

Research Article

Appearances of the Risen Jesus and the Modern Study of Bereavement Hallucinations

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1. Independent researcher

Although the hallucination hypothesis is not new, fresh life has been breathed into it by Lüdemann, Goulder, and others. Their efforts have received a dismissive response from evangelical scholars including Craig and Wright – a response which, however, betrays either a lack of understanding regarding the variety and nature of hallucinations and collective delusions, or a lack of desire to engage with the issues raised by the relevant interdisciplinary studies. However, this is equally true of the above-named sceptics. In the present paper, I shall argue that the post-resurrection appearances of Jesus *could* be explained on the basis of bereavement hallucinations/ collective delusions equally as well as by the traditional explanation of bodily resurrection. I shall refer to modern bereavement studies, arguing that the experiences of the bereaved disciples, including that of ‘seeing’ the deceased attachment figure, is likely to be familiar to many bereaved people today.

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1. Setting the Scene

Could the series of Jesus’s post-resurrection appearances, as described in the Gospels, have been initiated by a bereavement hallucination or a sense of presence? The proposal is not new (Strauss 1973, orig. 1835), and was resurrected some years ago by Gerd Lüdemann (1994: 174–75; 1995: 129–34; 2004: 163–66) and Michael Goulder (1994: 58–68; 1996: 48–61; 2000: 86–103). Several evangelical scholars have responded negatively to the suggestion (Craig 2002: 398–400; Habermas and Licona 2009: 106–09; Johnson 2002; O’Connell 2009; Kreeft and Tacelli 1994 166–68; Siniscalchi 2015), William Lane Craig in particular, dismissing it as “old hat” (“Visions” nd: 15). However, Craig’s wider comments betray either an ignorance

of or a disinterest in the professional literature on the topic, while Habermas, although refuting the hallucination hypothesis in more than one of his publications (2001; 2004: 106–09), is content to let his judgement rest on a single *ex cathedra* statement by psychologist Gary Collins, a personal acquaintance (in Strobel 1998: 79).

The traditional evangelical arguments against the hallucination hypothesis are generally oversimplistic and naïve, and include the following:

- Hallucinations are normally pathological, frequently found in schizophrenics, or are drug-related. Since none of the disciples fits any of these categories, their sightings of Jesus cannot have been hallucinatory.
- Even if it is possible for ‘normal’ people to hallucinate (McCreery and Claridge 1996), they need to be in a particular psychological state, and the disciples were not in the appropriate frame of mind.
- Paul’s experience on the road to Damascus was certainly no hallucination. He felt psychologically secure and sure of himself, and had no doubts about his decision to persecute the Christian ‘infidels’. Besides, his companions seem to have shared something of his experience (Acts 26:14).
- Genuine hallucinations are personal experiences and cannot occur collectively; but most of the post-resurrection appearances of Jesus were precisely of this order – manifestations to groups of various kinds – which indicates that the appearances were objective and not subjective experiences.

It is not the purpose of this paper to respond to these arguments in detail; that has been done elsewhere (Parsons 2005: 433–51). I shall simply make one or two salient remarks in passing. First, traditionalist scholars rarely attempt to set out their stall by defining what it is they are critiquing. The term ‘hallucination’ requires a precise working definition before the hallucination hypothesis can be assessed. The critic must know the nature of the beast prior to engagement. This is all the more important today because ‘hallucination’ has become an umbrella term for all kinds of sub-categories (Fulford 1991: 230–31). Some are pathological, others are not; some are drug-induced (LSD, for instance, is a noted hallucinogen); some occur as the result of traumatic experience, especially bereavement. Then there is the *type* of hallucination – visual, auditory, tactile, even olfactory. The university and hospital psychology and psychiatry departments around the world are awash with research programmes dealing with various categories of hallucination. Indeed, since its humble beginnings in the surgery of a general practitioner in rural Wales (Rees 1971), the study of bereavement hallucinations has expanded to such an extent that it is now considered as a sub-category in itself (Steffen and Coyle 2012). None of this variety is generally

recognised by critics of the hallucination hypothesis (one notable exception being Dale Allison (2005: 269–99, 364–75) – hence the skewed concept of such phenomena.

The critic is on firmer ground in pointing out that hallucinations cannot be collective appearances. There are those, even in the evangelical community, who demur (O’Connell 2009), but in speaking of the occurrence of collective hallucinations, they really mean collective *delusions*. The latter are indeed not only possible, but do frequently happen. The various ‘sun miracles’ that have supposedly occurred in association with appearances of the Virgin Mary, or at her behest (Nickell 1993: 177–78, 194–96), may well be of this kind. Collective delusions are usually triggered by the suggestion of an individual, which then has a knock-on effect in terms of a kind of epidemic hysteria or social delusion. The great sun miracle at Fátima in 1917, supposedly witnessed by a crowd of 70,000, seems to have taken off only when one of the child ‘seers’, ten-year old Lúcia Santos, directed the people’s attention to the sun. The crowd was agog, waiting for something to happen, and Lúcia’s suggestion was the catalyst. Now, if this kind of thing has happened throughout history, right down to the present, it is perhaps not so far-fetched to suggest that a hallucination of Jesus was experienced by one of his disciples who then excitedly declared to the others, ‘I have seen the Lord!’ Perhaps it was this simple suggestion that set the ball rolling among the rest.

