

BRIEF REPORT

Near-Death Experiences among a Sample of Iranian Muslims

Cheryl Fracasso, M.S.

Saybrook University

Seyed Ali Aleyasin, Ph.D.

Islamic Azad University, Ashtian Branch, Iran

Harris Friedman, Ph.D.

Walden University

M. Scott Young, Ph.D.

University of South Florida

ABSTRACT: Muslim near-death experiences (NDEs) have been rarely reported by comparison to the incidence of NDEs reported in other groups. Recently, after Kreps (2009) found no NDEs in a sample from Pakistan and Kashmir, he concluded Muslim NDEs may even be nonexistent. However, in Arak City, Iran, we easily identified 19 Iranian Muslims who reported having experienced an NDE. Thirty participants claiming to have memories from a period of unconsciousness associated with a close brush with death completed a Persian translation of Greyson's (1983) NDE Scale as well as background and semi-structured questions. Of these, 19 (63%) scored 7 or higher on the NDE Scale, Greyson's crite-

Cheryl Fracasso, M.S., is currently pursuing a Ph.D. in Clinical Psychology at Saybrook University. She serves as adjunct faculty member for the University of Phoenix; Research Assistant at Saybrook University with Stanley Krippner, Ph.D.; and Associate Managing Editor of the *International Journal of Transpersonal Studies*. **Seyed Ali Aleyasin**, Ph.D., is a faculty member with the Department of Clinical Psychology at Islamic Azad University, Ashtian Branch, in Iran. **Harris Friedman**, Ph.D., is a practicing clinical and organizational psychologist who was affiliated with Walden University at the time of the study; he now is Research Professor (Retired) of Psychology at the University of Florida, Professor Emeritus at Saybrook University, Senior Editor of the *International Journal of Transpersonal Studies*, and Associate Editor of *The Humanistic Psychologist*. **M. Scott Young**, Ph.D., is Research Assistant Professor in the Department of Mental Health Law and Policy at the University of South Florida. Correspondence regarding this article should be sent to Ms. Fracasso; email: cherylfracasso@hotmail.com.

rior for a valid NDE. The presumed NDErs were 10 female and 9 male; aged 16 to 65 years old with a mean age of 33; ranging in education from no high school diploma (5%), to high school diploma (37%), to bachelor's degree (58%); reporting NDE circumstances of accident (58%), attempted suicide (16%), illness (11%), natural disaster (11%), and emotional trauma (5%); and reporting time since NDE ranging from less than one to 20 years with a mean of 8 years. Although low reliability precluded further statistical analysis of the data or comparison of them to results of previous Western studies, our informal assessment was that both the contents and aftereffects of the Muslim NDEs were quite similar to those of Westerners. We concluded that NDEs are not particularly rare in Muslim groups and that their similarity to Western NDEs suggests they may be a cross-culturally universal and transpersonal phenomenon.

KEY WORDS: near-death experience, Muslim, Iranian, cross-cultural, transpersonal

Are near-death experiences (NDEs) culturally invariant, or are they limited to only some cultural contexts? The answer to this question is crucial in terms of the radical implications of NDEs for one of the most important human questions, namely the possibility of human consciousness existing apart from a functioning brain. If NDEs are not culturally universal, they could be considered a cultural artifact rather than a phenomenon with potentially more profound implications for humanity.

Research over the past 35 years has revealed that, among Westerners, about 25% of people who survive a close brush with death report an NDE characterized usually by a sense of reality or hyper-reality and by one or more features such as an out-of-body experience (OBE), movement through a tunnel, seeing and entering a light, having a life review, meeting deceased relatives and/or a mystical being, and a sense of being "sent back" (Zingrone & Alvarado, 2009). Researchers of non-Western cultures have also found NDEs with some of these characteristics (e.g., Kellehear, 2008; McClenon, 2005, 2006; Pasricha, 2008). However, the NDE literature to date contains few cases of Muslim NDEs (Holden, Greyson, & James, 2009, p. 9).

Recently, Ibrahim Kreps (2009) attempted unsuccessfully to find Muslim NDEs in Pakistan and Kashmir and concluded that Muslim NDEs may be rare or even non-existent. He speculated that NDEs may be "specifically designed for people who need them, and the need in certain communities may not be as great because of the persistence of traditional faith in an afterlife and a Creator" (p. 67). Consequently, we conducted a study in Arak City, Iran to test whether or

not Kreps's claim that NDEs are rare to non-existent among Muslims would be confirmed.

