Experiences of continued presence: On the practical consequences of 'hallucinations' in bereavement.

Jacqueline Hayes and Ivan Leudar

[1]The Anna Freud Centre, London, UK.

[2]The University of Manchester, Manchester, UK.

Word count (exc. figures/tables): 5934

*Requests for reprints should be addressed to Jacqueline Hayes, Anna Freud Centre, 21 Maresfield Gardens, London, NW3 5SU, UK (e-mail: jacqueline.hayes@annafreud.org).

ABSTRACT

Objectives : Our aim is to document the characteristics of experiences of continued presence and by doing so help to resolve long-standing controversies about their meaningfulness and consequences for the bereaved.

Design : We investigated these experiences using qualitative methods in both data collection and analysis. This enabled us to document their phenomenal characteristics, meanings, as well as consequences.

Methods : In-depth narrative biographic interviews were carried out with 17 bereaved informants and conversation analysis used to identify sources of meaning and functions of these experiences.

Results: Our informants heard voices of the deceased, saw their images, felt their touch, and sometimes felt their presence unspecified in any of the senses. Analysis revealed that experiences of continued presence were meaningfully connected to the concrete environments in which they happened and also to the personal histories of the bereaved. The narratives reveal both helpful and destructive potentials of these experiences for the bereaved. In all cases, the functions relied on the meaning of the relationship with the deceased.

Conclusions : The authors warn against oversimplification of experiences of continued presence, as significantly contrasting practical consequences commonly occurred within as well as between cases. The findings support the use of talking therapies based on personal meanings to help those disturbed by their experiences of presence.

PRACTITIONER POINTS

- Practitioners helping the bereaved with experiences of presence should not assume these are signs of pathology – they have varied and often healing consequences.

- In situations where experiences of presence cause distress, the problem is likely to concern relationship difficulties with the deceased.

- It is recommended that therapists help clients with distressing experiences of presence by working on the meaning of the relationship to the deceased.

INTRODUCTION

This paper is about experiences that may happen to the majority of people at some point in their lives - between 50% and 80% of people experience the presence of a deceased person who had been close to them when alive (Rees, 1971 and Weiner et al, 1996 respectively)[1]. The continued presence of the deceased may be experienced in any sensory modality - the bereaved person may hear a voice of the deceased, or sounds indicating their activity, experience an image, feel their touch, or smell them (Grimby, 1993). Even feelings of presence unspecified by any of the five senses are reported (James, 1902, reported in Leudar, 2001). These experiences have been thought of as "hallucinations" (especially in psychological medicine, cf. Sacks, 2012) but also as "continuing bonds", in for instance psychotherapy and counselling (cf. Klass et al, 1996). There is no neutral way of referring to them – each designation invokes an interpretive framework. This paper uses the term "experiences of continued presence" to focus on their phenomenal and pragmatic characteristics. We leave aside questions concerning the ontological status of these experiences, and ask how they become meaningful and what their consequences for the bereaved person are (cf. Leudar & Thomas, 2000, ch. 9).

Professional opinion on the value of these experiences is mixed. In his survey of "the hallucinations of widowhood", Rees (1971) reported that 68.8% of widows found the hallucinations helpful, and just 5.9% unpleasant (25.5% found them neither helpful nor unhelpful). Consistent with this, researchers in the field of bereavement studies have cited beneficial aspects. They have been associated with less loneliness (Glick et al, 1974), more

---

[1] These figures are based on studies conducted in the UK (Rees, 1971) and USA (Weiner et al, 1996). The number of persons experiencing continued presence may be even higher in other countries. For example, Yamamoto et al (1969) found that 90% of widows in Japan felt the presence of their deceased husbands.

restful sleep, mitigation of intense pain and loss (Parkes, 1972), and as providing guidance and encouragement for the bereaved (Conant, 1996). They have also been thought instrumental in helping to resolve any 'unfinished business' the bereaved has with the deceased (Klass, 1992; Klass, Silverman and Nickman, 1996), from conflict before the death, to saying goodbye when this was not possible. Bennett and Bennett (2000), in a study of widows, reported that "the presence of the dead" could result in "spiritual strength, practical help, or emotional comfort" (p.151). In another study of widows, Conant (1996) cited benefits to the bereaved including a "resolution of helplessness and feeling unsafe after the death", alleviating isolation through communication, and transforming the relationship with the husband to take the death into account. Experiences of continued presence then seem to be a means of coping with a disturbing reality rather than reality confusions (such as, e.g. mistaking imagination for perception).

A problematic side has, however, been noted too. Some work links experiences of continued presence to clinical depression, loss of reality and pathological grief (Kersting, 2004; Wells, 1983; Baegthe, 2002; Simon et al, 2011). Parkes (1972), despite documenting helpful aspects of the experiences, suggested that this was only the case within the first six months following the death. After that they were "illusions" indicative of pathological grief (Parkes, 1965). Just why some experiences of continued presence are happy and others painful and yet others indifferent has not been clear but will be considered below.

The current study is a part of a continuing project on hearing voices carried out at the University of Manchester. It is based on the work of the first author's PhD, supported by the Arts and Humanities Research Council. It aims to document the characteristics of experiences of continued presence and by doing so help to resolve long-standing controversies about the meaningfulness and consequences of them for the bereaved.

