Abstract

Reports of supernatural experiences in hospitals by nurses and doctors are often presented as Anomalous/Paranormal Experiences (APE) and will include apparitions, odd coincidences, death-bed visions and other anomalous phenomena. Some visions appear to be dead relatives of patients who have come to assist dying patients and give comfort to them through the dying process. Parapsychology researchers attempt to determine the relationship between such experiences and the psychological factors that may contribute to explaining them. For example, recent research investigated the correlation between certain types of perceptual experiences and nurses’ job stress, proneness to hallucinations and psychological absorption. Such research is conducted from the perspective that supernatural experiences are hallucinations and are produced by the brain in response to stressors and proneness to cognitive misattribution. Current research into this area is limited to attempts to explain such phenomena without considering an alternative hypothesis that spirits are independent of hallucinations and have ontological status. Ethnographic research, by contrast, with the observation and collection of data from clinical case files on a day-to-day basis strongly suggests an alternative hypothesis. Patients presenting with a wide variety of emotional, psychological and psychosomatic problems are often found to be influenced by ‘earthbound’ spirits of the deceased who have attached themselves to the patient. An earthbound spirit is one that has not progressed to a spirit realm after the death of the physical body. A wealth of evidence to support the theory that the spirit survives the death of the physical body has been accumulated by the Society for Psychical Research and other scientific institutions since 1882. Dialogue with earthbound spirits reveals that many of them were attracted to their living ‘host’ during a hospital visit or as an inpatient. Treating the attached spirit and the affected host is known as Spirit Release Therapy (SRT). A recent SRT training course in detecting and releasing earthbound spirits from a local hospital revealed several examples. However, these encounters were spontaneous and not part of an experimental protocol and therefore none of those engaged in the detection and release of these spirits had access to death certificates, with the consequence that they could not be validated by external evidence at that time. Acknowledgement of the evidence for the ontological status of earthbound spirits has far-reaching implications. For example, nurses, doctors and other hospital staff who witness such
phenomena could be better educated in how to deal with them, rather than be deemed to be ‘under workload stress’ or prone to hallucinations. In addition, an understanding of the process of dying where the spirit leaves the body would no longer be regarded as something ‘supernatural’ or ‘anomalous’ or ‘paranormal’, but normal and natural in agreement with F.W.H. Myers’ scientific framework of ‘expanded naturalism’. If every hospital had a Soul Rescue Group or Spirit Release Circle then, should the hypothesis be supported with empirical evidence, perhaps much suffering could be alleviated for trapped earthbound spirits and their unsuspecting living hosts. Further research is needed in order to determine the validity or otherwise of this avenue of investigation into the occurrence of such phenomena.

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