## LETTER TO THE EDITOR

## Agreement With Recent JNDS Article

To The Editor:

In the article *Explaining Near-Death Experiences: Physical or Non-Physical Causation?* that appeared in Volume 33, Number 3, Spring 2015 of this *Journal*, authors Robert G. Mays, BSc, and Suzanne B. Mays, AA, questioned the very core of what is considered to be "the classical model" of near-death experiences (NDEs). I found that the Mays's conclusions matched what I have consistently found since 1978 when I first entered the field of near-death studies. Following are four points of similarity.

First, Mays and Mays (2015) discovered that "neither the apparent proximity to death nor the specific physiological or psychological factors that were present at the time of the NDE influenced the intensity or content of the NDE" (p. 126). I noticed this pattern at the very beginning of my work, although at first it did seem as if the closer the individual was to full death the more apt he or she was to experience all or almost all the elements identified in the "classical model." Yet I could never completely verify this relationship. During the early 1990s, I began to track the NDE aftereffect of electrical sensitivity differently. I met with families whenever possible and designed a special questionnaire (referred to in Atwater, 1994, pp. 268–271). I discovered that it made no difference whatsoever, in terms of the number and intensity of electromagnetic aftereffects, how close the individual had been to full death or how many of the classic NDE elements the individual had experienced, even if the person had only a brief material aspect—perceiving the material world from a location apart from the physical body—or experienced nothing more than the friendly dark. What mattered—the only thing that mattered—was how psychospiritually intense the individual reported the NDE to have been. I perceived this intensity when the individual exhibited signs of high stress, having been pushed by the experience beyond a threshold of what the experiencer had ever imagined or been prepared to handle a phenomenon recognized by shamans and native healers (Atwater, 2011, Chapter 16).

Second, Mays and Mays (2015) went on to describe mind as the seat of a "field of consciousness" and that all cognitive faculties reside in this nonmaterial mind entity, not in the brain. During physical existence, the mind is united and co-extensive with the brain and body and interacts with the brain, probably via electrical interactions. They said that NDEs "may be facilitated or triggered by many different types of antecedent conditions" (p. 130) and that "the correct understanding of the brain is no longer an organ that *produces* consciousness but an organ that *interfaces* between the body and the conscious mind" (p. 141).

What Mays and Mays (2015) alluded to when describing the individuality of the mind, the transcendent or non-local aspects of neardeath states, validated for me the patterns of "before the event" that I had found. I noticed stressors, conditions in the experiencer's life that pointed to either unrest or inattention; these conditions were present in nearly every case I investigated. What caught my eye were episodes that occurred under these types of circumstances:

- · during major life junctures
- $\boldsymbol{\cdot}$  when a decision needed to be made, times of deep dissatisfaction, frustration
- · when feeling hurried all the time or excessively strained
- · while "running a tight ship," insisting on personal control
- · when lifestyle maintenance toppled one's ability to keep it going
- · alongside pushing limits—at work, at play, in everything
- when demanding and strict with rules limiting one's beliefs and activities
- · without existence of meaningful goals, or when in strong denial
- during "happy" times that were really a façade
- when overly satisfied or complacent

Stress seemed a consistent precursor to NDEs, whether acknowledged or denied, short-term or long-term, even with babies and the unborn a reaction to mother's or father's stress. And the type of stress I recognized was the kind that pushes a person beyond one's limits, beyond that which is "safe."

On February 29, 2000, *The Daily Progress* newspaper in Charlottesville, Virginia (Pinto, 2000) reported that Bruce Greyson, at the time a professor of psychiatry and a near-death researcher at the University of Virginia, was able to show a link between the phenomenon of NDEs and a natural physical response to trauma. He found that experiencers have more dissociative episodes—the normal kind, not the pathological kind—than those who were close to dying but did not have an NDE. "It's basically narrowing your focus so much that you block out things that are going on around you," Greyson said.