The study used qualitative methods in both data collection and analysis since these allow the researcher to uncover terms participants themselves use to represent their experiences

as well as the meanings with which they endow them. There is a good reason for doing this - there is growing evidence that the meaning of (hallucinatory) voices for the individual hearer determines their impact. For example, the meaning of voices has been shown to determine levels of distress in psychiatric patients (Birchwood and Chadwick, 1997; Close and Garety, 1998; Sayer et al, 2000; van der Gaag et al, 2003; Jones et al, 2003), to influence whether patients act compulsively on the commands of voices (Beck-Sander et al, 1997), and even to determine whether a voice-hearer becomes a psychiatric patient or not (Romme et al 1992, Honig et al, 1998; Pennings and Romme, 1996). In short, grasping the voice-hearer's interpretation of their voice is vital for understanding its consequences. In light of this we ask here how the meaning of voices, visions and other modalities of experiences of continued presence are managed, and how these meanings tie with the consequences for the bereaved.

METHOD

Participants

Informants & recruitment: There were 17 informants to the study. These are listed in Table 1 under pseudonyms. All lost someone close and had one or more experiences of their continued presence subsequently. The informants were resident in the UK, and most, but not all, were UK citizens. They were from a variety of backgrounds, religious and cultural and ranged in age from 20 to 82. More women than men chose to take part in the study (14 women, 3 men). Informants varied in the type of bond with the deceased (Table 2). The time that had elapsed since the death ranged from 1 year to 27 years, with a median of 3 years. Informants were recruited via an advert posted on the University website, and through the first author's work contacts.

Interviewers: The majority of the interviews were carried out by JH, a postgraduate student in her late twenties. A female research assistant, also in her twenties (JTB in transcripts) interviewed three of the participants.

<u>Interviews and analysis</u>

Narrative Biographic Interviews: The interviews were in a narrative biographic format. In such, informants are asked to tell the researcher about themselves in relation to the research theme – our informants were told that the interviewers were interested in experiences of continued presence in bereavement. The informants tell their stories with minimal intervention from the interviewer, encouraged to talk by continuers and occasional formulations (cf. Fitzgerald and Leudar, 2010). Leading questions are avoided in order to allow participants to use their own terms and meanings (Rosenthal, 1993). Where possible, there is a follow-up interview in which the interviewer asks informants questions seeking clarification and expansion. (In our study, this was possible in four cases).

Recording and Transcription: All interviews were audio-recorded. The total duration of the recordings was 2030 minutes (nearly 34 hours). The longest interview was 152 minutes, the shortest 26. The average length of interview was around one hour. The interviews were transcribed verbatim using Conversation Analytic conventions (see Jefferson, 2004).

Transcript Analysis: The interviews were analysed using Ethnomethodologically-inspired Conversation Analysis. Ethnomethodology offers tools for foregrounding structures of participants' accounts (see Garfinkel, 1967) and Conversation Analysis focuses on how language is used to accomplish particular activities in situ (see Sacks, 1992). Our focus was on what resources, linguistic or otherwise, the bereaved informants used to make experiences of continued presence meaningful on the occasion of the interview and beyond. Analytic disagreements were resolved in project data sessions.

RESULTS

We start with a brief outline of our results and then move to qualitative analysis of the interviews which is the heart of our paper. The modalities in which our informants experienced the deceased are provided in Table 1.

<Table 1 here.>

The comparison of our informants' experiences to those reported in surveys of spousal bereavements (Rees, 1971;   Grimby, 1993, 1998) reveals similarities and differences. In all studies, participants experienced continued presence of the deceased as just a feeling, or specified in any of the five senses. Moreover, most informants experienced the continued presence in more than one sensory modality (not necessarily at the same time). Which sense, however, carried the experience most often varied from study to study - possibly because of the varying characteristics of informants and the methods of collecting information.

Our first pass over the narratives identified several broad functions of the experiences of continued presence. These were;

- Helpful presence focusing on current problem (HPCP)
- Helpful presence resolving unfinished business (HPUB)
- A feeling of absence (FOA)
- Continuing fraught relationships (CFR)
- Saying goodbye (SG)
- Unclassifiable (U)

Table 2 shows the frequency of these functions in the 17 cases, as well as information about the type of relationship between the bereaved and deceased, and the approximate number of years that had elapsed since the death at the time of the interview.

<Table 2 here.>

Table 2 shows that our informants' experiences of continued presence followed the deaths of spouses, partners, children, parents, siblings, grandparents, an uncle, a cousin, an ex-boyfriend and a close family friend. 3 informants discussed experiences relating to more than one of these.

The most common broad function by far was a helpful presence focusing on a current problem, and this is consistent with past studies. Note, however, that most informants had experiences of more than one kind. We shall see these experiences were complex and each could have more than just one function. (Even a seemingly simple experience could have varied consequences and these could change over time.) We therefore turn to a qualitative analysis to demonstrate how we discerned these functions as well as their complexity. Our aim is to document those resources the bereaved use to make the experiences of continued presence meaningful and consequential.

Helpful presence focusing on current problem

12 bereaved informants reported that the experience was helpful with respect to a contemporary difficulty. Examples they gave included the encouragement needed to achieve a difficult task, being soothed to sleep, or helping to solve a mundane chore. The latter happened to Samuel. His grandmother had died 4 years before the interview. He experienced, at different times, her voice, images of her, and even smelled and tasted in the house the food she used to cook for him (when nothing was being cooked). In extracts 1 and 2 Samuel described an occasion on which hearing his deceased grandmother's voice helped him to solve a problem which was upsetting his grieving grandfather.

