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A longitudinal study of sensory and quasi-sensory experiences following bereavement using interpretative phenomenological analysis

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ABSTRACT

This longitudinal qualitative study describes the lived experience of 'sensory and quasi-sensory experiences of the deceased' following bereavement. Ten semi-structured interviews were conducted with four bereaved individuals at 6–12 months, 12–18 months, and 18–24 months post-bereavement. Following transcription, interpretative phenomenological analysis (IPA) of each account allowed for a description and interpretation of recursive and processual change, over time. The findings report four themes: 'the deceased as present, nearby, or somehow accessible', 'resolution, relocation and configuration', 'maneuvering closeness and comfort', and 'transforming, unfolding and enacting narrative futures'. The findings show that sensory and quasi-sensory experiences involving the deceased foster continuing bonds and are meaningful. The study outcomes bring novel insights into how such experiences unfold and affect bereavement.

Introduction

Sensory and quasi-sensory experiences of deceased others (SED) are sensory and perception-like experiences, including visual, auditory, olfactory, gustatory and somatic perceptions and can include a generalized felt sense of the deceased. Though viewed historically as a form of "unresolved grief," (Freud, 1917) research now conceptualizes SED as a normal response occurring in 42% to 82% of bereaved individuals (Grimby, 1993; Kamp et al., 2021; Longman et al., 1988). Due to the epistemological challenges they raise, the extant literature draws upon a variety of interpretive and theoretical frameworks to articulate what SED constitute. SED have been conceptualized theoretically as after-death communication, sense of presence, bereavement hallucinations, externalized continuing bonds, anomalous experiences, sensory experiences, illusions, and continuation of consciousness (Cooper, 2017; Datson & Marwit, 1997; Elsaesser et al., 2021; Grimby, 1993; Hayes & Leudar, 2016; Keen et al., 2013; Millar, 2023; Sabucedo et al., 2021; Steffen & Coyle, 2011).

Following an integrative review, Kamp et al. (2022) proposed the use of the term SED as a neutral construct for research on the topic. Emphasis on the sensory modalities SED are experienced within provides a helpful framework to categorize and describe relevant experiences. Examples of visual SED described within the literature include seeing the deceased appear partially or in full. Auditory SED include hearing sounds associated with the deceased, such as hearing them enter the room, or closing a door in the house, or hearing the voice of the deceased through comments, phrases, or conversations. Olfactory SED include smells associated with the deceased such as tobacco smoke, their aftershave or perfume, or the smell of their favorite meal. Tactile SED includes the experience of feeling touched, held, or being able to physically touch them. Gustatory SED includes perception of presence though taste. Finally, quasi-sensory experiences, constitute a more generalized and non-specific sense of presence that is perception- rather than being localized to a place or sensory modality. In contrast with presences that are associated with psychiatric disorder that are commonly distressing, SED bring a sense of comfort within the context of bereavement-related distress (Hewson et al., 2024).

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Theoretical perspectives on SED are drawn from attachment theory, the theory of continuing bonds, meaning reconstruction in loss theory, sensory motor theory, and psychological models of trauma. SED are thought to resolve violated expectations within the sensory motor system through "amodal completion" (Millar, 2023). Higher rates of traumatic loss for experiencers may indicate that SED involves a form of reliving, due to narrative disruption, and traumatic grief (Field & Filanosky, 2010; Kamp et al., 2024). Research has further shown that stronger religious or spiritual beliefs, the loss of a close relationship, and prior trauma, increase the likelihood of experiencing SED (Kamp et al., 2024). Steffen and Coyle (2011) suggest that a spiritual perspective on SED and their impact may reveal a broader range of adaptive outcomes for the bereaved. Addressing their adaptive potential, attachment theorists' position SED as a form of externalized 'continuing bond' and advocate for the internalization of the relationship as a secure base (Bowlby, 1982; Klass, 2006; Steffen & Coyle, 2011).

Regarding the consequences of SED and their role in bereavement, the existing literature points toward both adaptive and maladaptive potentials. Despite co-occurrence with grief, SED offer comfort, emotional support, an opportunity for last goodbyes, the processing of unfinished business through dialogue, relief from loneliness, and sensemaking (Hayes & Leudar, 2016; Nowatzki & Kalischuk, 2009; Steffen & Coyle, 2011). Some have argued that the adaptive potential of SED may be tied to the relational qualities they entail, with this emerging as a positive resource, or an expression of unfinished business (Hayes & Leudar, 2016; Kamp et al., 2019, 2022; Steffen & Coyle, 2011). While comforting for many, SED may involve stigma, fear, and difficulty conceptualizing the experience, particularly when these conflict with established worldviews (Keen et al., 2013). Although uncommon, a minority report unwelcome and distressing experiences, suggesting mental health implications when SED go awry (Hayes & Leudar, 2016). Whilst continued engagement with the deceased has long been held as a marker of bereavement complications, Kamp et al. (2024) have shown that bereavement distress reduced at similar rates for those that experienced SED and those that did not, with this suggesting that SED may constitute one way that grief is expressed rather than being an indicator of bereavement complications.