Methods

We recruited participants via announcements in four classes of about 25 students each at Islamic Azad University, Ashtian Branch in Iran, where one of us (Aleyasin) works, and via word of mouth after these initial announcements. The class announcement stated we were seeking participants who had a close brush with death through an accident, illness, injury, or trauma, and that we were seeking to interview participants who may remember anything during their period of unconsciousness. From the classes, almost immediately several students reported their own or a friend's or family member's NDE. The number of reports continued to snowball throughout the one month of data collection. The final total of initial participants was 30 Muslims residing in Arak City, Iran, where Islam is the state religion.

Participants completed a translated Persian version of Greyson's (1983) NDE Scale. The original NDE Scale is a 16-item multiple-choice inventory widely used to establish the presence of an NDE. Each Likert-format item yields a maximum score of two points. For example, question 1 asks: "Did time seem to speed up or slow down?" The possible answers were "no" (0), "time seemed to go faster or slower than usual" (1), or "everything seemed to be happening at once; or time stopped and lost all meaning" (2).

The scale consists of four sets of categories that assess cognitive, affective, paranormal, and transcendent NDE characteristics; participants must score a minimum of 7 to meet NDE criteria from a maximum of 32 possible points. The NDE Scale has shown high rates of reliability and validity in differentiating NDErs from non-NDErs among survivors of a close brush with death (Greyson, 1983, 1997, 2001, 2003, 2007). To assess for consistency, Greyson (2007) administered the NDE scale to 72 participants in 1980 and again 20 years later and found that scores had not changed significantly.

To develop the Persian NDE Scale, we used a back-translation method (Lin, Chen, & Chiu, 2005) to increase the accuracy of our translated version to its English equivalent. In this process, someone translated the original measure into Persian and then sent that translated version to a second person. The second person then issued the translated Persian version to a third person who translated it back into English. The back-translated version was then sent to a

fourth person who compared the original English version with the back-translated English version to establish that it was accurately translated. Using this widely accepted method, we determined that our back-translated version was equivalent to the original English version, although we think it important to note that nuances are always lost in any translation.

Regarding reliability of the Persian NDE Scale, George and Mal-lery (2003) provided the following guidelines to evaluate Cronbach's alpha: "> .9 - Excellent, > .8 - Good, > .7 - Acceptable, > .6 - Questionable, > .5 - Poor, and < .5 - Unacceptable" (p. 231). In developing the original NDE Scale, Greyson (1983) found alphas of .88 for the entire Scale and .75 for the cognitive, .86 for the affective, .66 for the paranormal, and .76 for the transcendental components, thus ranging from good to questionable. The Persian NDE Scale yielded .54 for the entire Scale and .13 for the cognitive, .52 for the affective, .26 for the paranormal, and .18 for the transcendental components, thus ranging from poor to unacceptable. Thus, scores from the Persian NDE Scale must be interpreted with extreme caution and are not appropriate for further statistical analyses.

We used a semi-structured questionnaire to ask about the after-effects associated with participants' close brushes with death. For example, long-term effects of NDEs commonly cited in the literature include an increased sense of purpose and meaning in life; feelings of love for, unity with, and compassion towards all living things; a decreased interest in obtaining material items and/or money; a decreased fear of death; an increased desire to be of service to others; and increased paranormal abilities (Atwater, 2003; Bush, 2007; Clark-Sharp, 1995; Greyson, 1997, 2001, 2007; Moody, 1975; Noyes, Fenwick, Holden, & Christian, 2009; Parnia, Waller, Yeates, & Fenwick, 2001; Ring, 1980; Sabom, 1982; van Lommel, van Wees, Meyers, & Elfferich, 2001).

We asked the following three exploratory questions: Were you able to communicate telepathically or understand information telepathically within this state of consciousness? Do you have any special abilities, such as enhanced psychic abilities as a result of this experience? What are the main messages learned from this experience? Last, we asked demographic questions regarding age, sex, educational level, length of time since the close brush with death, and circumstances of the close brush with death—type of accident, illness, injury, etc.

Regarding quantitative data analysis, for participants who scored

7 or higher on the Persian NDE scale, we calculated mean scores for the total scale and the four subscales. We also calculated incidence of specific NDE features, for example, percentage of participants who reported an OBE, seeing a light, life review, etc. For the exploratory questions, we calculated incidence of affirmative responses and, using qualitative analysis (Denzin & Lincoln, 2005), identified themes and calculated incidence of participants whose answers contained the themes.

Results

Of the 30 total participants, 19 scored 7 or higher on the NDE Scale. It should be noted that Greyson (1983) established the cutoff score of 7 based on the psychometric properties of the original Scale; considering the poor reliability results for the Persian NDE, our assumption may have been erroneous that 7 was also the appropriate cutoff for the Persian version. However, in the absence of further psychometric analysis of the Persian NDE Scale, we used the same cutoff score. The following data are for the 19 presumed NDEr participants.

