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**Mediumship and Mental Health:
Investigating Spirit Communication and the Importance of Integration**

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Abstract

Sensitivity to paranormal phenomena can be a source of emotional, mental and psychospiritual stress for individuals demonstrating verified mediumistic abilities, yet integrating these anomalous experiences in a healthy, affirming manner can reduce distress and potentially deflect egodystonic diagnoses of pathology. Because mediums can relay information which appear to be otherworldly from meditation, during trance, or by automatic writing and painting, health professionals have diagnosed mediums with mental disorders such as dissociative identity disorder and schizophrenia. This overreliance on pathology to explain anomalous experiences is troublesome and can cause severe distress to individuals demonstrating extrasensory capabilities. This paper was written to understand my own anomalous experiences and is designed to provide validity and professionalism to the practice. As the field of mental health continues to evolve, evidence supporting mediumship as a beneficial practice along with the importance of integrating this non-ordinary state of consciousness is becoming more socially accepted, and a transpersonal approach to treatment through veridical investigation and nurturing guidance is preferred over a traditional reliance on delimiting Western applications.

Keywords: Dissociation, Integration, Mediumship, Psychology, Transpersonal

Mediumship and Mental Health:**Investigating Spirit Communication and the Importance of Integration**

Mediums are said to act as the “go-between” for “spirit communication” by deceased entities (discarnates) to other living beings (Kripal, 2014, p. 282) and may be characterized by anomalous neurological patterns associated with trance and non-trance states that can be seen as a form of dissociation (Hageman et al., 2010; Oohashi et al., 2002; Peres et al., 2012). These trances may occur in varying degrees of wakefulness and are said to be abnormal states of consciousness where the medium is either unaware of external stimuli taking control of their body or is selectively responsive to receiving messages and information from discarnates (Barušs & Mossbridge, 2017; Cardeña, 2014; Krippner, 2005).

Several factors indicate that forms of mediumship—as non-ordinary states of consciousness (NOSC)—do not reflect a need for pathological diagnoses, nor are natural occurrences for mediums inherently negative (Barušs & Mossbridge, 2017; Ludermir & Lewis, 2001). Studies presenting evidence of authentic mediumship demonstrate how these individuals experience distinct neurological correlates when communicating with discarnates, and that their information is largely sound, which makes these and other NOSC different from mental disorders (MDs) (Bastos et al., 2015). Arguments supporting the integration of mediumistic abilities for individuals experiencing anomalous information reception (AIR) and transfer (AIT) point to a reduction of distress and deflection of pathological diagnoses (Beischel et al., 2015; Beischel & Schwartz, 2007; Delorme et al., 2013).

It should not be assumed, however, that mediumship is a unitary phenomenon (Rhine, 1945; Thouless & Wiesner, 1946); referring to AIR and AIT as manifestations of one single paranormal capacity. According to Marvan and Polák (2017), unconscious states of mental

receptivity possess aspects of “phenomenality” (Block, 2001) and the experiential component of transference is a result of both its phenomenal characteristics as well as the conscious interpretation of anomalous information. Morselli (1894) explained:

[t]here is no doubt that consciousness depends on physical conditions, which in part are well known (biological determinism of the psychic fact). The knowledge of these conditions, however, does not contain the solution of the problem, because they are the physiological antecedents, concomitants and consequents of every psychic phenomenon, but they are not at all the ‘psychic phenomenon itself’. (p. 7).

Moreover, mediumistic experiences may differ from other individuals exhibiting psi-related phenomena such as shamans, priests, and healing practitioners in that mediumistic abilities specifically refer to and target communication from discarnates, rather than angelic, demonic, or celestial entities. This article discusses mediumship from both biological and psychospiritual perspectives to further examine and explain the need for social and psychological integration.

Historical Prevalence

Since the 19th century, mental health professionals have regarded spiritual experiences as a marker of pathology, specifically those which resemble psychotic and dissociative disorders (Moreira-Almeida & Cardeña, 2011). This approach led to discrimination, segregation, and involuntary hospitalizations for many mediums who were already experiencing distress associated with their abilities, which were not culturally accepted in the Western World (Almeida et al., 2007; Moreira-Almeida et al., 2005). Since mediumship can be defined as “an experience in which an individual (the medium) purports to be in communication with, or under the control of, the personality of a deceased person or other non-material being” the comparisons to MDs have long been used to explain the anomalous experiences of possession and channeling (Moreira-Almeida & Cardeña, 2001, p. S31). What researchers rarely understand is how divine messages for social and scientific advancements, as well as creative works in literature, music,

and the arts occur. Such profound exchanges are commonly believed to have derived from external sources, albeit pluralistic in its cultural interpretations, that were relatively unbeknownst to the receiver and have historically been mischaracterized as egodystonic (Seligman, 2005).