This brings us to another problem with the evangelical riposte. All the evangelical contributions I have seen so far treat the concept of hallucination in purely monophasic terms. In other words, the view they espouse (which is in any case inaccurate or oversimplistic) is *our* view – the phenomenon as understood by modern Western society. However, the ancient circum-Mediterranean polyphasic society in which Jesus lived was a very different socio-cultural phenomenon, a fact which has been increasingly recognised in recent years by biblical scholars who have taken account of cross-disciplinary studies in social-science, psychology and anthropology (Craffert 1989; 2008a: 383–419; 2008b; 2009; 2011; 2018; Pilch 1998; Wiebe, ‘Altered States of Consciousness’ nd). Rather than imposing our contemporary monophasic system on first century Palestinian society, it has been argued, we should endeavour to evaluate life in that society through the eyes of those who experienced it. For us, hallucinations are essentially delusions, having no more objective reality than a dream. The ancients would not have understood the concept of hallucination at all; rather, all life was real, whether experienced in terms of normal consciousness or in terms of some altered state of consciousness (ASC) such as a dream, trance, vision, or (what we would call) hallucination. Perhaps the disciples experienced the post-resurrection Jesus in such a way without drawing any sharp distinction between one kind of reality and another.

It is clear, then, that, on the whole, traditionalist scholars need to engage more seriously with the issues surrounding hallucinations as these have been developed in recent years by various professionals in the field. But do the more sceptical critics fare any better? Only marginally so. Lüdemann (2004: 163–66) hits on the possibility that the disciples were in a state of bereavement following Jesus's sudden and violent death, and refers in a somewhat perfunctory way to one or two of the bereavement studies available at the time (Parkes 1972; Spiegel 1978). He also adopts a Jungian view of Paul's Damascus road experience (2004: 82–83; see Jung 1927: 257), and explains the collective appearances to the Twelve and other groups, including the 500-plus (1 Cor. 15:6), in terms of mass ecstasy or delusion. So he does appear to have some rapport with a psychological approach, although without arguing his case in fine detail.

The same is true of Michael Goulder who focuses primarily on the concept of collective delusions, illustrating by reference to the Sasquatch or Bigfoot panic in South Dakota during the spring of 1977 (1994: 62–63; 1996: 53–54. See also Stewart 1989). He, too, consults a scattering of vaguely relevant psychological sources (although the choice seems somewhat random), and acknowledges the help of a colleague in the Department of Psychology at his university.

Could a hallucination and subsequent collective delusions provide a 'sufficient' explanation for the appearances of Jesus as described in the New Testament? The answer is a tentative Yes, but in order to make the proposal stick we need to go further than the abovementioned scholars. First, we need to recognise that if one of the disciples did hallucinate Jesus's presence in the wake of his crucifixion, it was in all probability due to a keen sense of bereavement, so it is on that particular literature that we need to focus. This has already been recognised by Gerald O'Collins (2011) who engages with W.D. Rees, the abovementioned Welsh GP who was one of the pioneers in the field. Rees, himself a practicing Christian, recognised that although the post-resurrection appearances of Jesus were, in his view, veridical and not subjective appearances on the part of the disciples, they do bear some similarities to the features of bereavement hallucinations as gleaned from the statements made by the widows and widowers included in his study, and he noted that the disciples themselves would have been suffering the effects of bereavement in the wake of Jesus's crucifixion. He concludes that bereavement hallucinations might well be seen as complementary to the stories of Jesus's resurrection, helping the non-believer on the road towards faith, and confirming the believer in the faith he or she already has. O'Collins, in his typically respectful manner, takes issue with Rees's approach. While acknowledging some superficial similarities between the accounts of the post-resurrection appearances and bereavement hallucinations (2011: 227–28), he spends the bulk of his article highlighting the dissimilarities (2011: 228–35). Although initially

concurring with Rees that bereavement hallucinations, like the resurrection stories, have the power to encourage and uplift those who have lost loved ones, and can be regarded as a helpful part of the bereavement process, he concludes that 'on closer examination this proposed analogy proves remote and inappropriate and hence fails to prove illuminating in any *serious* way' (2003: 11).

But, like the other scholars we have mentioned, O'Collins fails to dig deep enough. Since the first tentative probings of Rees back in 1971, scores of books and hundreds of articles studying the effects of bereavement, including the ubiquitous 'sense of presence' (SoP), have appeared on the market, including journals devoted entirely to death-related studies, such as *American Journal of Hospice Care*; *Death Studies*; *Mortality*; *Omega: Journal of Death and Dying*; and *Palliative Medicine*, only one of which began publication prior to Rees's seminal study. Once we take account of the relevant literature in the field, we are led to the conclusion that the similarities between the SoP experienced by many bereaved persons today and the appearances of Jesus to his disciples may be much more significant than O' Collins allows.

2. The Groundwork of Bereavement Studies

i) Terminology

Before we can proceed to examine the trends in current bereavement studies and their possible significance for the hallucination hypothesis, we need to consider a number of preliminary factors. Chief of these is the question of terminology, which seems to have been entirely overlooked by the biblical critics mentioned above. Yet some form of working definition is essential if we are to proceed smoothly. There is a short discussion of terminology in Aleman and Larøi (2008: 15–18), and their concluding definition is as sound as any. A hallucination is

a sensory experience which occurs in the absence of external stimulation of the relevant sensory organ, has a sufficient sense of reality to resemble a veridical perception, over which the subject does not feel s/he has direct and voluntary control, and which occurs in the awake state (Aleman and Larøi 2008: 15, adapted from David 2004: 108).

The all-important term here is 'sensory experience'. Hallucinations, of any kind, involve the delusion of seeing or hearing things (occasionally other sensations are involved) without there being any corresponding external stimulus; thus, what appears to be a veridical experience is in fact a subjective one. Some psychologists are imprecise on this point, speaking of a 'sense of presence' which may include

genuine sensory delusions while not being restricted to them. In other words, a sense of presence may simply be just that – a vague feeling that someone is present, but who cannot be apprehended by any of the senses. Such is not a genuine hallucination according to our working definition, however, and the two should be separated into distinct categories. The hallucination hypothesis as proposed by Lüdemann, Goulder and others does not suggest that the disciples had a vague sense of Jesus's presence among them, perhaps as a spiritual entity, but that they experienced the delusion of seeing and hearing him – possibly even of touching him (Matt. 28:9; John 20:17).