<u>Extract 1, Samuel</u>

218. Samuel: the <u>waste</u> disposal in the house wasn't working, my grandpa was like
219.   getting quite stressed about it because, erm, (.) he couldn't, that's what (I'm

```
220.        on about), he really sort of like caved in a bit and tiny little things like the
221.        waste disposal not working the television maybe like going, on the blink
222.        for like a second, .hh or, like half a day or something, really really like (    )
223.        would stress him, and I sort=of=like bent down to
224.        (1.0)
225.        look for the waste disposal, and I heard my grandma say, "it's at the back,
226.        it's at the back". And, just, I just heard her say those words, and as I looked
227.        towards the back I could see there was like a, thing that needed, needed to
228.        be turned, so it was as though like, she sort of guided me to fixing that thing
```

Samuel here recounts a situation with two problems. One is practical – the faulty waste disposal - the other is the emotional state of his grandfather who gets exasperated by problems of that kind (lines 219-223). The grandmother voice fits into this situation – it is clearly not a random hallucination but is instead relevant to the situation and its problematic aspects. First, it orients to the problem which is the theme of the episode and second, it points to the practical solution. In Sam's own formulation, it 'guides' him towards the solution (line 228). So the voice was helpful to Samuel and by implication to his grandfather, in removing a source of exasperation. The question is, what is it that makes the voice helpful rather than an irrelevant distraction? One condition of its helpfulness is the relevance of the words to the situation. But this is not enough - the second condition is its enabling engagement with the problem at hand – it points to a solution Samuel is already seeking. Such constructive engagement is not inevitable – Leudar and Thomas (2000) and Thomas, Bracken and Leudar (2004) reported on bereavement voices which were relevant to the situation, as with Samuel's, but engaged in a way detrimental to the bereaved person by discouraging them and abusing them (see Leudar & Thomas, 2000, chapter 9).

Moreover, the salient characteristic of the voice Samuel hears is that it is not 'anonymous' but sounds like his grandmother (cf. Leudar et al, 1997). This being so, the advice 'it's at the back' (line 225) is not just a comment that anyone could have made but creates a link to the past, to the way his grandmother typically acted and was. Samuel stresses the link in Extract 2.

Extract 2, Samuel

```
60.        Samuel: erm and, if I had a problem, I think there were probably
61.               quite a few occasions where, erm I was worried about some things
62.               or whatever when I was growing up and, if I told, my grandma
63.               she'd always like, say eat with me and you know the next day
64.               she'd find a solution to, any problem really, no matter how big. .hh
65.               or small and erm, .thh
```

He constructs a representation of her as an ever-helpful person, and links this memory to her 'continued presence'. In extract 2, he formulates this relationship as a place where he would take his problems when he was growing up, and his grandmother as responsive, nurturing and problem-solving (line 63-65). He conveys this with the extreme case formulations "no matter how big...or small" (line 64-65), and "she'd *always*" help in this way (line 63). The voice acquires sense as a concrete and vivid continuation of this supportive agency in Samuel's life. He links the current problematic situation to the past when his grandmother was present to help – as a result, now even though not alive, she is there to help. The voice of his grandmother then is a link to the past that transforms the problematic episode, helping to alleviate both his grandfather's disabling grief and Samuel's sense of loss. His grandmother's voice transforms the situation practically and emotionally. It helps with the sense of loss and it does so by altering the situation towards what it might have been before his grandmother's death.

The helpful nature of the voice then is accomplished using several sources of meaning. Firstly, the voice itself is *meaningful* language, not just a sound. "It's at the back, it's at the back" (Extract 1, lines 225-226) is literally an informative which acquires its pragmatic force (guidance) in the concrete context that Samuel provides - he is in his grandmother's house, specifically her kitchen, with an intention to fix the appliance. The information that the voice carries fits this environment as is indicated by the ellipsis in the voice – the 'back' is the back of the appliance, 'it' is something relevant to fixing it. This is the second source of meaning, the relationship of the voice to the immediate environment. The third source is the family

history, which is made relevant and consequential in the here-and-now of the situation. All of these sources combine so that in Samuel's words, the voice guides him (Extract 1, line 228).

To summarise, Samuel heard his grandmother's voice at a time when her knowledge of the house was needed. The voice was helpful because it fitted into the situation in which Samuel found himself, and was facilitative of his intention. In the other cases in this category, the experience of continued presence helped a person to cope with something in their life that was rendered more challenging because of the death of the person close to them – the loss of that particular person's support or knowledge. In all of the instances the experienced presence of the deceased was helpful because that particular relationship *could* help with the problem or part of the problem. Samuel's grandmother in life could help with the appliances in her own house, but not with, for example, his work. The type of help on offer fitted with the skills and capabilities of the deceased in their life and the nature of the relationship between the bereaved and deceased while both lived. The experiences in this category were, at the very least, facilitative of the person to continue with their immediate activities and life. Note also in Samuel's example that the practical help provided by the voice helps with his feeling of loss – vicariously, his grandmother is there again when she is needed.

As we noted above, however, not all experiences of continued presence are helpful, even though in many respects they are like those of Samuel. In two cases reported in Leudar & Thomas (2000, ch. 9) the voices of a deceased father and a husband were both relevant to each situation but were unhelpful because they extended into the present the past family problems. In four of our informants the experience of continued presence did just that. [2] We now turn to one of them.

Continuing fraught relationships

---

[2] We are writing about relationships as if they were either happy or agonistic. However, our informants' relationships were complicated, and what the experience of continued presence did was to bring *some* of the relationship history into the present.

Julie heard the voice of her deceased mother on a regular basis and this was not pleasant.