Throughout history, mediums have provided tremendous benefit to societies. It is through the acceptance of these extrasensory abilities and finding appropriate avenues to express AIT that mediums find their calling and can nurture their craft in life-affirming ways. Today, celebrity mediums such as Matt Fraser, Tyler Henry, Teresa Caputo, John Edward, Lisa Williams, and James Van Praagh are just a handful of noted mediums who have made their way into contemporary life through television shows, books, and workshops on training individuals to explore their psychic and mediumistic potential. These mediums have made significant contributions and are doing their part to affect positive change within the cultural fabric of the West and beyond.

With the rise of transpersonal psychology, more socially accepted avenues to explore paranormal phenomena are increasingly available than ever before. This is not to discredit the innumerable sacrifices mediums have made by bringing their gifts to a larger audience, but these individuals and transpersonal scholars alike are paving the way for AIR experiencers to take ownership of their gifts for their psychospiritual constitution and for the good of those yearning for closure. The larger mission here is not one of fraud or susceptibility, but of connectedness and life-affirming content that seeks to provide answers to seemingly unanswerable questions.

Mental Health Challenges

Comparisons to MDs such as dissociative identity disorder (DID) have long been misused to discredit mediums from exploring their abilities in a safe and affirming environment. Traditionally, disturbances caused by DID are “not a normal part of a broadly accepted cultural

or religious practice” and include symptoms of memory loss, out-of-body experiences, poor mental health, emotional detachment, and lack of self-identity (American Psychiatric Association, 2013, p. 292). Mediums report being cognizant during mediumistic activities, are bodily present during communications, do not always suffer from other diagnosed MDs, are able to empathically distinguish between their emotions and that of discarnates, and are self-aware to identify themselves as separate from the entities with which they are communing (Seligman, 2005; Wickramasekera & Szlyk, 2003).

Schizophrenia is another common misdiagnosis of mediumship and is characterized by a complete breakdown of one’s ability to function commonly due to hallucinations, delusions, disorganized thinking, and abnormal motor behavior (American Psychiatric Association, 2013). Even though skeptics often accuse mediums of hallucinating or exhibiting delusional thinking, this argument for mediumship as an MD cannot account for the verifiable information often conveyed to loved ones through the medium under scientific scrutiny. In addition, individuals report significant relief upon hearing messages from their deceased loved ones. Therefore, this process of connection and information sharing is extremely beneficial, rather than destructive as one finds with MDs. These benefits are inclusive to the medium as well, enabling them to practice their craft as a valued member in service to their community. This process of integrating mediumistic abilities with nurturing guidance, psychosocial sensitivity, and community involvement is vital to healthy social functioning and becomes possible when viable spirit communication is established, of use, and warranted.

A Transpersonal Analysis

Mediums often provide verifiable information from external sources with significant details that do not cause disorganized thinking or abnormal behaviors, specifically in many of the

cultures that respect the practice as an integral part of the human socio-spiritual context.

Therefore, mediumship is not considered a mental illness, as it is seen to exist in cultures that accept such practices as a beneficial part of their religio-spiritual constitution. In Latin American and Afro-Brazilian cultures, mediumship is not only widespread but interwoven within the cultural framework as a viable method of socio-spiritual interactions (Mishlove, 2016).

Moreover, “the symptoms are not attributable to the physiological effects of a substance” (American Psychiatric Association, 2013, p. 292). Since mediumship is induced through meditation and/or ritual, this NOSC is not indicative of an egodystonic pathology because the practice does not require the use of alternative substances or psychedelics to be experienced by the medium.

While MD diagnoses applied to those with mediumistic abilities is counterproductive to healthy integration, not all individuals who practice mediumship are successful. Those with verifiable abilities receive the greatest psychosocial benefits from their skillful practice, and studies examining authentic mediumship provide evidence of anomalous experiences and justification for positive integration, specifically those from culturally accepted populations, as well as those that distinguish between MDs and mediumistic abilities from a neurological perspective (Moreira-Almeida et al., 2008). The importance of integration is discussed in the hopes of rectifying outdated paradigms surrounding spirit communication and to call for a broader social acceptance with a more inclusive transpersonal approach to therapeutic intervention (Seligman, 2005).

