an abusive encounter with a doctor
There were a couple of instances where that got slightly disturbed and that was by a doctor; an interaction with a doctor. The intervention she took control of because she was very assertive woman in a sense of her own not taking any nonsense or stupidity from people. She couldn't stand idiots [laughs] and if she found one ... but her doctor was another story. He was an extreme idiot. He was worse than an idiot really, [he was] quite abusive. The only Karma that was happening at the time, negative karma actually, was the doctor, which she actually handled very well. So it was unusual in that she wasn't suffering a lot of pain, and that her mind was still.

Perceiving that the physical exhaustion of the loved ones allowed the person to let go and die
And then she died in the early hours of the morning, and what happened was that people had got very exhausted. We all had to the end of our tether, so to speak, this was the only way we could all let go to be physically exhausted and unable to continue, and she had got to that point too.

Perceiving that the grey energy blanket remained around the person as her breathing deteriorated and death was imminent
And then, there was a name for it, Cheyne-Stokes breathing started to happen and even then that grey blanket was still around her... when she started the Cheyne-Stoking, it was obvious and everyone came around, and prayers were done for her then. No, actually they were there and we were all a bit in awe of what was happening.

Portending that passing would be very sudden
I knew she was passing and it was going to be very sudden, that was the unusual thing. I knew it was going to be very sudden so I aroused everybody, because some people were sleeping, some people were in the waiting area, so I pulled everybody in and we stood holding hands around her bed.

Perceiving she vacated very quickly out the top of her head
And then she vacated incredibly quickly out the top of her head.

Travelling with the spirit of the person until she reached her spiritual Kingdom
And I journeyed with her for some way and this was unusual, because I actually did the Phowa [Buddhist] practice without consciously thinking of doing that. It just happened that I shot out the top of my head the moment that she left as well and travelled with her some way and then I got to some gates or doors or something and I couldn't go any further. You'd have to go beyond this way and she didn't need me. I'd actually promised her verbally that I'd help her travel. I didn't exactly say travel but I said that I'd be with her the whole way.

And that hadn't happened to me before. I'd travelled with others but not where it was so definite. I could not go any further and it felt to me like she had entered her spiritual kingdom, which wasn't mine you know unless you die you can't enter the spiritual kingdom and it did seem like this. But other people had amazing experiences at that point. It was like an explosion when she left her head. I don't know actually [what it looked like] because it was happening to me physically as well. Other people would have seen it. I actually made a noise and went out the top of my head. I wasn't observing what it looked like because I wasn't actually there ... I don't know if I actually had my eyes opened or closed.

Perceiving the function of Cheyne Stokes breathing to bring energy into the body in preparation for leaving
But the experience was of amazing propulsion of an amazing velocity, you know it was incredibly ... The Cheyne-Stoking seemed to bring the energy into her body to leave ... So there was this powerful experience of building the energy to leave ... It takes energy to leave. It actually takes a lot of energy for some people to die.

Seeing that the physical feeling of coldness in the person's feet was inhibiting her from leaving her body
But just prior to that I'd looked at her feet and they'd gone blue and I'd realised because all the time her feet had been too hot. It often happens with cancer that they actually get hot and she had been like that. And probably only an hour
before she died I'm a bit mixed up with time, the others would probably know. At some point I knew that she couldn't leave. The physical feeling of coldness in her feet - it was too cold for her. You know that physical sensation can keep you in the body. So I put socks on her and it wasn't long after that that she left. But the really strange thing was that [after her death, her daughter] went to a psychic and she talked to B's mum and she said, 'My feet were cold.' You know what a funny thing to have said, Madeleine telling her [daughter] that her feet were cold! And I put some socks on her and she left. So, it was a funny confirmation.

**Perceiving white energy moving up and concentrating in the top part of the body prior to death**

So I'd say that now sitting down and talking to you what I'd seen was that she actually moved up her body and her energy became concentrated in the top part of her body. And so it was just white so her legs didn't really exist any more.

**Noticing that the person felt particularly well four days before her death**

About four days before she left she actually said to Bernadette on the quiet. ‘Do you think they've got it right, I feel so well?’ Well, this was four days before. But, she had been feeling this, you see and this was the first time she had spoke it.

**Seeing the heat leaving as a mist passing out of her body**

After she had died, we all said prayers for her and she was lying there. Still, actually even after this expulsion was complete ... There were other aspects of her leaving. So that, at a physical level, the breaking down of the five elements, I could see that happening as a mist passing out of her body, like the heat was leaving.

**Perceiving the subtle habit of consciousness was still in her body after death**

There were all sorts of other elements leaving, like there was moisture and it was interesting, because I stayed in there, while they washed her, the staff came and I think that they do that fairly quickly, and dressed her and clothed her and when they picked her body up which had already started to go into rigor mortis, she was actually in her body again. Well, when they sat her up, it was like a habit. The habit of being in the body was still there and I was sitting in the chair and she was there, [K points to an imaginary bed in front of her] and they sat up and she just looked at me and I knew, that she was looking at me and I knew she was dead also. If I hadn't known it was habit, I probably would have screamed or I would have said, ‘Hey, she's still alive!’ But it was the habit I lost then. So our consciousness contains so many different levels and so it didn't actually form an aura, it was bodily consciousness and it didn't give out an essence in the sense of an aura, because the consciousness had left but the habit was still present.

I've never known that before that being at death gave me that insight of being human is so strongly linked to our body that it remains as a consciousness after. The consciousness of movement or the consciousness however you would like to summarise that consciousness, isn't a habit of the body and yet there is a habit of the body that remains for a little bit which you might say in the killing of animals which I've seen my father do, that shaking that happens. But this was at the end after death, when the body... It was subtle, very subtle.

**Perceiving different consciousnesses letting go of the body at different times**

So there are different consciousnesses, not even different levels. Different consciousnesses and they die at different times. And they let go of the body at different times. And there is not one whole thing that we can call consciousness. There are actually lots of little things. I don't know what that thing was that was left (through her crown). It seemed to be the major aspect of life and death. I don't know what to call that. But after seeing that habit of bodily ‘beingness’, it was quite new for me. I hadn't seen that before.

**Perceiving that the person had returned and was present above her body to two days after her death**

Well there was actually, because they came fairly quickly and put her into a bag to take her to the morgue and then we went up with her, Bernadette [her daughter] and I and we just sat with her then, in the chapel. And there wasn't anything then it was like she had gone and then the next day ... We kept coming back each day but the next day after she had been put in the morgue, and brought back out and they’d give you a viewing room, she was definitely present then. And she hadn't left. That was like a presence above her body, actually. You know how people come back and they look down. She was there but she wasn't in her body, the body was there but she was around us.

**Perceiving three separate consciousnesses in the room**

There were a number of things, the consciousnesses again, there were three separate consciousnesses. There was the form consciousness and that was like her own body above her body, and there was the mind consciousness which actually related. There was something that related to me that was grateful that we were there, talked, that had a sense that “This is all so new and so difficult, in a sense that I'm glad that there is somebody to talk to that I'm glad that there is some familiarity, that there is something to relate to.” And I think that there was hearing consciousness too, I felt that she could hear us and we were very conscious that with her body, we were very honourable with how we spoke about. I just had a sense that she was present.

**Seeing that the person had the form of her old physical body like a mirror above her body**

So those two unseen elements of hearing and the speaking, but the body was actually above and she had the form of her old self, of her physical body. It was just above the coffin, lying, but not so stiff, still clothed. So I guess that it would be like a mirror.

**Noticing that the clothing that the persons’ energetic form was wearing was lighter but identifiable as hers**

But the clothing was a little bit different. It was light because it wasn’t substantial, so it was light. It was identifiable as hers. Anyone walking in would have identified it as hers. It was a nightie, actually. It was one of the nighties that she wore before she died, so it was recognisable. The funny thing as I look back at it, she had slippers on. And I didn’t even think about that but she didn’t wear slippers of course but she always did wear slippers at home.

**Perceiving that the energetic form was not present at the funeral five to seven days after death**

It was a funny thing, I got to the actual funeral, to the actual graveside late, and actually there was nothing really there either. She was completely gone by the time of the funeral. Five days. They left it longer. She didn’t really want to be rushed, in that process and they wanted people to come so it might have been five to seven days. But she was completely gone. There wasn’t anything that she was hanging around for anymore. So like they all felt very happy at
the funeral, it was really the time for the family to celebrate. They did it perfectly. It was really like a public show of her life and really it was the family’s time to show their love for her but she actually wasn’t there. They may not like to hear that but … It was an honouring of her like the going of her and she was gone, basically.

Perceiving the essence of the person had left the human plane
But it felt like those other things, like when I saw her sit up, like that and the habit consciousness, it would go like the body, but the thing of importance, the thing of essence had already left and was final.

Perceiving many little miracles after death
Well I think that [she] has done that [provided proof of the survival of her consciousness] with all of the different things that have happened since her dying. She was really into the environment and into the native plants and the drought broke after she died the whole drought in that area and people would say, ‘That was [her]’! Because she’d actually said, ‘I’ll go up there and bring rain, I’ll make them get some rain for you.’ You know that was a bit of a joke and when it happened, it was like - and there have been many little miracles like that out of that area.

The other big miracle was that the Tigers won. The Tigers won in the footy. She was a tigers fan, they hadn’t won, and she said, ‘I’ll make the Tigers win’ and the tigers won! And I mean, it had been seventy six years since they’d won. The family actually were just over the moon. One of the boys, he threw his tigers shirt into the crowd. That was what his thing was, his tigers’ shirt. She was an amazing Tigers follower. The whole family (and particularly the boys) were.

One of them, who was sensitive and incredibly naive. She did it for him. He would say, ‘It’s [her] if they’re going to win. He had all his hopes up and we were a bit scared about that, you know. And then the other weird thing. This is almost a year to her dying; she’d just gone into hospital the year before. And we’ve just had the cyclone [with her name]. Well, one of her sons lives there but the other son has never been to Darwin without her, was going two days ago, just after [the cyclone] had been through so we all said it was [her] … You know there have been these things, you talk about group consciousness. That is ever. We associate our consciousness with ourselves but the group is greater that the individual person. There is no such thing as the individual person, on the biggest scale of things, so that’s been true of all, I can’t say all because I haven’t spoken to them all, but the family members that I have spoken to have all had experiences in some way. So, there’s not just one ending. There’s everyone’s experience of her but that was my experience and with the death of her and her belief, I imagine that that would have happened to her.

MARION

Story 1
Marion was working as a casual pool nurse, in a hospital and was sent to work in the Paediatric Causality Unit, which was extremely short staffed. When she arrived she was told that although she had no prior experience in this area, she would be the sole RN, with one assistant, and that she had 39 patients waiting. Marion felt out of her depth in this new area and asked for help from her spiritual guides, which said that they would help her. However, they were emphatic that she must do as they say.

Although she was very busy, Marion intuited that there was “something not quite right” about a nine years old boy with a high temperature, who was admitted following a fit at home. Marion had a brief word with her mother, put the little boy on the bed and after doing his ‘obs’, and left the room.

Hearing spiritual guidance about an impending seizure
A voice said to me “Go back to that room.” And I said, “I’ve just left.” And the voice said, “GO BACK TO THAT ROOM!” And it was like, “GO BACK TO THE ROOM.” And I went back and caught the child as he ‘seized’ off the bed. And his mother was hysterical, and I remember thinking, “Thank goodness you said, GO!” ... The following morning, I came back to work and was sent to paediatric intensive care unit. It was a tiny six-bed unit. Lovely! All the staff were there, and he was there. He had deteriorated, and now they had thought that he had meningitis. And, throughout the day, I wasn’t looking after him, but I was in the same area as him. And throughout the day, I had watched him and thought, “Mmm, you’re stable, but you’re not well.” Then we couldn’t find any staff, to staff the night duty and someone said to me, “Will you staff the night duty?” And I said, “No, I’m a bit tired.” And a voice said to me, “You must staff the night duty.” I said, “I haven’t had any sleep! What will I do?” And they said, “Go home and staff the night duty, if you want.”

Intuiting grave condition of patient and mother-son connection
So the child had deteriorated, and I remember my time to leave happened very shortly after that. It was my time to clock off, but he needed a CT scan and there were no staff to go with him, so I stayed back and went down to CT with him, and I didn’t like - I had a feeling that whatever was happening was not right. And I remember the doctor saying, “Oh, it’s an epileptic fit.” And I kept thinking, “No, this is not right, this is something!” And, I remember looking at his mother and I remember looking at her heart break, and I remember looking at him and their connection that was intertwined by her heart, which was much more than that of a sick child. And I looked at it, and I thought mmm. … So I asked her about her children, and this was her only child and I wondered whether what I was seeing was ‘the only – child’ tangible connection between mother and son, or what that was. But I was still very conscious about that. And I was standing, and a nurse came out to take over from me, and I kind of wished them well, knowing that their journey would be rocky and left.

Feeling dramatic increase in room temperature coinciding with the arrival of a huge angelic spirit
So, having not really wanted to, I thought I had better [staff night duty]. So, I agreed to do that, and sure enough, when I came on, who should I be looking after, but this little chap! He was intubated & ventilated and I remember thinking ‘O.K. Alright, I’ll look after him.’ And so we settled into the shift. I remember it was about one minute to midnight, and I was there and I was emptying the catheter bag as you do at midnight; doing all your sums. And I remember at the head of his bed, all of a sudden the room heated up dramatically, and I remember someone from another bed said, “God, it’s hot in here!” and I said, “Yeah!” and I looked up, and here honestly, was this hugest angelic spirit that I have ever seen in my life. And I thought, feeling very, “Oh my goodness me! Can anybody see this?” And [I thought], “I’ll just keep my head down and write!” So, I went to write my urine output out at the end of the bed chart.
Responding to angelic request to channel energy into child’s head and body

So I wrote that and I looked up, and the angel was looking at me, and I thought, “Well, what’s happening here?” I didn’t know, but the angel then said, “Could you channel some ice blue into his head now?” And I thought “That’s a reasonable request!” So I stood at his feet, and put my hands on his feet. I was just allowing some ice blue, crisp ice blue energy that travelled up through him, but settled enormously around his head. It went through his whole body, but it was particularly there. It swirled, almost like a cloud over his head. And then, the ice blue turned to a kind of a silver and then to a white and then back to the blue. And I thought, ‘Oh, that’s nice’. I thought, ‘Oh, there you go...’ (Laughs) I said “Oh, thank you!” It said, “Do you think that you can channel some purple energy up through the whole of his body?” And I thought, “Oh, OK! Sure!” And hands (indicating the sole of an imaginary foot); I was kind of channeling the energy through this magnificent (pause) ... It started as lavender, and it went to a rich purple-indigo colour and then the silver drops came in. They were just amazing, so I kind of channelled it like in a kind of wave.

