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Understanding how effective 'induced after-death communication' therapy is in helping people deal with grief and what factors influence the results

Submission date
23/03/2025

Recruitment status
No longer recruiting

Registration date
24/03/2025

Overall study status
Completed

Last Edited
10/08/2026

Condition category
Other

[_] Prospectively registered
[_] Protocol
[_] Statistical analysis plan
[X] Results
[_] Individual participant data

Plain English summary of protocol
Background and study aims
Grief is a normal human experience, but some people experience intense sadness that lasts for months or years, making everyday life difficult. Induced After-Death Communication (IADC) therapy is a brief, two-session treatment that may help people process their grief and feel reconnected with loved ones who have passed away. This study aimed to test whether IADC therapy helps reduce grief symptoms, and to explore which factors might predict better outcomes.

Who can participate?
Adults aged 18 and older who were grieving the loss of a loved one and had experienced that loss at least six months prior were eligible. All participants needed to speak English and be able to tolerate strong emotions during therapy.

What does the study involve?
Participants first completed a screening interview to ensure suitability. They then completed online surveys at four points: one month before therapy, just before therapy, just after therapy, and one month after therapy. Therapy involved two 90-minute sessions focused on reducing the sadness of grief using a specialised technique involving eye movements or tapping (bilateral stimulation). Some participants also reported sensing the presence of their deceased loved one during therapy.

What are the possible benefits and risks of participating?
Many participants reported feeling “lighter” and better able to move forward after the therapy. Benefits may include reduced sadness and stronger feelings of connection with the deceased. Risks include temporary emotional discomfort when recalling sad memories, and feeling tired after therapy sessions.

Where is the study run from?
The study was conducted by two psychologists in private practice—one in Adelaide, South Australia, and one in Queensland. Some sessions were delivered in person, others via Zoom.

When is the study starting and how long is it expected to run for?
The study began in July 2023 and data collection finished in early 2024.The study has been completed and the results have been published.

Who is funding the study?
This study received no external funding and was conducted voluntarily by the lead researcher.

Who is the main contact?
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Contact information

Type(s)
Public, Scientific, Principal investigator

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Additional identifiers

Protocol serial number
H-2023-207

Study information

Scientific Title
Efficacy and predictors of outcome of Induced After-Death Communication (IADC) therapy in treating grief

Acronym

IADC Study

Study objectives
The primary hypothesis is that IADC Therapy will have therapeutic effects on grief symptoms and sadness.

Ethics approval required
Ethics approval required

Ethics approval(s)
Approved 29/08/2023, Human Research Ethics Committee, University of Adelaide (LEVEL 3, RUNDLE MALL PLAZA 50 RUNDLE MALL, Adelaide, 5000, Australia; +61883135137; hrec@adelaide.edu.au), ref: H-2023-207

Primary study design
Interventional

Study design
Interventional wait-list controlled trial

Study type(s)
Treatment

Health condition(s) or problem(s) studied
Treatment of grief in bereaved adults

Interventions
Bereaved English-speaking adults in Australia were provided with Induced After-Death Communication (IADC) Therapy following a one-month waitlist (control) period.

Intervention Type
Behavioural

Primary outcome(s)
1. Grief Symptoms as measured using the International Prolonged Grief Disorder Scale at Time 1 (start of waitlist period), Time 2 (end of one-month baseline waitlist period), and Time 4 (one-month follow-up post-treatment).
2. Average Daily Sadness - subjective self-report on a 0-10 scale at Time 1 (start of waitlist period), Time 2 (end of one-month baseline waitlist period), and Time 4 (one-month follow-up post-treatment).

Key secondary outcome(s)
1. Depression as measured by the Depression, Anxiety & Stress Scale (DASS-21)
2. Occurrence of after-death communication (ADC) as measured by self-report at Time 3 (immediately posttreatment) and Time 4 (one month follow-up)
3. Ongoing bonds as measured by the Continuing Presence subscale of the Ongoing Attachment Inventory at Time 1 (start of waitlist period), Time 2 (end of one-month baseline waitlist period), and Time 4 (one-month follow-up post-treatment).
4. Grief as measured by the Hogan Grief Reaction Checklist at Time 1 (start of waitlist period), Time 2 (end of one-month baseline waitlist period), and Time 4 (one-month follow-up post-treatment).

Completion date
16/07/2024

Eligibility

Key inclusion criteria
1. English-speaking
2. Adults (>18 years)
3. Within Australia

Participant type(s)
Patient

Healthy volunteers allowed
No

Age group
Mixed

Lower age limit
18 Years

Upper age limit
110 Years

Sex
All

Total final enrolment
45

Key exclusion criteria
1. Suicidality
2. If less than six months had passed since the loss
3. If clients were unwilling or unable to tolerate high levels of emotion or distress in confronting their grief and sadness.

Date of first enrolment
10/09/2023

Date of final enrolment
15/05/2024

Locations

Countries of recruitment
Australia

Study participating centre
Moveon Counselling
168 Main Rd
Blackwood
Australia
5051

Study participating centre
John Daniels Psychology
Suite 55, Level 2, Niecon Plaza, 19 Victoria Ave
Broadbeach
Australia
4218

Study participating centre
Healing Grief International Pty Ltd
10 Scroop Rd
Hawthorndene
Australia
5051

Sponsor information

Organisation
The University of Adelaide

ROR
https://ror.org/00892tw58

Funder(s)

Funder type
Other

Funder Name
Investigator initiated and funded

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not expected to be made available

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		23/01/2026	04/02/2026	Yes	No
Participant information sheet	version 1.1	20/08/2023	24/03/2025	No	Yes
Study website			10/08/2026	No	No