To date, the literature on SED is consistent with Gillies and Neimeyer (2006) meaning reconstruction theories of loss. Though not necessarily adaptive, SED provides opportunities for sensemaking, benefit finding, and identity change after bereavement (Currier et al., 2015; Hayes & Leudar, 2016; Hewson et al., 2024; Steffen & Coyle, 2011). SED may be an indicator that the bereaved derive benefits from externalized bonds with the deceased or that further sensemaking and identity transformation is needed to internalize the relationship. Grief involves a process of meaning (re)construction whereby post loss meaning structures incorporate new ways of viewing the world that integrate the lost relationship, and foster opportunities for personal growth. When meaning systems are fixed, incompatible, or distressing, therapeutic techniques aimed at supporting the reconstruction and integration of the event story (i.e., events leading up to the death) and the back story (i.e., story of the relationship) to support greater coherence (Gillies & Neimeyer, 2006, 2006; Neimeyer, 2009, 2012).

As in other forms of anomalous experience, the emotional and behavioral consequences of SED are likely tied to how SED are appraised, with pleasing and meaningful attributions contributing to positive affect, and negative and stigmatizing appraisals producing distress (Garety et al., 2001; Neimeyer, 2012). Positive interpretations include recognition that the deceased is at peace, passed over to an afterlife, or retained as a helpful presence for the bereaved (Steffen & Coyle, 2011). Negative interpretations described within the literature include feared malevolence, incomplete passage to the afterlife, or fear of "going mad" (Jahn & Spencer-Thomas, 2018; Keen et al., 2013; Sabucedo et al., 2021). Dependency (Mancini et al., 2015), closeness (Kamp et al., 2022) and conflict (Testoni et al., 2020) have been associated with distressing SED, suggesting that qualities of the pre-death relationship may also play a role.

Despite theoretical and empirical evidence suggesting that internalized CB are adaptive (Black, 2020; Scholtes & Browne, 2015), the process through which externalized experiences such as SED are maintained or become integrated has gained limited attention, due in part to the dominance of cross-sectional and positivist research designs. Similarly, research examining the unfolding and maintenance of SED remains scarce. Through an in-depth phenomenological approach to inquiry, the current study explored some of the ways that SED contributes to sense-making and sought to answer the following questions: How do bereaved individuals make sense of, and derive meaning from SED? How is this shaped by cultural and spiritual beliefs, including belief in an afterlife? How is unfolding grief shaped by the interpretation of SED? The study is theoretically grounded upon grief and meaning reconstruction and the theory of continuing bonds.

Methods

Design

A longitudinal qualitative design was employed, using semi-structured interviews to capture the interpretative and ideographic nature of SED within participants' lifeworlds'. Three phases of data collection over a period of twenty-four months enabled examination of temporality, attending to diachronic and processual patterns across the data set. In accordance with (Neale, 2021) a longitudinal analysis was concerned not with "concrete events" but with the unfolding of agency and the "inner logic" of participants' lives.

Patient and public involvement and engagement

PPIE ensures that the research process was aligned with the needs and priorities of bereaved individuals and services. An advisory group provided feedback on the study design, reviewed participant information sheets, and participated in data analysis discussions, offering reflections based upon their own experiences.

Sampling and recruitment

Participants were purposively recruited from local bereavement services, hospices and via a social media advertisement. Information Sheets were shared using a Qualtrics Survey link or as paper copies. A recruitment poster was also displayed in the waiting room of bereavement services. Participants were required to speak fluent English, report at least one form of SED, and be 18 and over, and to have experienced a bereavement six months ago. Recruitment was passive in order to ensure that participants were not coerced. The strategy included targeting culturally diverse populations via social media platforms. Participants were asked about the presence of neurological disorders (e.g., Parkinson's Disease) however none reported any current issues or diagnosis.

Data collection

Depending upon the preferences of the participants, interviews took place at home, within a consulting room, or online via Microsoft Teams. One participant requested to attend only one interview, and one delayed the final interview due to the anniversary of loss. Initial interviews took place six to twelve months after bereavement, with subsequent interviews offered at twelve to eighteen months, and after two years. The researcher confirmed participants' willingness to proceed at each interview, emphasizing their right to withdraw at any time. Interviews were conducted by the lead researcher (HH) and lasted between 60 and 120 minutes. Semi-structured interview schedules included open questions on the nature of the relationship, SED, and impact (i.e., can you tell me about your bereavement?, can you say something about what sensory experiences of the person were like?, what did you make of it? when did you first/last notice it?, do you feel able to tell me where you imagine they might be now?). Questions were informed by literature review, (Hewson et al., 2024) and consultation with a patient and public involvement group. Follow up interviews utilized a shorter version of the interview schedule emitting introductory questions on the nature of loss. The use of active listening techniques facilitated participants to tell their own story with recursive questioning used to explore how experiences changed over time (i.e., was it similar or different to your experience last time?) (Neale, 2021). Creative methods provide opportunities to shift the power balance of the researcher-participant dynamic whilst supporting expression of pre-reflective awareness and a more nuanced understanding of participant life-worlds (Day et al., 2023). Participants were therefore invited to bring objects or photographs to interviews that provided a sense of connection to the person. At the end of each interview, transcripts were created using Microsoft Stream, these were then reviewed and edited to ensure a verbatim record. All identifying information was removed.