Hearing the child communicate relief of headache

It went up through him, and the angel said, “That’s very nice!” And the boy said, “Thank you, my head ache has gone. I feel much better.” I said, “Ah, fabulous!”.

Seeing child’s spirit beside the angel as he was pronounced dead

I wrote down another measurement and all of a sudden, the alarm started going. I thought, “Oh my God! Oh, no!” And a nurse came over and said, “He’s coning!” and I’m thinking, “What’s happening here?” And the angel had the boy with him, the boy’s spirit beside him. And I’m just looking and I’m thinking “What’s happening here?” Then all of a sudden, he was bradycardic. We were pumping drugs in, and they said, “We think he’s coned, he’s dead.”

Realizing that pain was keeping child in his body

But as the weeks went on, the trauma subsided, and I could sit with my own counselling and ask, “Why on earth did you put me in that situation?” And it was about, that pain kept him in his body, and that no matter how much we upped his medication, because he was unconscious, [because we had sedated him], nobody would up the opioids for his headache, because, there was no parameter that said that he had a headache! And yet, that was what he did have. He had brain swelling and meningitis. And that was the thing that kept him in his body.

Watching the unraveling, the diminishing energy between mother and child during child’s transition

And it’s like, mmm! And I remember after he was brain dead and I remember as the hours went on, watching his energy fields diminish, and watching his mother, (pause) the connection. She was so desperately trying to hang on. It was an unraveling, but it was diminishing in the amount of energy going from him to her. It was like the connection was there, but the energy flowing to it had dissipated.

Story 2

Marion, who was working as an agency Paediatric Nurse, was sent to a high dependency adult ward. After her traumatic experience with the little boy in the first story, Marion devised a particular visualization technique, to close down her psychic abilities while at work, in an attempt to avoid participation in the metaphysical dramas that occurred there. On this occasion, when she saw an angelic being in the ward, she tried unsuccessfully to close down her perceptions.

Knowing that a huge, bright angel portends work ‘trouble’ [dramatic happenings]

All of a sudden here was this angel standing behind the nurses’ station (It looked) just like the typical angel, but very big. For me they have a soft blue around them. These angels are big, they are big! In terms of size they would be about 51/2- 6 feet and they are broad, they are bright, and there is no doubt about them. And they never come together. I have never seen them together. Whatever these ones are [Angels]. [They] have faces, but not clear [ones]. Kind of, you can see their jaw line and it’s in a flesh colour. A jaw line, but that’s about it and then it disappears. They certainly have wings but the rest is kind of … I try not to look! I now know when you see them, you end up in trouble!

Seeing an angel withdraw and reveal identity of patient going into transition

What happened was that I looked at the angel; the angel almost withdrew and went to the bed diagonally across from where I was. And I thought, “That’s too good, when an angel literally goes back in so that it reveals the bed!” I remember there was a lady in the bed, who had grey hair. She was quite elderly, probably, in her fifties, and I looked, and there was a nurse with her, and I thought, “This isn’t good!” And I looked at the nurse and the nurse said, “I don’t think she’s well.” I said to her, “I don’t think she’s well either!” (I’m assuming that the night nurse was seeing something different to what I was seeing!). And I went over and the nurse said that the monitor at the desk says that she’s ‘crashing’. Would somebody call ‘Arrest!’ And I thought, ‘Bloody hell!’ What do you do when you’re a paediatric nurse at an arrest? So I said (to the nurse), “What will I do? What will I do?” And he said, “Why don’t you scribe and observe?” Great idea, I could manage that.

Seeing the dying patient out of body, chatting with angels

And it was the most amazing arrest that I have (pause) the most visual arrest I have seen! So, when I arrived with the trolley [and time had certainly slowed down], the angel was standing behind the bed. And the lady was out with the angel, with a few more angels, and they were chatting!

Telepathically communicating with the patient to return to body

And I was thinking, Oh that’s very interesting, and I was writing down the drugs, atropine - and thinking, “I don’t know what you guys are doing, but you need” (pause) adrenaline, more adrenaline, bicarb, (pause) I’m thinking after the bicarb and the resident is saying “You’re going to get her back!” I don’t think we’re going to get her back! And I thought, and they [the patient and the angels] literally were chatting; they literally were chatting! And I thought, and [it was all telepathic]. And I remember saying, “I don’t mean to interrupt, but if you want to get back in, you better hurry, because they’re going to stop this in a minute, and you’re going to end up in big trouble!” And she then looked at me, and said, “Ooh!” And I said, “You can hop out another time and stay out, but if you haven’t made up your mind, hop in!” And the next thing I looked at her, and she was gone and the resident said, “She’s back!” And I thought, “Ooh, OK!”
Seeing bed surrounded with flowers like peace lilies as white as the glow around bed
So, they all kind of left running into ICU. I was there with the crash cart thinking, “Oh, brother!” After they had left there were flowers everywhere! Literally, her bed had flowers all around and I remember she had them; the main thing - like peace lilies. I remember looking at them and thinking, “Wow!” They’re as white as the glow that is around this bed! It was amazing!

Receiving angelic message verifying metaphysical experience
And I then kept going for the rest of the shift thinking, “I wonder how she is; I wonder what she’s doing?” Never knowing, and, “I wonder if I made it all up?”. Like, you know, it seems an easy story to make up, you know. I went home, and all of a sudden, I don’t know how, but as I reached the back door, and I looked out, there was one peace lily. And I thought, “I’ve never grown a peace lily in my life!” Then I thought, “Alright!” So, I kind of got that if one of those angels turns up, something is happening. It’s not just a matter of, if there is change happening, or death is imminent. And I don’t know whether death is imminent or that an out of body experience, big out of body experience, or an energetic shift of big proportions happens. So, I guess that’s the kind of relevance of that.

General Perceptions
Marion then shared some general perceptions of how she witnesses the permortal experience.

Perceiving spirit recognises that physical body is too depleted and reluctantly chooses to leave
So, as they then progress and inform us as they progress in treatment, their physical bodies, can be enormously depleted. Sometimes, that then takes the energy they have for spirit; their spirit. And sometimes the energy for spirit stays, but the depletion to the physical body is so great, that the spirit recognises that the physical body will never return, and they choose to go. But these are the children that don’t want to leave. Their spirit does not want to leave, but their physical body is so debilitated that it would never recover, so they understand that they have to go.

Recognising dying children reverse sleep patterns to conserve energy
And the hard part about that is, sometimes for them, it’s easier to stay awake at night, and flat out then in the day. And the reason for that is because the energy at night is less draining than it is during the day. It’s also because of the amount of elementals, elemental spirits, around at night. It is also because of the moon, which helps with fluid balance, and it’s because the people who love them are the only ones around at night, as opposed to all those others who are there. So, they don’t have to be energetically impacted by the rest. So, you often see children who are dying, having a reversal of sleep patterns. You see lots of people having reversal of sleep patterns. And they’re saying, (Marion’s guides) that we, as health professionals think that is undesirable (this pattern reversal) and we try to reverse that, and [then] have them be in a more agitated state. It’s true! So that’s why that happens! OK.

Explaining roles of angels, undines and spiritual healers in changing energy field during transition
Angels are the directive architects. Angelic energy tends to be the energy that is directive. It is the force, the creativity, whereas the workers, the ones who change the energy field, tend to be more elemental energies … its like angels are the architects. They have the plan, and they have the knowing. Undines affect the water balance and different elementals affect body heat. So, water balance in the body, is affected by undines. Heat in the body is affected by different elemental energies and so what angelic energy does is be directive … Undines, then changes the physical body, in order to facilitate the energetic changes. So, it’s facilitated by other elementals. Energy workers are the physical components for transforming and channelling energy, to facilitate environment for dying person’s transition. When energy workers are asked to help, it’s because sometimes, because the energy that is channelled, that is directed and channelled to elementals, lack a physical component. And sometimes in order to refine it, it needs to go through a physical component, to then be utilised by the body, in a much more rapid way. Its like, it’s a transforming energy and the healer acts as a transformer, to move the energy into that, that is sustainable for the body, and the human energy field to use. Most times, most transitions happen, regardless of physical and most energy workers are asked in my experience to facilitate the environment so that those spiritual beings can do their work to the best of their ability. Occasionally, then, what happens is that you (the dying person), get stuck for whatever reason, like the boy with pain and those others that I’ve been talking about. It’s that some things have happened to stop the process. Sometimes energy workers believe that they’re asked to do something to the one that is dying, when mostly, that has been taken care of. So, they are there to facilitate the environment for all to happen. They can express the intent that the appropriate energetic changes happen. Occasionally they are asked to intervene, but mostly you can watch it and bang, it just does happen.

Perceiving some children die without parental presence to reduce energetic burden
Sometimes, the energetic load of having parents that don’t want this to happen, whose emotional load is so high, that some kids choose to die when they are not in the room, so that the energetic burden is less. And as distressing as that is to the parent, it’s easier for the child. So, thank heavens we are now able to warn parents, “Knowing that you’ve been sitting around the bed for 48 hours, I want to tell you that some kids choose to die when parents are not in the room. And it’s not about not wanting you to be there, it’s just about how they want to go.” And all parents get pissed off if they aren’t in the room.

Story 3
Marion recalled a two year old boy. His family lived in a rural area, and they taken him to a city hospital for a bone transplant. The treatment had failed and he was dying. His grieving parents knew that death was imminent, and were staying the night in the hospital. Marion asked her spirit guides to allow the parents to be with him at the moment of his death. Her guides asked her what she would like for herself, and Marion stated that she would like to see “between the worlds” during the little boy’s transition.

Recognising presence of big angel as sign of energetic transition
And about a quarter past two (in the morning), I walked down the corridor and a big angel arrived. And I thought, “Wow! God!” By now I know what a big angel means - an energetic transition is happening.
Telepathically receiving request from spiritual guide to awaken mother
And I said to Samuel (Marion’s spiritual guide), “What will I do?” And he said, “The time is near, wake the mother.” And I thought, “Right, ok!” And I went in and I counted the [boy’s] ‘resps’ [breaths] and nothing had changed, and I thought, “Nothing’s changed?” And back I go to wake the mother. “What will I say to the mother?” And he said, “Just say, ‘Come, sit by the bed.’” And I thought, and I was hoping that I was doing the right thing. You know, this was an exhausted mother. So, I went and woke the mother and said, “I think you should sit by the bed and she said, “Why, is something happening?” And I said, “I think its just time to come and sit by the bed.” Thinking all the time under my breath, “I hope I get this right!” So, she came and sat by the bed, and I said, “Where is your husband?” and she said, “He’s staying at the hostel.” And I said, “I’ll ring him.” So she came and she was just there, and she had been talking to him [her husband] and she said, “I’m sure I’ll feel better after three hours sleep.” And the father came into the room, and they sat and I looked at the child and I looked at them and I looked at the child and he had gone quite blue. And I thought, “This might actually be it!” And I then walked out of the room, and my higher self said, “Are you ready for this?” Like, “Yeah, what am I supposed to do?” “Nothing, just watch!” And “Is this your wish?” And I’m thinking, “Yeah.” “So, go back into the room!”

Noticing an increase in room temperature coinciding with appearance of a big angel
So, I went back into the room and I was standing near the door and watching the child, who was, by this time, having a bit of grunting. I watched the mother, I watched the father, and a nurse came in and said, “Oh my God, it’s so hot in here!” And I said, “Yeah, I’m noticing it’s hot.” And it was amazing, the big angel turned up and was standing behind the bed, and I had been reading some spiritual books, and I had read that children, people who die, leave by their solar plexus and I thought, “Oh, yeah.”

Seeing the child’s spirit hop out of his crown chakra and integrate into parents’ energetic cores
This child; the angel was standing behind this child as well, and as any other spiritual being, things was fabulous. [The child] hopped out viva was watching, and the other nurse said, “I’d better get one of the doctors.” And I said, “Whatever you want to do.” And he hopped, and he sat in his mother’s aura. Not even in her aura, in her core. And at that point in time, she stopped her crying, and said, “I will always love you, no matter where you are in the world.” And she literally took her hands and placed them on her heart. And I’m thinking, “Oh, my God!” And he sat in her. I’ve seen a connection like a horizontal connection, but I’ve never seen a - It wasn’t even an overlay, it was an integrated thing. And all the time, the big angel stood there holding hands out and there were a moment that I was in awe of what happened. And he hopped out (of his mother’s field) and I thought, “Wow!” And he looked at the big angel, and the big angel nodded, and he sat in his father’s core. And at that point, his father said, “Me too! You’re the best thing that I’ve ever been privileged to be your dad, and I’ll always be your dad.” All of this was said spontaneously as he integrated into them. And I remember thinking, “Oh, that’s amazing!”

Perceiving mother glowing and radiating bright pink in response to energetic presence of child
And then the mother had gone bright pink, and I thought it was a flush from tears and the warmth in the room, but the bright pink began to glow, she began to radiate.

