

Raymond Moody – Proof of Life After Life: 7 Reasons to Believe There Is An Afterlife

Numbers in parentheses, following some statements, are reference numbers. I included them to indicate that Moody cites a specific paper, relative to the concept included in the statement. Many of the journals involved may be less rigorous than those reporting things like randomized controlled trials, however.

Comments in braces (“<>”) are text I added to clarify a quoted statement, that is only quoted in part; or to demarcate my own sometimes skeptical comments on what Moody is saying.

Moody’s core framing is laid out in Chapter 3, on page 55. It centers on an argument between 2 competing schools of thought:

p. 55 – **Materialist vs. Dualists**

“ ... two major schools of thought on this matter – neither of which have proven answers and both of which continue to engage in a battle of speculation.” <this is true – nails it!>

“ ... subscribers to the **materialism school** believe everything is physical. ... nothing exists except matter and its movements. ... tend to reject things and events they can’t recreate or measure, particularly matters of spirit or soul.”

“**Dualists** believe that the body and mind are separate, meaning that the mind can often exist independent of the brain, possibly even communicating at a distance.”

Moody then argues that “ ... much of the world we live in is unexplained.” Cites that “ ... the science of quantum mechanics has unveiled several new rules of physics that seem both spiritual and scientific. ... although we may not be able to see or weigh them, we know that they exist beyond the perception of known measurement.” “Although materialists say that psychic powers cannot be consistently reproduced in a laboratory, does that mean it’s a waste of time to explore psychic communications or other events like intuition that are known to statistically exist? Not at all. Perhaps what it means is that we need to find different methods of exploration.” “When Carl Gustav Jung spoke before the Society of Psychical Research in 1919, he defended psychic research by saying that psychic events are common; we just don’t know why or how they take place. Still, he said, ‘I shall not commit the fashionable stupidity of regarding everything I cannot explain as a fraud. (17) He left it at that.”

What then follows is Moody’s layout of 7 specific areas he labels Shared Death Experiences (SDEs), with supporting arguments, examples, and background. He regards each of these 7 areas as providing greater or lesser degrees of “proof” of the dualist argument. In particular, he notes that traditional studies of near-death experiences (NDEs) involve inherently subjective data – each is a report by a single individual, with no ready means on confirmation or validation. SDEs, on the other hand, provide 1 or more external observers of the events under study.

Intro pg. XVI – “In 1975, I derived 14 common traits of what I came to name the near-death experience, or NDE” (based on a very extensive library of NDE experiences that he had compiled):

1. **Ineffability** – many (most?) people couldn't find the words (language) to express what they had experienced. The experience went beyond their ability to verbally express.
2. **Hearing the Death Pronouncement** – many heard a doctor or someone else pronounce that they were dead.
3. **Feelings of Peace and Quiet** – pleasant feelings and sensations, with no pain.
4. **Noise** – many people describe unusual auditory sensations, like a loud buzzing noise or a loud ring. Some found it pleasant, while others found it extremely annoying.
5. **A Dark Tunnel** – the sensation of being pulled rapidly through a dark substance, that most describe as a tunnel.
6. **Out-of-Body** – usually after the tunnel experience, most people have a sense of leaving their body and looking at themselves from a point physically outside their body. Many of these are quite detailed, including people and activities that are going on around their body. These tend to line up well with descriptions of activities, from others working around the person's body.
7. **Meeting Others** – they encounter other spiritual beings, who are there either to ease their transition or to tell them that it isn't yet their time to die.
8. **A Being of Light** – usually starts out as a dim light that becomes rapidly brighter, to a level to eclipse in brightness anything they have ever encountered. The light communicates with them, asking if they are ready to die or what their accomplishments are (what they have learned?). Never judgmental, but rather Socratic, aimed at helping the person proceed along a path of truth and self-realization.
9. **A Life Review** – the questions asked by the Being of Light often lead to a complete review of all events in one's life, chronologically but very rapidly, incredibly vivid and real. Often includes direct experience of what others in each setting heard and felt.
10. **A Border or Limit** – that marked the line of death and no return. Some experience what it feels like on the other side of the line: wonderful feeling of peace and tranquility, all worries vanish.
11. **Coming Back** – some resisted or even resented returning, but nearly all report positive feelings that linger for long time. Many are very positively transformed. They lose all fear of death.
12. **Not Telling Others** – many feel that their experience was a unique, special, spiritual, life-changing experience. They also fear being labelled crazy, hallucinating, or being mentally

deficient. They also feel that they can't adequately describe the experience, because they lack the language / ability to do it justice.

13. **Positive Effects on Life** – the effects were profound and noticeable. They were broadened and deepened, gentler with those around them, new morals, new goals, and a renewed determination to live according to them

14. **New Views of Death** – They no longer fear death, but many have a sense that they have a lot of personal growth to attend to before leaving this life. They also believed that there was no “reward and punishment” model in the afterlife. Rather, the “being of light” made their “sinful” deeds obvious to them and made it clear that life was a learning process, not a platform for later judgment.