The researcher that conducted the study had prior experience of SED through therapeutic work with bereaved individuals and had similar experiences to those people studied. Though they did not hold strong perspectives on SED, experience of working with individuals who report distressing hallucinations encouraged curiosity toward emotional processes and mental health.

Data analysis

Data were analyzed using LIPA (Farr & Nizza, 2019). LIPA is grounded in phenomenology with emphasis given to participants' lived experience and meaning making. A "double hermeneutic" interpretation of the participants' interpretation was applied, recognizing the central role of the researcher (HH). To support reflexivity the bracketing interviews, journaling was undertaken by the lead researcher, alongside discussion with other members of the research team.

Analysis was conducted in accordance with recommendations by Neale (2021), and by Farr and Nizza (2019) and incorporated the following steps. First,

transcripts for the initial interview were carefully read with reflexive statements recorded on each to describe experiential aspects and points of interest to the researcher. Second, experiential themes were noted electronically within Microsoft word within a further column to cluster reflexive statements for each transcript. Third, pen portraits were constructed to address the context and time course of each participant transcript (Neale, 2021). Fourth, themes were grouped into super-ordinate and ordinate themes for each transcript. The fifth step involved the development of thematic charts to condense the core themes for each transcript. These steps were repeated for subsequent interviews for each participant resulting in 10 distinct thematic maps.

When all waves of data collection and analysis were complete, the sixth step explored connections across cases and required a process of grouping together themes identified for each individual participants based upon similarities and dissimilarity. Themes that were not present across the data set were discarded. Following this, the seventh step comprised of cross case analyses incorporating a process of grouping together themes that were salient and meaningful for all participants. This supported the development of a thematic map, including graphical representation with connections between each theme. Step eight drew upon time Course Grids and pen portraits to further analyze diachronic and processual changes evident for each participant, enabling a finely grained analysis of unfolding and longitudinal processes for each case (Neale, 2021). Step nine included discussion of interpretations with the second and third author to ensure these were grounded in the data. Finally, analysis continued into the writing process, when patterns of convergence and divergence emerged.

Due to the time course of the study, the cross-sectional analysis of wave one data was near completion prior to the subsequent data gathering points. When analyzing multiple waves of interview data, starting inductively with "pure data" was an impossibility; elements of abduction and induction were therefore applied. Examples of the analysis were reviewed by the patient and public involvement group to support greater reflexivity and to elicit alternative perspectives.

Findings

Participants

Four participants were recruited enabling idiographic similarities and differences to be closely examined (Smith et al., 2021). All had lost someone within the last six to twelve months. Participants reported a range of experiences (see Table 1), some reported experiencing SED in multiple sensory modalities, one reported only quasi-sensory experiences of the deceased. Participants experiences were contextualized by a range of life transitions and family circumstances; two cared for dependents, one anticipated mortality because of her own deteriorating health, and one reflected on her adjustment to retirement.

Table 1. Overview of participant's reported grief experiences.

Participant	Age	Circumstances of loss	Religious/afterlife beliefs	Reported SED
Amy	74	Spousal loss Sudden death	Belief in afterlife/ Orthodox Christian	Quasi-sensory SED
Wendy	69	Spousal loss unexpected deterioration	Belief in afterlife/ Christian faith	Visual, Auditory, & Quasi-sensory SED
Rebecca	60	Spousal loss Following late-stage cancer diagnosis	Belief in afterlife/ Christian faith	Tactile, Auditory, & Quasi Sensory SED
Stacey	46	Loss of parent; unexpected loss	Uncertain afterlife belief	Tactile, Quasi-sensory SED

Data analysis generated four themes: "the deceased as present, nearby, or somehow accessible'; resolution, relocation, and reconfiguration," "maneuvering closeness and comfort," and "transforming, unfolding, and enacting future narratives" (Table 2). In order to provide a deeper and more nuanced exploration, an overview of these themes is provided before focusing on two in more depth. In accordance with Farr and Nizza (2019) the reported description of themes emphasize '*themes spanning time*'.

The first theme summarizes how SED confirmed that the deceased was "**present, nearby or somehow accessible"** representing a tipping point for CB engagement and heightened anticipation and hope for further contact. This was further supported by *social acceptance* of SED through shared experiences.

