

A Systematic Survey of Near-Death Experiences in South India

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Abstract—In order to determine the prevalence rate of Near-Death Experiences (NDEs) in south India, the author systematically surveyed four villages with a total population of 6430 persons. Eighteen persons were reported to have died (or nearly died) and revived. Thirteen (72%) of them reported having had NDEs which is about 2 cases per thousand of the population surveyed.

Eleven features of the south Indian cases are compared with the features of north Indian cases. Most of the principal features of the south Indian cases resemble those reported from north India. However, they also differed in the frequencies of four features; two of the features were reported chiefly by the north Indian subjects while another two only by the south Indian subjects. All these four features have been reported among American cases. The author suggests the possibility of a genuine phenomenon underlying the similarities of features among cases in two different cultures.

Introduction

Persons who come close to death from grave illness or injury and survive, sometimes afterward report unusual affective and cognitive experiences which occurred at a time when they were ostensibly unconscious and near death or even considered dead. Such experiences are often referred to as "near-death experiences (NDEs)." Although scattered reports of such experiences have come from many parts of the world, the majority of studies derive their data from Western patients (Greyson and Stevenson, 1980; Moody, 1975; Ring, 1980; Sabom, 1982). To date, only two reports of such cases have come from India (Osis and Haraldsson, 1977; Pasricha and Stevenson, 1986).

In an earlier paper we (Pasricha and Stevenson, 1986) reported some 16 cases of near-death experiences that came to our attention while investigating reincarnation type cases in India. The paper included summaries of four cases of the Indian NDEs. It also compared the frequency of 12 features in the 16 Indian NDEs with their frequencies in 78 American NDEs. The data for the American cases derived from an earlier study reported by Greyson and Stevenson (1980). Six of the features were reported mainly by the Indian subjects, namely: taken to other realm by messengers; passed to a 'man with a book;' sent back because of a mistake; subject not 'scheduled' to die yet, another person said to be due to die instead of subject; brought back from other realm by messengers; and (subjects had) residual marks on the body after NDE. Three features were found

only among the American subjects which were: saw own physical body; sent back by a loved one or an unknown figure but not because of a mistake; and reviewed own life, "panoramic memory." And the following three features were reported by the subjects of both the cultures: saw deceased acquaintances (in other realm); saw 'beings of light' or religious figures; and apparently revived through thought of loved living persons or for other reasons and own volition. We had argued in that paper that the difference in features between the two cultures may be due to the effects of one's own beliefs regarding life after death and that some of the experiences may seem different in details of description but on closer examination, found to be similar in nature.

There have been few studies of the NDEs in non-Western cultures and far fewer systematic surveys anywhere in the world. The only attempt at a systematic survey of the general population was that of Gallup (1982), which used a somewhat ambiguous question¹. The present paper reports the first investigation of cases concerning the prevalence and features of NDEs in a particular geographical area.

The survey was conducted between 1985 and 1986 by using appropriate sampling techniques. The present article reports my findings of a systematic survey completed in four villages. It also includes features of the NDE cases identified during the survey and investigated up to 1989.

Method

The Survey Villages and Population

In order to learn the prevalence rate and characteristics of NDE cases, I undertook a systematic survey in an area (Channapatna, District Bangalore) of Karnataka State, India. Bangalore is the capital of Karnataka State (south India). The Bangalore district is divided into 11 subdivisions, called Taluks (roughly corresponding to Tehsils in northern India and to counties in the United States and the United Kingdom). One of these subdivisions, the Channapatna Taluk, is situated on the Bangalore-Mysore road, about 60 kilometers southwest of Bangalore. This area was chosen for two main reasons: First, it included both urban and rural populations and second, it was easily accessible from the institution where I work (the National Institute of Mental Health and Neurosciences [NIMHANS]) in Bangalore.

Criteria for Inclusion

In determining the prevalence rate the following inclusion criteria were applied: (i) the subject must have been a resident of the survey village at the time of the survey; and (ii) the subject must have been alive at the time of the survey.

