

# The potential therapeutic benefit of mediumship readings in the treatment of grief

Chad Mosher, PhD

Julie Beischel, PhD

Mark Boccuzzi

The Windbridge Institute for Applied Research in Human Potential



## FACT:

Unresolved grief can cause significant mental and physical distress.

Grief is a ubiquitous and natural experience among people of every culture (reviewed in Worden, 1991, pp. 8-9).

However, grief can cause "various physical and mental aberrations" (Worden, 1991, p. 1) and unresolved or nonintegrated bereavement can lead to chronic depression (Hensley, 2006).

Increased morbidity and mortality may also result from grief (e.g., Schaefer et al., 1995; Shahar et al., 2001; Stroebe et al., 2007).

In addition, if individuals cannot self-heal (Jordan & Neimeyer, 2003), they may develop complicated or traumatic grief, a clinically important syndrome which differs from major depressive disorder and involves a heightened risk of distress and dysfunction (Prigerson et al., 2009).

## FACT:

Traditional psychotherapy provides little to no effect in relieving grief.

Unresolved grief is considered pathological in stage models (e.g. Kübler-Ross, 1969) and the goal of traditional psychotherapy sessions is "working through the stages," and resolving the sense of loss.

However, Larson and Hoyt (2007) pointed to the popular yet pessimistic consensus within the grief and bereavement literature that grief counseling was **at best ineffective** while **at worst harmful** to clients seeking help.

Similarly, in a recent meta-analysis of traditional psychotherapeutic grief treatment outcomes, Currier, Neimeyer, and Berman (2008) revealed a "**discouraging picture for bereavement interventions**" (p. 656) which added "**little to no benefit** beyond the participants' existing resources and the passage of time" (p. 657).

## FACT:

Experiences of after-death communication (ADCs) dramatically reduce grief.

Non-traditional interventions and experiences have been repeatedly demonstrated to dramatically diminish or even entirely alleviate grief (e.g., Botkin, 2000; Drewry, 2003; Hastings et al., 2002; LaGrand, 2005; Parker, 2005).

These include both **spontaneous** [e.g., sensing the presence of the deceased; visual, olfactory, auditory, and tactile phenomena; powerful dreams] and **induced** [e.g., eye-movement desensitization and reprocessing (EMDR) techniques (Botkin, 2000); use of a Psychomanteum (Hastings et al., 2002)] experiences of after-death communication (ADC).

Although ADCs have been described as "paranormal," they are universal in nature and usually healing, comforting, and beneficial (e.g., Drewry, 2003; Houck, 2005; Klugman, 2006; Sanger, 2009).

## FACT:

Pilot data suggest similar positive effects after readings with mediums.

There have been no systematic studies published investigating the effects that receiving a personal mediumship reading from a non-denominational, mental medium has on the experience of grief.

An exploratory study using an anonymous, on-line survey which asked participants (n = 83) to retrospectively rate their levels of grief before and after a reading with a medium indicated that participants recollect experiencing meaningful reductions in levels of grief.

A subset (35%, n = 29) of participants also worked with a mental health professional (MHP) as part of their approach.

Participants' verbatim comments about those experiences can be found below on the left.

# The potentially positive therapeutic benefits of mediumship readings in the field of grief psychology warrant serious study.

## Representative Participant Comments

### Short- and long-term effects of a mediumship reading

"[The medium]... had a profound effect on my life and my grieving process... It has helped me in a way I never would have imagined."

"After the reading... I had a different definition of my relationship with my mom that was more special than I could ever expect."

"[The medium] helped me manage the grief that has been with me for more than 20 years."

### Experiences with a mental health professional (MHP)

"When my first MHP negated the reading I had with a medium, I switched to someone who understood and supported 'my new reality' and therefore received much more constructive help with my grief."

"I only went to a grief counselor for four sessions. I did not continue because I didn't feel that she was helping me either way."

"I know that I personally needed to go through counseling as well. However, the level of healing was accelerated by getting readings."

"The medium reached my heart, the social worker my mind."

## Advantages of Mediumship Readings over Traditional Grief Counseling Interventions, Non-traditional Methods, and Spontaneous Experiences

Readings may be less frightening, less intimidating, and easier to understand than more personal, spontaneous ADC experiences.

