

The Art Of Healing: Past, Present And Future



By
James Peltier, Ph.D.

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I dedicate this paper to the Scientists and Researchers who have spent a lifetime studying Human Phenomena and Human Abilities with little recognition for their work beyond the Halls of Academia.

This paper is my dissertation for my Doctorate Degree in Spiritual and Psychic Sciences so it is more technical and less personal than a book. Its original title was: ***The Utilization of Psychic Abilities, Mediumship and Energy as an Adjunct to Psychotherapy.***

I hope that you find the information within these pages useful in understanding all of the scientific research that was done by hundreds if not thousand of people.

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Abstract

This book briefly reviews the history of healing and psychotherapy from the times of antiquity to present day. A review of modern day research and theories about; the nature of consciousness, modern physics, psychosomatic interaction, and parapsychology which provides supportive data as to the validity of psychic abilities and healing, affords insights into the modern day psychotherapy model of transpersonal psychology. It also provides a degree of credibility and understanding about the techniques utilized in ancient times for the physical and psycho-spiritual healing processes. The study suggests that the utilization of psychic and mediumship abilities and healing energy are valid adjunct tools that can be a part of the normal therapeutic process which brings together all the necessary components for the release of belief patterns that create disease in the physical, emotional, mental and spiritual bodies of an individual. In the same manner that the ancient healers had a spiritual perspective in the nature of their healing which integrated the body, mind and spirit, this study addresses the necessity in the integration of the body, mind and spirit within psychotherapy and all aspects of healing.

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INTRODUCTION

Psychotherapy is as old as humankind. The methodology used in the treatment process has varied over the centuries and yet a common thread does exist in all models and techniques that are utilized by the various practitioners. While shamans and priests have in most cases been replaced with psychologists, psychiatrists, and psychotherapists in the contemporary Western tradition. Many of these modern traditions are using similar methods with less superstition and mysticism attached to them.

The contemporary constructs of various psychotherapy models are in accordance with the paradigms which developed and dominated Western scientific and philosophical thought during the modern era. Cartesian dualism, the Newtonian mechanistic model of the world, and the analytic reductionism have provided the understanding which is the foundation of contemporary mainstream psychotherapy.

The authenticity of those paradigms is currently being challenged. Recent research in several fields of study have provided new scientific models that challenge the modern dualistic, reductionistic and materialistic assumptions. New research in psychosomatic interaction, quantum physics, paranormal phenomena, and the nature of consciousness, is creating new paradigms. In some cases, these new paradigms are to replace the old ones. In other cases, these new paradigms stand along side the old paradigms offering a different perspective of reality.

There is a concept that there is no non-truth. There are however levels of truth. And the higher truth incorporates the lower truth. This can be applied to the paradigms of the past and those evolving in the present moment. Each is based on an aspect of perceived reality based on the reality from which it was viewed. Many significant gains were accomplished with the present Western beliefs. The new paradigms are evolving because the reality from which they are perceived is different, thereby providing another model of reality.

These emerging themes from the areas of study mentioned support the assumptions that the mind and body cannot be separated. For that matter, neither can the spirit be separated from the mind or the body. Transpersonal psychology was an outgrowth from members of society that intuitively knew that the human being was more than a machine or mind, and its purpose extended beyond the traditional aspects of contemporary psychology models. So once again, certain aspects of the human conditioning that were known and utilized in ancient times and by present day shamans is being integrated into present day models of the human psyche.

This holistic approach is making inroads in traditional medicine and psychotherapy. A holistic orientation towards psychotherapy that is coherent with and supported by the recent insights presented and delineated as an adjunct to traditional psychotherapy is described within this study.

The position, maintained and utilized in actual practice, is that the revised assumptions, supported by recent research and theory, are more adequate than those of the modern era in dealing with issues found in the area of dysfunctional behavioral and mental patterns. Additionally these revised assumptions are demonstrably more effective in healing physical diseases and in attaining higher levels of wellness.

CHAPTER I THE HISTORY OF PSYCHOTHERAPY AND HEALING

Introduction

This chapter will briefly present the historical developments in psychotherapy and healing. These two areas, psychotherapy and healing, are combined because throughout most of history the practitioners were generally the same individuals. It has only been in modern times that the roles for healing the body were separated from the healing of the mind.

Shamanism

Shamanism represents the most widespread and ancient methodological system of mind-body healing known to humanity.¹ There is archaeological evidence suggesting that the techniques of shamanism are at least twenty thousand years old. In Les Trois Freres cave in the south of France, there is a mysterious, partly painted, partly carved deer like creature thought to represent a shaman. In the Pin Hole Cave in England carvings on bones from the Paleolithic period show a shaman garbed in an animal mask.²

Shamanism is a word derived from the Russian "saman." It is perhaps the world's oldest profession, and the personage from whom both the modern doctor and priest descend. In the vast literature on shamanism one finds the shaman characterized as priest, physician, magician, sorcerer, exorcist, political leader, psychotic and charlatan.³ The shamanic practices are remarkably similar in Asia, Australia, Africa, the Americas and even in Europe.

Michael Harner, noted author and shaman, suggests that these practices were developed and used for the past twenty thousand years because they work. Through trial and error the same techniques for healing were adopted by diverse populations. He also believes that individuals need not share the same cultural perspective in order for shamanism to be effective. "The ancient way is powerful, and taps so deeply into the human mind, that one's usual cultural belief systems and assumptions about reality are essentially irrelevant."⁴

Typically in shamanic cultures, a healing hierarchy exists, with those whose only talent is physical manipulation or prescription at the bottom, followed by specialists in diagnosis, and then crowned by the shaman's use of the creative mind and altered states of consciousness to intervene with the supernatural. The shamans performed the difficult task of seeking the connectedness of all things and protecting the souls of the sick and dying. Traditionally they were used as the treatment of last resort. The purpose of much shamanic healing is primarily to nurture and preserve the soul, and to protect it from eternal wandering.

