

Letters to the Editor

Different Kinds of NDE

To the Editor:

As psychiatrist, leader of the German section of the International Association for Near-Death Studies (IANDS), and author of 14 scientific publications on near-death experiences (NDEs), I have analyzed more than 200 NDEs and hold a lot of workshops on NDEs in international psychiatric and neurological congresses. In 1999 I wrote a chapter on the neurological and psychiatric interpretation of NDEs in a German book edited by Hubert Knoblauch and Hans-Georg Soeffner (Schroeter-Kunhardt, 1999). In this book, Knoblauch and his colleagues published the first German poll concerning NDEs (Schmied, Knoblauch, and Schnettler, 1999), showing that there are 3 million Germans who have NDEs, which thereby are three times more common than the psychiatric disease schizophrenia, but yet completely ignored by psychiatrists.

After publication of this book, disturbed by Knoblauch's interpretations of his sociological NDE data, I wrote him a critique in the form of a three-page letter and later published my critique in a parapsychological journal (Schroeter-Kunhardt, 2000), neither of which Knoblauch answered. Instead, Knoblauch has continued to repeat his dubious theses nationwide in interviews and newspapers.

Because Knoblauch and his colleagues have now published a short form of his theses in English in this Journal (Knoblauch, Schmied, and Schnettler, 2001), I have to repeat my critique of Knoblauch's conclusions, referring to his article in this Journal and to the detailed version of his theses in his book. Both are full of contradictions. Scientists who have studied NDEs much longer than Knoblauch, who has gathered only 82 NDEs, are not so premature in their conclusions and consequently came to quite different results.

First, Knoblauch and his colleagues postulated that there is no causal connection between the clinical death and the occurrence of NDEs. Furthermore, Knoblauch and his coauthors presented the well known fact that NDEs also occur when death is only expected, that is, in psychologically (and not biologically) near-death situations, as their own new

discovery. In fact it is well known that NDEs mainly occur in situations of imminent biological death, in the anticipation of one's own imminent death, or in direct contact with death in different forms, such as accompanying dying people. Exceptions such as the occurrence of NDE-like elements during meditation or under the influence of hallucinatory drugs show only that NDEs are neurobiologically based and can be triggered by altered states of consciousness.

Actually, 46 of Knoblauch's NDEs happened during life-threatening situations. Furthermore, 18 other NDEs that he classified as not happening in near-death-situations occurred in life-threatening situations and so imply near-death situations. For example, 9 of them happened during automobile accidents and electric shock, 4 during heart attacks, 4 during surgical complications, and so on. Contradicting their assertion, Knoblauch and his colleagues later in their book admitted that NDEs correlate with near-death situations, and that two-thirds of their own NDEs were in life-threatening circumstances.

Elsewhere in their book, Knoblauch and his colleagues postulated that the physical crises were not related to organic facts that lead to physical death. Not being medical doctors and not having consulted any medical advisor, Knoblauch and his colleagues simply cannot decide this; furthermore, the authors did not investigate this relationship in their NDEs.

Second, Knoblauch and his colleagues postulated that previous knowledge of NDEs leads to the experience of NDEs, and represented the contradictory findings of other researchers as wrong. Two pages before, Knoblauch and his colleagues nevertheless admitted that they could not say whether the higher percentage of knowledge of NDEs among NDEs existed before their NDE, or whether it was a consequence of their NDE, because they had not examined this interrelation. Furthermore, they admitted that in some cases they could exclude previous knowledge of NDEs, and that this previous knowledge did not influence the incidence of NDEs.

Third, their oft-repeated statement that there is no universal or standard NDE pattern depends on a capital mistake: Knoblauch and his colleagues confounded NDEs with *oneiroids*, complex dreams with a certain degree of lucidity, concerning the theme and situation of death. NDEs long ago have been clearly defined psychiatrically, and so differentiated from individual dreams, as archetypal models of *oneiroids* (Schmidt-Degenhard, 1992; Schroeter-Kunhardt, 1993). In fact there are clear phenomenological differences between both forms: *oneiroids* are individual, idiosyncratic dreams without the universal elements

found in NDEs. Furthermore NDEs are experienced in more dangerous situations that are clearly more near death (Schroeter-Kunhardt, 1993).