Seeing child sitting with angel
All the time, I’m kind of between the worlds, so I kind of have a telepathic opening to the big angel and a telepathic knowing to the child and a heartfelt connection with his parents, so it was quite amazing. He hopped out and went back to sit with the angel. And he was sitting with his angel, like you would do for a toddler. But the angel didn’t cuddle him; it was more like the angel made a platform with his arms and the child sat in there. And the child was ‘as happy as Larry’.

Perceiving that child was move as had almost gone energetically
And then almost, and I don’t know how this happened, because I came back to looking at his physical body, and I looked at his physical body, and I looked at his parents and his parents were still sitting beside the bed and I said to his mother, “Would you like to cuddle him? Now is the time to cuddle him.” And she said, “I don’t think I can.” And I said, “I don’t know. You’ve always cuddled him.” And she said, “Alright.” And I gave him and the angel was there, but he needed a lot of support to move him, because he was almost gone energetically, so we gave him to his mother and his dad was there, and his dad had his feet, but his mum had him.

Feeling tremendous vibration as a very refined and high pitched hum
And the next thing that happened was there was a tremendous vibration in the room and I thought, “Either the helicopter has landed on the roof.” (Pause) And it wasn’t a thumping, it was a very refined feeling and it had a high pitched hum about it.

Seeing child’s solar plexus open and column of light surrounding the whole central area of child
And when I looked back or somehow or other watched what that was, (because it was almost like I had moved back to the physical, to give him to his mother), I had to get back to where that is; that energetic place. And what happened was, I watched and the solar plexus in him had opened and there was the light, and thank God there was ‘the light’, because I always wanted to see it. And it was huge! And a doctor walked in, and said, “How are things?” And I said, “They’re OK.” And he said, “It’s awfully hot in here!” And I’m thinking, “Yeah, Yeah, it’s awfully hot!” And it was the most amazing thing! The guardian angel, who had remained at the top of the bed, while his parents had him, now moved and while this white light, this column of light, surrounded pretty much the whole central area of the child.

Seeing guardian angel take child’s hand and help child’s spirit move out through column of white light at moment of death
The big guardian angel began to move into that column. At that point his parents began crying, and I thought, “I think he’s going.” And I think this is what this is. And sure enough the big guardian angel then took him, took his hand and kind of helped move him out through this column of white light. And his mum said “He’s stopped breathing!” And I said, “Yes, I think his time has come to go.” And she said, “I’ll miss you, I’ll miss you.” And the crying started.

Seeing the guardian angel and child hang within the column of light for 15 minutes, enveloping parents
And I remember thinking, “Oh my goodness!” And they didn’t go go. They moved into the column and you’d imagine go, go. And they hung there for a while, like minutes; ten, fifteen minutes, just hanging. But he had clearly left his body
and there were no respirations, and whilst I didn't take his pulse, it was quite clear that he had stopped breathing, and his father had got very emotional and was hugging his mum, who was hugging the child, who was involved in this huge light, and the father and mum were part of it, and the energy stayed for a long time.

**Seeing energy column fold up, turn inside out and leave in formation as child and angel left**

And as the energy then folded, like folded up, went up, the guardian angel and the child left, and then the column almost left in a kind of formation from the bottom, but kind of turned inside out, and when that column left.

**Seeing column of light comprised of millions of angelic beings, opening and lining pathway, like guard of honour**

Do you know, it was a most amazing thing! I imagined it was only light. I had thought in my head, "It is only light, but they were millions of angels. Millions of angels are what caused the column of light. And you could only see it, as it dissipated. And it had come as a mass and that's what the light was, and they were angelic beings, who'd had opened the pathway, who had lined the pathway, like a guard of honour. And it was like, that's what the light is. In paediatric deaths that's what the light is. They are the keepers of the path to the spiritual world.

**Seeing soft physical glow of 8-10 cm surrounding body dissipating, not moving, remaining for many hours**

[A short time later] There was like a physical glow energetically, like the physical glow, which exists about 8-10 cms. And it's a softness of energy around the body. It has no movement. It doesn't flow. It dissipates, but there is no movement in it. It's just kind of there. And that existed for a number of hours. Hours and hours and hours

**General perceptions**

Marion spoke generally about perimortal patterns she has observed.

**Perceiving spirit stays in room with parents and leaves when parents leave room**

And the interesting part is some of the children, who choose to hang around a lot longer and continue to visit their parents energetically, and stay in the room that those parents often still think that their children are here. And often their children are, and there comes a time for whatever reason, their parents will leave the room, and it's like the parents reset the dial, and when they come the child has gone, and they perceive that the child has gone now and many parents have told me that.

**Energetic glow, very close to body 4-6 hours, disappears within a few days**

But that time-frame is usually around four to six hours. And that's because the glow of the physical body gets less and less and probably - And from about that time, it's very close to the body. And that's the sensing of difference and as the body gets to a few days, then the energy fields becomes not there.

**Observing people recognise that spirit has left, leaving only body**

And that's the bit that makes it, that people notice. This is only the body. It's because the energy has gone. It has dissipated.

**Perceiving body decays when energy absent around body**

The 'boys' say (Marion's guides), that when the days go past, when the body decays, that's when there is no energy surrounding the body. I didn't tell you that. They say, "You should tell what we tell you!"

**Believing angelic structures exist in hospitals to facilitate healing and transition**

So, what I know is that every hospital (that has been blessed) has an angelic structure, which is responsible for the healing. So, when people pray for the sick, it goes to the angelic healers, who then go to disperse those prayers amongst the sick in a particular way ... So, it's very important that the rituals of blessings of hospitals occur, so that the angelic beings have been asked to set up their formal healing structures around that ... And the reason that I need to tell you this (is) because people pray for the dying, they pray their prayers into a structure that governs those that are in hospitals. So, what about those who die at home? They are usually plugged into healing institutions. Those things also happen for people who are in a traumatic accident, because there is usually a health professional, in the form of an ambulance officer, who has contact with the traumatized. And they lead out the structure of healing that is there for humanity. (Other) cultures will have developed rituals that deal with that, so it's still intact, and that's why everybody across all cultures have a sense that bombing a hospital or a place of healing, is on the scope of being not tolerable ... So that all people who die, are usually supported by that (angelic structure).

**Perceiving some spirits get lost during transition**

Some people choose not to take that path, and they, then, are the people, who get trapped between the worlds, and they often try to find their way back to either places that are familiar, places where light occurs; churches or hospitals, so they try to find their way to the glow to people, who meditate, those sort of places, trying to find their way.

**Receiving channelled information that death can't be predicted with auric reading**

They asked me to tell you, you can't predict death, and they don't want people (to try to predict), it's not helpful for people to think, the aura is only six centimetres, you must be dying. Because there are many actions that we don't understand and there are many factors that pertain to that individual and that individual's life on earth, that you cannot necessarily predict, but you must be respectful of it. So, one of the things, even as an energetic worker, your aura looks like it only has a few days, or your aura looks like it only has a few hours isn't helpful, because that's not necessarily how it is, because it's a contract.

**Perceiving that people survive on channelled angelic energy to complete life contracts**

If the contract that the individual needs to fulfill, if their aura dissipates quicker than their contract, then their guardian angel will stand beside them, will go and filter their energy (That's why that happens! – Marion receives an insight at this point), because their guardian angel is part of their structure, so it will channel the energy that will sustain them to do the work that they need to do, even thought their physical energy will look to an energetic worker as not being there. They will sustain that. My higher self is saying that maybe there are some people, who think that they will be able to predict
death, in terms of looking at the aura and seeing that this is occurring, and he says, “No, because there is this ability to sustain based on angelic energy, based on what it needs to do. And that’s why you hear of some extraordinary, on the brink of death (situations) … everyone thinks it’s going to happen … and then they come back. They are surviving on angelic energy, in order to achieve, some of the things that they need to do. (It’s different for) animals, because they are more closely aligned energetically with elementals, and elementals tend to sustain them more under the directive of angels. But humans can sustain their energy with angelic forces, and the angelic forces. It’s almost like fuel for the body, for them to complete their contract.

MEGHAN

Meghan witnessed her father’s death from a heart attack.

Recognising energetic signatures of spirits of dying person’s brothers in the room

If I recall the actual process of death itself, as he lost consciousness, he slumped and his head went to his chest. His breathing slowed. It had been very laboured, because of the cardiac failure, but I was very aware that he could still hear me and I was more aware of that energetically, than I was physically. I was also aware of the presence of his two brothers, in spirit, close to him, and I spoke to him, and said to be aware of George and Terry, and that they had come for him. I felt them, and saw them on internal vision. I did not see them externally with my physical sight, but I recognised the signature of their energies. I actually saw them in a different way as if they were distant, but I knew that they were coming close.

Perceiving an enormous white spirit lifting upwards, out of the body

His breathing had definitely slowed and then stopped, and then, as well as I can recall, because this was fourteen years ago now. I recall the next piece dramatically, because his breathing stopped, and then there was a pause. But it was only a matter of minutes, but I can’t tell you how long that was. The spirit, the only time my jaw was literally on the floor. I didn’t see which channel it lifted through. I was so shocked to see this enormous white body lifting out of this man. My jaw was on the floor, and I said, “How on earth could that get in there?” …  [It was] definitely taller and larger, by about twenty five percent …

Observing the spirit hovering beside the body, as if standing beside

[It was] above, behind and slightly to the side. It sort of rolled out of the body and hovered beside the body for the moment, like standing beside himself, and stayed in that position, as if standing on the floor.

Observing the spirit was unformed, not recognisable energetically

[The spirit] was not formed, not recognisable, a white figure, not recognisable and not recognisable energetically. [It was] the only time my jaw was literally on the floor.

Observing the white purity of the spirit lifting out of a profoundly troubled man

It was - my sense of it was that it was larger than the physical body, not by much, maybe by a quarter … But what stunned me so dramatically was the whiteness and the purity of the spirit in a man who had been profoundly troubled all his life, profoundly troubled, heavily addicted, psychologically disordered and quite emotionally violent. And it was the purity of the spirit that shocked me so dramatically and made me think of what some of the teachers talk about, that it is only those who profoundly love you who will profoundly challenge you … When people are spiritually well engaged, the crown chakra appears as very white, and it’s that same white colour that composed my father’s spirit. That was what I found so shocking. Because, psychologically and emotionally, this man was very disordered! But yet, that was what my shock was, my sense was the difference, and that was, “How did that fit in there?”  It wasn’t the physical size, it was a spiritual size. Somewhere in me registered the spiritual positivity, in the being that I was looking at. But to me, my small incarnate mind was at gross variance with my experience of the being. So, it’s certainly not something that I could have psychologically projected. It shocked the socks off me!

Observing spirit remained in room for 5-6 minutes before disappearing

But that was my experience and it stayed in the room, it didn’t communicate with me, it just stayed present for maybe five or six minutes and then it just disappeared. It just seemed not to be there, I don’t remember the process of disappearing I’m afraid, but it seemed not to be there.

Story 2

Meghan’s husband, Henry came in from their property cradling a rabbit, close to his heart, which he had found tangled in wire.

Perceiving the rabbit’s shock and pain settling in the healing energy

Now the rabbit’s head was lolling sideways. It was still alive. Its heart was beating fast and my first impression was of it being cradled incredibly lovingly, in Henry’s energy. And the animal’s shock and pain settling in that energy.

Feeling the pain in the animal’s energy

And both of us being healers, he held the animal while I gave it healing. And I felt the pain in the animal’s energy.

Perceiving expanded, spiky, white energy

The energy was a bit hyper-expanded again by about 30% larger than I would normally expect it. As if these photographs that you see of the animal’s hair standing on it end. There was that spiky kind of quality in the energy. And it was quite a white energy … And as I gave it energy, I had the intuitive sense that this was going to kill it cure it. Not that the healing would kill it, but that the animal would go into transition or it would get better.

Seeing the rabbit’s energy lift out of its body between the healer’s hands

It seemed to be hovering, making a decision for a while and then it decided to go. And I was very touched by what happened next. The animal’s energy lifted out of its body. It seemed to lift straight up from its back, but between my two hands.
Following the rabbit’s spirit as it rose and slowly disappeared through the wall of an envelope into another dimension.
And my hands just followed, as we would in the way that we’ve looked at together, and I just followed it up and it rose about a metre above the body and it moved to the right and then it just slowly disappeared, as if I’d just passed it through the wall of an envelope into another dimension.

Feeling that the spirit which animated the animal was the same spirit that separated from it in death
The energy just disappeared out of my hands and I had the sense that it had slipped out of one membrane, into another and there was a very sacred sense of holding the spirit of this animal which was the same, interestingly … The spirit of the animal as it was still alive felt the same as it did when it actually lifted above and separated from the body. So there was no difference in these two things, when it actually went through. And then, a definite sensation of it slipping through some article, as if through a membrane, from one dimension to another. There’s the early story I told you about an animal, about the guinea pig, which died and again a huge sense of the thing lifting out of the body and of the body then being empty of that which animated it, and that which animated it, being present and separate from the body. And then of that which animated it, being present and remaining present, in a dimension separate from the body for a short period of minutes and then again transiting into another dimension.

Story 3
A young man in his late thirties, had longstanding undiagnosed stomach pain. He was referred to Meghan, a psychiatrist, for assessment of functional pain. She examined him physically, psychologically and energetically and concluded that he had a physical pathology, of unknown origin.

Seeing chakras larger and wider than normal on assessment
And I assessed him energetically and I remember that his chakras were much larger and wider than normal and he came back to me twice more for assistance with the pain and the chakras had gotten wider and then he didn’t come back again. They were much wider than normal.