Scientific Research on Mediumship

An important first step to establishing a healthy, scientific understanding of mediumistic activities and mental health involves reintegrating aspects of subjectivity into consciousness

research (Barušs and Mossbridge, 2017). “The careful use of the tool of consciousness to investigate any phenomenon and draw accurate conclusions requires insight, time, and training in understanding, neutralizing, and transforming one’s own beliefs, biases, and flaws” (p. 146).

Recognizing that all people are capable of self-awareness, have unique identities, are continually re-creating themselves, and have challenges that are part of the human condition may help mental health professionals better assess and assist individuals experiencing AIR and AIT.

Studying Spirit Communication

Kelly and Arcangel (2011) investigated spirit communication in a triple-blind study that comprised 12 mediums and 40 sitters (those receiving a reading by a medium). The results showed 14 out of the 38 sitters provided correct readings. Statements expressed as comments on the readings noted deeply personal details that negated the option of vagueness or that the information was derived from other sources. Conversely, the remaining 24 sitters who chose the wrong reading had qualitatively mixed results. Reasons for choosing the incorrect reading were attributed to the sitter’s interpretation of what they considered insignificant information at the time. Notably, a total of 30 sitters positioned their correct reading among the top three in the accuracy ranking.

Quantitatively assessing the results of the tests done by E. W. K. indicated that their prior knowledge did not have a significant effect on the study. It was also important to understand the unusual and artificial nature of the study. Stevenson (1968) wrote, “removing the sitter from the medium’s presence. . . may diminish the motives of both the medium and communicator for communicating” (p. 336). None of the mediums had ever read for a proxy sitter before. Usual procedures for readings involved a unique and personal interaction between the medium, the real sitter, and their deceased loved ones.

Investigating AIR and AIT

Scientific investigations into AIR and AIT have also been promising, which further establishes mediumship as a method of spiritual communication rather than an MD. Beischel, et al. (2015) replicated and extended a 2007 study done by Beischel and Schwartz that achieved positive findings associated with the anomalous reception of information about deceased individuals. They obtained these results with research mediums under experimental conditions. These conditions eliminated the reliance on general explanations often associated with mediumistic information such as cold reading, rater bias, cueing, and fraud.

Beischel et al. (2015) conducted two, triple-blind experiments as mediumship readings over the phone. All three participants (mediums, raters, and experimenters) were blinded. The experiment had 20 mediums and 40 sitters. Six randomly selected mediums performed 12 readings under electroencephalographic (EEG) examination. All 20 mediums were Windbridge Certified Research Mediums (WCRMs) and participated in all 86 readings. WCRMs were tested, screened, and trained using an eight-step certification procedure, regularly participated in mediumship research, and demonstrated prior ability to communicate with discarnates under controlled laboratory conditions.

Results from Beischel et al. (2015) concluded there were comparisons: (a) between intended and false readings for the estimation of accuracy; (b) of the percentage of accuracy of readings in general; (c) regarding hits versus misses for different readings; (d) of global scores; and (e) for chosen readings between intended and false readings that were successfully replicated and extended. Results demonstrated the phenomenon known as AIR and showed that accurate and specific information was successfully reported and documented without prior knowledge, sensory feedback, or the use of deception.

Neuroscience and Mediumship

Hageman et al. (2010) was another study that emphasized the neurobiology of mediumistic trance experiences in Brazilian samples, since the practice is socially accepted to see whether mediums possessed specific neurobiological correlates while performing mediumistic activities. The first experiment involved two mediums and a control participant. The second experiment involved nine mediums (six psychophonists and three psychographers). Psychophony is said to be the practice of speaking for a source of external origin, also considered a disembodied spirit, while psychography is when a spirit is said to be writing through the medium's hands (Moreira-Almeida, Neto, & Cardeña, 2008). EEG records looked for epileptic discharge during three distinct periods: baseline, the point of mediumistic communication (MC), and recovery. Ictal EEG patterns were not observed, as these patterns looked for seizure-related activity, and were seen as having no bearing on the study.