The scheduled and regulated environment of a reading makes it well-suited as a controlled and prescribable treatment option.

A reading may be preferred for individuals who long for contact but have not experienced it.

A medium serves as a non-judgmental participant in the experience who will not disparage or pathologize the experiences of the bereaved.

## Conclusions

The absence of effective treatments for grief and the trends from exploratory data warrant further study into the potential therapeutic benefits of mediumship readings in the field of grief psychology.

We recommend controlled research trials with readings from credentialed mediums whose abilities to report accurate and specific information about the deceased have been demonstrated under controlled laboratory conditions (e.g., Beischel, 2007/2008).

The combination of traditional psychotherapy and mediumship readings may prove to be more beneficial than either intervention separately.

## References

- Beischel, J. (2007/2008). Contemporary methods used in laboratory-based mediumship research. *Journal of Parapsychology*, 71, 37-48.
- Botkin, A. L. (2000). The induction of after-death communications utilizing eye-movement desensitization and reprocessing: A new discovery. *Journal of Near-Death Studies*, 18, 181-209.
- Currier, J. M., Neimeyer, R. A., & Berman, J. S. (2008). The effectiveness of psychotherapeutic interventions for bereaved persons: A comprehensive quantitative review. *Psychological Bulletin*, 134, 648-661.
- Drewry, M. D. J. (2003). Purported after-death communication and its role in the recovery of bereaved individuals: A phenomenological study. *Proceedings of the Annual Conference of the Academy of Religion and Psychological Research*, 74-87.
- Hastings, A., Ferguson, E., Hutson, M., Goldman, A., Braud, W., Greene, E., et al. (2002). Psychomanteum research: Experiences and effects on bereavement. *Omega: Journal of Death and Dying*, 45, 211-228.
- Hensley, P. L. (2006). Treatment of bereavement-related depression and traumatic grief. *Journal of Affective Disorders*, 92, 117-124.
- Houck, J. A. (2005). The universal, multiple, and exclusive experiences of after-death communication. *Journal of Near-Death Studies*, 24, 117-127.
- Jordan, J. R., & Neimeyer, R. A. (2003). Does grief counseling work? *Death Studies*, 27, 765-786.
- Klugman, C. M. (2006). Dead men talking: Evidence of post death contact and continuing bonds. *Omega: Journal of Death and Dying*, 53, 249-262.
- Kubler-Ross, E. (1969). *On death and dying*. New York: Scribner Classics.
- LaGrand, L. E. (2005). The nature and therapeutic implications of the extraordinary experiences of the bereaved. *Journal of Near-Death Studies*, 24, 3-20.
- Larson, D. G., & Hoyt, W. T. (2007). What has become of grief counseling? An evaluation of the empirical foundations of the new pessimism. *Professional Psychology Research and Practice*, 38, 347-355.
- Parker, S. (2005). Extraordinary experiences of the bereaved and adaptive outcomes of grief. *Omega: Journal of Death and Dying*, 51, 257-282.
- Prigerson, H. G., Horowitz, M. J., Jacobs, S. C., Parkes, C. M., Aslan, M., Goodkin, K., et al. (2009). Prolonged grief disorder: Psychometric validation of criteria proposed for DSM-V and ICD-11. *PLoS Medicine*, 6, e1000121. doi:10.1371/journal.pmed.1000121
- Sanger, M. (2009). When clients sense the presence of loved ones who have died. *Omega: Journal of Death and Dying*, 59, 69-89.
- Schaefer, C., Quisenberry, C. P., & Wi, S. (1995). Mortality following conjugal bereavement and the effects of a shared environment. *American Journal of Epidemiology*, 141, 1142-1152.
- Shahar, D., Schultz, R., Shaker, A., Wing, R. (2001). The effect of widowhood on weight change, dietary intake, and eating behavior in the elderly population. *Journal of Aging Health*, 13, 186-199.
- Stroebe, M., Schuch, H., & Stroebe, W. (2007). Health outcomes of bereavement. *Lancet*, 370, 1960-1973.
- Worden, J. W. (1991). *Grief counseling and grief therapy: A handbook for the mental health practitioner* (2nd ed.). New York: Springer Publishing Company.