Realising a pattern of increased activity and enlargement of the chakras signified preparation for death
I didn’t hear and I didn’t know what happened and a number of months later his wife contacted me for a receipt and I asked her very tentatively about her husband and she said, “Oh, you didn’t hear?” And I said, “No, I’ve had no contact with him and I didn’t think it was appropriate to follow up” And she said, “He died!” And she said that he had Linitis plastica - ‘Leather Bottle’ Cancer of the stomach. It is cancer of the stomach, which occurs in between the two layers of the gastric lining. So, it hadn’t been found, but the man had cancer and in fact, what was happening was that the chakras were getting larger and larger as he was dying. The man was dying! I saw this once, another time, ayear later with an elderly woman, whom I did see a number of weeks before her death, twice - maybe five weeks and then three weeks before her death. And again, this pattern of abnormally large chakras, which were abnormally large and abnormally energetic. So, there would have been a pattern of shutdown from the illness. And the chakras; because you know, we scan the chakras and so there seems to be a process of preparation for death.

Perceiving the dynamic energy left the chakras during transition
This [spirit that moved out] is what animates the being. [During my father’s transition], you know when a snake sheds its skin? That’s what I see, just like “snakes’ skin” of the chakra, but none of the animating energy, none of the dynamic energy [remains].

Perceiving at least two layers of the physical etheric stay briefly with the body after death
I know that two layers - From previous observation, two layers of energy field stay with the body … It’s like a body doesn’t decompose immediately, so there is actually a separation, but I can’t tell you precisely where it is, I believe it to be somewhere in the layers of the physical etheric, because in the system we use there are four layers; the physical, mental, emotional and spiritual. But within each of these layers are sub layers. So that there are at least two layers of the physical etheric that remain. And they hold the body together, but they do not last long. When the animating spirit is gone, they then begin to decay, decompose and the body follows that.

Story 4
Meghan’s aunt died and she attended the funeral with her relatives, including her cousin, a healer and her ten year old, psychic niece, Evelyn.

Seeing the spirit of the person standing beside her coffin
And as luck would have it, she [Meghan’s niece] would end up sitting between Bronwyn [the healer] and me at the funeral. And our aunt Angela was actually present, standing beside her coffin, for the funeral. And this young lassie said, “You know, but auntie is here!” and we went, “Yes.” And she said, “She looks OK!” And we went, “Yes.” “And, why is everyone so sad?” “Because Evelyn, they don’t see her!” And she said, “Why can we see her?” And I said, “Well, maybe we’ll tell you that someday!” We wanted to be kind of discreet and we advised her not to say anything to her mum, because her mum might be a little upset!” But it was a little - it struck us very profoundly, because the whole service - just the words of the service, spoke of life after death, but because of the grief, nobody actually believed it - nobody actually believed the sermon, and there was our aunt actually standing there looking at us!

Seeing the apparition looking much younger and slightly bemused
She was just looking in a slightly smiling way, slightly bemused. And she was much younger. Interestingly, she was much younger than she was when she died. She was a very elderly lady when she died. She was maybe in her fifties [in this apparition] … what I remembered of her when I was a young child was, very, very, gentle, soft woman … with very lively, sparkly eyes. And it was that flavour in her energy, that [manifested as] she was looking at us. [Her look seemed to say], “What are they all doing here?” Ah, and I remember a slightly bemused quality as well, as if maybe she didn’t quite understand. I didn’t have any sense of communicating at all.

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Seeing an apparition of healer’s father coming from a distance, being present and going back into the distance
My father came back to me once, when the same cousin was with me, many years later and we both felt his presence very strongly, and we felt a kind of emotional connection with him, but not a verbal connection. And again, he came as if from a distance towards us, was present with us and then went back a distance … sort of a sense of distance … ah, the experience with my father was extremely visual. I saw that as clearly as I see you.

Meghan visited an acquaintance, with terminal cancer, who had a great desire to live, and had been hospitalised with ascites, for palliative interventions.

Perceiving very thin, fragile, energy field and very wide chakras with diminished energy
But there was a lot of grief in her … profound grief in her and when we went to see her the second time she had agreed to have treatment in hospital. Now it wasn’t chemotherapy. I think that she had steroids - I think, it was to really to maintain her and she’d had steroid therapy, and she’d had antibiotics. But I remember when I saw her in hospital; two things struck me, that her energy had become very fragile. She also said, and I thought of you at the time, she found it very, very, difficult to be looked after, in a modality, that didn’t accept her beliefs. That was actually toxic to her, and I felt very strongly, as we were working with her, and she did improve, and her energy was very thin, and her chakras were quite wide in her too, but they didn’t have a lot of energy. They had [become] large, and she was very thin and underneath it all (what) I could feel was, “This is far too much, it’s too much for you, you can’t hold on”.

Perceiving energy field strengthened with healing but the person was too tired to maintain it
And, I felt if she had been in our healing hospital, or some such facility, that she might actually have made it for longer, because this was her conscious wish, but just that the odds were stacked too heavily against her. And that her field had gone very thin, and that it had improved, strengthened with the healing. My overall impression was, that in fact, despite what she’d wished, that she was not going to maintain it. In fact, more deeply the truth was, that she was so tired, that she needed to let go.

Mirwiam” and I said “Darling where have you been? ‘Oh, Mirwiam it was so beautiful! I saw the lights and I crossed the Sunday to be there with me for that event, but whatever he did in that time when he left this incarnation and when I

Connecting with an aspect of fathers energy many months after his death
There are multiple levels of consciousness and so I when my father died, there was a period of about fifteen months perhaps, where I was advised that I could call him in if I needed to, but he had a lot of work to do and that he was working in Germany, so that was cool, when I needed to, but he had a lot of work to do and that he was

Gathering of energy with corresponding appearance of wellness prior to death
So, some people begin to gather their energy three or four days before they leave for the last time, cause we witness the coming in and the going out and I think maybe for some people that’s to help them leave for the final time so that their not frightened o.K? And some people begin like three or four days before they die and you hear people say, ‘Oh God, aren’t they looking well, but I always get nervous about that; ‘the shines,’ I call it. And then some people do it like two hours before they go. They gather it and then they’re are out …

Being guided to look up and witness merging of balls of light, following father’s death
I’ve seen it in two ways; one way is that just before they totally leave, they gather all their energy around them and they look absolutely splendid and they go and some of them can do it hours before they go and some of them can actually take three days before they actually leave that incarnation and how we recognise in practice is “Oh, Mrs. brown looks really good today and everyone thinks Mrs. Brown is getting better and actually Mrs. Brown is getting ready to leave for the last time … So when my father died, I had the most amazing experience. The afternoon before, (he died through the night of Wednesday morning). The afternoon before he died; on Tuesday, he came to visit me, and he hadn’t been well for a couple of weeks. He had flu-like symptoms, and he arrived. And he’d had a shower and a shave, and he was really dressed handsomely, and he looked a million dollars, and my mother would go so far as to say, that she saw stars coming out of his head, and he died through the night of the next morning.

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But on that Thursday, I had the most amazing experience. I was with the group of people that I do energy work with, and this little voice just said, “Look up, look up!” And all a sudden this big ball of light appeared and a smaller ball, and they just merged. It was just absolutely spectacular too see that and that was nine years ago, and I had never seen that with my physical eyes before, but I had a real sense in our clock time, he would have been dead for, ah, not quite forty eight hours, but whatever had occurred in that forty eight hours, he had done what he needed to do, review the lifetime … And I actually feel that he had been through that process and so the energy that he had brought down into the body of this particular incarnation, was then going back to join his total energy. And that’s what I physically saw with my eyes.

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Mirwiam (Interview 1)

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Story 2

In her role as a paediatric nurse, Miriam was nursing a little girl, for twenty two months, whose condition had not been diagnosed and who deteriorating rapidly. During this time she had arrested, had been resuscitated and was ventilated during the month that she was comatose.

Perceiving a change in ‘light grid’ denoting out of body experience
Now during that month she was out there floating OK? And I’d go to her body and I’d say “OK, we’re still out there.” Then I came one night duty, and I had a look at her and I said; “Ah, we’re coming back!” And I sat beside her and in she came, And ‘ping’, she was awake! I remember saying, “Hullo Mirwiam” and I said “Darling where have you been? “Oh, Mirwiam it was so beautiful! I saw the lights and I crossed the
water.” And then she started reeling off every kid that had died around her over the 16 months. And it was really
gorgeous, because I said to her, “What would you call this place that you went to Ruby? And she said, (she was on a
water.” And then she started reeling off every kid that had died around her over the 16 months. And it was really
they’re really well and fit and its absolutely spot on, Its in pure joy and its as if  they…

Sensing Father’s unique pattern of energy when he visits
[I can feel when my father comes to visit me] because what you’re sensing, what your feeling, not sensing is the energy
pattern of that individual - no different, whether they are incarnate or not incarnate. And you know exactly who’s there.

MIRIAM (Interview 2)
Story 1
As a young student nurse, Miriam was supervising a coronary care unit, in a country hospital with staff shortages. She
was providing advice and support to a nurse in the adjacent ward, who had just returned to work after not practicing for
many years. Miriam was particularly concerned about a patient her colleague was nursing, who was ill with congestive
heart failure. After being informed by the nurses’ aide from this ward, that this man had cobwebs in his mouth, she left
her coronary care post to assess the situation.

Perceiving absence of energy field as a black void surrounding a person, dead for some hours
And I thought, this man was fine (to access), and it wasn’t too far up the corridor and I had this torch and I snuck up to
the bed and it was so black and there’s a part in me saying, that it wasn’t just because it was night. It was black! And
still it was black, because what I was tuned into was the energy field. And finally I got the torch, and he was as dead as
doorails, and the cobwebs in his mouth were … He had CCF and he had pulmonary oedema and the oxygen running
down his nostrils had dried the cobwebs, and there was fluffing his mouth. And these two hadn’t … and when I say it
was black, it was an absolute void. I don’t know how long, this was; (perhaps) 3.30 -4.000 AM. Whether he had died at
ten o’clock in the night, I have no idea. How they were taking a pulse and blood pressure I have no idea! He was cold,
he was so dead! But, when I walked into that room it was black! And it had nothing to do with the fact that it was night.
‘Hasta la Vista,’ he’s gone! He wasn’t hanging around there at all. He was out of there, you know. So, I remember that,
as a student.

Story 2
Miriam relates a story about going to see her dead brother, three days after he died in a motor cycle accident. The
funeral parlour staff were reluctant to allow her to view his body, as it had just been released following an autopsy, and
hadn’t been cleaned up. She persuaded them, however, saying that she was a nurse, had seen plenty of dead bodies,
and wanted some time alone with her brother. They hesitantly agreed to a viewing.

Mistaking the etheric body for physical body of dead person
They looked at one another and they agreed, and they brought him out on just an old gurney and they had a sheet up to
here on him [his chin] and he was obviously naked underneath it, and I remember walking down the pews of the chapel,
and they had a chair there for me, and I remember sitting beside his body … and it’s an experience that I don’t think that
I have encounted in my nursing practice. But I looked at him, and I looked at him, and I looked at him, and I looked at
him, and I looked at him and he absolutely looked like he was just asleep in bed. That’s the only way I could see him.

He’s flesh was still alive, he was surrounded in light, and I thought, “Wow, this is amazing!” And I sat and I talked with
him. And I thanked him for being my brother, and I sat and exchanged and that was fine.

When I got home my father - because my brother had been in a motor vehicle accident, my father said, “Well, how he
does he look?” “He looks just like he’s in bed, asleep.” I said, “He looks fantastic!” And my father said, “Oh, that’s
good, because I was worried about your mother.” Anyway, that night, they dresse him and he was in his coffin, and my
mother and father and I went in to see him, and when I walked in there, I looked again, I looked again, I looked again -
My father shot me the filthiest look - My mother was just beside herself! Anyway, when we were home he still didn’t say
anything. And the next day he said - he was so angry - He said, “I thought you said, he looked alright!” He said, “I
thought your mother was going to - we were going to need a coffin for her too!” And I said, ‘Dad, all I can say to you;
(is) how he looked in the evening, and how he looked at lunch time - He did not look the same!” And I’ll never forget
that experience. Because, in the evening, he looked worse than a piece of dead meat! And, at lunch time that same
day, he was totally surrounded by light. And yet, by the evening, part of his face was caved in! And I ask myself - I was
twenty four at the time, and I ask myself, “Was I delusional? Was I so distressed, that I didn’t see what was before me?”

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Nick (following preamble) OK. When you say that I have somebody in mind, I only spoke to him and I never, ever met
the man.

Perceiving an increase in vitality in field 3 weeks prior to death
However, I knew because of his energy field. When they’re very close to going [and I’m talking about weeks], it
changes, ready for preparation to the point of living and death. There’s no line somehow, but there is a line because the
energy changes and generally what changes before they pass over, is that their energy becomes very alive and its as if
they’re really well and fit and its absolutely spot on, Its in pure joy and its as if they…”
Perceiving a deep pink colour in the energy field just prior to physical death
You know, when people say you see the light, they see the light. Then, just prior to crossing over, when that happens, there is a beautiful deep colour that surrounds them. It’s very deep pink. It always comes into pink and that’s a very healing colour.

Perceiving that energy field of fearful people changes from deep red to soft pink at time of death
You generally will see this very deep red… And there’s a lot of anger there… And even though they may die with fear in their eyes… When that last silence and then the lungs, “fffhhhh” (N makes expiration sound,) you will see that change from red to a very soft pink.

Perceiving colour change from pink to blue in energy field at moment of death
And when they take their last breath, when they die, their body can still carry their energy. And you feel it go. And it goes in temperature. So, it goes from the pink to the blue and then you know that they’ve transmuted over to the other side.

Perceiving client’s revived spirit after death
Now when they get to the other side, I see and feel that energy and they become alive again.

Perceiving a clear form encased in a white light following death
[The energy] takes on a shape - the way I describe it, the way I see it, it takes on a white light with ice in the middle of it. So it’s clear but not clear, it’s clearer than clear encased in this white light, and it’s very much alive. It’s as though they’ve crossed over into a new life and that’s when I say and I said earlier, I liken it to when people are dying, it’s a celebration of the end of this life which is form, which is colour, to the beginning of a new life, and that’s when I see this other form…

Perceiving a state of waiting and preparation following death
And it’s like immediately they seem to be taken into a waiting room and then preparation, I guess, for rebirth in another life. That’s how I see it and feel it. It’s very clear.