The experience of contact with the deceased contributed to "**resolution, relocation and reconfiguration"** whereby the bereaved reimagined their relationship accommodating physical death but incorporating a spiritual or symbolic "distal presence." The meanings attributed to SED allowed for the updating of end-of-life narratives, to accommodate the wishes of the deceased. Participants were shown to grapple with spiritual and religious frameworks with this incorporating "uncertainty and reconfiguration of belief."

All participants referred to the ways connection with the deceased offered hope of reciprocity. SED occurred alongside a range of other CB expressions that provided **"closeness and comfort**." Engaging with

Table 2. Themes and Subthemes.

Themes	Subthemes
1. The deceased as present, nearby, or somehow accessible	1. Confirmation of and hope for presence 2. Social acceptance and conflict
2. Resolution, Relocation, and Reconfiguration	1. Narrative disruption an accommodation of the death story 2. Relocating the deceased 3. Uncertainty and reconfiguration of belief
3. Maneuvering closeness & comfort	1. Objects and places 2. Dialogue with the deceased
4. Tranforming, Unfolding and enacting narrative Futures	

"*objects and places*" as well as "*dialogue and communication*" *brought* the deceased into the present thereby encouraging SED and maneuvering closeness. SED and CB, as proponents of personal narrative, appeared to facilitate "**transformation, unfolding, and enacting futures"** that were experienced as disrupted by loss. The remainder of this paper will focus on the first two themes.

The deceased as present, nearby, or somehow accessible

Confirmation of presence and hope for contact

Auditory, tactile, visual, and quasi-somatic SED such as sensory closeness, hearing, seeing feeling, and communicating with the deceased symbolically were seen to confirm their presence. This interpretation constituted a tipping point, with the deceased experienced as present, restored, or passed over to an afterlife. Despite the benefits of SED as a source of comfort, the absence of the deceased remained deeply felt. Participants voiced a desire for more frequent and complete contact and described their attempts to encourage this through dialogue and engagement with other CB types. Though vivid forms of SED were less frequent as time went on, a symbolic connection with the deceased was confirmed by a "kind of knowing," or a "felt sense" that they remained nearby or "with me."

The following quotations illustrate how participants drew upon duration, spatial features, and sensory perception as confirmation of presence:

> *"I did see him, he was there for ages, it was about 6'o'clock and he was kneeling on the floor, and he had his hands on the bed … I wanted to touch him" (Wendy, T1, 6 months)*

> *"Dad had kind of plumpish hands, like squidgy, one day I felt them, and I just kept it going like that (moves her fingers over her own hand)." (Stacey, T1, 6 months)*

End of life conversations, belief in afterlife, and prior experience of SED were pivotal in establishing anticipation of presence. Rebecca recalls how her husband promised to *"let her know"* if his spirit continued after death. The following quotation from Rebecca demonstrates how the cognitive, affective, and somatic aspects of SED were integrated.

> *"Alex always said to me …that he would always be here on my shoulder, and I believe that, … I quite often do this (places hand on shoulder), and I can feel Alex's hand on my shoulder, so I have absolutely no doubt that he is with me."(Rebecca, T2, 12 months)*

Amy expressed dissonance regarding her experience by *"I don't mean to sound airy fairy but there is definitely a calmness in the house, and I would like to think that is him"* (Amy, T1, 6 months). Amy experiences sense of presence as "being stuck in a nightmare" through with moments of reconnection preceding the pain of loss. Her divergent perspective was contextualized by sudden and traumatic loss, her husband's atheism, and resultant conflict between holding on verses letting go.

As SED reduced in frequency absence was more prominent. This was illustrated by Wendy' use of the past tense foregrounding inaccessibility, with SED experienced as illusory, fading, or just beyond reach. *"I say I haven't, but I have seen him sometimes, I've looked over to his side of the bed and I can see where his head has been on the pillow." (Wendy, T2, 12 months)*. Recognition of partial contact sparked longing for reconnection for some: "*I would love it if his voice just came and answered, that obviously doesn't happen, but I do believe he is, in some ways, still there" (Rebecca, T3, 18 months)*. Over time, quasi-sensory, emotional, symbolic, and cognitive processes appear to replace sensory experience as confirmation of presence. Despite fewer visions of her husband after a year, Wendy described sensing his presence "*I can always feel him, do you know what I mean, I know he's there" (Wendy, T2, 12 months)*.

Within the final interview, participant experiences reflected greater divergence. While Stacey's account emphasized CB and her efforts to maintain her father's influence for her children, Wendy and Rebecca continued to seek contact, requested visits from the deceased, looked out for signs, and drew upon memories and objects brought bring them into the present and encourage SED. As illustrated by Wendy, agency, desire, and anticipation, distinguished those who did and did not experience vivid SED:*"If I want to see him, I close my eyes and think 'come and see me John, come and see me' and half the time he does" (Wendy, T3, 18 months)*.