The research team in Hageman et al. (2010) used a high-risk model (Wickramasekera, 1991) to identify somatoform and psychophysiological disorders to bolster objectivity when investigating the mind-body connection for mediums. Two evaluations were administered by Brazilian colleagues to test for psychological disorders including the Dissociative Experiences Scale (DES) (Bernstein & Putnam, 1986) and the Tellegen Absorption Scale (TAS) (McIntyre, Klein, & Gonçalves, 2001). The DES looked for signs of a dissociative disorder, while the TAS measured the individual's propensity for anomalous experiences characterized by changes in attentional focus and the reformatting of an individual's views of self and the rest of the world (Tellegen, 1977; Tellegen & Atkinson, 1974). Imagining the incorporation of spirit communication was used to improve performance and rehabilitation by demonstrating the activation of similar portions of the brain involved in mediumistic performance (Appel, 1992;

Feltz & Landers, 1983). Psychological testing lasted four minutes and was measured under two resting conditions of baseline movements (eyes open or eyes closed) and after recovery.

The first participant (Pai Ely) was originally a banker who later joined the Candomblé and Umbanda mediumistic traditions, while the second participant (José Andrade) was a noted psychographer who incorporated spirit through painting from the Kardecismo movement, and the control participant (E. O. S.) was a teacher from a neighboring city and a translator. Ely scored high on both the TAS and the DES tests which indicated his ability to suspend disbelief and to demonstrate a greater degree of empathy, especially when another individual was presently undergoing stress (Wickramasekera & Szlyk, 2003). Andrade scored lower on the TAS, but just as high on the DES which signified that Andrade did not deal with stressful situations like Ely. The researchers believed the differences were because Andrade's form of mediumship involved full incorporation during the solo performance of artistic psychography and Ely was used to dealing with clients on a regular basis and his work involved a great deal of one-on-one counseling. Both mediums tested "severely dissociative," which could also be interpreted as "intensively imaginative" if cultural considerations were excluded (Hageman, 2010, p. 12).

One significant finding regarding the DES test in Hageman et al. (2010) was that the control also received a high score which supported the hypothesis of a cultural bias in testing. The study highlighted the need for caution when using strict interpretations of relatively high levels of absorption and dissociation as risk factors for egodystonic pathologies. It was understood that one's ability to dissociate played an important part in the practice of mediumship and that altering one's normal states of consciousness during hypnotic-like procedures was pivotal in experiencing and understanding anomalous experiences (Krippner, 2005).

Important psychophysiological findings in Hageman et al. (2010) were that Andrade had: (a) a higher temperature in his right hand than his left hand, which varied considerably during and under all test conditions; (b) increased electromyographic (EMG) readings during incorporation and decreased during recovery; (c) increased heart rate during incorporation and decreased during recovery; and (d) greater sympathetic activation in his left hand. Ely had a difficult time remaining still, which was common for many Brazilian mediums in trance, but his EMG, skin conductance level (SCL) and heart rate increased during the imagination conditions. E. O. S.'s scores were perceived as normal.

Andrade and Ely's EEG measurements in Hageman et al. (2010) showed an increase in theta power and a decrease in alpha waves as compared to E. O. S.'s EEGs whose alpha waves increased during baseline conditions. Muscle tension increased in both mediums during the eyes closed portion of the baseline condition, and the right hand increased in temperature during the imagination session which is said to be synonymous with healers and those incorporating spirit (Krippner, 2005). Heart rate increased in both mediums, as E. O. S.'s decreased during the imagining of incorporation, which suggested an increase in sympathetic activation as a systems response for both mediums. Andrade's frontal EMG increased during the imagining condition, which was consistent with Hageman et al.'s hypothesis that increased muscle tension may be driven by external sources of cognition.

Individuals who possessed response inconsistencies stemming from their central nervous system (CNS) and autonomic nervous system (ANS) were described in Wickramasekera (1986a) and was explained as "living episodically in two worlds, one in which they are critical, rational, and practical, and another into which their fantasy and emotional reactivity expands and deepens" (Hageman, 2010, p. 15). However, according to Wickramasekera (1986b, 1991), these

incongruences between CNS and ANS did not usually appear with religious practitioners. Mediums were shown to demonstrate inconsistencies between observed behaviors and verbal reports. These reports did not consider the fact that spiritual practitioners experienced distress on a regular basis and developed unique methods of flip-flopping between one chosen style of cognition and an easier accessibility to specific cognitive processing (Wickramasekera, Krippner, & Wickramasekera, 2001).