Being aware that client’s energy form leaves the room when loved ones come to terms with death
How long the energy form stays in the room, depends on the people that are grieving. And I’ve experienced people who are not aware of my work. And I notice then, that the form will last a lot longer, because the person, who has crossed over, doesn’t want to leave, because the family haven’t come to terms with the death. I’ve been with people, say, for three or four weeks [prior to death] and the family are there. They get used to me being there and I work with the living and the person whose about to cross over. And once they go, the people that remain there are a lot more comfortable. And you see that shape still in the room and you’ll feel it go.

Seeing and feeling the return of the energetic form on the day of the funeral
And the funny thing is that it will return on the day of the funeral of the celebration of the passing that body over … I can both see it and feel it.

Seeing the energetic form of the client standing beside the coffin at the funeral
My experience as a rule is, I see it [the spirit] stand at the side of the coffin.

Seeing the energetic form dissipating as the coffin disappears
And when that coffin …well depending on how the service is done … If the coffin drops down and goes wherever it goes, I see it disappear. It seems to break away to nothing just go into the atmosphere.

Noticing relative’s grief and relief when the energetic form leaves
And I say ok its ok, it’s gone and that’s when some people feel a strong sense of grief and relief, at the same time. This is what I see.

Perceiving companion spirits in the room prior to death
But going back to before they die, the interesting thing about that is, you can walk into the room with the living people and there are all these other people (in spirit form) around, waiting to help them cross over in spirit form.

Seeing the form of spirit companions
[These people have a physical form]. They’re almost as clear as a person on this plane. There is a renaissance colour change with clothing. The clothing style is different. There could be many from a Victorian era to a modern era or from the eighteen hundreds and seventeen hundreds.

Perceiving the same spirits greeting the client following death
And when they cross over you see the very same people greeting them on the other side, which is an interesting…

Noticing a change in colour of spirit companions after they cross over
But its there and you see its one of those people [in the room] and when they cross over, you see them in a different way too. They’re virtually white. So there is a … it’s like a veil – white, and they lose their colour…

Perceiving that spirit companions retain facial characteristics after crossing over
They have exactly the same [facial characteristics].

Perceiving that the person is picked up and carried to the other side
For me, there is a physical picking up of that person and carrying them to the other side.

Seeing a deep red energy field in clients who are fearful of death
You generally will see this very deep red… And there’s a lot of anger there… And even though they may die with fear in their eyes… When that last silence and then the lungs, “fffhhhh” (N makes expiration sound,) you will see that change from red to a very soft pink.
Seeing the change in colour from red to pink on the last breath
And even though they may die with fear in their eyes... When that last silence and then the lungs, “ffhhhh” (makes expiration sound) you will see that change from red to a very soft pink.

Perceiving reluctance of fearful clients to leave the dead body
But its still there -They will take some of it over with them. And my experience with those people; they don't leave too readily. They don't transmute too readily to the other side. And you will see them hanging around or being more present around the dead body, around the shell.

Story 1
Clairvoyantly diagnosing that client has serious illness
Well, I think of a man that I had been working with for two or three months, and he came to me one day, and I did a healing with him and I said, “Do you have check ups every six months?” And he said, “No, I don’t like doing that. Men don’t like doing that.” And I said “Do it!” … And he discovered that he’d got prostate cancer and we talked about if it was treatable. And we realised, once the Doc had said, “Look it’s too far; it’s in the lymph nodes in here.” (Pointing to the groin lymph nodes). Then we knew he was going to go.

Noticing the fading in colour and change in density of the energy field from solid to soft as illness progressed
When I first met him, I may have seen … At that time he was doing quite a lot of energy work so it was quite a bluey purple colour, then it faded. And we all change; I mean since I spoke to you earlier, your colour has changed, too ...But when it comes to somebody crossing over, it becomes more definite and solid, as if it’s a more protection thing; I don’t know…I’m not quite sure why that is … It’s like looking at trees. You can look at the leaves on a tree and you can see the outline of the etheric on them. And if it’s dying, it’s a bit denser and this is what’s happening with people. And this man went through various stages of colours like the rainbow, you know and moods. His unhappiness, his sadness, his joy. We all go through this gamut of emotions and colour around us. And, bit by bit as it gets closer to the day, it becomes softer. You see the heart becomes softer.

Perceiving the dying clients’ progression to seeing non physical beings
And you see they start to see things and people think that they’re going mad, that they’re seeing fairies… No they’ve seen the angels, don’t worry! Its spirits way of preparing them to see that on the other side.

Seeing client’s energy field respond to communication with visitors
And there are various stages of that, once you accept that. And you can either deny it to them and they don’t make a [physical] response. The only thing that responds is colour [of the field]. If you say [to them], “Oh, don’t be stupid!” - it goes solid. If you say, “Oh, how were they [the angels] today?” - It just goes softer.

Seeing the colour changes in comatose clients’ energy fields in response to verbal communication
If you see somebody in a coma, and you speak to them, you see the change in the colour. They respond to it. And everybody thinks, “Oh, There’s no life in here!” And they’re just waiting for them to die. You know, they hear every word, every word that you've got to say. And you see the change in the colour. And the more love you put into that being, the softer it becomes and it makes it much easier for that being to cross over.

Seeing colour of client's energy field become solid and resistant in response to loved one’s anger
And if the anger is coming from the people [loved one’s] that are mad because they’re leaving them, then the person who’s dying, also feels uncomfortable and become more solid in their colour. It also protects them from crossing over. It delays slightly in some way. And in saying that, I don’t altogether believe what I’ve just said because when ‘the Boss’ is ready to take you, you go. But there is some resistance that goes on there. And that’s what I do see with people.

Perceiving the unconscious clients’ positive energetic response to gentle touch
And the main thing is to be there, hold them, touch them, stroke their feet, their hands. They respond so beautifully and you don’t think they’re doing anything. When you see the colour change the minute you pick their hand up… you know, you know they feel it.

Feeling the presence of energy at the moment of passing
And you know once they take that last breath to the next life I feel that energy still in that hand, still there. It’s very beautiful.

Perceiving the changes in the chakras upon death
[The chakras] are energy, so energy stops [as the person dies]. So when I look at your chakras, they’re swirls of energy, so whilst the life is there this is doing this business. It’s like a dance. (Gestures - using convoluted movements). And then, when somebody crosses over, it’s like pulling the energy through… It’s like a dance, a Balinese dance. And once somebody crosses over, there’s this stillness. The hands (of the dancer) become still as the energy becomes still.

Perceiving the energy field dissipate and leave the client following death
The energy stays, and then you feel the energy dissipate and there’s no longer anything in that body, there’s no colour, there’s nothing, only shell. And you know then, that that spirit soul that was there a nano second ago has left … And sometimes it can leave the room immediately too.

Noticing the differing temperatures as the spirit leaves the room
And it can change. I felt somebody leave the room icy cold and with others it’s gone [the spirit] with a warm breeze. Just so beautiful, it is so beautiful! I feel that when that happens, the people that go with icy cold somehow have had trauma crossing over. And the softness to me is, ‘Ah well, I’m ready and I’ve gone.’ And they’re so beautiful. Kiddies do that all the time, it’s lovely, light, and warm.
Perceiving the client communicating with healer after death

Introduction: One of Nick’s clients was initially very reluctant to have distant healing sessions and was very resistant to dying. After an initial distant healing session, he acknowledged a profound emotional change as well as his readiness to die. Nick had the following experience the night of his client’s death. I’m lying in bed the next morning, I admit like three o’clock in the morning, I lived in the country then, I had all of the tree ferns over the window, and I couldn’t see much. But I saw all these beautiful fireworks and I woke up an eight o’clock and the phone rang and my friend [the person who referred the client] from the north said, “Guess what?” and I said, “Yes, Tom passed away didn’t he.” And he said, “How did you know?” And I said, “Well, I saw the fireworks outside my window and I knew it was him going.” And he said, “You’ll never believe this, but Tom loved fireworks and he created a fireworks show after every horse show.”

PHILLIP

Perceiving that changes colour in the emotional body indicate proximity to death

For a psychic or a clairvoyant there are certain things when death is approaching, particularly, that become apparent. One of them is, if we look at the colours in the aura first, or in the emotional field, which is the one that most clairvoyants see. Most psychics tend to have a vision of the astral body, because it’s the easiest one, at this stage in our awareness anyway. So, that’s what most clairvoyants tend to see. The key thing there really, is the change in the colours.

Noticing the red colour in astral body becomes paler and more transparent as death approaches

What tends to happen there is that certain colours begin to fade. You could see how the red ray ... The red ray in the aura is the ray of will and purpose. It relates to the vibration that gets us to incarnate in to the first place. It actually acts like a kind of magnate to bring us into a consciousness. So the red ray is almost like the earthing vibration. It brings us down into planetary experience and so long as that it is fairly active, in some of its width from vermilion right through to crimson colour ... When it is fairly active, the person is reasonably grounded and they stay alive and they function and so on. What tends to happen as death is approaching, is that colour tends to become paler, and the reds become fainter so that you can see through them. They become more transparent. At the colours are transparent anyway, but, they become even more transparent, slightly watery.

Observing the correspondence with colour change in the aura and the astral body

And if the colour begins to seriously diminish in volume in the aura, if you see it disappearing and thinning, it’s like a butterfly’s wing that has become knocked; the same thing starts to happen in the astral body.

Perceiving fragmentation and fading of red colour as a sign that higher bodies are withdrawing

There is a kind of a critical mass point which I’ve never quite been able to work out, but there comes a point that once that energy of will to be, illustrated by the red fades to a certain point, it suddenly rushes out. So it’s almost like somebody pulls the plug out more fully, so the leak of colour, you get a rush of colour and that is when the higher bodies in the person literally have been told to withdraw. And once that stage is reached, there’s absolutely nothing anyone could do to change it. You know, we could put lead weights on the higher bodies but they would still withdraw, because there is nothing we could do. And that is one of the clearest signals that any clairvoyant will see. The red light in the astral body begins to fade. It also fragments. You get a phenomenon. I was talking to a doctor about this yesterday. You get a phenomenon, which is a bit like confetti. It often happens in the colours and they break up into little patches before they completely disappear like little splotches and dots of colour.

Perceiving irreversible withdrawal of colour up the body

And they almost appear to come up the aura, oddly enough away from the bottom, which is where they are placed and that is a sign that the higher bodies are leaving. But as I say, at that point nothing can be done and that is one of the easiest things to see.

Describing perception of the funnel shape of the crown chakra

Another thing that often happens is around the top of the aura, in the space around the crown chakra, if you like the funnel. Chakras can be funnel like in their form, you know, like a funnel shape. [They are] narrower towards the glands of the body, but widening as they move through the aura. Some clairvoyants should put that differently, however, that is the way it appears to me.

Perceiving opening, and widening and clearing of the crown chakra as a sign of impending death

And what also is often a very clear sign, (and I’ve known many clairvoyants, who have worked with people in hospital, for example, who see this), is the crown centre almost opens up. It appears bigger and clearer, almost as if someone’s hoovered it out and widened it and that is also a very fair sign that the person is approaching death. In one instance, I spotted it in someone who was walking around the town, here. She didn’t look very well, but she was walking around and it was perfectly obvious that she was not far from death; within weeks I would have thought, probably days. Whether she knew that or not, I don’t know.

Perceiving a late burst of energy shortly before dying

You see this often in a hospice. When I’ve been in to visit people in the local hospice, oddly enough as that is happening, in their face they can actually appear slightly well. They often appear fairly buoyant ... Because the withdrawal is from bottom to top in a sense. You know what I mean, so that you get a late burst of energy, before it finally leaves. And in most people, [although] you do get exceptions to that, the departure if you like, appears to be in that mode.

Believing that chakras are inter-dimensional doorways

I believe that the chakras are like inter-dimensional doorways. Because they’re quite a puzzle in a way, because you know we talk about them as if they are attached to us, and they are in a sense but there is something more mysterious to them ... But we see it as an appendage in the various bodies, you know ...
Perceiving clarity of the crown chakra allows transition of consciousness
It’s almost like when somebody’s dying; you get this clarity in the crown chakra, allowing this point of transition. I think that is why when people die this the tunnel is. It’s the consciousness moving through the chakra point, in effect and we travel in consciousness through that and we do that when we sleep and all kinds of things.

Perceiving that some people exit from the physical body near to the heart chakra
Now it would seem to me these days, most people seem to come out that way (through the crown chakra) and particularly in a slow death. You know, in a more tranquil death or a death in sleep it seems to me from what I’ve looked at that that is the route out and that there do seem to be exceptions to that. Sometimes, some people seem to exit from the physical body. The higher bodies seem to move up from the physical body near to the heart centre. Now, why people do that I don’t know. I can’t give you any reasonable explanation for it.

Seeing the detachment of the etheric energy at the moment of traumatic death
seeing a burst of golden light at the moment of traumatic death was a severing of the etheric energy from the body and at that point he was dying, you know it was finished … because as he hit the car, there was an immediate detachment by this sort of bluey, whitishness … At that point there was a slight energy of conflict.

Seeing the higher light of a person evacuating through the solar plexus following euthanasia
It was not as clear as it could have been as a process, and it appeared that all the energies of this person, the higher light of this person, kind of evacuated almost through the solar plexus.

Seeing the energy field like a transparent bluey white parachute or hot air balloon before traumatic death
Yes, it looked a little like that. And it kind of began to pull away immediately (pause) So, by the time he hit the car, he was already unconscious or detached to such a point that there wouldn’t have been any real pain. The pain would have come had the body stayed connected, and he begun to regain consciousness.