Actually, in my analysis, 27 of 100 NDEs contained individual dream-like or *oneiroidal* elements. This demonstrates that there is a continuous transition from complex individual dreams concerning the theme of death to NDEs (Schmidt-Degenhard, 1992), which can easily be differentiated from *oneiroids* by their transcultural similar elements, including the out-of-body experience, the tunnel, the light, the life review, transcendental landscapes, and contact with deceased persons.

If we actually look at the statistics of Knoblauch and his colleagues, they contradicted their own statements that there is no universal NDE pattern. In fact all 82 of their NDErs described nearly all typical NDE elements, in frequencies ranging from 11 to 65 percent (see Table II in Knoblauch, Schmied, and Schnettler, 2001, p. 25). The claimed differences between East and West German NDEs never reached statistical significance. Only the negative affect accompanying the East German NDEs differentiated them significantly from West German NDEs. Knoblauch and his colleagues themselves admitted that the small number of NDEs did not allow them to differentiate different NDE types because of nonsignificance of these differences.

The cultural differences between East and West German NDEs are in fact quite often only different interpretations of the universal NDE elements. The negative affect of East German NDEs may be only a reflection of the conflict of nonreligious people suddenly being confronted with completely unexpected, highly religious experiences, an explanation Knoblauch and his colleagues never offered or recognized. Also, Knoblauch's statement that in China out-of-body experiences and tunnel experiences do not exist is incorrect. Already in 1992 a study of 81 NDErs, victims of the worldwide biggest earthquake, revealed that 43 percent of the Maoist NDErs had out-of-body experiences and 16 percent reported tunnel experiences (Zhi-ying and Jian-xun, 1992). Altogether, NDEs in different cultures do not show the enormous differences that Knoblauch and his colleagues repeatedly claimed; these differences can be claimed only for idiosyncratic dreams with the theme of death. On the contrary, NDEs consist worldwide of the same elements, with differences only in the shaping and interpretation of these elements.

This astonishingly small influence of culture on the basic elements of NDEs is also confirmed by the fact that children without any relevant cultural education about life after death experience the same universal NDE elements. The same applies to nonreligious people who experience

NDEs that contradict their own convictions and afterwards show conversions to an religious life.

Fourth, that some NDEs consist only of single elements and do not always repeat the same succession of these elements has been well known since Raymond Moody's first description of the phenomenon (1975). This does not contradict the universality of NDEs. These single NDE elements are simply a partial experience or recall of a biologically implemented sequence of archetypical NDE elements.

Fifth, the NDE elements cannot be reduced to structures produced by social narrative, as Knoblauch and his colleagues postulated. They claimed that the uniformity of NDE elements can only be understood as products of narrative motifs and legend forms, and therefore they are narrative reconstructions, sometimes completely constructed by the NDEr.

In fact the NDE-specific hypermnesia implies that NDE reminiscence does not rely substantially on narrative motifs that existed before the NDE. NDEs are rather primary, archetypical experiences that were a source of religious ideas about life after death, and therefore were occurring long before any narrative religious model or religious tradition existed. Indeed, Knoblauch and his colleagues admitted that the religious and ideological differences between East and West Germany surprisingly did not affect the occurrence of NDEs.

Futhermore, studies have shown that there is no relevant difference between the repeated NDE narrations over many years after the NDE (van Lommel, van Wees, Meyers, and Elffereich, 2001) or between NDE narrations reported either a short or a long time after the NDE, which Knoblauch and his colleagues themselves admitted. Despite Knoblauch's sociological bias, the fact that the dominant affect in most NDEs is strongly positive also shows the cultural independence of the NDE elements and their neurobiological origin.

Last but not least, the theory of a narrative reconstruction of inner experiences applies equally to *all* inner experiences; and yet it never has any relevant consequence, for example, on the interpretation of the inner experiences of people with schizophrenia or reactions to trauma. Knoblauch and his colleagues themselves stated that NDErs themselves are quite confident that their descriptions of their experiences are identical with their experiences. Altogether there is no relevant difference between the near-death experience and its narration. I find the claims of Knoblauch and his colleagues inconsistent and unscientific.