Regarding demographics, participants were 10 females and 9 males who ranged in age from 16 to 65 years old, with a mean age of 33. Thirty-seven percent reported having a bachelor's degree, 58% reported having earned a high school diploma, and 5% reported not graduating high school. Fifty-eight percent reported their NDE occurred through an accident, 16% through a suicide attempt, 11% through an illness, 11% through a natural disaster, and 5% through an emotional shock from a trauma. Length of time since the reported NDE ranged from less than one year to 20 years ago, with a mean of 8 years.

Regarding quantitative results, participants' total scores on the Persian NDE Scale (1983) ranged from 7 to 23, with a mean of 14.47 ($SD = 4.48$). Subscale scores were highest for Transcendental ($M = 4.16$, $SD = 1.68$), followed by Cognitive ($M = 4.11$, $SD = 1.73$), Affective ($M = 3.32$, $SD = 1.94$), and Paranormal ($M = 2.79$, $SD = 1.95$).

Regarding incidences of specific features, 62% of presumed NDErs reported encountering a light, 53% coming to a border or barrier they could not cross and were "sent back" to life against their will, 42% hearing an unidentifiable voice, 41% having a life review, 37% seeing future scenes, 32% having out-of-body experiences (OBEs), 32% hearing the voice of a definite mystical being, 26% seeing deceased rela-

tives or religious (holy) spirits, 26% coming to a border and making a conscious decision to return to life, and 21% sensing the presence of deceased relatives and/or religious (holy) spirits.

To the question, "Were you able to communicate telepathically or understand information telepathically in this state of consciousness?", 53% reported "yes" and 47% "no." To the question, "Do you have any special abilities, such as enhanced psychic abilities as a result of this experience?", 74% reported "yes" and 26% "no." One participant reported that her psychic abilities seemed to decrease after her NDE.

Although we did not conduct a formal analysis of responses to the semi-structured aftereffects questionnaire, our informal observation was that the themes we found in our sample were roughly similar to those commonly reported in Western samples. Regarding responses to the final question about main messages learned from the NDE, we found that each respondent indicated one of four main themes: spiritual values are the most important aspect of life (47%), death is beautiful and nothing to fear (26%), work on Earth was not yet finished (21%), and the next world is more beautiful than this one (5%).

Discussion and Conclusion

Before turning to our conclusions, we will discuss limitations of our study. First, our sample size of 19 presumed NDErs was small and from the localized area of Arak City; the extent to which our findings may be generalized to all Muslims cannot be known. In addition, our incidence of 63% NDErs (19 of 30) is substantially higher than the approximately 35% incidence that resulted from an analysis of retrospective NDE research over the past 30 years (Zingrone & Alvarado, 2009). This difference may be due to our recruiting not just survivors of close brushes with death but survivors who remembered something from their periods of unconsciousness, to the snowball sampling method we used, and to other possible factors (Greyson, 1998). In addition, the Persian NDE Scale yielded low reliability, which rendered the quantitative results inconclusive and prevented further statistical analysis of them or comparison of them to results from previous Western studies.

Despite these limitations, our data nevertheless contradict claims that Muslims rarely or perhaps never experience NDEs. Clearly Muslim NDEs do occur, which leaves open the possibility that NDEs may be culturally universal and may reflect transpersonal phenomena rather than merely materially- and culturally-based phenomena.

In addition, our preliminary observation of similarity of NDE features and aftereffects between our sample of Muslims and previous samples of Westerners clearly warrants further research. Based on our experience, researchers may be more successful when a local citizen of stature conducts participant recruitment.

An unanticipated finding from our study was that two participants reported concerns over post-integration issues: Both reported a deep desire to return to the realm they had experienced during their NDEs. Each of these participants' NDEs occurred during a suicide attempt, and both were in psychotherapy as a result. Thus, additional research about Muslim NDEs may help not only to answer questions about the ultimate nature of consciousness but also to assist Muslim NDErs who may be similar to Western NDErs challenged by NDE aftereffects.

In conclusion, our results suggest that Muslim NDEs may actually be quite common, as they are in the West, and may not be especially different in their key features from Western NDEs and therefore not heavily influenced by cultural variations, including prior religious or spiritual beliefs. Future studies could focus on developing reliable instruments to assess the incidence, characteristics, and aftereffects of NDEs using larger sample sizes of various representative Muslim populations. Such research could enhance our knowledge of Muslim NDEs and, if extended to yet other culturally diverse populations, our understanding of NDEs globally.

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