Seeing the higher bodies leaving like a parachute
I have seen traumatic deaths where nonetheless … I mean I saw a chap knocked off a motorcycle on a busy road one day, and he died instantly as he hit the ground. And when I saw this chap, actually as his body hit this bus and he came off his motorbike like he’d been fired by a catapult and went up in the air almost loop the loop really. He hit a car and bounced off it. But before he hit the car, I was aware of the higher bodies leaving him, before he hit the car, like a parachute coming out of his physical body … In fact this is the other thing that is interesting, if ever you see people jumping out of windows in tall buildings, before the body ever hits the ground they’re out of it, before the body ever makes contact or as it makes contact, out come the higher bodies.

Seeing the energy field like a transparent bluey white parachute or hot air balloon before traumatic death
It was all very quick, but the energy field looked like a transparent bluey white parachute, coming onto the edge of the body, but coming onto it because he was still alive. So, if you can imagine something around the solar plexus attached, to the physical body, with a chord or a line, and then around it there’s a kind of whistful field, a transparent blue - whitish field. This is what it looked like and that’s the thing that I noticed and as that happened, I didn’t tune into his astral body, that was the thing that dominated my awareness, but it was like a parachute. It was quite odd, yes! It looked like a parachute or a balloon that was only partly inflated … It was kind of like a balloon, I’m just trying to visualise it again. You know you see a hot air balloon …

Seeing the energy field begin to pull away before traumatic death
Yes, it looked a little like that. And it kind of began to pull away immediately (pause) So, by the time he hit the car, he was already unconscious or, detached to such a point that there wouldn’t have been any real pain. The pain would have come had the body stayed connected, and he begun to regain consciousness.

Seeing the detachment of the etheric energy at the moment of traumatic death
And then what happened, he hit the car and then he bounced off this car. He must have died as he bounced off this car, because as he hit the car, there was an immediate detachment by this sort of bluey, whiteness … At that point there was a severing of the etheric energy from the body and at that point he was dying, you know it was finished …

Seeing a burst of golden light at the moment of traumatic death
And as this happened, the one thing I do remember, is there was a burst of golden light. It was almost as if someone had taken a photograph, and there was a flash and there was this golden, there was a range of golden light; I’ll put it like that. I knew at that point he was dead. So he died before he hit the road. Then he hit the road and you know, they were doing all sorts of things but whatever they did it was too late. The guy had left … But it was this big balloon thing that I remember and this flash of golden light.
Perceiving that the soul was in control of dying process
But what interested me was that at what must have been the point of death, there was this of golden light and golden light, and golden light I always associate with the soul or the higher self or the spiritual dimension and it was almost as if at that point the soul took over completely and dictated the play of what was happening.

Seeing higher mental self departing via the crown chakra after traumatic death
The only other thing I remember is that I was also aware of the crown chakra opening out, so although the energy seemed to rip away from the solar plexus, its actual departure was via the crown chakra. And that was a fairly traumatic situation, it all happened in a matter of seconds. And as I talk to you I can actually see it as if it was a video and his actual exit was via the crown chakra, his higher mental self withdrew via the crown centre.

Perceiving the dying person communicating with dead relatives
But, you know, the business of the dead relative thing where, as people are approaching death, they start to talk about everyone who has died beforehand? That’s a very common phenomenon and where their brothers and sisters have been dead for fifteen years and their great aunt or uncle and I mean, you know, it is very common occurrence, particularly people who are getting on a bit, who have lived their life and they have come to the end and they’re dying slowly. And it’s usually put down to hallucinations, isn’t it. Well, they’re not at all [hallucinating]! Most clairvoyants will say, I’m sure, that in the room they will see projections of those souls. Like, when my mother was dying, (pause) when my wife’s grandfather was dying, he was about eighty four and died very slowly over a weekend, and I think it was his brother and one or two people and you could see that his crown had become very active, there was extra movement there, and I said to my wife, “I think he’s going to pass.” And then he started about his brother and various other people and you could quite clearly see their presence around the bed.

Perceiving that departed souls project themselves in a recognisable form
They would project themselves how they would be recognised. It seems to me that when mediums pick up on someone after they have died, what they see is a transmission of a form. For example, there was a very famous psychic artist who I did work with once, but she has now died. And she noticed that the drawings that she did of people who had passed over were always of them slightly younger than they were when they died. I mean, for example, one chappie, the image of him was when he was about forty and he died when he was about sixty. So, you know, it’s a projection and they seem to project an image of them that the person is going to recognise, so …

Seeing a light form through the soul’s projected form
But I don’t believe that for one minute that, that is what they look like anymore. I think that we do become something else, like a ball of light or energy or something so that we can create any form that we want. It’s a bit like the old shape shifters. This is what they do; they project themselves in a way that is recognisable. But you can go through that and see just a light form of some kind … And I think that that is what the real self is like after death. I think that the real self is more like the aura, than the physical self, you know.

Seeing metallic colours in the auras of people who have left their body following death
And usually, once people come out of their body, the colours of their aura, because they retain their emotional field for some time … to look at, is much more metallic, because the mind body or the mental body seems to have in it the same colours of the emotional body, but at a higher frequency. Sort of up a notch … I use the word metallic; you know, more shiny, more iridescent.

Seeing a vibrant, almost overwhelming glow around the higher bodies that have pulled away from the person’s body after death
And once the astral body and the mental body have pulled away from the physical body then that seems to be the case. There is a vibrant almost overwhelming light which begins to reflect more of the mental side of the person, and I think that’s because after death, of course the big adjustment is the mental one, because we’ve got to understand what we’ve left behind, reacquaint ourselves with where we are and go through an evaluation and so on and so the mental body starts to take over and you get this sort of metallic glow. That’s the only way I can express it really, that appears around the higher bodies.

Perceiving the mental glow in the higher bodies as the process of realisation of ‘a bigger picture’ and fearlessness, following death or near death experience
So, one of the reasons for that is that the understanding that we have is not intellectual in a very concrete sense, but in much more realised mental thing, where we realise what’s going on. When I was struck by lightening, although it caught me by surprise, when I was out of my body, I kind of understood what was going on, and I understood it was not an accident, somehow, even though it appeared to be. And I think this is what happens to the mind of the person, when we’ve passed out of the body, that we start to go into the process of realising the bigger picture, what’s going on, and the fear goes, absolutely, after a while. And I think that this sort of mentally glowing, because you see through the higher bodies, is that process of realisation.

Perceiving a subtle bluish glow around the body following death
One of the things that happen is that for a few days, I don’t know how many days, as I haven’t actually measured it ... What happens is around, the body you get a glow. It’s a bit like a glow worm. You know when you see a glow worm in a bush, you get this subtle glow, you know. You get a subtle bluish glow around the body.

Perceiving the residual energy dispersing into the general energy field as the body starts to decompose
And this subtle bluish glow eventually breaks up, a little bit there again in fragments, and the more in fragments, the more the body is moving into decomposition. Because any physical body has to have an energy counterpart, so what I think is happening, is that the energy is readjusting to the new physical state that it’s going to support and ultimately all the physical atoms degenerate into dust. So what is happening is that the energy is also fragmenting with the material that it supports. But that is a kind of residual energy that is there to give the matter presence because the real world, as understand, is energetic. And the material body is kind of an attracted body, isn’t it. In spiritual terms, the imprint of the soul is in the energy and not in the body. So that would make sense in a way. You’ve got this residual energy that appears to disperse into the general energy field as the body itself starts to fragment and go back into its parts … And
when the body is dying or degenerating, you see this glow. But when you look at it closely, it like lots of little points of
light joined together and bits of them appearing to break off almost and dissipate into the common ether if you like.

Seeing that the intensity of the glow around the body depends on the intensity of the Earths’ energy
But it’s like a glow, like a bluey, white glow. And that does vary according to where the person dies. If the energy is
high in the earth at that point, then the glow is brighter and the person actually disperses more slowly. Quite apart from
everything else, you do get this kind of glow. And if you look at it it’s like a kind of dust breaking up …

Awareness of entities around the body assisting in transportation of matter from one state to another
The other thing that I’ve been aware of on many occasions is that around the body, you suddenly see the equivalent of
fairies. I mean they’re not fairies, but they’re like … I jokingly say that they’re the human equivalent of a ‘Spiritual dung
beetle’. I once watched a programme on dung beetles and prior to that, didn’t know their importance. What you get are
entities around the body. Wherever there is light and form, there are beings. They’re part of the angelic kingdom.
They’re Undines, Devas, and Nature Spirits. Call them what you like. And these Elementals are intelligent forces that
help with the transportation of matter from one state to another. And wherever you get anything like that … These
[entities] are a kind of Undine or Elemental thing you know that helps to break things down. Because just as you need
them to build things, you need them to recycle. And in effect the body is being recycled. This is what they’re doing.

Seeing the breakdown of the body via energetic imprint of meridians around the physical body
In a mortuary, for example, they’re very busy. And you can see these activities across the body, a bit like lots of lights
running along channels. And on one occasion, I remember watching a post mortem and it was a bit like lots of ... it was
almost as if the meridians existed, the energy body was still somehow imprinted around the physical body, in a very light
energy form. And the break up of the body was taking place according to this pattern. And just as the body builds itself
in a particular way, via the meridians, it also breaks itself down that way. And you could see little dots of light, using the
meridians as kind of roadways, to break up the structure.

Perceiving an energetic connection of the emotional body of the dead person with the cremated remains
[Although the energetic process of dissolution has been escalated with cremation], there is still an energetic presence
[of the person in the cremated remains], because they have a connection with it. For example, if somebody gave me an urn with ashes that I’d known, not only is there an energetic connection with those ashes, but there is an emotional one.
And this is important, because it’s often the emotional vibration that is significant here … The great interferer is the
emotional body, which develops attachments and therefore it’s the emotional body that we have to wrestle with, the
astral body, if you like, when we first die, because there is a bit of us that does not want to die. There is still this
attachment to what we have left behind, because of the emotional body’s attachment to the emotional energy that these things [the ashes] have … But because we have an emotional field, there is an emotional field around the urn and
around the ashes. Do you see there is an emotional identity? So somehow we can attach ourselves to that and relate to it.

REBECCA – Interview 1

Story 1

Noticing energetic changes shortly before death
Probably I started noticing energetic changes about eight weeks before her death. During those 8 weeks one of the
most fascinating things to me was the way the energy actually changed. So, we have in healing touch an energy
technique called chakra spread, specifically for transitions. So, it was interesting, that I started doing chakra spread
round about; it was around about the seven or eight weeks before she died. Anyway, as I use the pendulum as well as
my hands, I put it into the energy field around the bottom of her feet and nothing happened. And she was always a
person who was very grounded, so that sort of gave me a bit of a surprise. So, that pattern actually continued, but it
started to come up her body. But that time when I visited, I put the pendulum below her feet and it was actually still and
I actually put my hands in and it was actually like … you know when you’re expecting to feel something and you know
when a balloon is blown up and it just keeps going. Well, that’s like when I put my hand in it was drawing me in.

Perceiving movement of energy field up the body
what I noticed was this pattern, was that each time that I went to see her or every second time, the energy was further
up the body. And, the second time I started asking questions like, do I need to work in that area. But I got the answer
that I still needed to work in that area even though, there wasn’t a lot happening energetically. Of course, I then started
reading, thinking that there was something that I was missing. But, this is a pattern that energy workers have confirmed.
That actually the energy starts to move up the body.

Noticing energetic changes preceding physical changes
And the other thing that happened conjointly with this was, and there weren’t any obvious physical changes, the
coolness of the limbs hadn’t really started at this time either. So even though there were energetic changes, there
weren’t any apparent physical changes that went with it. She found that she was less energised, which you would
expect anyway if you don’t have a lot of energy in your legs, there’s not really much to work with.

Noticing enlargement and merging of top three chakras
The other thing that happened concurrently, was the Crown Chakra got bigger. I started to feel a little bit circumspect
about working in that area because it was just; it seemed to be really blown out.
But it was sort of like it came from the throat and sort of went out from there. So, it was like the top three chakras were
beginning to meld into one.

Noticing compromised sacral and solar plexus chakras associated with an unresolved interpersonal
relationship
One of the things with this particular lady was that she had had a consistently compromised sacral and solar plexus
chakras. She said that that was because of her relationship with her sister that hadn’t been sorted out.
Becoming aware that resolution of relationship issues correlated with changes in energy field
And she started seeing her sister, about four weeks before she died. And it was interesting, in the fact that even though the energy seemed to have been up around about here about that stage. So it was around about that midriff area. And the first meeting they had a very big argument, but they both ended up in tears and she thought that that was a good thing. And the following week they had another meeting and a lot of things were resolved and then her energy started to move more quickly, which was interesting.

Perceiving a standing, shimmering presence near the person
Even though I wasn’t getting a lot of visuals at that time, as she said that I felt a presence and then, actually saw just this shimmer, and it was standing, (of course she was lying down), it was standing in her chest space and she said “I don’t know that I want to leave the same way that I came in.” I didn’t quite get what that was about. So, I just left it like that.

Sensing the beginning of physical changes a week before death
The last week before her death the physical changes started to happen … you know, the cooling of the feet and ah, but it was interesting that she maintained warm hands.

Sensing a fullness of the heart Chakra
And even though there wasn’t a lot happening at the heart chakra, it still felt … even though the pendulum wasn’t moving, in a clockwise direction, it still felt to me like her heart was full. So, I can’t quite, It wasn’t with my hand either, it was a sense that I had.

Sensing out of body explorations
And at the same time that I had finished working with this lady, I’d done the final charka spread, and I said a blessing because I didn’t think that I was going to be seeing her again, and I really had a strong sense of her spirit taking a little hop out and a little hop back in again, just as a little trial to see what it was like outside … the body so to speak … So I did the last session with her. Her niece called me and asked me to come, and it was probably around about 10.30 at night, so I did a charka spread… she was a little bit restless, so I think that the family were concerned that she had some pain. That wasn’t my sense of it at all, that it was purely the physicality, you know. So the charka spread was in three rounds so you spread each charka very gently and really what’s that is doing is course is just getting rid of any excess stuff so people can do what they need to do. And, it was on the second round that I sort of looked up and there was sort of like these little wisps and I thought, “Oh,” and I think that she just popped out for a little look see, then popped back in again. I saw the wisp go this way and the wisp go back again.

