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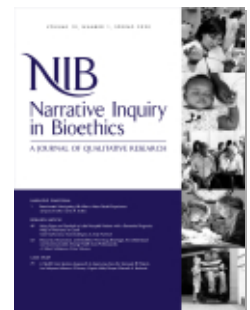
## Healthcare After a Near-Death Experience

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known to judge and invalidate my work when I share the spiritual side of my practice. One practitioner even told me on a public forum that if she'd known there were people like me in the field, she never would have become a music therapist. This mentality is why I feel so driven to discuss this topic openly with other practitioners. How can we support clients with their experience if we cannot support other practitioners who've had a near-death experience?

This is why I believe it is crucial for counselors, healthcare practitioners, and therapists to learn how to hold space for people who've had either spiritually transformative experiences or near-death experiences.

Regardless of our own beliefs, we need to recognize that these experiences are perhaps the most powerful moments of someone's life and may bring them the catalyst they need to help others by sharing their stories. When listening to these stories, we can shape how people move forward. Near-death experiencers came back for a reason and should not hide their stories from the world. They should live out loud and share with anyone who will listen. These experiences are gifts to share with the world to make a difference, help people and change the way we view death, life and life after death.



## Healthcare After a Near-Death Experience

Nancy Evans Bush

Fifty-seven years ago, my reality exploded. I was 28, a middle school English teacher, daughter of a family of Welsh clergy-scholars, marinated in the rational, compassionate, social justice theology of mid-20th century liberal Protestantism. During the delivery of my second child, this happened:

I came to and found myself hovering over a roof of what I determined must be Peekskill Hospital.

I was curious and unafraid at seeing the Hudson River nighttime landscape before rocketing into space. Somewhere in what I considered "God's territory," a group of geometric circles approached me with a shockingly powerful telepathic message:

"You are not real. This is all there is. This is it. Anything else you remember is a joke. You never were real. Your life never existed. The world never existed. It was a game you were allowed to invent. There was never anything or anyone. That's the joke—that it was all a joke."

I argued frantically, but this was their world, and they were messengers of this intense and appalling truth, "Whatever you remember is part of the joke. Your mother, your babies—this is all there ever was. Just this."

The circles drifted off, and I was alone. There was nothing left—the world unreal and gone, and my first baby, and this baby who would never be born, and all babies. There was no world, no home, not even a self to go home to. Everyone wiped out, unreal, everything gone, even God, and I was gone, and what may have been my mind was alone in the swimming twilight.

I awoke in a hospital bed, almost catatonic with shock and depression. The baby was down the hall in an isolette, cyanotic, and I was not allowed to see her. The circumstance created a plausible explanation for my obvious distress, about which I recall mostly the psychic numbness. In hindsight, I think they must have assumed I was psychotic, as there is no memory of anyone talking with me. I assume the OB stopped by at some point, but I have no recollection of seeing him. No health care person said anything about an unusual incident during delivery. No one asked directly what was going on with me. Because of my distress, I was discharged early, leaving the baby in the NICU for almost a week. Was she real? I did not know.

There was no way to speak about that unidentifiable happening, no way to process it. Nothing in my background could speak to it, though the truth of the message felt unarguable; at a cosmic level, I have never doubted its having genuine meaning. The only available explanation at the time was predestination, which I took to mean that God did not

want me . . . but how could I admit that to anyone? How could I burden anyone else with the certainty that they were also unreal?

The post-traumatic stress was so severe, I did not speak about the experience to anyone for twenty years. Six years in, I learned that the ‘circles’ were Yin/Yang symbols, which terrified me: *Someone else knows about them! They are real! Why was a Chinese symbol in the mind of a Yankee Congregationalist?* The significance as Yin/Yang had no meaning to me at the time.

The most blatant effect of the NDE was an existential depression, which endured for years, coupled with enormous anger at God, church, and the very concept of being. There was also the confusion of how to live as someone reportedly unreal. If the infant screaming at 2 a.m. is unreal, how much does a feeding matter? What are the developmental goals for babies who do not genuinely exist, or for a marriage or friendship? How to assess unreal achievement for report cards? My best answer was to repress the whole thing as much as possible and to become very busy in the physical world. Although the psychic numbness continued around any recollection of the images or related topics, by the seven-year mark, ordinary life seemed almost normal.

Years passed. And then, twenty years after the experience, I was hired to run the tiny office of a new non-profit organization housed at the University of Connecticut. It turned out to be the International Association for Near-Death Studies (IANDS), and so my experience discovered its name: near-death experience (NDE). However, near-death studies were such a new field, and NDEs seemed like such a new phenomenon, there was as yet no literature on the subject. Anything any of us wanted to know had to be either dug out of pre-existing literature or developed in new research (for which there was no funding).