Intro, pg. XXII – Story of Moody's own SDE at his mother's death. His mother had a moment of terminal lucidity. He was with 5 other of his adult family members (together, they comprised all of the people in the room). Several (including Moody) claimed to see his father appear to take his mother over, “as solid as if he were standing there in the flesh.” Room changed shape “for all of us,” light became “soft and fuzzy,” a feeling of being “pull<ed> upward” like being lifted off the ground in a glass elevator. Accompanied by a very positive feeling – one of the happiest days any had experienced, across their lives.

p. 1 – Argues that Shared Death Experiences (SDEs) – where more than 1 credible witness has the same experience at the same time – provides a higher level of evidence of the reality of a “non-neuronal” source for consciousness, memory, and reason, than does NDEs alone.

Definition: “A shared death experience can consist of some of the same elements that we use to define a near-death experience. But the difference is that the person to whom the experience occurs is not near death. Nor are they ill or injured. Rather they are in the presence of somebody who is dying. And as they observe the other person's dying process, they co-live that person's dying experience so closely that I have come to call these experiences empathic.”

p. 2 – When sharing his own experience in lectures to groups <who admittedly chose to attend his talk = a highly selected group, with obvious bias>, about 1 in 5 claimed that they had had a similar experience – about the same number that claim NDEs, in similar settings.

p. 3 – Cites Plato, claiming that case studies (stories) are the only way to explore such a question. “It is through the collection and examination of case studies regarding different types of SDEs that I have been able to determine several objective reasons to believe in the afterlife.”

p. 4-15 – **Moody outlines 7 areas (his 7 “proofs”) of SDEs.** He then sequentially addresses each in a chapter:

1. **Out-of-body experiences** – those cases of NDEs in which the NDEr observes their own body from outside it, including surrounding people and events. There are studies where researchers have listed and confirmed the elements the NDEr reported. <Still completely

subjective, of course, but 'validated by others' relative to the events the NDEr claims to have observed.>

2. **Precognitive experiences** – a.k.a. “crisis apparitions,” when “a healthy person experiences an apparition of a loved one who is in a severe crisis or is dying.” “... usually perceived as being so real that it seems that the person in crisis is actually standing in the same room.” It can also involve “an auditory experience, in which the dying person speaks to the perceiver.”

3. **The Transforming Light** – “are there transformative effects from death experiences that be <objectively> documented and observed?” <The key word here is “transformation” – the well-documented fact that people who experience high-end NDEs display measured changes in personality, that persist over decades.> A study of more than 400 NDErs “showed a variety of objective and profound changes in the personality of the test subjects, including a decrease in death anxiety” a “higher zest for living,” “development of higher intelligence,” and “an increase in psychic abilities.” <??? – does “psychic abilities” have any empiric meaning?>

Calls the before-to-after change the “Scrooge Syndrome.”

4. **Terminal Lucidity** – “a flash of lucidity and vigor that takes place shortly before death,” including in people who demonstrably have no electrical brain activity at the time. “Patients who are brain dead make a profound temporary comeback, speaking clearly about specific things” “despite EEGs showing that the brain itself is not functioning.” “Terminal lucidity is clearly a shared death experience simply because it is witnessed by one or more persons shortly before death, oftentimes after cognition and brain function are <demonstrably?> gone.”

5. **Spontaneous Muses, Healings, and Skills** – “many who have near-death experiences report visiting halls of knowledge where they are exposed to – some say they are even downloaded with – what seems to them to be all the knowledge in the world. There are some NDErs who return with new talents – increased skills and intellect – as a result of this powerfully transforming encounter.” “For some, these changes can be quite dramatic.”

6. **Light, Mist, and Music** – Phenomena of light, mist, and music appearing in the vicinity of dying person have been reported throughout history. These are “paranormal phenomena <experienced> by those watching over the dying,” ... “yet are rarely the subject of researchers. They are important because they <might> show that some essence of the dying has not only survived but is manifesting itself to others.” E.g., Louisa May Alcott’s description of her sister Elizabeth’s death where she claimed to see a mist arise from her sister’s body at the moment of death, which coalesced into a sphere-like, cohesive shape. The attending physician commented to Louisa May Alcott that seeing such mists arise from a body at death was common.

7. **The Psychomanteum** – crystal gazing to see and communicate with departed loved ones. Moody used a room of mirrors that he built in his home office, based on accounts of similar devices from across western history (e.g., ancient Rome). Claims that a woman patient took

a physical picture of “3 glowing orbs,” containing “the essence of her <departed> daughter. <and you can probably guess what an old cynic like me is thinking here, from an objective viewpoint>

p. 17-42 – **Reason #1: Out-of-Body Experiences**

“A sense of leaving the body is reported by as many as 50% of those who have an NDE and are a leading indicator that there truly is a mind *and* body.”