Story 2
Rebecca was giving healing sessions to a man, Tom, in the late stages of cancer of the Liver. He was in severe pain, was very irritable and had difficulty coming to terms with his diagnosis. He was on large doses of analgesia, which wasn’t controlling his pain. He had been referred to Rebecca. primarily for pain relief.

Noticing tightness, resistance and guarding in the energy field as protection
The energy did come up the body but it did come in (towards the body) first, so the energy was quite tight anyway, because of his resistance … Actually the word resistance came up at the beginning but I’m actually thinking about the word guarding now, you know its like, guarding, and that was the sense I got up here and here (the trunk area) was the guarding … When I was working on this part of his body I’d actually have my hands out, about two feet away from his body and when he’d relax I’d start to move them in again and that’s when I got a really strong sense of “choo” (hand signal demonstrating defence). I got a really strong sense of tightening and defending … When I started to move in he started to relax and I thought I could get a little bit closer … I started asking just a few gentle little questions like, “How do you feel having a woman that you hardly know, working in your energy field?” And of course that was a mistake to say ‘energy field,’ but anyway that’s what I said to him. And of course he said, “Well, you’re alright, you’re OK. You’re not after me…” Anyway, when I came back next time he said “you know, that stuff you said, actually I don’t feel really comfortable with your … not with me, but with a woman caring for me.” I said that I wasn’t caring for him per say. What we were doing was entering into a sort of a business relationship, a partnership … You know that he was paying me, so that I could help with his energy to help with the pain and that really what he and I were looking for was to help this process with his illness, whatever the outcome might be, and I think what really did it for him was the fact that I said “whatever the outcome might be.” because he was assuming that everyone was assuming that he was going to die… so I thought that that was really interesting and after that the field started to relax. That was a very interesting lesson for me in that you know people can pull their field in as much as a defence, as protection.

Observing the energy field relaxed with pain reduction
The energy was quite tight but it actually came in, except for around the liver area, where there was a great spike because of the amount of pain that he had initially… It was interesting that the energy field started to come in, closer to the body. I was a little bit concerned about that from the point of view of his pain because you know what that was doing, it was really pressing on that ‘spike’ area … I did quite a number of different techniques, just to balance, so that his field needed to do whatever it needed to do and it was interesting that as the pain started to reduce, so the field started to relax little bit…

Noticing that the energy healing reduced pain
He said that he felt better after I’d been and that the reduction in pain lasted about 48 hours. It would build up to a crescendo again and I’d come again after it had built up to a crescendo … Anyway, I noticed that the edge started to soften, so I checked out with him what he was doing medication wise, to see if he had any changes, and it was interesting because he said, “Well, seeing that I’m seeing you, I’m cutting down on the medications.”
Perceiving energetic pain spike softened in response to healing
I think energetically the spike started to soften. So, how I feel a spike its quite often like fibreglass, it has a sense of hard sharpness of fibreglass and I remember particularly in this case because I thought it must be particularly severe...

But anyway one of the things that I noticed was over about three weeks was that the field seemed relaxed, and it didn’t seem so ‘porcupiney’. Like there are porcupine spikes and there are big spikes that are pain spikes.

Perceiving compromised areas in the solar plexus and heart
Things are starting to soften a bit, but the two areas that were most compromised were the solar plexus, and that makes perfect sense really, and the heart. So there was nothing much happening in the sacral area. I mean it was fine. The energy started to come up, but these areas just maintained their compromise.

Becoming aware of patient’s heightened perception of energy healing
So I started doing the chakra spread and I think it was about two weeks before he died and I remember once he opened one eye and he looked at me and he said, “Mmmn...” I said, “Have you got some experience that you want to tell me about?” and he said, “Well, its like somebody’s taking some water somehow and cleaning, you know, the gritty bits.” Then he said that it was like little shell gritty bits, like when you have to get the sand out of your hair.

Perceiving energetic movement and softening in response to resolution of relationship
So, again the energy did actually come up the body and it did stop around the solar plexus, it started to move and because he had softened a bit, his relationship particularly with this one daughter. One day I saw them and they were both looking at each other with soft eyes. And I thought yeah, there is a change here. So, once he got past that and the guarding which was mainly here (solar plexus). As that eased it was like the heart chakra was... I’m just thinking... I think that his heart chakra was always open because he was a kind man but, again, it was like a relaxation. The petals relaxed out so I suppose when he was having his ‘chakra spread baths’... when the chakra was actually being bathed with that relaxation, it was possible to get any ‘gritty bits’ cut from around the petals of the chakra.

Noticing response to energy healing immediately prior to death
I think I was going for a regular session and his wife called and asked me to come a bit earlier, so I came and he was... it was funny, it wasn’t quite a cheyne stokes he wasn’t quite conscious and he wasn’t quite unconsciousness. It was just that twilight zone. Anyway, I told him who I was and what I was doing and that I would be doing the chakra spread, and was there anything else he wanted to do or say and it didn’t have to be in words and it was also fine to let go because that was the thing. When I walked in there it was... “I’ve got to breathe it’s my job to breathe!” Anyway, as I did the ‘chakra spread’ and I came into the heart chakra and I came in really, really close, and spread it one and then twice and then on the third time (this was the first round) he took this great big deep breath and one side of his face... Noting absence of lower chakras with pendulum

Feeling fine stardust energy from person’s right side of heart chakra
I feel for him it was more around the heart. It was sideways. I needed to do at least one full round the ‘chakra spread’ did the  ‘chakra spread’ and I came into the heart chakra and I came in really, really close, and spread it once and then smiled and he died. So it was like, I feel confident enough to let go now.

Perceiving energetic pain spike softened in response to healing
I think energetically the spike started to soften. So, how I feel a spike its quite often like fibreglass, it has a sense of hard sharpness of fibreglass and I remember particularly in this case because I thought it must be particularly severe...

But anyway one of the things that I noticed was over about three weeks was that the field seemed relaxed, and it didn’t seem so ‘porcupiney’. Like there are porcupine spikes and there are big spikes that are pain spikes.

Perceiving compromised areas in the solar plexus and heart
Things are starting to soften a bit, but the two areas that were most compromised were the solar plexus, and that makes perfect sense really, and the heart. So there was nothing much happening in the sacral area. I mean it was fine. The energy started to come up, but these areas just maintained their compromise.

Becoming aware of patient’s heightened perception of energy healing
So I started doing the chakra spread and I think it was about two weeks before he died and I remember once he opened one eye and he looked at me and he said, “Mmmn...” I said, “Have you got some experience that you want to tell me about?” and he said, “Well, its like somebody’s taking some water somehow and cleaning, you know, the gritty bits.” Then he said that it was like little shell gritty bits, like when you have to get the sand out of your hair.

Perceiving energetic movement and softening in response to resolution of relationship
So, again the energy did actually come up the body and it did stop around the solar plexus, it started to move and because he had softened a bit, his relationship particularly with this one daughter. One day I saw them and they were both looking at each other with soft eyes. And I thought yeah, there is a change here. So, once he got past that and the guarding which was mainly here (solar plexus). As that eased it was like the heart chakra was... I’m just thinking... I think that his heart chakra was always open because he was a kind man but, again, it was like a relaxation. The petals relaxed out so I suppose when he was having his ‘chakra spread baths’... when the chakra was actually being bathed with that relaxation, it was possible to get any ‘gritty bits’ cut from around the petals of the chakra.

Noticing response to energy healing immediately prior to death
I think I was going for a regular session and his wife called and asked me to come a bit earlier, so I came and he was... it was funny, it wasn’t quite a cheyne stokes he wasn’t quite conscious and he wasn’t quite unconsciousness. It was just that twilight zone. Anyway, I told him who I was and what I was doing and that I would be doing the chakra spread, and was there anything else he wanted to do or say and it didn’t have to be in words and it was also fine to let go because that was the thing. When I walked in there it was... “I’ve got to breathe it’s my job to breathe!” Anyway, as I did the ‘chakra spread’ and I came into the heart chakra and I came in really, really close, and spread it one and then twice and then on the third time (this was the first round) he took this great big deep breath and one side of his face... Noting absence of lower chakras with pendulum

Feeling fine stardust energy from person’s right side of heart chakra
I feel for him it was more around the heart. It was sideways. I needed to do at least one full round the ‘chakra spread’ and then decide whether I wanted to do the rest, because I was looking out of the corner of my eye and I just had a feeling of stardust, very fine stardust coming out of the right side and I just saw it out of the corner of my eye.

REBECCA - Interview 2

Story 1

Rebecca’s preamble: It was within a period of I think that the person had a diagnosis and they were dead in three months. So it was a rapid progress of this disease process and towards death. And right from the very beginning they had embraced the holistic experience and decided that there were certain things that had to be done and they weren’t practical hands on things, they were more like releasing any angst, “sorting out disordered relationships” was the way she put it. And to have her chakras as clear as she could for the journey, because she realised that when there are blockages in the chakras, it makes the death process more uncomfortable for people.

Perceiving a “smokey haze” above the person
I saw her twice in that last week. But there was there was like a smokey haze above her, so that when I was standing at the table holding her feet, I could see it and it was quite different from the etheric layer. The etheric layer I’ll usually see as blue hairs, standing up but this was much wider, so I’d say it was about 6 inches. So it didn’t have that blue-grey colour particular to her etheric, which was a lovely blue-grey colour that was very strong. But this was a haze because it was going this way:(indicating to the left and right) it wasn’t going up ways which was what I experienced before...

So, we’re standing at the end of the table, at her feet. I could actually see it over the whole body.

Noticing absence of lower chakras with pendulum
And then I think that last time again with the pendulum... even though I could see that smokey haze, (it was up around from the root upwards), the pendulum was still (not registering) around those lower chakras.

Perceiving the presence of non–physical beings supporting and holding during transition
I suppose the other thing that I really was very aware of with her was the presence of other beings in the room. I can’t remember exactly, and I can’t remember, if that was the first time that I saw angel wings or not, but it was around about that time. So I saw the outline, I didn’t see his face or any colours, except for the white tips of the wings. There were two in each corner, very large with these big wings and the beings in the centre. I couldn’t say if they had wings or not. There is more of a golden edge around beings when they are in that situation. And more it was like that support and holding. That was the sense I had of it, so it was rather mind blowing, really.

Perceiving Guides directing energy Healing
But I’d say most of the times, say 60-70% of the time, my hands were doing something that I didn’t understand. There was once when I started off and I thought I’d do something, and my hands were stuck, (and I’m trying to think where they were), and my hands were going here - heart and sacral chakras. And what happens with those is that my hands get stuck, and then I feel as if my hands have gone into the body. But it was almost like, quite often, I’ll just go with the
flow, but this was like what you actually need to be doing, and you just do it, and it would have been hard not to. Then the energy of the guides comes through my hands, as they do the work that needs to be done. And then my hands - I mean that I had control but I didn’t have control. I would have had to really force them to change them. So, but my hand on the heart stayed there; my hand on the sacral raised up, and started doing like these spirals over both the sacral and the heart chakras, and I don’t know what that was about.

Recognising that the client’s acceptance facilitated intuitive healing
Working with someone who was in that space I think, allowed me that freedom, to go with the flow a lot more than because of the family expectations or because of the person’s [expectations] or because of the hospital or whatever. I’d [usually] need to stick to healing touch techniques per say. So, that was quite a different experience working with her.

Story 2
Rebecca and her colleague Helen were asked to visit Joyce, a sixty years old woman, who was dying in a hospital. She was very restless, picking the bed clothes when they arrived, and they were asked to help settle her agitation. As Rebecca and Helen’s energy was too strong for Joyce, they taught her ten year old grandson, Stephen to do a simple healing technique, verbally guided him while supporting him with their energy.

Noticing that energy transference was too strong for the client
I put my hand in her energy, and she got so agitated and she just could not tolerate it, and so I stepped outside of the field again. It was that my energy needed to be turned down. I had been told by a teacher, “When you’re working with the dying, you need to turn your energy down. Turn your energy down!”.

Perceiving agitated energy around client’s head and heaviness of heart
Just amazing! It was just like this agitated energy around her head and around her heart. I felt this heaviness, and I suppose [it was due to] leaving this grandson.

Perceiving the energy flowing from grandson’s hands and settling disturbed energy
Anyway it was like this flow, I just had a sense it was like honey, and it was like this lovely golden honey, coming through her field, and settling all of that [Energetic disturbance] and going all the way down, and I did actually see it flow from his hands ... And she actually stopped plucking the bed sheets, and she died the next morning, quite comfortably ... I mean this little grandchild knew on one level, but didn’t know on the consciousness level. Yeah, and of course he was really happy to be doing something other than sitting there with Mum crying, and Grandma plucking the bed sheets.

Story 3
Being aware of the necessity to assess the agitated client’s energy field before treatment
Rebecca was requested to work with a comatose man, with a closed head injury, who had been hospitalized, following a car accident. She stayed on the perimeter of his field, trying to assess whether he wanted her to assist him.

Perceiving a disturbed energy field with a lot of jagged edges
I was warned to stay on the perimeter of the room, as far away as I could get, and just scan the edge of the field, because there were lot things not right with the field, a whole lot of jagged edges.

Attempting to make contact with the client’s soul
[I was] trying to get past the induced coma, to establish contact with the soul as much as I could, with what was going on with the soul, of the person inside this body, wherever they were.

Sensing that client’s consciousness had vacated the body
And I had a sense that this person was already out of their body.