Extract 3, Julie

456.	Julie:	erm, then she started calling me names like, "Slag" [and "Slut"]
457.	JH:	[right]
458.	Julie:	and "Whore"
459.	JH:	right
460.	Julie:	and telling me I wasn't fit to live
461.	JH:	right
462.	Julie:	"take all your tablets"

As with Samuel's grandmother-voice, Julie's voice is not anonymous, but is aligned with her deceased mother. Moreover, again, as language, it is relevant to Julie's situation – she is under a psychiatrist at the time and is prescribed pills. The voice, however, engages abusively rather than constructively with her predicament, telling her to "take all her tablets" (line 462). The examples she gives, "slag", "slut", and "whore" (lines 456-458), have clear general meanings – they are gender-specific insults referring to sexuality. The language of this voice is consistent with findings that voices are gender-specific in their insults (Legg and Gilbert, 2006). These general meanings however acquire specific sense in the context of Julie's story. Julie situated the mother voice in the history of their relationship, emphasising three of its aspects;

- Her older brother was her mother's favourite and Julie felt she was an unwanted child;

- She discovered that she was named after a woman her father was having an affair with;

- She took a different name but her mother and the rest of her family insisted on calling her by her original name. By virtue of her name she was caught in the crossfire between her father and mother.

The voice as described by Julie extends her mother's rejection of her from the past into the present – like Samuel, she is a 'practical historian'.[3] Setting up links into the past to provide

---

[3] A 'practical historian' makes information about the past consequential in the current settings, and in

specific meanings to experiences of continued presence was a general characteristic of these experiences across the cases.

Julie discussed serious consequences of her experiences of continued presence:

Extract 4, Julie

636.	Julie:	It makes me question, is it true?
637.		(2.0)
638.	JH:	right
639.		(5.0)
640.		So it makes you think, what, what she's saying to you, might be true?
641.	Julie:	yeah.
642.	JH:	right
643.		(28.0)
644.	Julie:	when you hear a thing often enough
645.	JH:	mm:.
646.		(4.0)
647.		Mm::.

The long silences in this part of the interview (line 639, line 643) are occasionally followed by formulations by JH of what Julie has said. These are designed to display understanding and to encourage Julie to continue (cf. Fitzgerald and Leudar, 2010). Formulations warrant acceptance or rejection on the next turn, and Julie accepts the formulation (line 640) with a "yeah" (line 641). Julie warrants the voice's power to make her doubt herself in this way – it is the repetition of its message. This she implies when she says "when you hear a thing often enough" (line 644), leaving this sentence incomplete for JH to draw her own conclusions. One of the consequences was then that Julie begun to see herself in the insulting terms used by the voice.

This voice was, not a simple memory of the past, since Julie's mother did not use these words against Julie when alive. The rejection of Julie by her mother was implied but never so explicit. Rather, what the experience of continued presence did was to distil the hostility of their relationship, crystallising it in abusive words. A similar distillation was visible in the two other cases that reported hostile voices. So it seems that the hostile experiences of

---

doing so enriches the present (see Leudar and Nekvapil, 2011).

continued presence are not mere repetitions of what happened in the past, but rather transform and extrapolate memories to fit the present circumstances. But then the helpful experiences are not simple repetitions either, as we have seen in Samuel's case.

In both instances analysed so far, experiences of continued presence were voices meaningful to the bereaved person. There were three obvious sources of this meaningfulness – the linguistic content and its relevance to both the concrete situation at hand, and to the history of the relationship between the bereaved and the deceased. The nature of that relationship influenced whether the experience was constructive or hostile but the relationship itself was *taken for granted by both informants and apparently not changed by the experience*. This was not always so. Some experiences of continued presence helped the bereaved to resolve a problem in the relationship with the deceased.

Helpful presence – resolving unfinished business

Aggie's boyfriend died of a congenital heart problem. He knew that he was terminally ill but concealed this and instead broke-off their relationship, seemingly in an attempt to spare her the pain. They were partly reconciled shortly before his death, but hearing his voice since the death sustained the reconciliation after his death.

Extract 5, Aggie

277.	Aggie:	things like "I'm sorry" an "now I understand why things happened"
278.		(.) he never said that heh heh
279.	JTB:	heh heh
280.	Aggie:	he never properly apologised for everything
281.	JTB:	mm
282.	Aggie:	so: (.) because the last part of the relationship (.) went quite badly,
283.		like he knew he was dying an he pushed me away
284.	JTB:	mm
285.	Aggie:	an I just thought (.) that he just didn't care anymore (.) an then just
286.		before he died he broke down and got real upset and said "I want
287.		to be with you, blah blah blah" an then like "what did I do?" (.)
288.		because it had been like six months
289.	JTB:	yeah
290.	Aggie:	of: (.) a complete nightmare (.) an (.) he never said sorry for it (.)

291.   really (.) like not properly said sorry (.) an: like he- he's- st- telling
292.   me he understands why everything I've done, why I did it (.) an he
293.   never understood nothing (.) three four years he never understood
294.   anything (.) so

Klass (1992) and Klass, Silverman and Nickman (1996) reported that resolving unfinished

business is an important function of continuing relationships with the deceased.

Conversation analysis shows exactly how this may be accomplished. The problem that the

voice resolves for Aggie is "being pushed away" (line 283) by her late boyfriend, resulting in

"six months of a complete nightmare" for her (lines 287-290) for which he "never" (line 290)

apologised when alive. Aggie repeats several times that he "never" apologised properly for

pushing her away, indicating a significant underlying anger about his actions in the six

months preceding his death. The voice (here Aggie gives a general example of the type of

things the voice says to her rather than a specific instance) which uses the words "I'm sorry"

(line 277), has the pragmatic force of an apology within the context of her problem. Aggie

groups these words together with another utterance of the voice, "now I understand why

things happened" (line 277) and this informative seems to be part of the apology.