Most other definitions of hallucinations broadly agree with that of Aleman and Larøi. Slade and Bentall's definition of the phenomenon, for instance, is: '[a]ny percept-like experience which (a) occurs in the absence of an appropriate stimulus, (b) has the full force of impact of the corresponding actual (real) perception, and (c) is not amenable to direct voluntary control by the experiencer' (1988: 23). Similarly, the *Diagnostic and Statistical Manual of Mental Disorders* (DSM–IV) defines hallucination as: 'A sensory perception that has the compelling sense of reality of a true [i.e. "objective"] perception but that occurs without external stimulation of the relevant sensory organ' (1994: 767). These definitions suggest, incidentally, that whereas hallucinations *may* exhibit the character of a delusion (Kaplan and Sadock 1994: 284), in that the percipient may initially be caught off guard and imagine that the voice or vision is objectively present, they cannot be described as *illusions* because an illusion is a misinterpretation of something 'out there' perceived by the senses which can normally be corrected by the percipient, whereas a hallucination is not dependent on any veridical sensory object.

Mitchell Leister (1998) has suggested that the DSM–IV definition in particular is deficient in two ways: i) It fails to distinguish between pathological and non-pathological types of hallucination, and ii) it pays too little attention to cultural beliefs as determinants of such experiences, in view of which Leister amends the DSM definition, adding: '... that occurs in conjunction with, and is believed to be etiologically related to, a physical or mental disorder, and that is not ordinarily experienced or accepted by other members of the culture or sub-culture' (1998: 309). As it stands, however, one may wonder whether this definition is quite as 'new' as Leister maintains, for it throws us back onto the horn of pathology – the view that the overwhelming majority of hallucinations have some readily definable psychotic cause. So, too, the *APA Dictionary of Psychology* which, although in close conformity with Aleman and Larøi's definition, stresses: 'Hallucination is typically a symptom of psychosis, although it may result from substance abuse, or a medical condition such as epilepsy, brain tumor, or syphilis' (VandenBos 2007: 427). No doubt this is true, but it does leave us with the impression that hallucinations rarely, if ever, occur to

persons in normal physical and mental health. Fortunately, however, there has been an increasing tendency over the past few decades to recognise that hallucinations are not restricted to psychogenic cases, and can be experienced by apparently healthy individuals (Aleman and Larøi 2008; Andrade, Srinath and Andrade 1989; Larøi and van der Linden 2005; McCreery and Claridge 1996; Slade and Bentall 1988: 68–81).

A wide variety of hallucination types has now been identified, of which the bereavement hallucination is but one. As we are about to discover, a large number of individuals have testified to having had such an experience following the death of a loved one, and in the great majority of cases, they were in sound physical and mental health at the time and had never experienced a hallucination before. There has been some discussion as to whether the term ‘hallucination’ is appropriate for such experiences, given its traditionally pejorative connotations. It is for this reason, coupled with the fact that it is culturally anachronistic, that Maurice Casey, in his assessment of the post-resurrection appearances, advises against using the term, preferring ‘bereavement vision’ instead, ‘because that is how the people who saw them interpreted them ... [and] because this fits everything we know about them in a culture in which visions were normal and considered to be perfectly real’ (Casey 2010: 488). Ian Stevenson (1983) even goes so far as to invent a new word (‘ideophany’) altogether. However, I have chosen to retain the traditional term for present purposes because it is instantly recognisable and is perhaps less maligned than it once was. The percipients, too, tend now to be much more willing to share their experiences with others than was the case earlier when far greater stigma was attached to the term. We should remember, of course, that many bereaved percipients experience SoPs rather than pseudo-sensory phenomena, and that the former are not really hallucinations at all, strictly-speaking.

ii) Frequency and Nature of Bereavement Experiences

One of the most striking observations to have emerged from the scores of studies on bereavement hallucinations is their comparative frequency. One small-scale Japanese study (Yamamoto, et al. 1969) found that eighteen out of the twenty participants (90%) claimed some kind of ‘sense of presence’ (including sensory experiences) during bereavement, while Rees’s much more extensive study put the figure at 46.7% (137 persons out of the total sample of 293) (1971: 38). Hardly any of the relevant studies found a lower percentage than this. For Grimby the figure was 83% (of fifty participants) (1998), for Olsen 61% (of forty-six participants) (1985; see also the summary in Castelnovo, et al. 2015), and for Lindstrom 75% (of thirty-nine participants) (1995). The larger surveys tended to report slightly less impressive

figures, but these, too, recorded significant percentages of those experiencing bereavement hallucinations in one form or another. The 434-strong sample of Kalish and Reynolds (1973) yielded a figure of 44% SoPs, while that for MacDonald (1992) (465) was 35.6%. The fairly wide range of results is due largely to an equally wide range of variables, including culture, gender, age and attitude on the part of the participants, and the nature of the scientific methods deployed on the part of the investigator, as well as sample size. In many cases, participants had never disclosed their experiences prior to their confiding in the investigator. Among the reasons given for their reticence were the fear of being considered mentally unstable or ridiculed by relatives and others, or simply that they cherished the experience as an intensely private affair (Rees 1971: 40). The bottom line, however, is that experiences of this kind have been found to be extremely widespread, even in our modern, sophisticated, monophasic culture. How much more so, then, in societies of a polyphasic order which have traditionally been more amenable to such experiences?

As to the nature of bereavement experiences, these can involve any one, or more, of the five senses, and in a minority of cases, percipients attempt to verbally communicate with the deceased. The accompanying table provides a statistical representation of the ways in which the bereaved may encounter their loved ones. As the olfactory sense seems not to have been involved in the disciples' meeting with the risen Jesus, I have left it out of account here.