Using the latest available voters' registration lists, 663 target respondents (persons designated for interviews) were identified in the four survey villages. In order not to miss any cases (as far as possible), every household was included in the present study² and one member from each household was interviewed with regard to his or her knowledge of the cases. The person interviewed was

usually the head of the household, but a younger member was interviewed when the head of the household was not available. Eighteen respondents had either moved out of the village or were not available at the time of our visits (we made two call backs for the respondents who were not available during the first scheduled visit). Finally, a total of 645 respondents were available for the interviews.

The ages of the respondents ranged between 16 and 90 years. Three hundred and ninety-nine (62%) were males and 246 (38%) were females. Four hundred and sixty (71%) were illiterate or functionally illiterate; 76 (12%) had attended a primary school; 62 (10%) had gone to a middle school (or intermediate school); and 47(7%) had had education up to high-school or beyond. Four respondents were college graduates.

Information regarding their occupations was available for 640 respondents. Half the respondents were cultivators, and of the remaining half 158 (25%) were housewives; 123 (19%) were laborers; 19 (3%) had their own business; 13 (2%) were caste laborers³; five were in government service; and two were students.

Information on religion and socioeconomic status was available for 642 respondents. All the respondents were Hindus, and a majority of them (65%) belonged to the lower middle socioeconomic group. Only one respondent belonged to the upper class; 10 respondents belonged to the upper middle, 85 (13%) to the middle; and 132 (21%) to the lower socioeconomic class. The socioeconomic status was appraised by using a standard technique developed for the rural population of India (Pareek & Trivedi, 1964). The technique consists of a scale which includes such parameters as the level of education of the head of the household, the type of house he lives in, his furniture, and agricultural equipment etc.

An interview schedule was administered to each respondent, which, in addition to eliciting the usual demographic data, asked questions about the respondent's belief, familiarity, and knowledge regarding cases in which a person had apparently died and revived.

The respondents who said that they were familiar with cases of the kind being studied, were asked to give specific information about a subject whom they knew or of whom they had heard, either in their own village or any other place. Later, 12 of the 13 subjects identified within the survey village were interviewed in detail about their experience—one subject had died after the first round of interviews. In addition, 4 informants who were present when the subject revived or narrated his experiences to them, were interviewed. If the respondents did not have any knowledge of or familiarity with the cases, only their demographic details were noted, which did not take more than five minutes. If on the other hand, an informant was the subject of a case or had first-hand knowledge of a case, for example of one occurring among his (or her) family or close friends, the interview was much longer and lasted for 40 minutes or more.

When the subjects were interviewed, they were first allowed to narrate their experiences spontaneously and then specific questions were asked from a checklist (see Appendix) in order to elicit specific information not mentioned

spontaneously. In all, 12 subjects were interviewed. One subject had died by the time the first round of identifying the cases was completed. The essential information for this case was obtained from the subject's relatives. The relatives or friends of subjects were interviewed in 5 more cases; hence 17 informants (including 12 subjects) were interviewed for 12 cases. In addition to the questions about the subject's physical condition, they were asked about what the subject had told them (the informants) about his or her experience. In general, the versions stated by informants who were not subjects agreed with what the subjects themselves stated about their experiences.

Results

Belief, Familiarity, and Knowledge of Revival⁴ and NDE Cases

Of the 645 respondents interviewed, 148 (23%) respondents believed that it was possible for a person to die (or almost die), recover, and have memories of the period during which he or she was dead (or apparently dead). Sixty-two (42%) of these respondents had heard of one or more such cases in their own village and 47 (32%) respondents had heard of such cases in other villages. The belief in revival on the part of these informants might have derived from their knowledge of cases. However, the remaining 39 (26%) informants, although they believed in revival, had not heard of or known about a case.

Cases in the Survey Villages

Sixty-two (42%) of the respondents who were familiar with revival cases also referred to one or more specific cases in their own village. However, not all respondents who were familiar with such cases, knew of every case in his or her village. In all, informants made references to 26 cases.

Eight cases were excluded since they did not fulfill the inclusion criteria; seven of the subjects of these cases had died long before the survey, and one had moved to another village. The remaining 18 cases were investigated for further details. Table 1 shows the distribution of cases in the four villages surveyed. It

TABLE 1
Prevalence of Revival and NDE Cases in the Survey Villages

Population Village	1985 (estimate)"	No. of Revival Cases	No. of NDE Cases
Patalu	1979	5 (2.5)	3 (1.5)
Kannamangala	1312	1 (0.8)	0 (-)
Sunnaghatta	1253	3 (2.4)	3 (2.4)
Sigrajipura	1886	9 (4.8)	7 (3.7)
Total	6430	18	13

* Estimated annual growth (by geometric progression) from 1981 census figures (Census of India, 1981).