But this was not the only unresolved problem – she also spoke to the interviewer about

feeling very guilty about her own actions;

<u>Extract 6, Aggie</u>

355. Aggie: he got incredibly upset with the stuff that was happening to me
356. JTB: mm
357. Aggie: cos I've had pff I've had a lot going on for ye(h)ars ha ha and not much of it
358.   positive (.) but I've just (.) and some experiences when I was little or some
359.   are his experiences when he was little
360. JTB: mm
361. Aggie: an (.) an something came up an I had to be involved with the police an stuff
362.   and that made him incredibly set- upset an he ended up in hospital
363. JTB: mm
364. Aggie: so it was kinda- not like an asthma attack but it's like (.) he can't breathe an
365.   his er chest was tight an
366. JTB: mm
367. Aggie: so he needs attention like he really needs steroids or whatever
368. JTB: yeah
369. Aggie: so I put him in hospital for that so for a long time I felt "oh I've killed him"
370.   cos it was only (.) six weeks, two months after (.) like before he died when
371.   all that happened so (.) I kinda blamed myself for a lot of things but (.) I'm

372.   kinda letting go of a lot of that now

In extract 5, Aggie indicated that hearing her boyfriend's voice apologise to her helped her with unresolved anger she felt towards him. In Extract 6, she describes how the voice helped her to resolve enormous guilt and worry. Before the voice offered her forgiveness, she blamed herself for his death (line 371). She conveyed this through reference to what had happened two months before his death, and the 'directly-reported' thought, "oh I've killed him" (line 369). This is a real burden, and hearing the voice initiated a process of self-forgiveness - "I'm kinda letting go of a lot of that now" (lines 371-372).

To summarise, Aggie contextualised her voice in her relationship history with her late boyfriend and within this context the voice was intelligible as an apology, and offered her understanding and forgiveness for her own actions. Aggie's problem was different to Samuel's – the problem was in the relationship itself, and the voice helped her to resolve significant confusion about the meaning of their actions towards each other before his death and in effect mend the relationship retrospectively. As in Samuel's case, the type of help on offer was entirely appropriate to the relationship with the deceased. Indeed, it was only her boyfriend that *could* help with this particular difficulty – we can imagine a friend or therapist might say what they think her boyfriend would have said to her: that he probably was sorry for the upset he caused her, and that he would have forgiven her for the things she'd done. But the voice helps Aggie because its concreteness makes the reconciliation with her boyfriend interpersonal. Indeed, in this category experiences of presence were at their most transformative and healing.

The 'saying goodbye' experiences reported in table 2 could also be viewed as a form of resolving unfinished business with the deceased, as in some cases they were taken to be a belated farewells.

Overall, our analysis revealed that even within individual cases experiences of presence could have diverse and contrasting functions. Aggie, for instance, also reported that

sometimes her ex-boyfriend's continued presence increased her pain by foregrounding his absence.

A feeling of absence

As Grimby (1998) observed, an experience of continued presence that may be pleasant at the time, sometimes serves to emphasise the loss, resulting in pronounced grief. This was described by 3 of our informants. The following example comes from Aggie's interview.

Extract 7, Aggie

```
93.     Aggie: so it's kind of comforting but- (.) like once (.) I like (.) really really really
94.            thought he was there like could literally feel him
95.     JTB:  mm
96.     Aggie: and could hear him and then I woke up and turned round an I jus:t (.)
97.            couldn't stop crying an I was like "oh god" heh heh (.) so it was a bit (.) cos
98.            it feels like it's actually (.)
99.     JTB:  mm it felt so real
100.    Aggie: yeah yeah (.) so: (.) mm (.) heh
```

Aggie begins here by formulating the gist of her experiences of continued presence as being comforting (line 93) but downgrades the comforting element by prefacing it with "kind of" (line 93). It turns out that some such experiences may be comforting when they take place but then have anything but comforting consequences - Aggie draws the contrast as follows. The experience is described as emotionally intense and the vividness of the feeling of presence is emphasised through repetition "I...really really really thought he was there" (lines 93-94) and through the use of "literally" (line 94), as well as the added fact that she was feeling him there as well as hearing him (lines 94-96). This description suggests that there was a unique 'literal' quality to this experience of continued presence - Aggie in fact accepted JTB's formulation "so real" (line 99) at the end of this extract (line 100). By contrast, the almost real presence was followed by extreme distress as the realisation that he was dead hit her – she "couldn't stop" crying as a result (line 97). The intense grief is also captured with the

exclamation "oh god" (line 97), the seriousness of which is hedged with the laughter - "heh heh" (line 97) – that follows.

This example illustrates that experiences of continued presence may be followed by a gaping absence, provoking shock and grief of a magnitude that almost repeated the original bereavement. These experiences occurred at a time when the bereaved person was not thinking about the death, or feeling intense grief and the presence brought the lost person and their death into the awareness of the bereaved. This grief amplification tended to occur relatively early in the bereavement – a matter of days or weeks in two cases, and within the first six months in Aggie's case.

Intriguingly, the feeling of absence happened in cases where the presence was at other times very helpful. In fact, the feeling of absence itself encapsulates this paradox – it is both comforting and painful, depending on a temporal dimension. The experience Aggie describes here has contrasting consequences – it is both lovely and painful – and which one is most relevant depends on Aggie's time-frame. In the moment it happens, her boyfriend is poignantly 'restored' to her, but only to be taken away again moments later. In fact, the analysis of all the cases revealed that the complexity of the consequences of these experiences in grief should never be underestimated – as, for example, momentary decreases in loneliness may quickly be superseded by raging grief. This demonstrates that it may not be possible to say unequivocally whether experiencing presence is a good thing for the bereaved, even within a single case.