Source	Sample	Type of Experience				
	n=	SoP	Visual	Auditory	Tactile	Speech
Rees (1971)	293	39.2%	14.0%	13.3%	2.7%	11.6%
Olsen (1985)	46	32.1%	78.6%	50.0%	21.4%	17.9%
Grimby (1998)	50	52.0%	26.0%	30.0%	6.0%	30.0%
Klugman (2006)	202	55.4%	37.6%*	-----	25.2%	69.8%
Haraldsson (2009)	337	9.8%	69.4%	27.6%	13.1%	-----

Table of Bereavement Encounters

*Klugman's category here was actually labelled 'waking vision' which included both visual and auditory experiences. The figure of 37.6% includes both of these combined.

The above scholars have been selected because they focus solely on bereavement experiences rather than paranormal manifestations in general. Some of the figures appear to be markedly inconsistent with one another, but there are mitigating factors, including sample size, method, and cultural background. In general, the larger the sample, the more moderate the figures for each category tend to be, although this can be offset by other factors. Haraldsson's remarkably high figure for the 'visual' category may be due to the fact that his sample was drawn exclusively from the Icelandic population among whom encounters with the dead tend to be much more common than in the USA and most European countries (Haraldsson and Houtkooper 1991: 149). Again, Haraldsson's equally surprisingly low figure for SoPs (9.8%) is probably due to cultural bias. The experiences of Icelandic subjects tend to be largely sense-based, while Rees's much higher figure for SoPs (39.2%), along with the low 'visual' figure (14.0%), is reflective of his Welsh respondents.

Olsen's very high 'visual' figure (78.6%) is likely to be due to three factors: the small size of the sample (46 individuals), the sample type (elderly widows/ widowers), and especially to the fact that his sample was restricted to those who had experienced bereavement hallucinations as opposed to the general population. Suitably adjusted to correspond with the results of the other researchers, Olsen's 'visual' figure would be 47.82%, thereby reducing the discrepancy.

One final singular factor to be noted is that the 337-strong sample in Haraldsson's 2009 study consisted solely of those whose deceased relatives had suffered violent deaths (murder, suicide, accidents). His findings were that these circumstances resulted in much higher instances of sensory bereavement experiences – especially visual ones – than is normally the case, with correspondingly fewer SoPs. These findings, having been anticipated by Ian Stevenson (1982), were later substantiated by Field and Filanosky (2010).

iii) Cultural Extent of Bereavement Hallucinations

As we have already suggested, culture tends to play a significant role in the results obtained. Yamamoto's very high figure for his albeit limited sample reflects the fact that Japanese society, with its peculiar spiritual perspective, has traditionally been more open to the possibility of bereavement experiences of the kind mentioned, and ridicule is not generally expected – hence, perhaps, the greater openness of

these subjects. The cultural pattern is far from straightforward, however. According to a Chinese study of fifty-two participants (Chan, et al. 2005), only 33% claimed to have experienced an SoP. The striking difference between the results of this and the Japanese study could be due, in part, to differences in methodology, but religious differences may also be involved. In Japan, the traditional religion, especially of the ancestral kind, seems to have been encouraged, whereas in China it suffered a period of suppression, especially during the Maoist era.

It is interesting to note that native peoples, including ethnic minorities living in a predominantly Western society, often display a decidedly positive disposition towards SoP or sensory experiences during bereavement, as a number of anthropological studies have shown. For example, the bereavement practices of Hopi Indian women have been shown to be conducive to such experiences, even to the extent of their being induced (Matchett 1972; Shen 1986), and Bilu and Abramovitch came to much the same conclusion in the case of Moroccan Jews who had emigrated to Israel (1985). Grindal's fieldwork among the Sisala people of Ghana revealed a keen interest in raising the spirits of the dead through ritual (1983), while Kalish and Reynolds (1973) reported a greater number of occurrences among Mexican Americans than among white Americans and other ethnic groups in their sample (see further Slade and Bentall 1988: 77–81 and Rees 2001). The upshot of all this is that the occurrence of bereavement SoPs and sensory hallucinations appears to be a worldwide cultural phenomenon, and there would seem to be little reason for denying that experiences of this kind were well-known among the bereaved in first-century Palestine, and that a sense of reality was attached to them.

iv) A Sense of Presence and a Sense of Reality

The sense of reality attached to a bereavement hallucination or SoP will naturally be dependent upon a number of factors and variables, including cultural traits, levels of expectation, if any, and not least the nature of the experience itself. Genuine hallucinations, with their element of sensory delusion, can seem very convincing to the percipient. Such apparitional data as we have include cases in which the apparition – often of a deceased relative – has been perceived as a perfectly solid figure, capable of blocking the light from a lamp and casting a shadow (Myers 1903: 326–29), or even disclosing information that could not have been obtained by normal means (Berger 1995: 4; Irwin 1999: 249–50; Zorab 1962). In cases as dramatic as this, it is hardly surprising if the percipient should interpret his or her experience in veridical terms. Even a vague sense of presence, however, can be understood in the same way. Of course, it is true that some percipients may regard the experience as veridical initially, but

once past the initial shock may reassess it in subjective terms. Grimby (1998) has shown that during the first year of bereavement, repeated hallucinatory and SoP experiences tend to abate in intensity, and some fizzle out altogether during that time. According to her statistics, the SoP is the most persistent of all, while the sensation of being touched by the deceased, already the least common experience, is the least enduring. The continued experience of 'seeing' the deceased declined by 54% during the first twelve months, and 'hearing' by 80%. Rees noted that some of his widows and widowers were still experiencing the presence of their deceased spouse in some sense after ten years, or even longer, although this tended to depend largely on the strength of the emotional attachment (1971: 39). The point to be made here is that if the bereaved came eventually to believe that their experiences were merely subjective, this would beg the question as to why they would continue to experience their hallucinations and SoPs if they did not believe them to be veridical. It may be that those with religious affiliations would be more easily convinced of the veracity of their experiences than those without, since they would have independent reasons for believing their deceased loved ones to be alive in some sense (Becker, et al. 2007; Benore and Park 2004; Rees 2010; Wortman and Park 2008). Although we cannot explore this matter any further at present, we can conclude from the foregoing remarks that a goodly proportion of those who experience bereavement hallucinations or SoPs apply to them a developed sense of reality.