This response happens with high stress. Throughout the ages sacred initiations of the greatest order demanded a "death"—typically psychospiritual rather than physical: the death of the ego. One had to "die unto the self," leaving behind previous desires and wants, to take on the trusted role of healer-guide who then dedicated the rest of one's life in service to others. Consider the mythological traditions of the "hero's journey" or the making of "wise ones." High stress was always the deciding factor: how the individual faced "the watcher at the gate" (the stress threshold), overcame fear (passed through/ascended), then entered the other worlds of spirit (that null space where everything is said to converge/suspend/expand into the collective whole), and was imprinted from the aftereffects (bore the "mark" of ascension) which established the extent to which the individual was changed. Invariably, afterwards, experiencers say, "I got what I needed." In summary, my findings correspond to Mays and Mays's (2015) point that there can be many different antecedent conditions to NDEs.

Third, Mays and Mays (2015) asserted that "the commonality of intensity and content in NDEs . . . under a wide range of conditions suggests that a *common state of consciousness* occurs during NDEs" (pp. 130–131). In their view,

the *individuality* of the mind is fundamental and the transcendent or non-local aspects experienced in NDEs are properties of the mind. So a better model and explanation of consciousness should be derived from the phenomenology of the transcendent mind itself as evidenced in NDEs and not from the extrapolation of mysterious-sounding quantum phenomena. (p. 144)

I've seen them thousands of times: experiencers who behave as if they have been punched, jerked, hit, pushed, or somehow spun around. Something physical happened to them, something separate from any mind play or otherworldly visitation or event that put them at death's door. And that "something" shifted their futures, pushed them into a unique arena of experience. The "something" that set them apart I call a "power punch." It is a force. It is an energy. It is intense. In my view, this intensity, what narrows the focus in high stress, is the key, the hinge, to understanding NDEs and their aftereffects.

In my original research of 3,000 adult near-death experiencers (Atwater, 1995, p. 7), the 21% who claimed they did not have aftereffects worth mentioning, or at all, were the same ones whose episode was so seemingly superficial to them that they described it as a simple, fleeting dream. (Of those where I was able to recheck with their families, these "significant others" contradicted the experiencers, noting ample changes. Others could readily see these changes, but the experiencers could not.) The 60% who reported significant, noticeable changes after their experiences were openly expressive about how intense their NDEs were and how these experiences had impacted their lives in dramatic ways. They exhibited most or all of the entire pattern of aftereffects. Many seemed stunned at how much they had changed once they compared "before" with "after" their NDEs. The 19% who were so radically affected it seemed as if they had become a different person or at least an altered version of who they had once been, bore the full brunt of the "power punch"—and showed it. Before and after photographs illustrated the depths of what they had been through and how their NDEs had changed them. Almost to a person they displayed the full pattern of aftereffects.

And, with the 73% who reported electromagnetic aftereffects, I was able to establish that it was the intensity of their NDE that had been the determining factor—rather than how long or short their NDE, or how much light they had been exposed to during it, or how close they had been to full physical death. No matter how I approached this matter, cross-comparing brief and longer near-death states, complicated and simple—regardless even of imagery or how it was described—I still reached the same conclusion: What mattered most was the intensity of the NDE, not any other feature or aspect. The intensity is what shifts experiencers. This theme of intensity of NDEs relates to Mays and Mays's (2015) point regarding a common state of consciousness during NDEs.

Fourth, according to Mays and Mays (2015, p. 144), the likelihood of recording a positive instance of verified veridical perception of a hidden visual target during documented brain inactivity is very small. From my own findings, this unlikelihood is because the experiencer's field of consciousness stands in the way of pat answers; it is a mind that thinks and acts on its own. The AWAreness during REsuscitation study (Parnia et al., 2014) has continued to miss documenting a patient seeing a hidden visual target during an NDE because the doctors involved made no allowance for a mind that responds to emotions and feelings rather than to impersonal visual stimuli. To verify details of perception of the material world during NDEs, one must allow for a field of consciousness that is without limits, that is capable of transcendence.

I found that the Mays and Mays (2015) article validated my own work. I like to think my work also validates theirs.

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