Complications – the difficult to categorize experiences

Five informants reported experiences of continued presence that were not easy to slot into the five functions we identified. This difficulty is, however, revealing of the nature of the experiences we are analysing.

Tracey lost both her father and husband four years before the interview, within six months of each other. Both continued to be present in her life in ordinary ways. She reported holding imaginary conversation with them, and both remained significant others included in ordinary interactions and events. As we saw with Aggie (Extract 7) this psychological presence can ironically foreground the absence (Extract 8).

Extract 8, Tracey
22.	Tracey:	.hh=um::<, (.) I've had that, quite a few times, you catch yourself short,
23.		because it's like four years since my dad died, and it'll be, four years at
24.		Christmas that my husband died. Even now, four years down the line you
25.		suddenly like catch yourself short where you'll say, I must tell, Dad and
26.		then you think "oh shit, they're not here to tell".
27.	JH:	yeah
28.	Tracey:	that is a very common thing
29.	JH:	kay
30.	Tracey:	and I think that's because (.) it's just ingrained into you that they're there
31.	JH:	yeah, yeah

The two deceased are not present in this mundane way just for Tracey but also for others in her family (Extract 9). The bereavement is not just an individual matter, but a social one. The next extract shows how the deceased may be present in others who are living – in this case, Tracey and her mother's experiences of their sons.

Extract 9, Tracey
36.	Tracey:	but with my husband it's a bit strange because I see it more in my son,
37.		he'll do something, and you're like "woah". (.) that's just how he would've
38.		done it.
39.	JH:	okay
40.	Tracey:	and I know that my mum gets that a lot with my brother. That she'll see
41.		my dad, in him.
42.	JH:	okay

These mundane experiences of continued presence are formulated as arising from the agency of the living. The bereaved actively include the deceased in their lives through remembering, with the memories invoked by situations. The deceased do not act as independent agencies in these situations. As Tracey pointed out, this kind of continued inclusion is commonplace. Why then did she choose to participate in our study? The reason was that she also reported experiencing an intense and distinctive smell of her husband, arising suddenly and involuntarily (not shown here). She reported that this was so strong

that it arrested her attention: it was "all I can smell". She stressed the unusual nature of this experience, characterizing it as "bizarre" and "freaky". She had this experience only in very specific and appropriate circumstances, shortly after meeting socially with his school-friends, whom she had only seen in her husband's company when he had been alive. The smell in these circumstances constituted a continuation of the deceased and arguably warranted her being with the friends. Tracey's account was not difficult to analyse, but it was an outlier in terms of the five common functions. This was because in the other experiences of continued presence we analysed, the deceased was an 'agent' who participated actively in the situation. In this case, the deceased is indicated by the smell as a passive presence.

So the significance of Tracey's case is two-fold. Firstly, the sensory nature of the experiences of continued presence matters (it differentiates them from 'mere' remembering). Secondly, the agency of the deceased is significant too. In experiences of continued presence the deceased is not just remembered or invoked by the situation but is endowed with agency and actively participates in the situation.

The fact that some experiences of continued presence are not easy to categorise indicates two things. One is the primacy of a detailed analysis over fitting experiences into categories. The other is a need for an extensive narrative data base. Categories of function emerge from analysis of cases and so the set reported here is open-ended and can be revised. Nevertheless even the unclassifiable cases were reported as meaningful experiences and they drew on the same sources of meaning as the classifiable ones; the language and sound of a voice, the immediate environment, the person's immediate activities, and, most importantly the relationship history with the deceased. All our informants acted as 'practical historians' to make experiences of continued presence meaningful.

DISCUSSION

The functions of experiences of continued presence were identified by paying attention to the ways in which participants contextualised their experiences thereby making them intelligible, meaningful and consequential. Take this context away, and the experiences lose much of their sense and so might be mistaken for 'hallucinations'. All our bereaved acted as 'practical historians' – setting up links to their personal histories to make an experience of presence intelligible. The impact of an experience relied on meanings contingent on the relationship with the deceased. This meaning could change over time as new circumstances arose. Participants were active in this process of meaning-making and drew on several sources of meaning. Most commonly, these were the phenomenal qualities of an experience of presence (such as the language of a voice, the content of a vision), the person's immediate environment and activities, and, as highlighted, their relationship history with the deceased. These sources of meaning contributed to the functions of the experiences of continued presence but the precise contributions were individual and varied within as well as across cases. The current project demonstrates the importance of looking closely at individual cases and instances of the phenomena in order to understand their consequences.

By studying the experiences of continued presence in a wider variety of bonds (i.e. not only spouses) we expand the work of Rees (1971) and Grimby (1993, 1998). Moreover, the methodology enabled a more nuanced picture of these experiences to emerge - many of our informants found the experiences helpful some, but not all of the time. The help could centre on an everyday problem faced by the bereaved or relate to the past relationship with the deceased, resolving conflict, anger or guilt. The experiences of continued presence can be problematic in several ways. They could lead to a profound 'feeling of absence' or cause problems by continuing the strife of a relationship. The phenomenon of the 'feeling of absence' demonstrates that their vividness, particularly early in the bereavement, could lead to very raw feelings of loss.

Our findings also confirmed Klass et al's (1996) observation that resolving unfinished business with the deceased can be an important element of these experiences. However, this is clearly only part of the picture.