Can be an NDRer, or someone who witnesses the person as they are out of their body. Can be visual, auditory, or tactile. Example: Man arrests during routine procedure in Italy; initial resuscitation fails; wife suddenly bursts into the OR, says her husband appeared to her in the waiting room demanding that she come tell the surgeon not to give up on the resuscitation, as the patient claims he is not dead <yet>. Secondary resuscitation attempts are successful, with good final outcome. Another is a man who goes out-of-body, meets his sister who has just died, who tells them he has to go back into his body. They were many miles apart when these events happened..

Cites a series of studies that reviewed events that OBE NDEers claimed to see, that were independently corroborated at very high rates of concurrence – pp. 24 – 29, but especially pg. 29. Many of these were visual, for example while the patient was under anesthesia with their eyes taped shut.

p. 34 – What leaves the body?

1. “It” does not need the body to survive.
2. “It” knows that it comes from a specific body – it knows the body it left.
3. “It” contains the five senses. Sometimes these senses are enhanced.
4. “It” is free to move and does not seem to be tethered to the body.
5. “It” is a vehicle into another dimension. Sensation of going through a tunnel, then entering another world where they encounter dead relatives, beings of light, a life review, a landscape of great beauty, etc.

p. 43- 60 – **Reason #2: Precognitive Events**

Definition: “When a person unexpectedly sees the death of another person, usually a friend or a relative.” Example: Moody and his wife have separate dreams, at the same time, seeing the death of their first as-yet-unborn daughter at delivery – 2 different views of the same procedure. It then actually happened. “Some precognitive experiences are ‘knowings’ rather than dreams.”

They come in different types:

1. Vision is not limited to only one person – a dream, a waking vision, or an auditory experience, experienced by more than one person at the same time.
2. The dying don’t perceive it – witnessed only by the living who are tending to or caring for those who are dying.
3. Apparitions of deceased relatives – often coming to meet those who are dying.
4. Apparitions near and far – who appear via visual, auditory, or ‘strong thought’ means to those at far distance, who then reach out those who are at the death bed.

5. Precognitive visions not always visual – sometimes auditory, or a ‘knowing,’ a burst of intuition.
6. They are not always about death – could be about life foretold, for example.

p. 53 – When is a dream just a dream, and when is it precognitive? (cites study by Melvin Morse, MD)

- A “real” or “hyperreal” quality
- Sights and sounds superimposed over ordinary reality
- A unique feeling to the dream that is unlike anything experienced before – a visionary dream is so vivid it can’t be forgotten
- A mystical white light or a spiritual being of light – an experience of light is the hallmark of a very deep experience and greatly affects the person who has it.

p. 55-57 – Icelandic Studies done by Erlendur – structured review of such events in Iceland. “... Erlendur is careful to point out that in about one-third of them, another person bore witness to the interviewee’s experience, which was approximately the same number as similar studies currently going on in other countries” (citation).

p. 63-81 – **Reason #3: The Transforming Light**

p. 63 – cites Charles Dickens fictional work A Christmas Carol as an example of how an NDE can fundamentally change the outlook, understanding, and personality of a person who experiences such an event. <very weak – Moody doesn’t clearly note that this is a means to illustrate a concept, rather than a real example>

p. 64 – “All scholars and clinicians I have talked to who have interviewed NDErs have come to the same conclusion: NDErs are better people because of their experience.” <this has been empirically shown by other researchers using validated psychometric tools>

“Although NDEs are ... known ... as crisis events, they don’t have negative effects like ... other ... crisis events.” (“trapped in the foxhole,” PTSD, floods, tornados, fires, automobile accidents, and the like)

p. 65 – Cites study by Melvin Morse, MD, et al. of 400+ NDErs (Transformation Study), which identified 4 main areas:

1. Decrease in death anxiety – NDErs have about ½ the fear of dying as exhibited by people who have crisis events, but don’t have an NDE.
2. Higher zest for living
3. Higher intelligence – people who have NDEs feel they are smarter and that they have evolved into “higher beings.” Especially true for children who have NDEs.
4. Increase in psychic abilities – “On average, those in the NDE group had four times as many verifiable psychic experiences <whatever that means – not defined or described by Moody, although they may be in Morse’s original paper> as those in other groups tested (5).

“Although personality change is observed in nearly all of those who have near-death experiences, it happens so often that it is not treated as being “superordinary,” only an indication that the superordinary remains an imminent possibility. ... It’s an indicator that all

such experiences carry with them the possibility of visible and permanent change and are thus shared experiences on a lesser by more frequent scale.”