v) Attachment Theory and Continuing Bonds

Attachment theory is not concerned exclusively with the problem of bereavement. In general terms it addresses the question of the need of the individual to be attached to or in the physical proximity of a revered figure who can be relied upon as a 'safe base'. This attachment figure could, of course, be a parent or a father-figure, or a much-loved mentor. The relevance of attachment theory to our present sphere of concern lies in the question of what happens when this figure is no longer there. In what sense does bereavement affect this sense of attachment? It is possible that hallucinations or SoPs provide a coping mechanism allowing for a transition period in which the bereaved person learns to let go of the figure of attachment, perhaps by transferring allegiance to someone else, or simply by coming to terms with the loss. Psychologists are pretty much divided on whether or not such bereavement phenomena constitute a pathological matter. Is it healthy to maintain contact with the dead in this way, and does it obstruct the ultimate aim of moving on? For many psychologists, the first twelve months of bereavement provides the benchmark (Parkes 1970; Olsen 1985). During that period, hallucinations and SoPs may be regarded as helping to effect the transition from reliance on the former attachment figure to a different one or to some form of autonomy. Readjustment to a new situation in which the deceased can finally be laid to rest

is the chief aim of the bereavement process. Most psychologists in the field consider that if the struggle for detachment from the deceased extends much beyond the first year of bereavement, there is a strong case for regarding the situation as pathological, involving as it does a period of 'complicated grief' which requires the intervention of appropriate therapy. In the final analysis, the question of attachment and continuing bonds beyond the twelve-month watershed hinges on whether an extended grief process should be regarded as psychologically beneficial or unhealthy, and on this issue the jury is still out.

One caveat to the above discussion is provided by the results of research undertaken by Field and Filanosky (2010) who found that sensory hallucinations, as opposed to mere SoPs, during bereavement were more likely to occur in the event of the deceased having died in a violent manner (by accident, for example), and also in the case of the bereaved individual feeling in some way responsible for the death, whether justified or not. The gist of these findings was anticipated by Stevenson (1982) and Haraldsson (2009: 103–07). Obviously, we should not make too much of these results, since sensory bereavement hallucinations are clearly not restricted to such cases; but it may well be the case that a higher proportion of those in the categories stipulated by Field and Filanosky experience hallucinations in comparison with the general population of bereaved individuals. The figures of Rees, Olsen and Grimby are revealing in this regard, since all three samples constituted or included elderly individuals whose spouses had died natural deaths. Of Rees's sample of 293, 39.2% claimed to have experienced an SoP, while the figures of Olsen and Grimby were 32.1% and 52% respectively, but related only to the 'hallucinating' segment of the sample. On this basis, Rees's figure, once adjusted to conform with those of the other two, would be much higher. In all three cases, the SoPs of some individuals in the sample were augmented with sensory hallucinations, but the bottom line is that SoPs were by far the most common experience reported by these elderly subjects whose spouses had died natural deaths, usually in hospital or at home.

vi) Bereavement Phenomena and Meaning-making

The death of a loved one is rarely accepted as simply part of the natural order; usually some attempt is made to discover meaning behind it, and in the view of many psychologists, the bereavement process serves a meaning-making role (Neimeyer 2001). Finding meaning in the death of a loved one naturally facilitates recovery from bereavement and aids ultimate resolution, and hallucinations and SoPs could be instrumental in the therapeutic process. However, cultural expectations and societal approval are also important. As already noted, the high instance of SoPs in the Japanese widows studied by Yamamoto and his colleagues can be attributed in part to the openness towards such bereavement experiences in Japan.

Meaning-making for Steffen and Coyle is intrinsically bound with spirituality (2010; 2011; 2012: 47–50). The believer often makes sense of his or her loss by understanding it in the light of pre-existing religious beliefs, so for these people hallucinatory or SoP experiences are frequently seen in veridical terms. Often, for the non-believer, such experiences have a merely palliative effect, but even here, a strong sensory experience leads, sometimes, to a foothold on the ladder of faith. Indeed, without the hope or expectation of an afterlife, it is difficult to see what possible meaning the loss of an attachment figure can have, unless it is to encourage the bereaved person to become more independent or autonomous, thereby developing into a more rounded individual. Perhaps, too, the bereavement process may lead to a readjustment of values and preconceptions.

3. The Significance of Bereavement Studies for the Hallucination Hypothesis

In the light of our brief survey of modern psychological studies of the bereavement process, and in particular the occurrence of hallucinatory and SoP experiences, can we say that bereavement hallucinations on the part of one or more of the disciples might explain some of the post-resurrection appearances? Paul tells us that Jesus ‘was seen’ (*ōphthē*) by Peter, and subsequently by others, himself included (1 Cor. 15:5–8). But since he clearly understood his own experience to be revelatory (Gal. 1:12, 16; cp. Acts 9:1–9; 22:4–16; 26:9–18), and his consistent use of *ōphthē* may suggest that he felt Jesus’s appearances to the other apostles to be of a similar, non-bodily order, the likelihood is that he regarded all these sightings in visionary – though veridical – terms. Of course, this brief comment belies the heated scholarly debate on these matters. Craig (2002: 157–59), for instance, argues defiantly for the view that Paul understood Jesus’ resurrection in bodily terms, but we can hardly affirm as much from Paul’s meagre comments.