The range of functions reported here have implications for common theories of hearing voices and experiences of presence. The experiences that were documented could not accurately be described as 'hallucinations' if hallucinations are understood as false perceptions, acquiring meaning only as symptoms of an underlying mental illness. This is for several reasons. The voices, visions, and other experiences of presence documented were meaningfully connected not only to the concrete environments in which they happened, but also to a person's past, specifically to their relationship history. Secondly, the experiences of presence were not inevitably problematic. Where the experiences were distressing, the problem was not that the person was 'hallucinating' or relating to a dead person *per se*, but dwelt in the relationship to the deceased. Moreover, the meaning of this relationship was not static but could change with the experiences, as demonstrated in this analysis by the interview with Aggie. This study also joins others in demonstrating that such experiences as voices and visions can happen to persons free from serious psychological problems (only one informant was under psychiatric supervision). The hallucinations of bereavement reported here were not inherently pathological but rather held both healing and destructive potentials.

All of the experiences of presence reported were continuations of one or several aspects of the relationship with the deceased before the death. But were the possibilities for the experiences wholly determined by what the relationship was in life? No, because it was possible for the meaning of the experiences to transcend this, for both constructive and damaging ends. The apologetic voice that Aggie heard for example both continued from the relationship problems with her boyfriend before he died but also offered something new – the apology and reconciliation. Although in Julie's case the theme of rejection was continuous, Julie's voice used linguistic forms that her mother did not use against her in life to undermine

her. In light of the findings reported here, the authors recommend that theories of the continuing bond are developed in order to encompass; 1) transformations in relationships as well as continuations, and 2) consequences which may be varied, unique and personal (and not constrained to specific helpful functions such as mitigating loss).

Given that the consequences of experiences of presence depending on meaning, and that this meaning can change, there is a strong remit for talking therapies to aid those with distressing experiences of presence. We learnt from examining the functions in close detail that the problem with an experience of presence lies in what the relationship with the deceased has come to mean. A fruitful avenue for therapy could be for therapist and client to work on the meaning of the relationship with the deceased. It is important not to overlook that the consequences of the experiences of presence, whether pleasant or unpleasant, were mediated by the response of the bereaved. Samuel was active in allowing the voice to guide him – he may have been less trusting of the information if the voice had not sounded like his grandmother, or if she had a reputation for practical jokes. The relationship history with the deceased does not *determine* the response of the bereaved to their experience of presence but *structures* it and makes certain personal consequences more likely. A role of therapy then might be for the bereaved to experiment in altering long-established responses to the deceased that are heightening the undermining aspects of that relationship.

The experiences of continued presence documented in this analysis were complex in their consequences and in fact often resisted a simple classification as 'helpful'/'unhelpful'/'neutral'. A methodological implication is that cases need to be examined in detail to determine whether the experience has benefits or otherwise, as well as to understand the changes in this, both temporally and situationally.

This study is not intended to be representative of all instances of experiences of continued presence. What it does demonstrate is that the complexity of experiences of continued presence should not be underestimated, and it begins to document their possible functions. It

also provides a method – establishing the sources of meaning that informants use for their

experiences - that can be used as a tool for understanding further cases.

References

Baethge, C. (2002). Grief hallucinations: True or pseudo? Serious or not? *Psychopathology*, 35, 296-302.

Beck-Sander, A., Birchwood, M. & Chadwick, P. (1997). Acting on command hallucinations: A cognitive approach. *British Journal of Clinical Psychology*, 36, 139-148.

Bennett, G. & Bennett, K.M. (2000). The presence of the dead: An empirical study. *Mortality*, 5, (2), 139-157.

Birchwood, M. & Chadwick, P. (1997). The omnipotence of voices: Testing the validity of a cognitive model. *Psychological Medicine*, 27, 1345-1353.

Close, H. & Garety, P. (1998). Cognitive assessment of voices: Further developments in understanding the emotional impact of voices. *British Journal of Clinical Psychology*, 37, 173-189.

Conant, R. D. (1996). Memories of the life and death of a spouse: The role of images and sense of presence in grief. In D. Klass, P. R. Silverman & S. L. Nickman (Eds), *Continuing Bonds; New understandings of grief*. Washington; Taylor & Francis.

Fitzgerald, P. and Leudar, I. (2010). On active listening in person-centred, solution-focused psychotherapy. *Journal of Pragmatics*, 42, 3188-3198.

Garfinkel, H. (1967). *Studies in Ethnomethodology*. Cambridge; Prentice Hall.

Glick, I. O., Weiss, R. S. & Parkes, C. M. (1974). *The First Year of Bereavement*. New York; Wiley.

Grimby, A. (1993) . Bereavement among elderly people. *Acta Psychiatrica Scandinavica*, 97, 72-80.

Grimby, A. (1998). Hallucinations following the loss of a spouse: Common and normal events among the elderly. *Journal of Clinical Geropsychology*, 4, 1, 65-74.

Honig, A., Romme, M. J., Ensink, B. J., Escher, S., Pennings, M. & Devries, M. (1998). Auditory hallucinations: A comparison between patients and non-patients. *Journal of Nervous and Mental Disease*, 186, 646-651.

James, W. (1902). *The varieties of religious experience*. London; Longmans.

Jefferson, G. (2004). Glossary of transcript symbols with an introduction. In G.H. Lerner (ed), *Conversation Analysis, Studies from the first generation*. Amsterdam; John Benjamins.