The second experiment in Hageman et al. (2010) ruled out epilepsy as a cause of mediumship. EEG results showed normal electrical activity and some degree of slowing. These results were seen in a similar study on involuntary possession (Oohashi et al., 2002) where the EEG of the subjects did not result in any pathological or epileptic findings. However, the measurements did indicate an increase in theta and alpha brain waves while in trance. Additional similarities were seen in a study on trance channelers (Hughes & Melville, 1990) where EEGs slowed as alpha, beta and theta brainwave activity increased.

A similar study (Mesulan, 1981) argued that abnormal EEG measures increased the likelihood that DID and involuntary possession may be the result of anomalous electrical activity in the temporal portions of the brain. However, Hageman et al. (2010) disagreed because the phenomena are not uncommon in other cultures and “are not significantly associated with any psychosocial dysfunction” or with epileptic disorders (p. 17). Therefore, mediumship has distinct neurobiological correlates and adjusting for healthy integration is vital for normal functioning.

Electrophysiology and Psychometrics

Delorme et al. (2013) was a study that used psychometric and electrophysiology data taken from the brains of six mediums who had accurately produced information about departed loved ones for individuals under double-blind conditions to investigate spirit communication.

Three out of four of the mediums whose accuracy could be evaluated scored significantly above chance. The relationship between the levels of accuracy and measured activity in the brain within the 20 seconds of silent communications was significant in the theta brain wave portion of the frontal brain region for one of the participants during mediumship. After correcting for multiple comparisons, significant differences were seen in electrocortical activity during the four mental states from all six participants, especially in the gamma band. This was postulated by the researchers to have been due to the increased muscular activity associated with these unique mental states. These changes could have suggested that the idea of communicating with the deceased was a distinct mental state that is both different from ordinary thinking and imagining.

Electrocortical activity was recorded from each medium in Delorme et al. (2013) with an EEG machine. Measured autonomic responses included galvanic skin conductance (GSR), respiration, heartrate, and blood flow. Results from the first experiment found significant correlations in two mediums including theta power for one medium that was negatively correlated with their individual level of accuracy, and the other medium had a positive correlation between alpha power and their individual level of accuracy. The second experiment occurred when mediums were communicating with the deceased and one of the mental tasks involving perception. Frequency bands of gamma and beta revealed significant changes while performing each mental task. Additionally, results from one medium were consistent with the previous studies involved in measuring electrocortical activity among high-functioning mediums.

Activity in the front portions of the brain seen in images obtained by magnetic resonance imaging (MRI) scans were associated with spiritual, trance states (Jevning et al., 1996; Beauregard & Paquette, 2006). There was also a noticeable decrease in theta of the frontal midline area that might also indicate a decrease in working memory (Onton et al., 2005). This is

consistent with how mediums access a mental state that is receptive to the potential for external sources and can be an example of anomalous information transference. The study suggests that “the experience of communicating with the deceased may be a distinct mental state that is not consistent with brain activity during ordinary thinking or imagination” (p. 8). The specific quality of the change in gamma power and the ability to assess the original activity emanating from the brain required additional investigation.

The Psychophysiology of Mediums

Bastos et al. (2015) was a study that discussed the psychophysiology of mediums and their ability to communicate with the deceased. These researchers conducted a literature review for English, Portuguese, and Spanish articles published between 2000 and 2015 using electronic databases including PubMed, Lilacs, and Web of Science for relevant articles on subjects such as “mediumship,” “mediumistic,” and “after-death communication.” Excluded articles from the study were ones investigating altered states of consciousness (ASC) caused by psychoactive substances. Results during phase one (primary literature search) provided 150 articles; the above exclusion criteria were applied during phase two (secondary literature search), yielding 19 articles for the final analysis in phase three (critical review of studies). The third phase yielded three categories based on methodology and outcome that evaluated: (a) mediumship and psychopathy; (b) accuracy of information during mediumistic activities; and (c) psychophysiological correlates of mediumship.

Bastos et al. (2015) reported mediums possessed “hypoactivation of brain regions responsible for cognitive processing and writing planning during psychography compared to a control task; EEG changes and a slight predominance of the sympathetic nervous system” (p. 129). The review found mediumship was associated with good mental health when integrated,

especially in experienced mediums whose practice was socially accepted. Additionally, “the majority of culture-bound dissociation is considered normal, does not lead to distress or impairment, it often arises in willing individuals in appropriate (frequently religious) contexts, and is usually experienced as beneficial” (p. 129). This affirmed Seligman (2005)’s discovery of mediumship as a therapeutic role to individuals under psychological distress who find the spiritual nature of its practice a positive transformation of their personal and social identities.