Note. Figures within parentheses show prevalence per thousand.

includes the cases of persons who had seemingly died (or nearly died) and revived and the number of cases in which NDEs occurred.

Eighteen cases of the revival type were reported in a total population of 6430. In five cases the subjects had been seriously ill or were thought to have died, but they had remembered no experiences during that period. The remaining 13 cases were reported to have had NDEs. One of the subjects died after my first contact, and her family members did not remember much about the experience except that after reviving, the subject said that she was taken to "Yamapatana" (the place in Hinduism where Yama, the god of death lives). Since sufficient information, except on demographic characteristics, was not available for this last case it was not included in the analysis of the main features.

The Prevalence of NDE Cases

In all, 13 cases were reported among an estimated population of 6430 persons (based on annual geometrical growth projection of the 1981 census). Hence the prevalence rate of NDE cases was 2 in one thousand population. In three villages the occurrence of cases ranged between 3 and 7 cases; in the fourth village (Kannamangla) no case of a NDE was reported.

Demographic Characteristics of the Subjects Who Had NDEs

Thirteen of the subjects who reported a near-death experience, 12 (92%) were females; the median age of the subjects at the time of the NDE was 29 years (range 20–70 years), and it was 50 years (range 31–80 years) at the time of our first interview with them; the median time lapse between the NDE and the interview was 20 years (range 1–49 years). Information on the socioeconomic status of the subjects was available for 11 cases. We could not obtain information in two cases as the subjects were reluctant to give information during our first interview and they were not available on a subsequent visit. Six of them belonged to the lower middle class, four to the lower, and one to the upper middle class. Information regarding their occupations was available for 10 subjects. Six of them were housewives, three were laborers and one was a farmer.

Physical Condition of Subjects Prior to the Time of NDE

Although reasonably good medical facilities are available in Channapatna, and the survey villages were situated at a distance of 5 to 14 kilometers from it, people generally did not seek medical consultations unless they recognized an emergency. (Such underutilization of medical facilities is quite common in most Indian villages.)

Six subjects were suffering from a mild to severe physical illness prior to the experience. The subjects reported that they had suffered from a wide variety of ailments including: fever for one day; fever off and on for six months, dysentery and difficulty in breathing for one day; 20 days following childbirth, involuntary trembling of the index finger followed by difficulty in lifting the forearm

and loss of consciousness; disorder with the abdomen, hand, and feet swollen; stoppage of passing urine and stools; some brief illness (no details available); and gall bladder operation. I was able to confirm the physical condition of three subjects from the informants. Informants were not available for the remaining cases.

Except for three cases, all the subjects had their experiences while at home. Two of the subjects had a NDE on their way to or from the hospital while one had it at the pond where he had nearly drowned and was rescued. It follows from what has been said above that except for two patients who were taken to the hospital, all the subjects revived spontaneously and without the measures of resuscitation available in the hospital. The records of those two patients who were taken to the hospital were not traceable. In one case the patient had been admitted a long time earlier. In the other case sufficient details were not available for tracing the records. (Presuming that specific measures were taken to revive these two patients, data from them are too meager to warrant making any comparison with cases in which no formal techniques of intervention were used.)

Before I describe the main features of the cases, I shall next present summaries of four cases to provide a sample of the description of the NDEs as reported by the subjects themselves.

Case Reports

The Case of Muttaka

The subject, Muttaka, was about 65 years old at the time of my interview with her in December 1985. She gave the following account of her NDE, which had occurred about 20 years earlier, and of the circumstances at the time. She was suffering from an abdominal ailment. Her hands and feet were swollen, and she was unable to pass urine or stools; and she fell unconscious. "I saw three persons with curly hair coming. Then I found myself outside (on the threshold of) a door. Inside, a fat man was sitting on a bench and looking through some papers. He told those three persons: 'Why have you brought her. She still has [not completed her allotted] time' and he threw away my papers. After that I do not know how I came back."