In this connection, the statement that NDErs intentionally shape their NDEs so that they confirm the standard American form is nothing

else than another bias of Knoblauch and his colleagues. At best, from my own manifold experiences with the production of NDE documentaries, it can be said that the mass media prefer cases that imply the standard elements. Altogether, the claims of Knoblauch and his colleagues again are inconsistent and unscientific.

Sixth, the statements that NDEs “have little consequences for the manner of living” (Schmied, Knoblauch, and Schnettler, 1999, pp. 212–213) and that NDEs have no moral consequences or directly “undermine religious belief” (Knoblauch, Schmied, and Schnettler, 2001, pp. 27–28) again are contradicted in the study itself. The data show that 58 to 70 percent of their sample of NDErs lived more consciously and had greater appreciation for life and their fellow creatures; the belief in God grew in 28 percent and 40 percent had less fear of death. Knoblauch and his colleagues also admitted that all NDErs, including those with sad lots, were quite optimistic and in a positive mood after their NDE; that the NDErs interpreted the NDE in a religious sense and as basis for their belief in life after death; and that their NDEs have long-lasting biographic relevance.

Given my objection to their interpretation of the data, does the study by Knoblauch and his colleagues have any benefit? It has; it provides good data about the frequency of NDEs in Germany: more than 4 percent of the population, that is, about 3 million Germans, have had NDEs. Especially astonishing was the high frequency of paranormal effects around the death of human beings: 14 percent had premonitions of someone’s death that proved true; 3 percent reported psychokinetic effects at the moment of someone’s death; and 4 percent of Germans have had deathbed visions. These results of their study suggest the possibility that at death we transcend space and time and that there is life after death; but the above-mentioned conclusions reached by Knoblauch and his colleagues do not follow from their data.

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Response to Schroeter-Kunhardt

To the Editor:

Thank you for the opportunity to reply to Michael Schroeter-Kunhardt's critique of our research. His comments combine wrong assertions about our study with misunderstanding of our methodology. This may sound harsh, so let me shortly refute his arguments.

As we mentioned in our article in this Journal (Knoblauch, Schmied, and Schnettler, 2001) as well as widely in our German publications, we have conducted *two* waves of interviews, each with more than 2,000 subjects. Schroeter-Kunhardt seemed unaware of the fact that we dealt with many more subjects than those in the first wave. As we also stress explicitly (in fact, we have written an essay on this in the edited volume Schroeter-Kunhardt cited), we have collected a large number of qualitative interviews, so that the number of cases amounts to more than 200.

Methodologically, these cases cannot be lumped together. Qualitative and quantitative interviews have to be distinguished, and the second wave cannot be added to the first one. Instead, it constitutes a confirmatory test of the first wave—and, as we mentioned, a surprisingly convincing test that corroborated the first wave's results.

The question as to the “death” of the patients is essentially *not* subject to interpretation. The questionnaire, which was printed in our edited book (Knoblauch and Soeffner, 1999), as well as in my monograph (Knoblauch, 1999), included two clear-cut yes/no answers as to both the subjective and the medical evidence of the subjects’ physical situation. Any additional “medical” information on the situation by the subjects was, as we noted, qualitatively too diverse and too unreliable to be interpreted on its own. It is these answers, which include items such as “had an accident” or “injured,” that Schroeter-Kunhardt seems to be “interpreting.”

Nowhere in our book did we claim, or intend to claim, that “physical crises were not related to organic fact.” I suspect that Schroeter-Kunhardt was confusing that with “psychical crises.”

Schroeter-Kunhardt was wrong in his assertion that we did not know if our subjects had knowledge about NDEs before their own NDE. In fact, this was a question in the questionnaire, and the answer was stated in the very essay he cited (Schmied, Knoblauch, and Schnettler 1999, p. 232).

Schmidt-Degenhard’s notion of *oneiroids* is interesting, but it did not seem useful to us. However, if one does use it, one should be aware that Schmidt-Degenhard took NDEs to be one type of *oneiroid*, so that the distinction between NDEs and *oneiroids*, as Schroeter-Kunhardt suggested, does not work logically.