Tells the story of Nick, a criminal and con-artist who experienced an NDE. “‘Now’, said Nick, ‘ I always live my life knowing that someday I’ll have to go through another life review.’” (6)

p. 67-72 – Lists 7 “Types of Personal Change”

1. No fear of dying
2. Understanding the importance of love
3. An appreciation of learning
4. A new feeling of control
5. Focusing on little things
6. A better-developed spiritual side
7. Re-entering the ‘real’ world

p. 75 – How to Support an NDEr

- Let NDErs talk freely about their experience
- Reassure them that they’re not alone (that many people experience these things)
- Tell them what the experience is (label it an “NDE,” and explain what that means)
- Bring the family into the picture
- Meet other NDErs
- Have NDErs and their spouses meet other NDErs and their spouses
- Have NDErs read about the experience

p. 77 – Points out that SDEs haven’t been investigated to the degree that NDEs have, and suggests that it may be a very good area for future research

p. 79 – Moody argues that verifiable long-term changes that happen in people who have a high-order NDE, demonstrate that the dualist viewpoint is “real.” <I personally don’t find this argument empirically convincing – changes in brain function, secondary to an NDE, would reasonably produce long-term changes in personality>

p. 83-104 – **Reason #4: Terminal Lucidity**

p. 83 – Definition: “Completely out of the blue, a patient on the verge of dying springs to life in an amplified form of lucidity. They may acknowledge those at the bedside with a wave or few quiet words, or they may sit up in bed and engage family members in a regular conversation. Some patients even get up from their deathbed and walk around the room, clearly speaking to stunned family members who now think their terminally ill loved one has beaten the odds and will soon be coming home. ... <but> come home, sadly, isn’t what happens. Always, the person settles back down in their bed and passes away a few hours later ...”

p. 84-85 – Some cases involve people institutionalized for very long periods of time with severe mental problems, who show sudden lucidity – to a level never seen before in their entire lives – before dying. Cites several cases, and a compilation of such cases some attempted to use to stop Nazi euthanasia of mentally ill people.

Historically, sometimes called “lightening up before death,” “madness,” “possession by demons,” or a “fey” experience. Some thought them caused by internal jolts of adrenaline released in anticipation of death.

- p. 88 – “Neurologists wonder how a “non-functioning brain” is able to function without active neurons ... Even the National Institute on Aging (NIA), a part of the National Institutes of Health (NIH), has jumped in, funding a variety of studies aimed at discovering factors that trigger TL, hoping that the answers might result in ways to treat neurological diseases like dementia and Alzheimer’s. (14)”

Cites a 2007 case brought forward by surgeon Scott Haig, regarding a man w lung cancer that had metastasized to the brain. “ ... only a small amount of intact brain tissue. The tumor had not just pushed the tissue aside but destroyed it. In the 2 weeks before his death, the man increasingly lost his ability to move, and his statements were vague and incoherent. Eventually he lost all ability to speak and move. Tests showed he had no brain waves. However, before his death, as his wife and a nurse reported, he surprisingly regained consciousness. He woke from his coma-like state and spoke for about 5 minutes quite normally with the attending family members. He said goodbye to them, touched them, and smiled. Then he fell back to the previous state and died within an hour (16).”

- p. 89 – Cites other cases of well-documented, long-term, severe brain damaged patients who showed TL.

- p. 90 – Cites ongoing NIA research program addressing TL. According to the NIA, such research will likely “expand our current understanding of the nature of personhood and consciousness ... (21).”

“This is a revolutionary message. TL is not only solid evidence that the mind and body can operate separately; it adds to a growing body of evidence that our consciousness can survive bodily death.” <the first part of that statement seems empirically correct, but the second half is a stretch – no direct evidence, so far>

- p. 93 – Notes that modern medical science has identified additional senses, beyond the traditional 5 sense of seeing, hearing, smelling, etc., to include many others – things like balance, pain, temperature, direction, chemical detection, light detection, etc.

Moody then argues that we may yet discover other “senses” that today we might label “paranormal” – “And the discovery of these senses won’t necessarily come from the exploration of our gray matter but from the invisible stuff that is the content of the mind.” “Terminal lucidity imposes a variety of possibilities most have never thought about – the most profound being that consciousness doesn’t need a functioning brain to survive.” Notes an “overwhelming number of <such> experiences ... “

Claims that these can result in “embracing life:” “The more we realize that something unknown yet powerful and good happens at the point of death, the more relaxed we will become about our own eventuality. When that happens, we have less fear of death and a greater appetite for life.”

p. 96 – Classifies terminal lucidity events as sometimes functioning as major <psychological> “healing experiences” within families. Calls them “observable miracles.” “ ... an event that can be witnessed but does not have a material explanation.” Cites Peter Fenwick, who “ ... analyzed hundreds of deathbed experiences ... <then summarized> “ ... Using our current science, it is difficult to find any specific brain mechanism that would underpin and explain these wonderful spiritual experiences (33).”

p. 97 – Recounts “remote terminal lucidity,” where the observer is not at the dying person’s bedside but many miles away (hundreds, or even thousands, of miles distant). The dying person then appears and communicates. Calls them “precognitive TL.”

p. 101 –Notes a few cases where dying people who experience TL describes what they are experiencing, as they return to consciousness. Extends that to some dying individuals who appear to have an NDE-like experience, then in a burst of TL, describe their NDE event as it happens.

p. 103 –“With terminal lucidity, the event is observable.” “Terminal lucidity is objective and observable, which makes it especially unique among other such transcendent experiences.” “Terminal lucidity flies in the face of ... materialistic thinking. It shows objectively that the mind and body sometimes do operate separately.” <hmmm May be a little bit of a stretch. It certainly provides a very attractive line of research, but it is relatively easy to generate materialistic hypotheses that could potentially explain it.>

p. 107-124 – **Reason #5: Spontaneous Muses, Healings, and Skills**

Some NDErs acquire new talents as part of the event. For others, an NDE leads to a change in profession, while others suddenly overcome crippling psychological disabilities. “ ... others acquire the life-long help of angelic muses, first introduced to them during their NDE.”