Mediumship and Dissociation

Peres et al. (2012) was another study that investigated the spiritual experiences of dissociative states where mediums communicated with, or were under the control of, a discarnate entity. Their first experiment looked at psychography for any links with changes in cerebral activity. They studied 10 healthy psychographers (five with less experience and five who were considered experienced). These participants had been practicing automatic writing for 15 to 47 years and produced two to 18 psychographies per month. The study used SPECT to scan the mediums as they psychographed, in both trance and non-trance states.

All mediums reported ASCs while performing psychography. Experienced mediums showed vastly lower rCBF measures while writing during trance. These measures were seen in regions of the brain when writing in the control condition. The difference was significant enough to report as compared to the less experienced mediums. The scores for complexity of writing samples during psychography were higher than the control group. This occurred for both the entire sample and for the more experienced mediums.

More seasoned psychographers in Peres et al. (2012) demonstrated decreased levels of brain activity in the “left culmen, left hippocampus, left inferior occipital gyrus, left anterior cingulate, right superior temporal gyrus and right precentral gyrus during psychography

compared to their normal (non-trance) writing” (p. 4). The overall complexity was higher than the control groups for the entire sample. Due to the complex content produced during a mediumistic trance, researchers believed this was not due to a normal state of relaxation. It was determined that relaxation could not explain the underactivation of brain areas related to the cognitive processes required to perform mediumistic activities. Dissociation, in this regard, had been seen as a lack of normal integration of consciousness and memory (Giesbrecht et al., 2008).

Finally, the researchers in Peres et al. (2012) performed linear correlations analyzing and comparing the changes in overall complexity scores to the changes in cerebral blood flow (CBF) measurements in the six brain regions associated with the dissociative state of psychography. A unique trend was discovered that showed an inverse correlation between the change in complexity and the change in CBF measures in each corresponding area of the brain. These correlations were inverse, which have been shown to have a greater impact on the complexity associated with decreased CBF in each of the subsequent regions. The researchers found:

The superior temporal gyrus, which contains the auditory cortex, was activated during psychography for less expert mediums, who heard phrases as if they were being dictated, but deactivated in the experienced subjects, who had no conscious control over the psychographed content. (p. 7)

This is also the same area in the brain that is involved in auditory sensory reception and linguistic comprehension (Kindermann et al., 2004).

The decreased activity in the temporal cortex, precentral gyrus, the hippocampus and anterior in the more seasoned mediums in Peres et al. (2012) has supported the data they subjectively reported of being unaware of the content they were writing while performing psychography. Less seasoned mediums reported they felt they had to work harder to experience the same levels of psychographic accuracy than their counterparts. This was seen in their increased levels of activation within the cognitive processing area while performing

psychographic tasks.

Contrarily, seasoned mediums demonstrated vastly decreased levels of rCBF during psychography, which was consistent with the idea of automatic writing as an act of non-conscious performance associated with their distinct claims of being controlled by an external source that was somehow planning the written content to be produced. This specific state of relaxation “might explain the lower overall activity of the brain, but the fact that subjects produced complex content in a trance dissociative state suggests they were not merely relaxed” (p. 7). Relaxation is again seen as an unlikely explanation for the underactivation of specific areas of the brain that are normally related to cognitive processing.

Dissociation and Pathology

Moreira-Almeida et al. (2008) examined Spiritist mediums to see if their dissociative experiences were pathological in nature. Over a hundred mediums were randomly selected from different Kardecist centers in Brazil before completing questionnaires on their demographic and mediumistic activity levels, as well as the Self-Report Psychiatric Screening Questionnaire (SRQ), and the Social Adjustment Scale (SAS). Mediums scored as having MDs, according to their SRQ ratings, and a randomly selected control group of mediums who did not score as having MDs on their SRQ were interviewed using the Dissociative Disorders Interview Schedule (DDIS) and the Schedules for Clinical Assessment in Neuropsychiatry (SCAN). The self-report questionnaires assessed sociability and potential psychosis, while structured interviews were used to evaluate for DID.