Social acceptance, conflict and shared experiences

Disclosure of SED met social acceptance and conflict. When others disclosed similar experiences or witnessed SED, this provided powerful confirmation that such experiences were real. In the absence of this validation, sharing and acceptance was complicated by social stigma, anticipated dismissal or concern, and a responsibility to contain their grief for others. Wendy described fear and concern expressed by her daughter: *"She says to me later, "it was frightening me to death." I said "I'm not frightened, you shouldn't be frightened he was like a big baby." (Wendy, T2, 12 months)*. Similarly, Rebecca described how friends questioned whether her continued engagement with her husband as though present was helpful, social acceptance was drawn from shared validation of meaningful objects, rituals, symbolism and coincidences: *"Everybody that comes to visit bumps into that star, and everybody without thinking always just goes, hello Alex, I'm sorry." (Rebecca, T1, 6 months)*. For Rebecca, sharing star badges at the funeral instigated shared ritual and remembrance. The sighting of stars, in the night sky and as objects, became recognized as a sign from her husband. Rebecca described several powerful examples where these were witnessed together with others, allowing her husband to be included and talked about:

> *"He looked at me and said, "Alex would have loved that, I bet he's really jealous about that pie we've just eaten," and as he said that, his star, which he was wearing on his t-shirt here, fell off and landed on the plate… so we all went, "Alex is here"" (Rebecca, T2, 12 months).*

Through SED her husband's promise to watch over and experience life through her eyes was fulfilled, bringing a sense of togetherness. In the final interview, further validation was drawn from a charity event that celebrated his life: "*Without a shadow of a doubt. He was in the room that night and that wasn't just me. Lots and lots of people said that and he was there. He absolutely was there." (Rebecca, T3, 18 months).* For Wendy, validation was drawn from her grandchildren: *"a bird's feather just came floating down, 'oh look' he says, and he picked up the feather and said, 'Grandad John has bought me that'"* (Wendy, T1, 6 months). Though Stacey did not disclose her initial experience of SED with others, she recalled a similar experience shared previously by her father's sister:*"I think what resonated was that when my grandfather died, my aunt told me, that she felt that her Mum had gone there… I definitely felt like it was dad." (Stacey, T1, 6 months).* Later, at the anniversary of her Dad's death, disclosure of further signs of presence brought validation and social acceptance. *"I told my mom about it and I said, you know, and she's like, well, maybe it's just something from your dad." (Stacey, T2, 16 months)*. This facilitated CB engagement with acknowledgement of her father's favorite flowers blooming and robins visiting a memorial bird bath, utilized as opportunities for shared remembrance.

Conflicting feelings about disclosure were often guided by the needs of others. Amy feared that disclosure would create a false expectation of her husband's return for grand children when she says "she thinks he will answer back. he's not going to go out and buy presents so it's difficult…I'm just going to say, you have to be there for everybody else" (Amy, T1, 6 months). In contrast, Stacey, overcame her own skepticism about heaven by acknowledging that belief in the afterlife was beneficial for her and her children. Both Amy and Stacey hesitated to share their experience of SED with others referring to a responsibility to foster healthy grief processing for others.

Resolution, relocation, and reconfiguration

Narrative disruption and accommodation of the death story

Following SED, death was framed as a rite of passage, before transition to the afterlife, another dimension, or a spiritual renewal lessening the finality of death. Expectation of reunion facilitated a continuing relationship, bringing the possibility of an alternative ending. The continuation of narratives disrupted by death brought resolution to memories of pain and suffering at the end of life. Where circumstances prevented goodbyes or granting of last wishes, SED provided a further opportunity.

Visitations to Wendy's home were contrasted with conflicting emotions surrounding her husband's wish to return home. *"He wanted to die in that bed, I said, … but I've seen him at the bottom of the bed, and I've spoken to him, and he stood there, and he's called my name." (Wendy, T1, 6 months)"* SED, along with anticipation of reunion in the afterlife maintained a sense of mutuality with her communication affirming commitment to the relationship for the future, and his gestures reciprocating this care. *"I said I'll love you until I see you again, and he looked at me and smiled and put his arms out as if to say 'I'll wait for you'." (Wendy, T2, 12 months).*

For Stacey, signs of her father's presence offered a further opportunity for contact, bringing resolution to challenges that prevented her arrival at the hospital

to say goodbye and be with him for the last moments of his life. *"Seeing it helped me on that flight on my own. I think at the time I did say, "OK dad, I know you're with me" (Stacey, T1, 6 months*). Though Alex's death disrupted Rebecca's plans to retire and travel together, end-of-life conversations established an intention for her to bring their plans to fruition. *"I've got every intention of making it happen so that he will see it through my eyes." (Rebecca, T1, 6 months)* As time progressed, SED confirmed for Rebecca that he was present and bearing witness to the ways she remembered him. SED provided powerful confirmation that he continued to keep his promise *"Alex continues to let me know wherever he is, that it's not that far away and I get so much comfort from that" (Rebecca, T3, 18 months).*