“Because <these> changes are witnessed by other people, they are shared-death experiences (SDEs) too.”

p. 108 –Uses the term “fear of death experience<s>, which are NDE-like experiences that take place at times of great mental and physical stress, like an ultra-panic attack.”

p. 109 –Uses an NDE recounted by Rajiv Parti, MD, chief of anesthesiology at Heart Hospital in Bakersfield, CA, to argue that materialism and dualism can coexist. Involves a visit to suffering souls in a sort of hell. “What is my karma”, asks Parti. Two angelic beings, who he labels Michael and Raphael (in his book, *Dying to Wake Up*), give him a “Near-Death Manifesto:”

1. Consciousness can exist outside the body.
2. There is life after death.
3. We have past lives, and our experiences therein can shape our current realities.
4. We are all connected to each other because we are all made of the one and same energy that manifests as differentiated matter.
5. Divine beings exist to help and guide us.
6. There are different levels of consciousness.
7. There is one, all-pervading, supreme love and intelligence that is the source of the entire universe, and that love is the supreme source of creation. (11)

“ ... the fact that his change is so visible to those who know him <shifting away from being a classic full-time materialist, and a bit of a money-focused jerk> makes this case a shared death experience. ... (And yes, Parti was literally transformed by the light ... this is one of those stories that could very well be place <in the chapter on> The Transforming Light.”

- p. 114 –Cites examples of “unexplained healings.” Initially, they are all psychological healing. Includes “the healing power of grief.”
- p. 117 –Cites one case of an apparent miraculous healing of infantile cerebral palsy with a hand in permanent, life-long, clonus, that suddenly reverses, in an adult who had suffered very debilitating conditions for decades, as recorded by UK nurse Penny Sartori.
- p. 120 –Experience of an orthopedic surgeon who had an NDE associated with a lightning strike while in a pay phone booth. After than event, he had a compulsion around classical piano, that eventually led to him becoming a master classical pianist, playing with famous orchestras around the world. “He did know he had acquired a ‘special gift’ and could now tune in to ‘the music from heaven.’”
- p. 124 – Moody then argues that “these muses, healings, and skills indicate and afterlife” because the “consequences of these are all visible after the NDEr has returned.” “To me, it definitely seems that life transformations brought by near-death experiences are distinctly different form transformations caused by more common worldly life events, such as divorce, natural disasters, or the birth of children.” “I think that contact with the divine is what differentiates the changes associated with near-death experiences from those associated with more mundane causes.”

p. 127-147 – **Reason #6: Light, Mist, and Music**

From a physician colleague: “Her mother had collapsed from a heart attack at her home, and this doctor had attempted resuscitation. Her efforts failed, but in the midst of it all, she had an out-of-body experience, raising toward the ceiling. As she turned to look at her mother’s comatose body, she saw her mom right next to her, smiling despite the imminent outcome. Then this doctor saw something else, a tear in the universe that seemed to be ‘pouring light like water’ into the room, and with it a number of her mother’s deceased friends. As her mother floated toward her friends and joined them on the other side, the light closed down ‘in an almost spiral fashion like a camera lens, and the light was gone. (1)”

“Since then, I’ve heard hundreds of SDE stories, from medical doctors, nurses, individuals as all education levels, and other lines of work. The sheer number of people who have come forward to me, and to my colleagues, with stories of shard death experiences tells me that the stories are underreported”

Definition: “ ... the presence of mystical light, mist, and music experienced by onlookers at the time of the event of another person’s death.”

Reemphasizes the claim that these experiences are massively underreported. “But when a number of people hear or see the same things at the same time, it deserves special attention.”

p. 128 –“Keep in mind that the instances quoted here were experienced by well-grounded witnesses, some them medical professionals who have spent considerable time at deathbeds of patients.”

Moody then supplies a series of anecdotes regarding light, mist, and music being observed by one or more people who attend another person’s death.

p. 129 –Definition of “light:” “Those who ‘see the light’ during a death experience – theirs or someone else’s – say that it is more than just a light; it is light with ‘substance’ that ‘wraps’ them in a blanket of love and caring that they have never before felt.”

p. 131 –Sometimes the light takes the form of a human figure that rises up from the body.

p. 132 –Suggests that the loss of fear of death that NDErs report. Links to this light: “ ... as a result of exposure to the bright light that often presents itself during the experience. This light has been described as a light with substance and usually includes seeing a glowing being of light that is mostly described as a guardian angel or a deity. Exposure to this light is credited with changes in their personality that last their entire lives.”

p. 132 –Mists – definition: “A number of those who bear witness to a person’s final moments see a mist rising from their body. This is generally defined as being a white or gray or even a pink or greenish haze that is cool to the touch, like fog. Some witnesses report that it dissipates like fog while others have seen it gather into a ball that then slips into an opening in thin air and disappears ...”