Schroeter-Kunhardt referred to his own research on NDEs, but he has not, to our knowledge, published anything about his empirical work. As to the differences between East and West German NDEs, we stated the statistical significance explicitly (Schmied, Knoblauch, and Schnettler, 1999, p. 234), and indicated that most differences were *tendencies*.

The cultural interpretation of these differences is, in fact, subject to further discussion, and we offered our interpretation as part of our discussion. Yet, Schroeter-Kunhardt’s claim that I said anywhere that in China there existed no out-of-body-experiences is plainly false. In my book (Knoblauch, 1999) I wrote that one finds in China “motifs like out-of-body experiences, tunnel, etc.” (p. 86), and in the corresponding footnote, I did refer to Feng Zhi-ying and Liu Jian-xun’s study (p. 214).

Schroeter-Kunhardt argued that the fact that some NDEs consist only of single elements does not contradict the universality of NDEs. The point is not that NDEs may consist of one single element, but that these elements may differ from anything mentioned in the standard experience as described, for example, by Raymond Moody.

We did not “reduce the NDE to a social narrative,” as Schroeter-Kunhardt asserted. To the contrary, as one may see in the conclusion of our book (Knoblauch and Soeffner 1999), we tried to offer an anthropological explanation that integrates “culturalist” and biological approaches.

Finally, Schroeter-Kunhardt seemed unaware of the “consequential” dimension in the psychology of religious experience. In this respect, one typically distinguishes changes in NDErs’ manner of living from changes in attitude and belief.

In sum, Schroeter-Kunhardt’s letter contains a number of assertions that are not only wrong, but belie what we have written. Let me conclude with a personal comment: When starting our work (which was finished more than three years ago), we had hoped to initiate a real scientific discussion on NDEs in the German speaking countries across disciplines. Our edited volume (Knoblauch and Soeffner, 1999) was one of the fruits of this hope. As Schroeter-Kunhardt’s untenable assertions show, the discussion has still to be developed in a more serious and unbiased fashion.

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Perplexing Questions About Novak’s “Binary Soul Doctrine”

To the Editor:

The Journal recently carried a fascinating and lengthy paper by Peter Novak (2002) entitled “Division of the Self: Life After Death and the Binary Soul Doctrine.” Novak submitted compelling evidence from

throughout history to support the theory that we are indeed two-part creatures, comprised of a conscious mind and an unconscious mind. He went on to show how dreams, trances, and mystical experiences seem to indicate, with an almost uncanny reliability, that at death there is a split between the two minds: the conscious mind engaged in the initial experience (darkness or tunnel), then phasing out, perhaps to take on some type of residence in a “netherworld”; with the unconscious mind comprising the second phase of experience (lights, landscapes, spirit beings), seeming to ascend into higher orders beyond earthly life. And he especially connected his theory to research done on near-death experiences.

To say that Novak’s research is impressive in the way he correlated stories, myths, and legends about death and the afterlife to a symbolic representation of left- and right-brain hemisphere functions would be an understatement. I think he is onto something worthy of further investigation. However, I would suggest caution in drawing any conclusions to his theory. The reason I say this is that there are too many missing pieces and contradictory elements to his data. Allow me to point out a few.

On page 164, Novak described the second stage of death (or near-death) as being devoid of conscious thought and reason, with the individual accepting as truth whatever is presented. And he emphasized this assertion throughout his paper. In my book, *Beyond the Light* (1994), which he cited in his article, I included the story of Jeanie Dicus (pp. 57–61). The Dicus case refutes this assertion because, throughout her entire episode, she challenged the Jesus figure who appeared. She argued, questioned, disbelieved, and countered almost everything told to her. I was only able to include a fraction of her story; had I included the whole episode, the full extent of her demanding questions would have required an entire chapter. Just because an experiencer seems to be in a state of direct and certain knowing, does not mean everything given is accepted. In my own three near-death experiences, presented in brief in Chapter Two of *Coming Back to Life* (Atwater, 1988, pages 24–61), I reported how, in all three of my episodes, I often questioned, analyzed, reasoned, countered, explored, and investigated what was happening to me, as it occurred.