In contrast with Wendy and Rebecca whose engagement with SED extended continued care, Amy's view of 'dead as dead' limited mutuality with further engagement with SED perceived as selfish. *"I do feel it is terribly selfish. As I said, you know, the person who's dead is dead, you know, that was done and gone with." (Amy, T1, 6 months)."*

Relocating the deceased

The deceased's physical and metaphysical location was experienced as fluid with multiple cooccurring physical, spiritual, and symbolic locations offering plausible opportunities for connection, reunion, and physical absence. Participants moved between proximal and distal experiences of presence. Comparison between then and now accommodated a relationship narrative that unfolded, with the bereaved imagining the deceased after their death, or in the future. Comparisons and acknowledgement of temporal and spatial change accommodated reconfiguration of CB integrating the reality of death. Difficulties relocating the deceased when evident, were associated with uncertain afterlife belief, and the presence of reminders that were distressing or omnipresent.

Stacey's account of witnessing a sunrise whilst traveling to join family after her father's death showed how she imagines his spirit ascending somewhere. *"I'd like. I'd just like to think. I just take comfort in the fact that maybe you know, he might be coming down, having a look, making sure I'm OK" (Stacey, T2, 12 months)*. Similarly, Stacey described the benefits of locating her father's spirit in the stars. This emerged as a way for her children to draw comfort from his presence watching over them.

In the following excerpt, Wendy contrasts memories with the immediacy and realness of SED.

> *"He used to stand in the doorway, but he used to sit there, I see him standing there now, and the other morning I did see him, and he was there for ages (Wendy, T1, 6 months)"* The later description locates him as a more distant presence returning home to her from his resting place at cemetery. *"I said, you have a long walk home to see me don't you,' it's a long way from home to there (the crematorium) (Wendy, T3, 18 months)."*

Rebecca feared that her husband would feel "further away," as time went on, and as she ventured further from their home. Carefully selected objects helped retain a sense of proximity, but oscillating presence and absence created tension regarding his whereabouts. Envisaging his spirit among the stars allowed her to locate him whilst reconciling tensions regarding Christian notions of heaven versus hell:

> *"Wherever you are Alex, you're not in this body anymore" and that absolutely confirmed it for me and. But where is, I don't know. So, I look at the star and I think, you know, maybe that's where he is, he's definitely with me." (Rebecca, T1, 6 months)"*

For Amy, memory of her husband's professional contribution dominated which she associated with stuckness when she says "you can't get rid of him, he's stuck here"(Amy, T1, 6 months) referring to the strength of his presence both within the house and outside through the longevity of his possessions and artwork. This culminated in a struggle to foreground preferred memories of their relationship. This is responded to with decisions to gift his artwork to others. Amy's narrative shifts between accommodating presence as a source of comfort, a desire to "get rid" of painful memories, limited control, and a need to "move on" to support and care for others.

Acceptance, uncertainty and reconfiguration of belief

Afterlife beliefs varied; SED affirmed some participants' beliefs while creating uncertainty and tension for others. Acceptance of SED was facilitated through uncertainty and by embracing the benefits they brought. Where the spiritual and religious belief system of the deceased differed, the bereaved were faced with the need to integrate both belief systems.

Christian and spiritualist beliefs incorporating belief in heaven and the ability of the living to communicate with the deceased through mediumship, supported Wendy's curiosity regarding mediumship."*I've always said I want to go and see somebody like that to tell me how he is. I want to know what he's doing" (Wendy, T2, 12 months).*

Stacey's uncertain belief, along with her experience of SED, is reconciled by embracing uncertainty and her choice to believe that presence could be possible. Reflection on spiritual and existential themes brings her to wonder at the natural world and imagine her fathers' body and spirit as returning to universe. This opened up reflection on broader spiritual and naturalist beliefs. *"I guess we got him cremated and we got his ashes just strewn, so I just feel like, you know, he's at one with the universe again" (Stacey, T2, 12 months*). The benefits of a symbolic perspective are drawn upon for her children, whom she hoped would establish a continued attachment to their grandfather. For Stacey, the continuation of her father's memory for others was prioritized above the existential and spiritual questions that SED raised.

Rebecca described uncertainty regarding the nature of the afterlife, with conflict between her husband's pagan and her Christian beliefs leaving her unsure where her husband might be located. SED prompted expansion of her belief system beyond a simple heaven-versus-hell dichotomy in order to accommodate her husband's presence as a spiritual entity. She grapples with envy at those who believe in heaven and struggles to accommodate SED within the available frameworks for meaning.