Muttakka said that she seemed to go up in the same body, but there was no swelling on any part of her body and she was able to stand, which she was not able to do in her physical body because of her illness. She also felt that time moved very fast and that the whole experience lasted only one minute. However, no informant was available to tell us about the actual duration of her unconsciousness.

The Case of Javanamma

We interviewed Javanamma, a woman of approximately 60 years, first in December, 1985 and again in January 1986. She had fractured her right forearm

about six years earlier, and then had a fever three days later. Although she was given an ointment by a local doctor for application on the site of the fracture, she received no treatment for the fever. She gave the following description of her experience:

"I was dragged 'up' by four yamadoots (messengers of the god of death, Yamaraj). I saw one door, and went inside. I saw my mother and father there. I also saw the Yama who was fat and had books in front of him. The Yama started beating the yamadoots for having taken me there instead of another person. (The name of the 'other' person was not mentioned.) While the yamadoots were being beaten up, I was accidentally hit on the back. As a result, I felt a severe pain and developed a mark on my back. The pain was more severe there (in the other realm) than it was after I returned back. I was asked by my parents and the Yama to be sent back. I was scared to be there because there were so many people, and I was happy to be back so I could see my children."

She also had a mark on the forehead which had allegedly resulted from the branding done by the Yama. "That is done to every one who returns from there."

The Case of Kenchamma

We interviewed Kenchamma, in January 1986 when she was about 35 years old. At the age of about 28, when she was pregnant for 5 months, she had a spontaneous abortion and bled profusely. According to the mother of the subject, Kenchamma was bleeding profusely for about 4 hours and had lost consciousness. The people around her believed that she was dead because "there was no pulse, no breathing and her body had become cold." While allegedly dead, Kenchamma had the following experience: "Four women came and carried me along. They met a man while going (to the other realm) who asked those women, "Why are you carrying her? She has young children, return her back." While saying this he placed a hot rod on my knee and pushed me down. I felt a strong burning sensation from the heat; when I regained consciousness I had a wound on my knee which was treated with some indigenous ointment. The four women who had carried me along, brought me back." The subject claims to have had developed a residual mark as a result of the burning.

The Case of Gowramma

We interviewed the subject Gowramma, first in 1987, and again in November 1989 when she was about 22 years old. She had no illness till the time when she suddenly felt weak and fell unconscious for about ten minutes. She gave the following description of her NDE.

"I was taken up by some messengers in a jeep to Yamapatna (the place where Yama, the god of the dead lives). He had a listing of names in the books. Yama looked into the books and told the messengers, 'Send her back; she still has not

TABLE 2
Main Features of North and South Indian NDE Cases

Feature	North Indian Cases		South Indian Cases	
	Number Queried	Number Positive Response (%)	Number Queried	Number Positive Response (%)
Saw own physical body	16	— —	7	1 (14)
Taken to "other realm" by some messengers	16	12 (75)	13	11 (85)
Saw deceased acquaintances	16	4 (25)	12	7 (58)
Saw religious figures	16	12 (75)	12	— —
Went to "a man with a book"	16	8 (50)	12	10 (83)
Sent back because of a mistake; subject not scheduled to die yet	16	10 (62)	10	6 (60)
Another person said to be due to die instead of subject	16	7 (44)	10	3 (30)
Apparently revived through thought of loved living persons or other reasons and own volition	16	1 (6)	12	— —
Sent back by a loved one or an unknown figure, but not because of a mistake	16	— —	10	1 (10)
Brought back from other realms by messengers or by deceased relatives	16	13 (81)	8	7 (88)
Residual marks on physical body after NDE	16	4 (25)	12	4 (33)

completed her time." During the experience, she claimed to have seen her body which was lying down, could see people, and also her house as from above. This was the only case in which the subject reported an out-of-the-body experience.

Main Features of NDE Cases

Table 2 presents the frequencies of the main features of the NDE cases from north and south India. The figures for the north Indian cases have been taken from an earlier article (Pasricha and Stevenson, 1986). A dash indicates lack of information about that feature; it was not spontaneously mentioned by the subjects (or their relatives) and we did not make systematic inquiries especially of the north Indian cases.