Moody then cites a series of anecdotes of various people, including several medical professionals, observing mists arising from a person’s body as that person dies.

p. 136 –“ ... usually everyone in the room with the dying person sees it <the mist, when it is seen>. But there are unique cases involving just one witness with a group ... “

p. 138 –Recounts the story of Jeff Olsen, as observed by Dr. Jeff O’Driscoll and “ER nurse” Rachel. Olsen has an initial NDE at the scene of the automobile accident. In the ED a LifeFlight away, O’Driscoll says “ ... I noticed a light. In it was the form of a woman, floating above the patient’s <Olsen’s> bed. She had flowing, curly blond hair and was dressed in various shades of white. Her form was almost transparent, and the look on her face was serene. She looked vibrant, otherworldly – I knew innately that this was the man’s wife. ... O’Driscoll said he sensed her immense gratitude toward him and the other doctors in the room. She also told him psychically that her husband had to survive to care for their living son.”

p. 140-145 – Music – recounts deathbed-associated events where music was heard by other people who were in attendance, variously described as “sentient sound” “so beautiful that they cannot be mimicked by anything I know.” Usually described as orchestral – “move like Beethoven than the Beatles.” Moody then cites a series of cases that reported these sorts of events.

p. 145-147 – Moody’s argument of why music, mist and music indicate an afterlife
It’s relative common, with one study reporting that more than 25% of nurses, doctors, and hospice workers having seen light surrounding a dying patient. If the light does mark a transition at death, it happens immediately (not a few minutes after death).

Notes that “until other methods of research are devised, the mystery of light, mist, and music <at the time of death> will remain the mystery it is.”

Moody states that the “sheer number” of such case studies means that something must be going on.

p. 149-172 – **Reason #7: The Psychomanteum**

Definition: “This technique involves using a mirror to ease the conscious mind into a vivid apparitional visit ... “

p. 150 –In various forms, it was used broadly across thousands of years in many different societies. Moody particularly cites ancient Greece, where such devices were often contained in underground labyrinths called “oracles of the dead.” The Greek’s “mirror” usually consisted of a large, polished metal bowl filled with still water, located within an underground chamber that minimized outside stimuli (sight, sound, vibration, etc.). Also used across the western world in medieval times and up through the end of WWI (~1916). With the advent of radio then television, it fell out of popularity.

p. 149 –Moody cites a study of such methods conducted by Arthur Hastings, professor and director of the William James Center for Consciousness Studies in Palo Alto, CA. One hundred participants were taken through a Psychomanteum experience, each lasting 3 to 4 hours. Of them, 63 reported “contact with the deceased;” 34 reporting having “mental conversations with the deceased;” and subsequent psychological testing showed that 92 of the participants had a decrease in grief.” (5) <Without reading the referenced article, I infer from Moody’s text that the “100 participants” in this study were very highly self-selected – they can seeking a means to communicate with dead loved ones. Thus, this was a massively biased sample.>

p. 151 –Moody states that he saw the Psychomanteum as perhaps providing a mechanism by which these sorts of concepts could be studied in a laboratory setting. This might include parallel EEGs or fMRI, to assess what might be happening in the brain (at least to the extent that such tools can measure that). He also saw it as a possible means to deliver “grief therapy” for patients who were “unable to overcome the depression and grief caused by the death of a loved one.” He adds: “By experiencing apparitions of the deceased, I don’t mean just seeing one <a ghost; someone who is deceased> but also feeling, hearing, or smelling them as well. **Such encounters are indications that the memories of our loved ones are deeply embedded in our unconscious minds.**” <This last statement indicates that Moody may regard these experiences as completely subjective, and not empirically real.> He further states that such a tool (psychomanteum) could help give a better view of the unconscious mind, for research purposes; and could help to understand the process of creativity within the human mind.

p. 151 –“Excellent medical research has shown that as many as one-fourth of Americans have experienced at least once an encounter with someone who has died.” (11)

p. 154 –Moody lays out a statement of purpose and goals for creating his own psychomanteum for these purposes. <From my viewpoint, let’s just say that it is NOT a rigorous statement of research context and testable hypotheses. Here he starts to get explicitly weird, in my opinion.>

p. 154 –Moody lays out the structure of his own psychomanteum: (1) A dark, faintly lit room (presumably plain, with no adornment or other objects to distract the eye; insulated against sound or any other outside stimuli); (2) a comfortable chair; (3) a “highly polished” mirror hung high enough that a person sitting in the chair could not see their own image in the mirror; and (4) a 20-watt lightbulb, located out of line of sight and so that it doesn’t cast shadows.

Moody’s actual instructions on building and using a psychomanteum are on pp. 184-5 of the text.