> *"I can't believe that a spirit that strong can just disappear, so I like to believe spirits gather somewhere, where that is I don't know, and I would quite like Alex to let me know" (Rebecca, T1, 6 months)*

> *"I know if there was any way, he would keep his promise, I still don't know what I think, I just know without any doubt now that he's about, but I don't know what about 'is' I guess' (Rebecca, T2, 12 months)"*

Amy's, orthodox faith encouraged visiting the body of the deceased, with the visitation of spirits expected in the first 40 days. Though spending time with her husband's body allowed for dialogue, the idea of his presence began to feel inauthentic and selfish since she no longer located his spirit there. Drawing upon her husband's perspective as an atheist when she says "*he would really laugh at me, he would say there's nothing there, he was an atheist, once you're dead your dead.*" From this perspective, Amy emphasized the continuation of memories for her grandchildren. Similarly, Stacey emphasizes death as an end whilst highlighting the importance placed on keeping memories alive "*Unfortunately, when you're dead, you're dead. It's the memory of people that we carry on, and I think that's what I find more important, that I keep his memory alive" (Stacey, T3, 18 months).*

Discussion

With emphasis on processual analysis the goal of this qualitative study was to gain an in-depth understanding of interpretative processes with a small group of participants. Findings highlight the complex nature of SED with their meaning and interpretation linked to emotional salience, shared experiences, after death belief, anticipation of reunion, symbolic or spiritual interpretations, and tolerance of uncertainty. SED appeared to play a pivotal role in sense-making with the meanings ascribed bringing resolution to narratives that were disrupted by the death and associated circumstances. The nature and type of SED differed for each participant: however, this was accompanied by CB for all. SED appeared to facilitate the development of ongoing CB's and imaginal representations of the deceased. Meanings for the bereaved centered on the deceased as waiting or watching over them, hope of reunition, honoring last requests by finishing what was started, and fulfilling the deceased's wishes. It is notable that the meaning of the experiences were perceived as neutral or positive. This finding lends further support to integrative models of meaning reconstruction that address how meanings ascribed may integrate cognitive-emotional processes within a more coherent and helpful narrative for the bereaved (Neimeyer et al., 2006).

Whilst previous research has highlighted that SED contribute changes in AB (Elsaesser et al., 2021; Keen et al., 2013; Parker, 2005; Penberthy et al., 2023), the current study casts lights on the tensions that may emerge. Though, often explained in accordance with established views on the afterlife, SED raised tensions alongside spiritual and religious frameworks, particularly when the deceased persons' belief conflicted with those of the bereaved. This was an interesting finding given that much existing research has centered on the bereaved individual, rather than on the belief system held by the deceased (Elsaesser et al., 2021; Keen et al., 2013; Parker, 2005; Penberthy et al., 2023).; SED appeared to coincide with questions that were raised by death, and loss of the person (e.g., What happens after death? What is the nature of the afterlife? What happens to our spirit when the body dies? Where is the person now? How will I live without them?). When conceptualizing SED and their meaning, the deceased was relocated, with representations of the person gradually located elsewhere, transported to a new stage of life, or in another realm. This provided a more hopeful and meaningful alternative to memories associated with a past relationship that had reached its conclusion. In contrast with past

memories, these alternative representations raised questions that brought new opportunities for the relationship (e.g., What remains of the relationship? Who am I/they to them/me now?).

The analysis demonstrates SED and meaning-making frameworks as complex, incorporating points of tension between religious and spiritual worldviews and the nature of SED itself. Despite the epistemological difficulties that SED raise, they nevertheless appeared to support a knowing that the deceased was somehow present, with this encouraging a more general and perhaps internalized sense of presence that extends later after bereavement when sensory experiences had reduced in frequency.

Given that reluctance to disclose SED has been reported within the literature (Keen et al., 2013), the current longitudinal analysis has shown how acceptance, interpretation and disclosure of SED unfolds over time and following disclosure of similar experiences by others. Notably, the validation of presence through shared remembrance, dialogue, and acknowledgement supported veridicality. Though stigma was evident in earlier interviews, validation emerged over time following disclosure to and from others and through engagement with rituals that brought the deceased into the present. Where the bereaved supported children emphasis disclosure was centered upon how to support them in adapting to the loss. When sharing with others, SED allowed for the person to be included.

Though SED were interpreted as a sign of the deceased presence nearby, findings suggest SED are dynamic and fluid, accommodating distal as well as proximal interpretations of presence over time. This mirrored the bereaved experience of the physical and sensory absence of the deceased in their lives. This is important as it may point toward new understandings of the role of SED and CB in grief processing, accommodating both acceptance of absence and the maneuverability of presence through spiritual, symbolic, and internalized CB over the course of grief. This provides a further perspective in relation to the theoretical interpretation of SED and CB as a form of proximity seeking or searching behavior, with such experiences supporting the imaginal relocation of the deceased as absent versus present, as well as distal rather than proximal. The study highlights a complex relationship between externalized and internalized manifestations of CB and therefore supports Hayes and Leudar (2016) view that oversimplification of SED and related CB expressions should be discouraged.