Given the hypothesis that the post-resurrection appearances of Jesus could have been based, initially, on a bereavement vision experienced by Peter, or one of the other disciples, to what extent might we apply the results of modern bereavement studies in order to illuminate these accounts? How far may the various features identified in these studies inform the nature of these events?

With regard to *frequency*, suffice it to say that the biblical, intertestamental and ancient literature in general is awash with theophanies (Gen. 18: 1–15; 32: 22–30; Exod. 3:1–4:17; 19; Job 38–42), apotheoses (Gen. 5: 24; 2 Kgs. 2: 11–12; Luke 24: 50–53; Acts 1: 9–11; Livy, *Hist.* I. 16; Ovid, *Met.* 14. 805–51; Dio Cassius,

Hist. 69. 2; Philostratus, *Apol.* 8. 30), dreams (Gen. 28: 10–15; 40–41; Dan. 2: 1–49; 4: 1–27; 7: 1–27; Matt. 1: 20–21; 2: 12–13; Philostratus, *Apol.* 8. 31) and visions (Isa. 6: 1–6; Acts 7: 56; 9: 1–7; 10: 9–16; 2 Cor. 12: 2–4; Rev. 1: 10–17; 1 Enoch 83–90; 2 Baruch 53: 1–74; 4; 4 Ezra 3: 1–5; 20; 5:31–6: 34; 6: 35–9: 25; 13: 1–58) of every description. The ancient Mediterranean world was a place of ghosts (Mark 6: 49; Matt. 14: 26; see Fenton 1999 for ghosts in Classical antiquity) and demons (Mark 1: 21–28; 3: 22–30; 5: 1–20; 6: 13; 7: 24–30; 9: 14–29; Matt. 4: 1–11; Luke 4: 1–13; Philostratus, *Apol.* 3: 38; 4: 10, 20). To be sure, none of these references are associated with bereavement, and it is surely impossible now to assess how common bereavement visions were. My point is that the kind of world in which people then lived would have been entirely open to the occurrence of what today are labelled bereavement visions.

As to their *nature*, the Gospel accounts speak of the disciples both seeing, hearing, and possibly even touching (Luke 24: 39; John 20: 27) Jesus, and it appears that they spoke to him (Luke 24: 18–23, 29; John 20: 15–16) as he spoke to them (Luke 24: 17, 25–26, 36–49; John 20: 10–17, 21–22, 27–29; 21: 1–23). Thus, the disciples are said to have experienced most of the sensory perceptions common among those who perceive their deceased loved ones.

In terms of *culture*, dreams, visions, trances and other altered states of consciousness (ASCs) were common occurrences in first-century Palestine, and although these were regarded as realities in some way distinct from the realities of normal waking consciousness, they were not considered second-rate realities to be treated less seriously than the normal kind. When the disciples told Thomas, ‘We have seen the Lord!’ (John 20:25), they no doubt meant what they said and believed it to be true, but this does not preclude that their experience might have been (in *our* terms) visionary. In Pieter Craffert’s words:

Yes, these were real cultural events and realities; yes, Jesus’ resurrection was a genuine cultural experience for his first followers and yes he was resurrected, as the texts indicate, in a first-century conceptualized material body. Since these people lived by a different logic and consensus reality it was neither material delusion nor objectively real, but culturally real. [So] no, culturally constructed intentional objects and phenomena are not necessarily objectively real. Jesus’ resurrection as a first-century culturally experienced event was in this view not an event in time and space. (2009: 147–48)

Craffert makes a sound case for the cultural concept of Jesus’s resurrection. I am less convinced that a cultural reality can be so readily divorced from both objective reality and material delusion. After all, a hallucination is a delusion of sorts, and *something* must have occurred to cause the disciples to describe

their experience in terms of resurrection. True, this event may not have been an objective bodily rising from the dead, but in evolutionary terms the disciples must have had much the same brain structure as we have today, and so were as susceptible to delusion as we are. What Peter 'saw' would not have been described by them as a hallucination or an SoP, but that is not to say that the experience itself was not what we would call hallucinatory. Culture may make meaning, but it takes more than that to establish reality at the neurophysiological level. Only the brain can facilitate first order reality; 'cultural reality' is the interpretation of something more fundamental.

Nothing that we have said so far in this section contradicts modern psychological studies regarding the cultural universality and frequency of bereavement hallucinations. If they are relatively common among the bereaved in our contemporary monophasic society with its one-dimensional view of truth, it is more than likely that they occurred in abundance in first-century Palestine. Obviously, this only proves that such experiences were familiar to the society in which Jesus and his disciples lived; it does not demonstrate that any of the disciples hallucinated Jesus's post-resurrection appearances. We need to go further.

It might be noted that, devoted as they surely were to Jesus, they were not family members, and so would have been less susceptible in this case to bereavement hallucinations. This argument, however, is not so difficult to refute. Some studies have pointed out that bereavement is not limited to family members, and that even close acquaintances may experience a hallucination of the deceased. However, the disciples were more than close friends of Jesus; he was their '*attachment figure*' without whom they felt disorientated and 'lost'. Further, many of them had left their biological families to make this attachment (Mark 10:28), a move which Jesus himself not only encouraged and commended (Mark 10:29–30; Matt. 8:21–22; Luke 9:59–62) but reciprocated (Mark 3:31–35; Matt. 12:46–50). There is little doubt, then, that the disciples would have mourned Jesus as a family member.