Sensing that client did not want healing
And [the client was] just letting me know that there wasn’t anything that they really required, so I didn’t actually do anything. I mean hands on anything, I mean really. I just said [to the relatives], “Well call me in the morning. I’m happy to come back if you’d like me to.” And of course they turned the respirator off, and [the client wasn’t] on a respirator and of course, died before the morning. So, it was like, “No, don’t intervene.” And I think, that the person was very disappointed; the person who called me was very disappointed, so I think that it is like [this] in that case, where I couldn’t get a sense of whether the soul required anything of me, whether it was because the person was in a coma, and the soul is at a distance - But I got a sense that I was falling down a tunnel, falling! And you know it was just like this little whisper at the end, this little tiny whisper saying, ‘It’s alright, and you can go away.” Yeah, so I have no doubt, because I certainly had that experience.

Story 4
Perceiving father’s communication with dead brother prior to death
My Dad just before he died - It was very interesting. He was in hospital, and I went to see him the day before he died. It was in the afternoon, sitting up in bed as chipper as chipper. I said, “What have you been doing?” And he said, “I’ve just been to lunch with Pete, and we had roast lamb and mince sauce. Much better mint sauce than Joan could make.” (That was his wife.). “Mint sauce, roast potatoes, pumpkin, ‘cause that was really good, ‘cause your mother wasn’t there, (Mum hates pumpkin) and beans.” And I said, “Oh, that’s really good, Dad, and how was Pete?” And he said, “Oh, he was the best he’s looked in fifteen years!”

(Because he’s been dead for fifteen years you see.) He’d gone and had lunch with his brother, who had been dead for all this time, just before he’d died. And he and I could talk about Pete, and those things. He had one brother alive, and he had quite a few brothers who were dead, but he didn’t remember them. He only remembered Pete. Pete was the only one whom he remembered.
Story 1
Rosa’s client [Theo] was a terminally ill old man with cancer. She assessed him energetically, and found that he was physically, emotionally and spiritually depleted. Rosa assisted him during the final months of his illness and continued to support him energetically in an intensive care unit, where he died from an embolism following surgery.

Perceiving light around body became very bright, flowing and integrated during death
The soul is always the same. It’s always centred. And how the energy moves from the physical to the soul, can change, but it is really only the light that gets brighter that I can see. Now, his light was really bright, energetically, physically, and on a soul level still very flowing, which showed me that he passed over being very integrated, at one … I see it around his body, and its very hard for me when someone becomes as integrated as they do, to see their physical body as separate from their soul. When that integration takes place it seems to be just a flow.

Perceiving the essence like a small fairy light move from the heart at death
The light … sometimes I see the essence move up and out … you know, from the heart … I’ve seen just a very small light from the heart, like a fairy light just gently move out of the body. Just gently move and there’s always been peace as this takes place and the person takes a deep breath and it will be one of ‘Thank God, finally’ It’s that kind of feeling and a feeling of I’ve done what I’ve had to do. Even though they fight to the end to stay in that physical body, I see in that moment a let go and acceptance.

Perceiving the light around the body fades and diffuses thirty seconds after death
(The light around the body) I see that fade. I just see it fade. It tends to just become nothing. It doesn’t go anywhere, it just fades … (It) possibly it takes thirty seconds to fade and it just diffuses, becomes nothing.

Feeling the presence of the spirit and communicating with it after death
[I feel their presence after transition] definitely, definitely. And sometimes I’ll just stay and say, “Now, do you need to speak with me?” Is there anything that you need to say?” And quite often they do. And the spirit speaks, because the spirit is still there, but the soul is gone. It’s only the spirit I communicate with. And if that spirit has had a good close connection with me, when I’ve been there and most people do. During the process of healing, they’re in my energy field anyway, so it’s very easy for them to communicate with me. The man that I spoke of a moment ago [Theo] - he stayed around. I left the hospital. His daughter stayed with him and I left and the family said that he still remained peaceful (prior to death) after all (other visitors) had gone, but I was talking to him, coming home in the car. And then within two days, he came through clearly. He told me that he was with his mother, gave me his mother’s name. Things that I guess were proof for the family. He said to me about his daughter and about the man that was coming, and that she would marry. And, that happened within six months and that was a surprise to us all. Yes, total surprise. She’d never met the man before and she was married within three months. So he (her father), had orchestrated a lot of that. It is a great comfort when they pass over, if they continue to communicate, because that says to the family that they are o.k. And that has happened quite often. If the family aren’t at a level of accepting that, I don’t pass that on, because they can’t move from one mode to another. Because I am. I allow time, and then often times, the spirit will impress the people to come to me to talk to me, and then if they are ready, I’ll pass that on, too.

Continuing to communicate with spirit about family members after death
The spirit always continues (to communicate after death) … It’s a different connection to all of the spirits depending on what they have to do. With the man, Giuseppe was his name; I only have to call him in, and he’s there. And occasionally I’ll say “Are you around Giuseppe?” and I’ll hear him very clearly and there’s always a little password I have with them to make sure it’s authentic. Once they can give me proof, and I know that it’s authentic, then I might allow, and I say allow, because I need to take responsibility for what’s coming and going and make sure there’s no psychoses there. So you know, there’s always a, “How are you?” He always calls me “Lora” and when he speaks to me, I hear the Italian, and that energy, and I feel the love. He was like a Dad. It was that kind of energy, and you know, when he speaks, it’s always about a family member, and I’ll know nothing about what’s going on and so I’ll phone them and they’ll confirm what’s going on, and that confirms what he’s said. So, I always seek confirmation and I looking for the validity in what’s given.

Story 2
Recognising blocks in energy field signified metastatic cancer
Well, there’s ‘Daniel’, who came to me. When he came originally, it was via an acupuncturist, who felt I could assist him. And he was in remission, with his cancer. Ah, the doctors had felt it had cleared. I started treating him, and I could feel through his body, that there were blocks in his energy field. So, I spoke to his parents, and I asked them to take him to the doctor please, and have another MRI, and they said, “Well, he’s in remission, and everything’s fine.” When he went to the doctor, the doctor simply said, “Just give him a Panadol, he’s probably pulled a muscle surfing.” And they wouldn’t do the MRI, and then they brought him back to me, and I was a little bit triggered. I went into a little bit of fear, because I knew that the cancer had metastasised in other areas. I could feel it in his body. It was just a knowing, and I said to the family. “No, that’s not good enough. I want you to take him back and have a total body scan, regardless of what the doctor says. Please insist!” So they did. And when they came back to me, they’d found it in his pelvis, in his lung, in his brain, in his cervical spine, in his knee. And the family went into total shock. If I hadn’t have insisted, as I did, he wouldn’t have had the time he had.

Working energetically to retard the spread of cancer
Now, I started to work on him immediately. They went through their process medically. I said, “Look, do whatever the doctors will do; I’ll just work on him every day.” So then I commenced working on him, every day. He would either come out to see me, or I’d go to his home, or I’d do it long distance, or even both. Now, they’d given him about three weeks, they said at that stage, (it would be) not very long at all, and said, they didn’t even know that it was any good doing the chemotherapy. And I said to them, “Well, I’m not giving up and I’m just going to keep working on him.” So, I think that they did start some chemo. I can’t quite remember. I think they did. But I just continued to stay focused.
Now, after a while they took him up to Brisbane to the doctor and the mother rang from Brisbane and said, “It’s just a miracle, it’s just cleared from all areas. There’s a spot in the lung. The neck’s cleared ... and the knee’s cleared the pelvis.” He still had some in the brain and a spot in the lung. But they were saying, it was a miracle. Now I said, “When he gets home I’ll just start to keep working with him again.” And he progressed to the stage that that they then wanted to do stem cell therapy. So then, they chose to go ahead and do that, with a belief that it was almost clear.

Noticing peak in crown chakra, coinciding with the growth of brain cancer.

They could go home at that stage and then unfortunately after opening up ... They did the stem cell, and because of the loss of strength in his knee, and the loss of muscle. I think it was bone, because he’d lost length in his leg from his pelvis. They decided that they would operate on the knee. Well, once they had operated on the knee, it [the cancer] returned, and when they said to the family (pause). And then something started to happen around the crown chakra, and his head actually formed a peak as a Buddha does, and there was a growth coming from his brain; I could see that. Well, that was a very small lump. He showed me that when he came to me, just after the stem cell treatment. About a month after the knee operation, within a month it started to grow, and [he] said, “I don’t know what this is!” And he kept touching it. [A] tiny lump ... It began like a very, very, (pause), like my fingernail, I could see it growing daily and I was concerned.

Communicating with spirit, standing, filling the room with light, soon after death

Yes, and he did that communicated after he died, and when the family phoned me, minutes after he passed over, I was on my way to him, and they phoned me, and said he had just gone, and could I go up and see him. So he was in the room and he was standing there. (pause) I’m going to cry. (pause) He filled the room with light. It’s so humbling, to work with souls as his, to see the transition of passing, and put that essence into that soul as they pass. How strong they are, how powerful they are. He was so clear and he was there to heal everyone else, and I said to him, “Are you o.k?” and he said to me, “Just make sure they’re [the family are] OK.” And he said, “Feel me.” And I said, “Why do you want me to feel you?” And he wanted me to feel him, so he could feel his body. He could see himself lying there, and I just put my hand on his body, and he said “I’m so cold” and I said “It’s only your body,” and he said, “I understand that” And he said, “I’ve got no pain!” And he said, “I’m concerned about their [family] pain.” He said, “I’m happy with my choice.” And he was. He was happy with his choice. He said, “I’ll stay with them.” And I said, “You just do, what you need to do.” And he said “I’ll just stay here and help them.”

Perceiving absence of light but essence remaining in the room the day after death

So, he remained there and I went back the next day and I could still feel his energy in the room, but the light had gone. I felt his essence remaining, when I went back the next day, to the room, and then, when he came out here.

Reappearance of bright light in room at funeral

I went on to do his funeral, the funeral was here at [my centre], he was laid out for people to see him, and he really enjoyed that. He enjoyed being there and he was once again a very bright light in that room.

Communicating with spirit about future signs of his presence

His friends found it very difficult, but he said that he wanted to stay, to give them comfort, and he enjoyed being the centre of attention, very much. He enjoyed that, and he was very proud, about what they felt about him. He could see that he had been loved by his friends, and he took pride in them, to see that. I said to him, “How will I know to identify you in the future?” And he said, “Look to the sky.” And whenever he’s around, he always presents as a very bright orange sunset.

Recognising a pre-ordained signal of spirit’s presence at brother’s wedding

I have a photo of him in the garden with me, and the photo shows the orange sunset in the background. He had his crutches there, and he was helping me build a circle here at [our home], and the sky went really orange, and we took a photo. He’s recently had his brother’s wedding here, and both [a friend] and myself were there, and we haven’t had an orange sunset for months, and I got the photo and I held it and I said, “If you’re here, give us a sunset!” And within fifteen minutes, the whole sky changed to a beautiful orange sunset, and I just found it very hard to believe he could change it just like that, and I said to [my friend], “We haven’t had an orange sunset for many, many months, and he just did it on cue!”

Story 3

Acting as a medium relaying messages to family

One lady was coming to me twice a week and she passed over within a month of Daniel passing actually, and she came back to me a few days later and said to tell her daughter to go to this box and that there is a ring there from Neil. Now, when I did, the daughter knew nothing about it. She said: “Mum never spoke about a Neil.” Anyway, she found it and in the ring it had, “With love from Neil.” She (the daughter) spoke to her father, and said, “Who was Neil?” And he said, “He was an old boyfriend of your mothers.” And last week I went to see her at the hairdressers [the daughter’s workplace] and the mother came through, while I was sitting there, and said, “Go and tell her [the daughter], that she needs to put a yellow rose in the garden.” So I went to her, I hadn’t spoken to her for months about her mother, and I said, “Look, your Mum’s here and she said you need to put a yellow rose in the garden.” And the daughter just shook her head, and said, “My auntie’s just doing a rose garden up in Cairns and she spoke to me the other night about putting a rose there for Mum.” I said, “Well, she wants a yellow one.” And he said, “I’m happy with my choice.” And he was. He was happy with his choice. He said, “I’ll stay with them.” And I said, “You just do, what you need to do.” And he said “I’ll just stay here and help them.”

Acting as a medium relaying messages to friends

Last week, I was driving home. Now, she [Jess] lost her best friend [Alyson] from a heart attack, three months ago and the lady was only sixty five. I’m driving up the hill from having a cup of coffee the other day, and this little voice said, “Hello.” I said, “Who are you?” She said, “I’m Alyson.” I said, “How are you going?” She said, “I want you to go to Gary and Jess, and tell Garry he’s got to read those papers before he signs the contract.” And I thought, “Oh, what’s she on about?” Anyway, I went to Garry and he said, “Oh, Jess’s not here.” I said “I need to talk to you. Look, this is
what I've just got from Alyson.” He said, “That's amazing!” He said, “I'm just about to go to Hong Kong and I've got this contract and I was thinking, 'I think I'll get legal advice this time.' And I said, “She wants you to really read the contract before you sign anything.”

She [Alyson] was here once for dinner, and I spoke to her once at the hospital when Jess had the baby, but she just knows that I can see. And Jess came to me yesterday, about three weeks after I spoke to Garry and said “I'm just feeling so abandoned by Alyson. I can't hear her, I'm just so abandoned. You know, and I didn't even know the woman and she was communicating with me and all I can do is just pass onto the family what I get. And another night I was sitting in a Chinese restaurant and she [Alyson] said, “Oh I love this! I used to love the curry. Tell the girls I'm not missing out on anything and I enjoy the Chinese every time they go.” So, I thought, a little bit of trivia, so I phoned Jess and I said, “Alyson popped in and she said, she used to love Chinese.” I said, “Oh, OK., so there you go, she just wants you to know.” But you really have to be decisive in who you tell. You don't want to appear to have psychoses. You don't want to overwhelm people, and the medical society would say, “This is psychotic!” and that's OK., but it works for me.