Tidwell et al. (2021) summarize the role of attachment theory in understanding the experiences of the bereaved. In the current study the presence of the deceased can be seen to provide a sense of comfort and safety to the bereaved. This incorporated belief that the deceased continued to support them by watching over them, acknowledging the living, and availing them of practical, spiritual and emotional help and support when needed. Though this is in accordance with the view presented by Field and Filanosky (2010) of internalized manifestations of the bond, engagement with externalized bonds such as retaining objects, and visions of the deceased were found to encourage similar experiences and to accommodate engagement with internalized bonds over time.

Strengths and limitations

To the authors knowledge, this is the first qualitative study to look in-depth at the experience of SED over time providing new lessons that may be transferable to other settings. The longitudinal design allows for examination of temporal changes and observation focusing on how these experiences unfold. Additionally, the study's use of patient and public involvement enhances the applicability of the findings. The study does however have some limitations. First, all participants were female, white, and primarily reported Christian faith. While this mirrors a common trend in research with more female participants, future studies should engage men to explore the gendered nature of these experiences. Masculine gender norms (i.e. rationality, emotional restraint) may lead men to dismiss or downplay SED whilst openness to experiences offers women greater opportunities to conceptualize and derive positive meaning. Consistent with previous research, most participants reported positive SED, meaning that those who experience greater stigma or experienced SED as negative may be underrepresented. Notably, the participant with conflicted feelings about presence declined further interviews. Though the small sample size limits broader transferability of the findings, the recursive nature of interviewing with multiple waves of data collection produced a total of 10 interviews enhancing the depth of insights into participant experiences.

Conclusions

This study described how the bereaved make sense of and derive meaning from SED over time, exploring how unfolding grief is shaped by interpretation alongside cultural and spiritual belief. SED are commonly experienced as positive and comforting after bereavement, but they raise important existential and spiritual

questions for the bereaved which can be difficult to articulate and explain. Interpretations of SED as an indicator of helpful presence or communication from the deceased may accommodate the development of a continuing attachment that provides security for the bereaved. Moreover, the meaning making process surrounding SED may serve to support adjustment to bereavement incorporating a distal and symbolic relationship with the deceased, accommodation of the death story, and the development of internalized bonds.

Based upon the current findings, those supporting bereaved individuals should avoiding dismissing SED and validate that they are a common and normal part of bereavement and not a sign of mental illness. SED may function for the person, in the context of strong feelings of absence, anticipated reunion in the afterlife, unfinished business associated with the death or the relationship, or spiritual tensions and dilemma's raised by the loss. A non-judgmental attitude and openness to SED as real are important to encourage discussion of the ongoing relationship and what this means for the bereaved. As SED can bring comfort and distress, support should focus on fostering adaptive relationships rather than discouraging them. Incorporating opportunities to address unresolved feelings of anger or guilt may be important for those who experience distress and unfinished business. SED raise existential questions regarding the whereabouts of the deceased, and what happens after death. Maintaining a pluralistic stance with regard to what SED constitute ontologically will provide greater opportunities for sensemaking and spiritual growth. Engaging with these questions from a position of "not knowing" will create space for the bereaved to relocate where they imagine the deceased to be symbolically, accommodating presence and absence. In accordance with meaning reconstruction theory (Neimeyer, 2012), it may be helpful for those supporting the bereaved to consider the contextual meaning SED may hold, along with the benefits this may bring in fostering future orientated narrative and positive self-identity.

Healthcare providers can support the bereaved by designing services that allow for non-stigmatizing discussion of SED. The inclusion of legacy interventions, memorialization, compassionate communities, and opportunities for dialogue with the deceased (i.e., letter writing, wind phones) will foster the transformation and development of continuing bonds. Promoting open conversations about death, the afterlife, and how to continue the relationship can provide opportunities to establish positive internalized relationships.

Future research in the area should seek a more diverse population to improve transferability to a broader range of cultural, religious and gendered groups. Given the symbiotic relationship between externalized and internalized bonds described further research that considers how these constructs overlap is recommended. In light of the complexities surrounding religious and afterlife belief, studies that focus more purposely on the experience of dyads with differing belief systems may be of merit.

Ethical approval

Ethical approval was granted on the 10 May 2022 by the University of Wolverhampton Research Ethics Committee in accordance with the British Psychological Society's code of conduct (2009). Participants provided informed consent. Their names and details were changed to ensure anonymity. Given the emotionally sensitive nature of longitudinal bereavement research use of a distress protocol directed the researcher to offer breaks or to discontinue the interview and offer emotional support where necessary. A list of resources was provided for all participants to mitigate risks and ensure access to support.

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