Within a few years, I had most of a Master’s degree in clinical psychology and a completed MA in Pastoral Ministry and Spirituality. I eventually became president and later a board member of IANDS. At the fiftieth anniversary of my NDE, I published “Dancing Past the Dark: Distressing

Near-Death Experiences,” (which has recently been called ‘the bible of these experiences’), followed by “The Buddha in Hell and Other Alarms: Reflections on Distressing Near-Death Experiences.” A third book, on spirituality and NDEs, is in process.

And yet, although the experience has been for the most part well integrated and I have been well out of PTSD for years, by the time of my presentation at this year’s IANDS conference (2019), I could still articulate no answer about the meaning of my NDE. When people say that processing can take a lifetime, they do not exaggerate! I can say we are real as *experiences*, or as *bundles of experiences*, but that is all. I have a modest confidence that by the publication of book #3, a fuller and more satisfying answer will have emerged.

I see my almost-forty years with IANDS as an era of evolving to understand my own experience while establishing a foothold in research so that others with distressing near-death experiences can be taken seriously and given reliable information. My experience was in 1962, long before public awareness of near-death experiences became widespread in the early 1980s; so, the absence of professional inquiry about my post-partum affect is perhaps not surprising (though it would have shown a sensitive level of nursing care).

Today, I would at least expect that a hospital’s nursing education program would lead an observant RN or CNA to wonder (and ask) whether a significantly distressed or shut-down patient might have experienced something unusual during unconsciousness. I would hope they would have developed a vocabulary for talking with patients about such experiences, and to have a list of resources, including knowledgeable chaplains. That projects, such as this NIB one exist indicates that physicians have begun to listen.

Debate continues over how best to understand these experiences. From the brain-based perspective, they are strictly biological responses to clinically understandable neurological inputs. From a consciousness perspective, they show evidence of mind as separate from brain, suggesting quantum-like functions, which exceed the limits of traditional scientific explanation.

From the perspective of the individual reporting an NDE, it is almost always claimed as the most intense, meaningful, and memorable *experience* of his or her entire life. The memory remains vivid and usually unaltered for decades, while the NDErs change careers, marriages, beliefs, and lives, and overturn cosmologies. Psychotherapist, author, and near-death experimenter Alex Lukeman, Ph.D., has written,

“When the ego encounters the underlying dynamics of the numinous [the sacred], there is . . . [an] accompanying destruction of traditional and habitual patterns of perception and understanding, including religious belief structures and socially accepted concepts of the nature of human existence and behavior.”

Bam and gone! The personal reality implodes. With a full-blown NDE, everything is to be rebuilt. But notice: Lukeman does not say that even a difficult NDE has been negative, or that the spiritual level is too deficient to be worthwhile. He says ego has just met the sacred, *which is often perceived as terrible*. The devastating upheaval is not only normal but *expected in deep spiritual experiences*.

What families and friends need to know is that the person with an NDE is neither mentally ill nor under satanic influence; these are common experiences, though they may be disruptive of preconceptions and established belief systems. What loved ones can do, primarily, is to listen. Experiencers need to talk, though that is where a support group makes a big difference, as the tolerance of family and friends will be strained.

Today’s resources are a far cry from what was available in the ‘60s and ‘70s. IANDS has support groups throughout the United States and Canada, and on other continents, both in-person and online. The organization publishes a newsletter and peer-reviewed journal and has an annual international conference. It is the basic referral resource.

Additionally, the Near Death Experience Research Foundation is an extended website with a rich collection of first-person NDE accounts. The distressing first-person accounts online often tend to be the most graphically, even spectacularly, hellish; some caution is advised. Several online forums

have sprung up on Facebook, offering abundant peer support. And of course, there are countless books about near-death experiences, both research-based and as individual narratives. For caregiving professionals, ACISTE, the American Center for the Integration of Spiritually Transformative Experiences, provides information and training. Distressing NDEs, like all experiences of suffering, must not be taken only at their superficial level, whether that means mechanical brain-as-mind or blindly ideological “only the Light is real!” There is enough material in these experiences, their origins, and their effects on human life to keep us occupied for the rest of our lives.



## Finding Community After Suicide and a Near-Death Experience

Chris Batts

I felt rejected throughout my life. At six months old, my mother threw me in a dumpster, and for years I lived in foster homes. I lived in bad neighborhoods with unkind and untrustworthy people. I felt alone and worthless. No one understood my pain. I kept it all secret.

I dropped out of high school. After a breakup a few years later, I started experimenting with drugs. Because I used to have epilepsy as a kid, I went to the doctor and told him I was having seizures. That way, I could get prescription drugs and try to overdose on them. I ended up experimenting with those pills, taking them every few hours. Something else started happening, too. Maybe it was my abuse from childhood coming back. Whenever I would go to certain places and see crowds of people there, I would get nervous and start freezing up. My body would shake and my stomach would hurt. I felt scared and paranoid, thinking that everyone was against me. This feeling hit me even when I was playing basketball. I started thinking people were criticizing my every move. I felt angry because I