Discussion

In our earlier paper (Pasricha and Stevenson, 1986) we expressed the hope of conducting a systematic survey to learn the prevalence rate of NDE cases in India. The present paper is a report of such a study.

The survey showed that 18 of the estimated 6430 persons (2.8 per thousand) had died and revived with or without intervention. All of them, however, did not have or did not remember experiences during a near-death episode; 13 (72%) of them narrated some such experiences. The ratio of near-death condition and near-death experiences was therefore appreciably higher in these Indian cases than it was in an American series reported by Sabom (1982); he found that only 43 per cent of persons coming close to death could later remember any experience at the time.

In both the series of Indian cases the following features were markedly more frequent than in American ones (Greyson and Stevenson, 1980): the subjects were taken to the "other realms" by some messengers, they saw or met deceased acquaintances or relatives; they saw a man with a book; a mistake was discovered such that the subject's time had not yet come or another person was scheduled to die; the subject was brought back by the messengers; and on return from the other realm he or she had some mark or marks on his or her physical body.

The above picture is considerably different from the one presented by the American cases. The subjects of the American cases are not taken by any messengers, they just find themselves in the other realm; no mistake is discovered for their return back; they come back of their own volition or for the love of their surviving relatives or friends.

However, differences in features occur not only between American and Indian cases, they are also found between the cases reported from two regions of the same country namely, north and south India. For example, two of the south Indian subjects (one each) reported features that were not found in the north Indian cases but were commonly reported by the American cases. These were: the subject was sent back by an unknown figure but not because of a mistake; and the subject saw his physical body from outside. On the other hand, most of the north Indian subjects met religious figures, and one of them revived on his own volition rather than being sent back. Both these features namely, seeing religious figures or beings of light and revival through one's own volition, were missing from the south Indian cases but have been reported in the American cases.

The differences in reported features even within the same culture may be due either to insufficient data or to actual variations in the experiences. On the other hand, the resemblance of some features between the American and Indian cases points toward the possibility of some common experiences that remain unaffected by cultural influences. Further studies on larger samples across cultures will help in understanding factors responsible for the similarities (or differences) in features of the NDE cases.

Conclusions

The prevalence rate of NDEs in a region of south India was found to be 2 cases per thousand. The features of the cases resemble each other in the two series of cases from northern and southern India. However, they differ from each other on four features. All these four features have been reported among the subjects of American cases. It is possible that the subjects go through some common experiences irrespective of their cultural background.

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Notes

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Reprint requests at the above address.

1. "Here is a question about unusual experiences people say they have had when they had been on the verge of death or have had a 'close call' such as experiences of continued life or an awareness of after death. Have you, yourself, ever been on the verge of death or had a 'close call' which involved any unusual experience at that time?" (Gallup, 1982, p. 183)
2. In an earlier survey of reincarnation type cases (Barker and Pasricha, 1979), we had chosen every tenth village and every tenth household in

each village for interviewing a respondent. We learned that choosing every tenth household was not an adequate method for identifying all the cases; we missed almost 30 percent of them.

3. For example, a person belonging to the Dhobi (washerman) caste did washerman's work, and a Kumhar (a potter) made pots for his living.
4. The term revival refers to persons who had come close to death, but the informants did not know whether they had had a near death experience or not.

Appendix

Information about NDEs (Checklist)

Age at occurrence of experience _____

Physical condition at the time of NDE _____

1. Healthy _____ 2. Illness _____ 3. Surgical operation _____

4. Childbirth _____ 4. Drugs _____ 5. Other _____

Duration of illness (if ill) _____

Taken to other realms by messengers _____

Saw own physical body _____

Review of life/Panoramic memory _____

Went to a man with a book _____

Who took you there _____

Description of other realms (brief) _____

Another person died instead of S _____

Sent back because of a mistake _____

(S was not scheduled to die)

Sent back for some other reason (Specify) _____

Met other deceased persons/religious figures _____

Who brought you back from other realms _____

Residual marks on physical body after NDE _____

Impact of the experience on S _____

Change in attitude toward life _____

Change in attitude toward death _____

Evidence of ESP after NDE _____

Any other information _____

Communication about NDE

Did you tell about your experience to anyone? _____

How long after the experience? _____

Relation with the person _____

Address of the person _____

Knowledge of NDE cases before own NDE _____