But how might their reaction to Jesus's sudden death match up with our contemporary understanding of the bereavement process? We noted earlier that psychologists often regard the twelve-month period as the benchmark for bereavement. In other words, that time frame is reckoned to be adequate for the bereaved person to 'let go' of the deceased and engage with a new attachment figure (Parkes 1970; Olsen 1985). However, this does not always transpire in practice, and Rees (1971) found cases in his sample who were still attached to the deceased decades later. Cases of this kind are generally referred to by the term 'complicated bereavement'. As far as the disciples were concerned, they showed no inclination to loosen their bond to Jesus after his death; in fact, they clung on to him as their '*attachment figure*' all the more

tenaciously. Obviously, in their case, the data are at such a premium that it is difficult to reconstruct a likely scenario with much confidence. The chief factor concerns the extent to which they understood and embraced Jesus's messianic status. Was their belief in this regard an *ex eventu* response to their failure to acclaim Jesus's messiahship prior to his crucifixion and a reaction to the sudden trauma occasioned by his violent death, as Wrede (1901; Eng trans. 1971) argued? Or, if Jesus's self understanding of his status according to Mark's Gospel (8: 31; 9: 31; 10: 33–34) is authentic, was the disciples' reaction a classic example of what social psychologist Leon Festinger (1956, 1957) memorably labelled 'cognitive dissonance' – a revision of their messianic expectations in order to conform to the new reality of their situation? How did this unforeseen turn of events – from Jesus's triumph to Jesus's death – dictate the direction of the *meaning-making* process?

If the latter alternative is correct, we have an interesting parallel from contemporary Lubavitch Judaism which can not only be confirmed *viva voce*, but has been meticulously documented by Simon Dein (1997, 2001, 2012; Dein and Dawson 2008) who lived and worked among these people for some time. The Lubavitcher are a Hasidic movement originating in eighteenth-century Russia, some of its members subsequently emigrating to America. They were led by a succession of 'rebbe's, each of whom supposedly had the potential to be the Messiah, and the seventh in line, Rebbe Menachem Mendel Schneerson (1902–94) was openly acclaimed as such by some members of the sect. When, in 1992, the Rebbe suffered a debilitating stroke, the faithful persevered, claiming that his suffering was necessary in order to bring in the Kingdom of God. Two years later, the Rebbe suffered a second stroke from which he died. Yet even then, the diehards would not admit defeat, arguing that the Rebbe was in repose with God preparing to bring in the Kingdom when conditions were right.

Perhaps it is possible that, in a manner similar to this, the disciples were able to make sense of Jesus's demise. Joel Marcus (2000: 392–93) succinctly evaluates the possible parallels:

It seems likely that despite the absence of specific statements proclaiming himself to be Messiah the Rebbe did think he was... [b]y the early 1990s significant circles in Chabad [Lubavitcher] were openly acclaiming his messiahship, and it stands to reason that if his self-assessment had diverged from their evaluation of him, he would have quashed such dangerous and misguided talk. He did not, nor did he forbid 'Messiah acceptance dinners' sponsored by the Lubavitch Women's League, or publication of his books that contained allusions to the 'King Messiah' on the title page; nor did he ban the singing in his presence of the song Yechi, with its chorus 'Long live our Master, Teacher and Rabbi, King Messiah forever and ever'. In such circumstances silence is

consent, just as Jesus' failure to stop the Jerusalem crowd from acclaiming him as Messiah at the triumphal entry in Mark 11: 1–10 pars. amounts to a tacit acceptance of the acclamation.

Thus, the disciples' belief in Jesus as God's Messiah was, in the end, confirmed by his death, despite orthodox Jewish opposition to the idea, and reinforced by evangelisation (identified by Festinger as a key feature in many cases of cognitive dissonance). A single bereavement vision may have proved the catalyst for subsequent events, suggesting that Jesus somehow survived his death and would ultimately return to claim his own (Mark 13: 5–37; Matt. 24: 4–51; Luke 17: 22–37; 21: 5–36). Suggestions of a concern over the delay of the Parousia (Conzelmann 1960; Hiers 1974), perhaps discernible in passages such as Luke 18: 1–8 and 2 Peter 3: 3–9, indicate that, in order to survive, the early Christian community was perennially obliged to adjust its expectations.

4. From Bereavement Hallucination to Collective Delusion

Whatever one's reaction may be to the hallucination hypothesis as presented here, it will be recognised that, despite the odd suggestion to the contrary (O'Connell 2009; Zusne and Jones 1982: 117–19), hallucinations are the preserve of individuals and cannot belong to shared experience. What can be shared, however, are collective delusions, and in his application of these to the post-resurrection appearances, it may be that Goulder (1994, 1996, 2000) is broadly on the right lines. This really requires a study in itself (I touch upon the topic in Smith 2023), but before I close, I wish to indicate how, in the case of the disciples, the singular visionary experience might have flipped over into the collective, and how this transition might turn out to be simpler than is often assumed.

Although written almost 130 years ago, Gustave Le Bon's *Psychologie des Foules* (1895; Eng. trans. 2018) still provides plenty of food for thought concerning the psychology of crowd behaviour. Two of his preliminary observations are especially prescient. First, he notes that a 'psychological crowd' must be imbued with a common purpose – one quite different from, say, a Saturday morning crowd of shoppers on the High Street. Second, psychological crowds require a leader – someone capable of galvanising hundreds or thousands of individuals into a concerted body with a common purpose and from whom all capacity for connected thought is removed. Yet the 'leader' need not necessarily be an individual, but an *ad hoc* committee. A politburo may serve as well as a dictator. According to the Gospel of Matthew, the charismatic power of Jesus, which was so evident in his crowd-drawing capacity throughout his ministry (Mark 2: 2, 12; 3: 7–10, 20: 4:1; 5: 21; 6: 31–34, 44, 55–56; 7: 1; 8: 1, 9; 9: 15, 25; 10: 1, 46; 11: 18; 12: 37; Matt. 4:

23–25; 5: 1; Luke 4: 37, 42; 5: 15; 6: 17–18; 8: 4, 19, 40, 42; 9: 11, 37; 11: 29; 12: 1; 14: 25), was invested not only in an individual successor (Matt. 16: 19), but diffused among the Twelve as a whole (Matt. 18: 18).