Results from Moreira-Almeida et al. (2008) found SAS scores for mediums were normal and considered better than those of the psychiatric patients by 73%. Outcomes of the SRQ suggested a low degree of MDs compared to psychiatric patients, which was lower than in other

studies involving Brazilian mediums. The study found “incorporation was linked to better scores of social adjustment and fewer psychiatric symptoms” (Moreira-Almeida, 2007, p. 57). The mediums in the study did not qualify as having a diagnosable DID according to the DDIS and SCAN. Additionally, “the mediumistic process was characterized by dissociative and psychotic experiences that were not related to MD” (p. 58). Subsequently, social adjustment was seen in mediums overall and was responsible for healthy integration of their anomalous experiences and role within the community.

In other studies—especially those of Brazilian mediums in religious communities—mediums had not reported such high levels of education and did experience a significant amount of “suffering” throughout their lives, even in childhood (Seligman, 2005). It could be postulated that a study involving a sample with a high socio-educational level would tend to test higher on social adjustment. According to Ludermit and Lewis (2001), high levels of education and religious engagement produce better mental health overall. Still, Moreira-Almeida et al. (2008) was significant enough to establish that proper integration requires social support, mediumship is not indicative of MDs, and an understanding of one’s spiritual purpose when experiencing paranormal phenomena can alleviate distress.

Cultural Considerations of Mediumship

Seligman (2005) looked at how individuals of the Candomblé religion came to internalize the cultural narrative for the established socio-religious role of the medium. The author found that individuals who identified with this role were able to reinterpret their own life stories in terms of the dominant cultural content. The researchers demonstrated how the internalization of an integrated self-identity such as that of the medium can act in a therapeutic context to aid in self-understanding and produce positive behavior.

The researchers in Seligman (2005) randomly recruited participants from spiritual communities in Salvador, Brazil, considered to be the spiritual capital of the Candomblé religion, comprising 1,500 different centers (*terreiros*) with between 30 to 300 members each and asked them to tell their stories regarding how they came to be initiated into mediumship. These interviews were semi-structured and conducted after participants successfully completed their initiation and regular practice within the Candomblé religion. Each participant proportionately represented their spiritual community where members found refuge and haven from discrimination by becoming more aware of their mediumistic abilities and practicing their craft in a socially accepted environment.

Seligman (2005) used instruments such as the Adult Psychiatric Morbidity Questionnaire (QMPA), State Trait Anxiety Inventory (STAI), Dissociative Experiences Scale (DES), and semi-structured interviews were used to screen participants for a variety of mental health issues including anxiety and depression. Criteria for the study were like those seeking membership into the Candomblé religion: (a) an ability to communicate through divination; (b) spontaneous entry into trance or possession states; and (c) past experiences of suffering in the form of distress that required medical or spiritual healing. Examples of distress for mediums were reported as:

Chronic, un-diagnosable illness; mental problems, especially anxiety and depression; interpersonal problems, especially problems within the family; negative life events or general misfortune, often in the form of unemployment, financial crisis, illness, death, or injury of self, friends or family, and finally, general malaise. (p. 278)

Additional examples of distress that was culturally referred to as “affliction” was seen in a smaller sample—specifically that of the men who all identified as gay—which was later dissolved by integrating their experiences in a socially acceptable way with their new identity as mediums (*filhos de santo*) within the community.

Seligman's 2005 study found: (a) non-medium initiates had higher emotional distress than integrated mediums; (b) integrated mediums experienced more somatic distress but were able to manage these disturbances in a way that did not disrupt their lives; (c) anxiety was high in both the treatment and control groups respectively with religious followers experiencing more anxiety than integrated mediums or controls; and (d) higher dissociation scores were seen in the religious groups as compared to control groups. Cultural models of integrating anomalous experiences were shown to provide a healthier context for personal identity and included incorporating their afflictions in a way that deflected egodystonic pathology and empowered the individual to see their experiences as "a primary symbol of their spiritual legitimacy" (p. 285). The ability to distinguish between one's affliction and an ability was one way that these mediums took ownership of their stories in a therapeutic context.

Destigmatizing cultural models of identity assisted individuals whose predisposition made them vulnerable to distress. "Religious idioms and ritualized behavior [helped] individuals express and resolve existential distress, by offering a vehicle for self-transformation" (p. 291). All participants in the study experienced some distress, yet the integrated mediums were able to channel their anomalous experiences in a way that assisted others in the community in a socially accepted way, which provided immense support and decreased their levels of overall distress.