If I were to look back over the 23 years I have been involved in near-death research and estimate, based on my own case studies, how many experiencers accepted versus questioned what they encountered, I would offer this: child experiencers of near-death states frequently challenge greeters in the first phase of their experience. To an angelic

figure they ask things like, "Is that what you really look like?" Yet they seldom argue with content in the second phase. With adult experiencers I have found the reaction to be quite the opposite: seldom do adults question greeters in the first phase, but quite often they will counter, challenge, or question the content and beings present in the content of the second phase. To give an idea of percentages from my research with those adult experiencers who in some way challenged or questioned the main content of their near-death episode, I would say one-third accepted *verbatim* everything presented to them, while the remaining two-thirds actively used their analytical abilities, some more than others.

Another assertion of Novak, and one quite common with many researchers, is that phase one consists of darkness or a tunnel and that those who do not report such a thing must have forgotten the occurrence. This is erroneous and does not hold up in broad-based research. The nationwide Gallup Poll on the subject of near-death experiences (Gallup and Proctor, 1982) found that only 9 percent reported a tunnel or any form of darkness. It was not until much later, after the media sensationalized the tunnel component, that more and more experiencers reported having experienced one during their episode. In my research on 3,000 adult experiencers and 277 child experiencers, hardly one-third claimed any such thing. Because of this, I no longer consider tunnels a signature feature of near-death states, but, rather, one of many elements associated with near-death states. In the majority of my cases, the first phase consisted either of an out-of-body experience or immersion into a brilliant light. I must admit, however, that with child experiencers, I did encounter quite a number of them who, in phase one, were met by "the living dark"—not darkness as we think darkness to be, but, rather, a warm and friendly intelligence some called "The Darkness That Knows."

On page 175, Novak wrote, "On its own, the unconscious could never choose to change its behavior patterns; it could never even grasp the fact that these behaviors were no longer capable of leading to fulfillment." If this is the state of mind that Novak characterizes for the second phase of a near-death experience, then I cannot imagine on what research he based that inference. It is typical, for both child and adult experiencers during their episode, to face misdeeds or any type of behavior that was less than satisfactory to them, and decide, right there and then, to make corrections. This is the reason many give for why they chose to return to life: to change their thinking and their actions.

His statement on page 176 about the contradiction in testimony from experiencers about time is really not a contradiction. Certainly,

experiencers report, almost to a person, that in reality there is no such thing as time or space, that neither exists on “The Other Side.” But in “getting there,” in going through the stages leading to arrival, one does go through “timing” in the sense of sequences of events, one after another. What is actually reported by experiencers, at least the vast majority in my research base, is a scenario closer to a shift in dominance that appears to take place between soul and ego, than to anything akin to a splitting off of left-brain and right-brain functions. It is as if the ego personality dissolves into the fullness of the soul, the real self: the two become one. And this distinction is emphasized in vivid and compelling language. Because this distinction is such a strong one, I find myself uncomfortable with Novak’s conclusions about the left brain comprising the totality of phase one and the right brain comprising phase two. I can appreciate why Novak would draw this conclusion based on the material he detailed, and it is an interesting concept. But his argument did not encompass all the evidence from near-death research, nor is it in line with the majority of experiencer accounts. Additionally, in the 1960s and early 1970s when I was actively involved in dehaunting houses, and on occasion since, I had many different encounters with ghosts, apparitions, and lost souls. Certainly, there were those who were little more than psychic residue, leftover energy imprinting from individuals long gone. Sometimes this residue could be traced to a living person who had simply moved away; sometimes it was connected to a death, as if strong emotions could hang in the air or permeate fabric and wood once expressed. On other occasions, the apparitions appeared and disappeared with a kind of rhythm, as if they were a recording stuck on replay. And with some there was no response, no change, nothing to indicate the presence of a soul. With others, however, there was response once engaged, and interactions followed—usually “rescue work” in the sense of helping the individual to realize he or she was dead and it was time to move on. A particular “release” of this nature that I did, which was written up in a local newspaper (Culbertson, 1989), centered around a Confederate soldier at Selma Mansion. The bulk of my cases were with fully responsive souls who, for differing reasons, refused to leave the earth plane. One encounter I had was with a 6-year-old boy standing at a freshly dug grave. The boy appeared to be a living child. I asked him what he was doing there. His audible answer was: “My Mommy and Daddy told me never to go anywhere without their permission.” On further questioning, I learned that he had been hit by a car on the way to school and that it was his body in the grave. I looked at the headstone and discovered that what the youngster had told me