One of Le Bon's most compelling comments is that truth is often of little account among a crowd's list of priorities:

In crowds it is stupidity not mother wit that is accumulated... The masses have never thirsted after truth. They turn aside from evidence that is not to their taste, preferring to deify error, if error seduce them. Whoever can supply them with illusions is easily their master; whoever attempts to destroy their illusions is always their victim. (2018: 16, 55)

The 'rally', with its packed stadia, loud music, stage-managed programmes and charismatic speakers, is the ultimate venue for crowd seduction; but the principle can apply in more spontaneous settings, too. For three years from 1968–71, thousands of people gathered on a nightly basis in the hope of seeing the apparition of the Virgin Mary on the domed roof of St. Mary's Church in Zeitoun, Egypt (Zaki 1978; Johnston 1980). Large numbers of witnesses, Christian and Muslim alike, were convinced, while others, who stood aloof from the crowd and deployed their powers of reason were not (Nelson 1973). Packed crowds offer people the opportunity to compare notes with their neighbours and mutually convince each other of what they want to believe.

The key point to mention, however, is that underlying every collective delusion is an individual stimulus. In the case under discussion, excitement was sparked by two bus mechanics who happened to work opposite the church. One of them noticed what he took to be a young woman about to commit suicide by leaping from the church roof. An official of the church was alerted, and it was he who identified the figure as the Virgin Mary. This in turn was probably suggested by several prior Marian associations with the area. By tradition, Zeitoun was supposed to be the place where the Holy Family had stopped to rest on their flight to Egypt (Matt. 2: 13–15). Then, too, the church itself had been built on land donated by the landowner following a dream he had of Mary instructing him to build a church in her honour, which he duly did. She also promised to visit Zeitoun in the future. It is not without interest, either, that this visit just happened to take place in the wake of Egypt's catastrophic defeat by Israel in the so-called Six-Day War of 1967. Thus, several socio-cultural factors seem to have conspired to make the timing of this visit appropriate. (For a detailed, level-headed Jungian-based interpretation, see Musso 2017, 2019).

The events of Zeitoun stand like a fully-grown oak tree germinated from a single acorn. Stories of this kind are borne out of a combination of psychological and sociological factors, nurtured by a will to

believe, but they do not arise spontaneously; rather, the blue touch-paper is ignited by an individual who sees or senses something and communicates his experience to another individual or group of individuals. From that point, the delusion – as it surely is – takes hold exponentially through human discourse. It is entirely possible that, by means of this perfectly natural process, a bereavement hallucination experienced by Peter or another disciple was communicated to the others and developed into a fully-fledged delusion. Had the hallucination been of Peter's mother-in-law, nothing unusual would have happened. It would have required a hallucination of the risen Jesus, who the disciples believed to be, or suspected of being, the Messiah in order to engender lift-off.

I do not claim to have addressed every question, but a single paper naturally has its limits. One outstanding objection, which in any case has been addressed elsewhere (see Carrier's [2009] robust response to Holding's [2007] 'beaten men' argument, along with comments by Kormarnitsky [2014: 45–80]) is that a group of people who were left defeated and despondent in the wake of the crucifixion on Good Friday were transformed into fearless ambassadors of the Gospel in the wake of Easter Sunday, even to the extent of being willing to die for the cause, and that this can be explained only in terms of bodily resurrection. All I will say in response is that people have been willing to die for much less, and that for the disciples, hallucinations and collective delusions were not mere figments of the imagination.

4. Conclusion

In the first section of this paper, I outlined the work done by New Testament scholars on the proposal that the post-resurrection appearances of Jesus may be explained by means of a combination of bereavement hallucinations and collective delusions on the part of the disciples. Naturally, most evangelical scholars summarily dismiss this possibility, but even the more liberal faction who embrace it do so without sufficient recourse to the work of psychologists and psychiatrists in the field. My proposal is that the hallucination/ collective delusion hypothesis is indeed a reasonable one, but needs to be underscored by reference to interdisciplinary studies, since it is only here that we can expect to discover the cutting-edge research into the relevant phenomena.

I devoted the following section to an overview of current bereavement studies, noting the general consensus regarding the nature, frequency, function and meaning of bereavement hallucinations, and finally applied my findings to the particular case of Jesus's post-resurrection appearances. I concluded that the conditions would have been perfectly amenable to the kind of psychological explanation we have been considering. The disciples had a very close, even familial attachment to Jesus, and his sudden and

violent death would have left them devastated and disorientated. Since they were unable to transfer their attachment to an equally charismatic and influential figure, they were compelled to seek a solution to their grief which somehow involved Jesus's continued presence. Individual hallucinations, leading to collective delusions, would have served this purpose and spared the disciples the humiliation and shame of admitting to the failure of their expectations. Their polyphasic understanding of truth would not have recognised the veridical/ subjective distinction to which we are accustomed and, as Jack Kent (1999: 27) has noted, they reached a turning-point at which they were finally able to let go of Jesus as their charismatic leader and mentor, and take up his cause as leaders themselves. This enabled them to function as more fully-rounded human beings than hitherto, and to find glorious meaning in a series of events that had initially seemed futile and pointless.

The chief aim of this paper has been, not to urge that this hypothesis should be adopted in every detail, but to suggest, against the general traditionalist position, that it is equally as feasible as the traditional explanation espoused by Craig (2008: 230–34, 371–77, 384–87, 395–99; contra Calvin and Colombetti 2019), Wright (2003: 686–96, 706–18), and others.

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