Seligman (2005) also found one way that assisted the process of integration for mediums was using narrative research. Incorporating individual narratives helped alleviate experiences of distress by demonstrating a medium's ability to embrace their gifts in a way that was free from stigma or unnecessarily harsh scientific scrutiny. The research showed that "afflictions" such as the ability to communicate with the dead could be seen in a therapeutic and socially beneficial context. In this regard, integration was described as when "ritual initiation, articulation of revised

self-narratives, and positive social expectations combine to give motivational force to this culturally structured identity and allow individuals to behave differently—as spiritually empowered, rather than spiritually afflicted people” (p. 272). By interpreting a medium’s past experiences in terms of a culturally accepted model within the structure of a positivistic narrative helped to organize a medium’s thoughts, improve their sense of self-worth, and empower them to find healthy, meaningful ways of sharing their gifts with others.

Socializing Mediumship

Negro et al. (2002) studied 110 mediums from the Kardesic community and discovered that participants with extensive mediumistic training experienced better socialization and adaptation. This furthers the notion that integration of anomalous experiences does produce healthier individuals, specifically when provided a system of trusted support, as well as training and education, in a nurturing, affirming environment (Seligman, 2005). Some pathological behaviors were seen among the less experienced mediums, but they were observed to have a weaker social support network. This demonstrates the idea that egodystonic diagnosis of pathology can be avoided with a healthier integration of anomalous experiences into a medium’s everyday life.

Synchronicity is always an interesting topic of controversy in studies involving mediums. Negro et al. (2002) affirmed this could be due to a medium fishing for answers or their answers being too vague, thus being interpreted differently by sitters. However, significant research has indicated readings with proxy sitters, who have not been provided any information regarding the departed individual and without the real sitters being present, was an excellent way to study the phenomenon in a veridical manner (Krippner, 2005). Proxy sitters reduce the chance of fishing or vague answers being given. Additionally, proxy sitters provide no feedback to the mediums.

Therefore, real sitters can blindly evaluate the readings, which have been shown to reduce biased interpretations of vague or unclear statements.

Moreira-Almeida et al. (2007) found dissociative tendencies, hallucinatory experiences, and extrasensory perception are common in most populations around the world and are not always associated with MD. If researchers used only ICD-10 criteria, then half of the mediums in most studies would have been diagnosed with schizophrenia without further analysis or investigation into the validity of their experiences or to the content of their messages. The study also showed that the intensity of the mediumistic experience was not proportional to symptoms of dissociative or psychotic disorders because “social maladjustment would have been found” (p. 58). Hence, a diagnosis of this kind does not account for spiritual experiences within a non-clinical population.

Conclusion

Mediums exhibit distinct neurobiological pathways, receive and transfer anomalous information from discarnates, and experience socio-cultural and transpersonal benefits—evoking a holistic relationship to their practice—when integrated appropriately. The World Health Organization (1992) recognized that dissociative or hallucinatory experiences should not be considered pathological if they occur in a cultural or religious context. It is also important not to discredit verifiable accounts of contact if the communication is accurate and/or therapeutically supportive. Hence, the case for mediums to integrate their anomalous experiences in personally fulfilling and socially accepted ways is seen as a healthier alternative than the diagnosis of a mental illness that may hinder such unique abilities from harmonizing with an individual’s potential life purpose.

Healthy integration can transform the distress associated with mediumistic expression, as

well as social support systems, meditation, and appropriate methods of biofeedback. These methods help to calm and control the internal states of the medium as they learn to integrate their daily experiences (Krippner et al., 2002). There are also examples in the United States where mediums and channelers are at greater risk of developing egodystonic pathologies than healers and intuitives in other parts of the world because of the negative associations of AIR and AIT. This phenomenon is due in large part to cultural bias against the incorporation of anomalous experiences as an integral part of individual and collective identities.

It is vital to develop further research into how mediumship can support the healthy functioning of individuals experiencing anomalous information as spirit communication during non-ordinary states of consciousness. More double-blind, placebo-controlled studies involving mediums can help demonstrate significant veridical evidence of mediumistic activities for the purposes of demonstrating validity of the practice and the importance of integrating these experiences of communication in a supportive manner. Finally, the cultural and sociological acceptance of mediumship must be given appropriate attention to foster the successful integration of mediums and their natural proclivities into contemporary society.

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