was true. I was rather startled at first, then saddened. Try as I may, I could not convince him it was all right to move on into the light realms. He stubbornly refused to budge without his parents' permission. I went home and held a prayer service for him, affirming and knowing that what was needed to help him would occur. The next day I went back to the cemetery and the boy was gone. This "ghost" was hardly a mindless apparition.

Yes, many ghosts are indeed zombie-like thought forms or psychic residue. But others are living souls who could use a little extra help. To wield the same brush stroke while painting them all into the same picture is unwise.

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Response to Atwater

To the Editor:

First, I must thank you for publishing my work in the Journal. My paper presented a fairly unique and controversial argument, and was bound to kick up a dust storm that the Journal could have just as easily sidestepped altogether. But you did not, for which I am very grateful, as that paper represents 14 years of my life's work.

And I thank P. M. H. Atwater for commenting on it. I have great respect for her; and to have her describe my work as "fascinating" and "impressive," admitting that it is supported by "compelling evidence"

and is “worthy of further investigation” was almost more than I could have hoped for. To bicker over mere details after such high praise seems almost petty.

However, there is one thing I should try to clarify. My work does not suggest, at least to me, that the division between the conscious and unconscious usually reaches a state of complete and total separation during near-death experiences (NDEs). The evidence suggests to me instead that the process of division often begins, but rarely if ever reaches totality, in the NDEr him- or her-self. Granted, we do see many parallel streams of evidence that seem to indicate that this process of division does begin in many NDEs, and would, perhaps, reach totality if the NDEr was never revived. However, if, as I have suggested, the division is never more than partial in most NDEs, one would not expect a complete absence of right-brain thought processes during the first phase, nor a complete absence of left-brain thought processes during the second phase, but only a noticeable reduction of same—for which my paper provided substantial evidence.

Moreover, I am also convinced that sometimes, probably only rarely, the division does not occur at all. Numerous streams of evidence suggest that the more spiritually evolved or psychologically integrated one is during life, the less likely one is to find one’s mind splitting into separate conscious and unconscious elements after death.

Atwater cited her own study indicating that only about one-third of NDErs recall encountering the darkness or tunnel in the first phase of their NDEs. But a conscientious observer would have to point out that other studies have suggested this number may be higher. Peter and Elizabeth Fenwick (1995) reported that the majority of NDErs in their study did find themselves in a tunnel, and fully two-thirds of their interview group reported experiencing the darkness (pp. 49–51).

Also, Atwater suggested that some of the ghosts she has worked with do not fit into the divided-soul scenario delineated by the Binary Soul Doctrine. But, curiously, she then went on to cite, as evidence for this contention, an encounter that did seem, at least to me, to follow the Binary Soul Doctrine pattern quite well. She describes a ghostly entity that not only had been unable to determine logically from the available evidence that it was dead, indicating a loss of logical reasoning ability, but also showed an unyielding predisposition to adhere to its previous mental programming and thought patterns, indicating a loss of creativity and autonomous free will: “Try as I may, I could not convince him it was all right to move on into the light realms. He stubbornly refused to budge without his parents’ permission.” My own research has taught me

that many other “ghostbusters” report essentially the same thing: that even on those rare occasions when they *are* able to interact with ghosts, they find all too often that these ghosts are frozen in fixed opinions and behavior patterns that resist all efforts at modification—exactly the sort of behavior the Binary Soul Doctrine would seem to predict.

In the final analysis, however, I feel Atwater and I are on the same page, both agreeing that this hypothesis is worth further research.

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