His initial research question: **Can apparitions of deceased loved ones be consistently facilitated in normal, healthy, people?** Participant inclusion / exclusion criteria: (1) Mature people interested in human consciousness; (2) emotionally stable, inquisitive, and articulate; (3) no emotional or mental disorders; and (4) no “occult ideologies.”

p. 155 –Moody discusses his full psychomanteum method, which includes a significant amount of “loading” – identifying and discussing the person they hope to contact, bringing up “touching memories,” reviewing pictures and other physical mementos, and the like. He also warned each participant that there was no guarantee of a successful “contact.” His argument is, this is how it was done anciently. Actual mirror gazing session started at “the mystical hour of sunset.” The subject was placed in the psychomanteum room, then “told to gaze deeply into the mirror and relax, clearing his or her mind of everything but thoughts of the deceased. They were allowed to stay in the room as long as they wanted, but were not allowed a timepiece. An attendant sat <out of sight> in the room the whole time.

When the subject emerged, usually after ~1 hour, they “were encouraged, but not required, to discuss what had happened for as long as they desired.”

Moody expected that “only one or two of the <10> subjects would see a dead relative ...;” and for those who did see something, they would “... doubt the reality of what they saw.”

Moody reports that 5 participants had “powerful apparitions of dead relatives.” All believed that what they had seen was real.

<Note: This could easily be a statement about the nature of the human mind, rather than a reflection of a real event external to the participant.>

E.g., first participant was a 40-year-old graduate student who was also a psychology counselor. She attempted to contact her 2-years-dead husband. Instead, she had a conversation with her deceased father. “He first appeared vividly in the mirror, and as their conversation continued, he stepped out of the mirror and into the room, where their conversation continued.” Reported that the next day, while at home and getting ready for bed, her father again appeared at the foot of her bed. <Note: I really wish Moody had videotaped this whole session.> Moody calls this “apparition by proxy” and reports that it happened 6 times in his own experience, starting with this set of 10 participants then extending to others. Over time, this happened with about 25% of participants who saw an apparition. Sometimes, the person who saw the apparition (1) did see the deceased person that the participant was trying to contact; but (2) the person who

actually saw the apparition was not the participant but a person well-known to the participant, who was miles away.

Moody then goes on to list a series of similar anecdotes. As a psychologist, he began to use this as a method for grief therapy. He claims it was very effective, and a great addition to his toolset for helping patients with disabling grief.

He shared his experience on Oprah, and was soon overwhelmed with a great many patients, most of whom were in “in a fragile emotional condition” related to their grief.

p. 161 –“In the study I conducted in 1992, about 50% of my patients reported communicating with the person who appeared in the mirror. (19) Six out of 16 ... who successfully saw a person in the mirror said they spoke with the deceased person. (20) I don’t mean they heard the thoughts of the deceased, but actually heard their audible voice.”

p. 162 –Moody states that others use other tools, such as crystal balls, to achieve the same mental state. Even when no apparition appears, it can be a major force for creativity (which is how some people use it) and for stress relief. Sometimes helped participants to “understand troubled childhoods or difficult relationships.”

p. 163-164 – Moody describes his own experience is using his own psychomanteum. He didn’t get the grandmother he was attempting to contact, but a different grandmother; and the main contact came after he had left the psychomanteum session, while sitting on the couch in his home reading.

Takeout visions: “twenty-five percent of those who came seeking reunions had them after they had left the gazing booth and <had> returned home or to their hotel.” (22)

p. 164 –Moody cites an experience of a “well-respected TV journalist” who has such a meeting with her son, who had committed suicide a few years before. Awoke from sleep to see him standing in her room. Thought he was an intruder. Quite an interesting account.

As usual, Moody then shares a series of anecdotes.

p. 165 –“Most interesting to me was the change that came over the people who’d had a real apparition experience. All of these patients defined their reunion as being ‘real,’ meaning that they were not fantasies or dream states. (26) Some recounted being able to smell, hear, even touch their loved ones. And what they saw was solid and three dimensional. ... Because their experience was real, the subjects expressed a different outlook on life. ... they became kinder, more understanding, and much less afraid of death.”

p. 167 –Describes a psychomanteum session with Joan Rivers, the comedian. Going in, Rivers was dismissive of the whole thing, making jokes. Coming out, she was completely different – claimed she had met and conversed with her deceased husband.

p. 168 –Moody: **I have never declared <as a psychiatrist> that these events are ‘real.’ ... I admit freely that I have no idea what takes place in the mirror or what it is that some say come out of the**

mirror. Is it a figment of the mind? A vivid dream? A different reality tapped into by a simple process used successfully down through history? I just don't know."

p. 168-169 – Main findings about the psychomanteum:

- Those who go through the sessions have great belief in what took place.
- About 25% encounter a person other than the one they had hoped to contact. (29)
- About 10% report that the apparition comes out of the mirror and sometimes touches the subject. (30)
- About 50% hold conversations with the apparition, but these conversations are often mental with no words being spoken. (31)
- In about 25% of the cases, the apparition was not encountered in the mirror chamber but in some other place, usually within 24 hours.
- Almost all the subjects judged the reunion to be real, not a dream or a fantasy. (33)
- Almost all the subjects were affected positively by the experience; it changed their view of their life and the afterlife.

p. 168-171 – Moody talks about a "black swan" case, in which a woman and her surviving daughter, following a psychomanteum session for the woman, claim to have seen and photographed 3 "orbs" that were her dead daughter – not "lens flares" – during a subsequent apparitional encounter in their hotel room. She shared the photo with Moody. <Completely and obviously unbelievable, not convincing. Why would an apparition appear in a photograph, given the general nature of what Moody claims they probably are? Why don't they consistently appear on film or video in other such settings?>

p. 175-179 – Conclusion

Moody talks about (1) medical ethics; (2) his personal views; then (3) asks "what is proof?"