Jones, S., Guy, A. & Omrod, J. A. (2003). A Q-methodology study of hearing voices: A preliminary exploration of voice hearers' understanding of their experiences. *Psychology and*

Psychotherapy, 76, 189-209.

Kersting, A. (2004). The psychodynamics of grief hallucinations – A psychopathological phenomenon of normal and pathological grief. *Psychopathology*, 37, 50-51.

Klass, D. (1992). The inner representation of the dead child and the worldviews of bereaved parents. *Journal of Death and Dying*, 26, 4, 255-272.

Klass, D., Silverman, P.R., & Nickman, S. L. (1996). *Continuing bonds; New understandings of grief*. Washington; Taylor & Francis.

Legg, L. & Gilbert, P. (2006). A pilot study of gender of voice and gender of voice hearer in psychotic voice hearers. *Psychology and Psychotherapy,* 79, 517-527.

Leudar, I. (2001). Voices in history. *Outlines*, 1, 5-18.

Leudar, I. and Nekvapil, J. (2011). Practical historians and adversaries: 9/11 revisited   *Discourse and Society*, 22, 66-85.

Leudar, I., Thomas, P., McNally, D. & Glinski, A. (1997). What voices can do with words: Pragmatics of verbal hallucinations. *Psychological Medicine*, 27, 885, 898.

Leudar, I., & Thomas, P. (2000). *Voices of reason, voices of insanity*. London; Routledge.

Parkes, C. M. (1965). Bereavement and mental illness, Part 1. *British Journal of Medical Psychology*, 38,1.

Parkes, C. M. (1972). *Bereavement.* London; Penguin.

Pennings, M. & Romme, M. (1996). Hearing voices in patients and non-patients. In M. A. J. Romme (Ed), *Understanding Voices.*

Rees, W. D. (1971). The hallucinations of widowhood. *British Medical Journal*, 4, 37-41.

Romme, M. J., Honig, A., Noorthoorn, E. O. & Escher, S. (1992). Coping with hearing voices: An emancipatory approach. *British Journal of Psychiatry*, 161, 99-103.

Rosenthal, G.. (1993). Reconstruction of life stories. In R. Josselson & A. Leiblich (eds). *The narrative study of lives*. London; Sage.

Sacks, H. (1992). *Lectures on Conversation.* Oxford; Blackwell.

Sacks, O. (2012). *Hallucinations.* New York; Picador.

Sayer, J., Ritter, S. & Gournay, K. (2000). Beliefs about voices and their effects on coping strategies. *Journal of Advanced Nursing*, 31, 1199-1205.

Simon, N. M., Wall, M., Keshaviah, A., Taylor Dryman, M., LeBlanc, N. J. & Shear, M. K. (2011). Informing the symptom profile of complicated grief. *Depress Anxiety*, 28 (2), 118-126.

Thomas, P., Bracken, P., Leudar, I. (2004). Hearing voices: A phenomenological-hermeneutic approach. *Cognitive Neuropsychiatry*, 9 (1/2), 13-23.

Van der Gaag, M., Hageman, M. C. & Birchwood, M. (2003). Evidence for a cognitive model

of auditory hallucinations. *Journal of Nervous and Mental Disease.* 191, 542-545.

Weiner, L., Aikin, A., Gibbons, M. B., Hirschfeld, S. (1996). Visions of those who left too soon. *American Journal of Nursing*, 96, 9, 57-61.

Wells, L. A. (1983). Hallucinations associated with pathological grief reaction. *Journal of Psychiatric Treatment and Evaluation*, 5, 259-261.

Yamamoto, J., Okonogi, K., Iwasaki, T. & Yoshimura, S. (1969). Mourning in Japan. *American Journal of Psychiatry*, 125, 12, 1660-1665.

Table 1 – *Participants to the study and modalities of experiences of continued presence*

Name	voice	fop*	vision	signs[4]	smell	touch/ tactile	taste	other sounds
Clare	•	•	•	•	•	•		
Samuel	•		•		•		•	
Esme	•			•		•		
Julie	•	•						
Isaac	•		•	•				
Inge	•	•						
Tracey					•			
Esther				•				
Sade			•		•			
Jude			•	•	•			
Sarah		•				•		
Samira		•				•		
Aggie	•	•		•				
Matt	•							
Kelly			•					
Heena	•	•						•
Linda	•	•						
TOTALS	11	8	6	6	5	4	1	1

*fop= general feeling of presence

---

[4] Signs were happenings that were linked indexically to the deceased as evidence of their continued agency. For example, flickering lights were attributed to a deceased husband.

Table 2 – *Nature of bond to deceased, years since death, and broad function*

Name	Significance of deceased	Years since death	Broad function*					
			HPCP	U	CFR	SG	FOA	HPUB
Clare	Grandmother	11	•					
	Cousin	3	•			•		
	Grandfather	1	•					
Samuel	Grandmother	4	•			•		
Esme	Father	6	•					•
Julie	Mother	6			•			
Isaac	Mother	3	•				•	
	Father	2.5	•	•				
Inge	Boyfriend	2		•				
Tracey	Husband	3	•	•				
Esther	Husband	6		•				
Sade	Ex-boyfriend	2					•	
	Family friend	2.5				•		
Jude	Brother	4	•					
Sarah	Son	27	•					
Samira	Uncle	2		•				
Aggie	Boyfriend	1	•				•	•
Matt	Father	6			•			
Kelly	Grandfather	2				•		
Heena	Grandfather	5			•			
Linda	Husband	5.5	•		•			
TOTALS	--------------	---------	12	5	4	4	3	2

*For the functions in full, please see the list above Table 2.