**Exploring the Impact of Negative Spontaneous Post-Death Experiences on the Bereavement Process**

Mia Jakeman & Callum E. Cooper  
University of Northampton  
Exceptional Experiences and Consciousness Studies

**Background**

Sensing the presence of a deceased loved one is a common phenomenon, with approximately just over 50% of widowed individuals having these experiences (Rees, 2010). There has been a great deal of research conducted surrounding the positive psychology of such experiences and their impact on the bereavement process. Cooper (2013) argued that spontaneous experiences can be a catalyst for the development of hope; Snyder (1996) also argued that in bereavement sources of hope must be discovered in order to cope with loss. Thus, research strongly suggests such experiences are a highly positive and useful part of bereavement, especially in fostering hope (Cooper, 2017).

Research surrounding the negative effects is sparse. In the past it has been difficult for individuals to bring these experiences up with family, friends and health services due to fear of being ridiculed (e.g. Roxburgh & Evenden, 2016). This may be due to assumptions of a taboo status that surrounds these experiences (Wright, 1998) or fear of being labelled as insane or deluded (Milton, 1992). Parker (2005) found 1 out of the 12 interviewees had a negative experience, Rees (2010) found only 6% of his participants reported them to be unpleasant (N = 293).

When such experiences are documented within the research, it is seldom the case that they will be expanded upon, as demonstrated in Cooper (2017) where a number of negative comments were made throughout interviews, but only expanded upon briefly within the research. Such instances are rare due to the clear majority of anomalous experiences found to be comforting and positive (e.g. Cooper, 2017; Houran, 1999). Research thus far has typically focused on the positive impact of such experiences. Given the limited information on experiences reported as negative, this study aimed to explore why that is, and also their impact on bereavement process.

**Methodology**

Semi-structured interviews were conducted with 4 females, between the ages of 38 and 53 (each with a background in psychology and counselling). The method of interviewing allowed the researcher to expand on concepts and comments as there is no rigid structure (Bryman, 2016), and allows clarification on points made (Corbin & Strauss, 2015) during the encouraged “rambling” of the interviewees (Bryman, 2016). Interpretative Phenomenological Analysis (IPA) was the approach used within this study.

**Findings**

The analytical process resulted in the emergence of 5 super-ordinate themes (with sub-themes):

**Table 1: Key Super-Ordinate Themes**

<table>
<thead>
<tr>
<th>Super-ordinate theme</th>
<th>From the Deceased’s Assumed Point of View</th>
<th>Continued Bond</th>
<th>Bereavement Process</th>
<th>Judgement</th>
<th>Emotional Expressions</th>
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<td>Illustrative quote</td>
<td>“They might not want to communicate, so I think you’ve got to be careful that you don’t prolong it for them. Because in my eyes, it’s alright for her wanting to communicate but I shouldn’t be able to keep her on… drifting from one place to the other if she wants to go completely and not have that communication” (Denise, lines 108-111)</td>
<td>“But I’ve done lots of work with the relationship with my father so now it’s much better” (Janet, lines 119-120, when discussing why comfort wasn’t felt in the presence of her father)</td>
<td>“I don’t see her anymore, but for the first year I did see her a lot, but now I don’t see her [Interviewer: Do you think it’s worse now that you don’t see her?] … Yes, yes, because that comfort has gone” (Denise, lines 44-47)</td>
<td>“A lot of people I spoke too, you could tell they were like ‘…right ok… no seriously it was a dream’ [laughs] yeah, a few people asked if I had been drinking, but I hadn’t, at all.” (Scarlett, lines 41-43)</td>
<td>“And I was absolutely petrified. And I remember thinking to myself, these are supposed to be your guardian angels, these are supposed to be really calming. And I am shifting myself, really I was so scared…” (Scarlett, lines 10-12)</td>
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**Discussion**

In regards to why an experience itself could be negative, it seems partially due to the spontaneity, this is especially demonstrated in the case of Denise, where the experience was overwhelming and caused feelings of terror and fear. It is only natural to be afraid of something that cannot be explained using conventional paradigms, therefore it is no surprise that some experiences are seen to be negative. The after effects of the experiences should also be taken into account when explaining why they were seen as negative. Although recent shifts in clinical parapsychology are receiving main stream attention (Cooper, 2017; Kramer, Bauer & Hövelmann, 2012), there is still a taboo lingering over anomalous experiences, where they are not totally accepted by every individual within western society (Burton, 1982; Rees, 2001; Roxburgh & Evenden, 2016), regardless of how much opinion has changed throughout recent years (Klass & Steffen, 2017; Rees, 2010).

Interviewees remained certain that negative experiences did not affect the bereavement process – and the process itself is by no means a simple one. E.g., Amber experienced a second ‘spiritual bereavement’ where she grieved the loss of the anomalous experiences that offered her such comfort, as well as the initial loss of her Mother. Given such limited research in this area, ‘spiritual bereavement’ could be expanded upon by future research in terms of both positive and negative experiences. The positive feelings from Amber’s experiences could potentially prevent Amber herself from full recovery. The paradox of letting go and remaining involved is explored within Klass et al. (1996) – more research is required. Whilst a continued relationship with the deceased is common (Klass et al., 1996; Klass & Steffen, 2017), to not have such anomalous experiences (+ or –) has been demonstrated to caused a decline in health and hope (Cooper et al., 2015; Cooper, 2017).