Medical ethics: As a practicing psychiatrist, Moody argues that addressing these questions, and particularly the psychomanteum, are proven and necessary tools for helping people deal with grief, up to and including disabling grief. He argues they are an ethical requirement, for that reason.

His personal views: Based on his experiences, he's a true believer. He cites many other clinicians who have come to similar conclusions, based on similar personal experiences. Notes that this is pretty much unanimous among physicians, including trained academic researchers, who have had NDEs.

What is proof: Moody tries to establish authority/expertise by pointing out that he teaches philosophy courses at universities (he has a PhD in philosophy, alongside his MD degree). He uses that foundation to challenge the meaning of "proof," arguing that the question of consciousness persisting after death of the physical body is impossible to prove using current logic and tools, citing Hume and Ayer (*Language, Truth and Logic*, 1936). Ayer went on to have an NDE, and responded to it in the usual way (total belief). Points out that "a new day is dawning in the serious study of life after death." He then calls the question: If it turns out to be true – that consciousness does continue after death of the physical body – what should we do or think?

<Note: This is basically Moody freely admitting that he doesn't have a convincing proof, despite the title of his book. See Materialists vs Dualists, back at p. 55 – "neither of which have proven answers and both of which continue to engage in a battle of speculation.">

He ends with a personal testimonial:

“After decades of persistent, rigorous skeptical inquiry, I am confident of a life after death. ...

Yes, there really is a comforting, loving light at the end of the tunnel.”

A needed corrective / counterbalance around this topic, within The Church of Jesus Christ (TCJC):

The Seductive Power of Apocalyptic Ideas in Mainstream Religions

(The story of Chad Daybell and Lori Vallow, and how they descended into evil)

By Dan Ellsworth

Public Square Magazine – May 8, 2024

In the shocking criminal trial of Chad Daybell, Latter-day Saints were left asking what happened here. How did a church member go so far off the rails? What are the things that lead people out of the mainstream of the Church and into apostate ideologies and horrifying criminal behavior?

To answer these questions in the story of Chad Daybell, we first need to understand that Chad Daybell was not alone in his journey into madness. By now, many church members are familiar with the picture of law enforcement encountering Chad Daybell and his then-new wife Lori Vallow by the side of a pool in Hawaii, where Daybell and Vallow had been reading from the book *Visions of Glory*, a book created by the late John Pontius in conversations with Thom Harrison.

The genre of *Visions of Glory* is apocalyptic, similar to the biblical Book of Revelation and other similar passages in scripture. *Visions of Glory* purports to be an account of a series of Thom Harrison's near-death experiences, with elaborate apocalyptic visions of the future of the world and the Church. In a letter to his priesthood leaders following the book's publication, Thom Harrison walked back much of the contents of the book and expressed regret for its publication, though his statements in other settings seem to convey none of that regret.

Could a downward spiral like this happen to anyone?

With its publication, *Visions of Glory* helped to fuel a culture of sensational fabulism in prepper communities in particular and sparked the development of a number of offshoot apostate movements. Chad Daybell seemed to attempt to replicate the appeal of *Visions of Glory* in his own books and eventually began claiming his own near-death experiences as the basis for his own accounts of apocalyptic visions. Throwing gasoline on Daybell's delusional fire, his friend Eric Smith began teaching the idea of "multiple mortal probations" (a form of reincarnation,) and eventually, Smith was excommunicated. Both Daybell and Smith were close friends with Julie Rowe, who claimed her own prophetic visions and six (!) near-death experiences, leading to her own excommunication.

<This article provides a nice illustration of the dangers potentially resulting from a fascination with NDEs, SDEs, apparitions, and the like. It shows what happens when people use NDEs to fuel apocalyptic beliefs, that can meet deep internal psychological needs based around (1) fulfilling physical appetites and cravings; (2) recognition and validation; and (3) power and control (the 3 great evils afflicting humankind, as reflected in Satan's temptation of Christ). It then uses Carl Jung's idea of a 'collective unconscious' stocked-piled with 'archetypes' (hero, prophet, mother, warrior, trickster, etc.). It ends with a discussion of how the leadership structure of TCJC avoids these potential horrors / pitfalls, while other religions regularly get trapped in them. See:

<https://publicsquaremag.org/faith/gospel-fare/chad-daybell-faith-apostasy/> >