The use of spirits is prevalent in shamanism. While the spirits offer protection to the lay person and shaman alike, the use of them to heal others or divination was normally the providence of the shaman alone.⁵

The achievement of a state of ecstasy (altered state of consciousness or trance) is agreed upon as a universal aspect of shamanic practice. The shamanic ecstasy has been identified as a highly specific, special category of altered state. One that can be entered into and exited at will.⁶

The shaman, then, is defined both by practice and intent: Shamanic practice involves the ability to move in and out of a special state of consciousness, the notion of a guardian spirit, and has the purpose of healing others.⁷

"The burgeoning field of holistic medicine shows a tremendous amount of experimentation involving the reinvention of many techniques long practiced in shamanism, such as visualization, altered states of consciousness, aspects of psychoanalysis, hypnotherapy, meditation, positive attitude, stress reduction, and mental and emotional expression of personal will for health and healing. In a sense, shamanism is being reinvented in the West precisely because it is needed."⁸

Ancient Times

Perhaps the earliest writings in medical history are found in Assyrian tablets dating from about 2500 B.C. Magic medicine had several characteristics: The belief in possession by evil spirits as a cause of disease and in the power of incantations to drive the spirit out of the body of the possessed. The curative

agent was the spoken or written word, the solemn ritual, and both the patient's and the magician's belief in their effectiveness. The following incantation from a tablet contains a prayer directed to the Babylonian god Ea, the Lord of the Deep.

(To be said over a sick man:)
He that stilleth all rest, that pacifieth all,
By whose incantation everything is at peace
He is the great Lord Ea.

By whose incantation everything is at peace,
When I draw nigh into the sick man
All shall be assuaged.
I am the magician born of Eridu
Begotten in Eridu and Subari
When I draw nigh unto the sick man
May Ea, King of the Deep, safeguard me.

O Ea, King of the Deep, see
I am the magician, am thy slave.
March thou on my right hand,
Assist (me) on my left,
Add thy pure spell to mine;
Vouchsafe (to me) pure words
Make fortunate the utterances of my mouth,
Ordain that my decisions may be happy,
Let me be blest where'er I tread,
Let the man whom I now touch be blessed.⁹

Even in the oldest writings handed down to us, we see magic operating alongside the principles of trial and error which ultimately paved the way for the advent of the scientific method.¹⁰

Another document that contains a wealth of information about medicine in Egypt is the Papyrus Ebers discovered in 1874 in Luxor. In an excellent state of preservation, it is sixty feet long and describes magical spells, incantations and rational medical advice which was used around 1500 B.C.¹¹

As civilizations went through transition to a more empirical orientation they regarded magic as the exception. The magic was relegated to such extraordinary psychological states as sleep, trance or ecstasy. This principle is illustrated by the sacred shrines of ancient Greece, dedicated to Apollo or Asclepius, and the oracles of Delphi and Dodona.

The healing powers of the Temple of Epidaurus were held in very high esteem. Pilgrims attending the shrines first went through a ritual of fasting, absolution and communal prayers. Thus prepared, they would fall asleep in the temple and were asked to relate their dreams to the physician/priest. The dream was regarded as a source of higher revelation, providing diagnosis, healing or advised treatment. Graphic accounts of cures attributed to these shrines have been found written on tablets found among the remains of some of these temples.¹²

The Hippocratic Oath, the ethical code of honor still taken by every practicing physician today, is a dedication to the mythical founding family of medicine. It begins: "I swear by Apollo the Physician, by Asclepius, by Hygeia and Panacea and by all the Gods and Goddesses, making them my witness, that I will fulfill according to my ability and judgment this oath and covenant. "Asclepius, the demigod of the healing arts had a famous healing family: his wife, Epione, soothed pain; his daughters, Hygeia and Panacea, were deities for health and treatment; and his son, Telesphoros, came to represent convalescence or rehabilitation. The legend was even incorporated by Christianity, with Saints Dasmian and Cosmas carrying on the healing tradition.¹³

The Asclepius as described in Homer's Iliad was an influential mortal. Eventually over 200 temples were erected to his honor throughout the area of Greece, Italy and Turkey. These Asclepia, as the temples were called, were the first holistic treatment centers. All who came for treatment were accepted, regardless of their ability to pay.

Within the Asclepia, dream therapy or divine sleep reached perfection as a healing tool. The dreams acted as diagnostician and healer. This mode of therapy was used when all the usual medicines had proven ineffective and the person was severely ill.

The diagnosis and healing took place during that special state of consciousness immediately prior to sleep, when images come forth automatically. (This state is now called "hypnagogic sleep.") What ever innate healing ability the patients possessed in the face of their grave illness was greatly enhanced in this setting. The mind (imagination) was allowed to go to work; and go to work it apparently did. Many, many cures have been ascribed to the Asclepian techniques: the blind, lame, deaf, impotent, and barren, those with headaches, boils, and diseases of every conceivable organ have been recorded on the ancient temple walls.¹⁴

Aristotle, Hippocrates and Galen were trained in the Asclepian tradition, and all of them were able to describe the role that the mind played in health. Aristotle suggested that the special images of the dream state were vital.

He wrote in the Parva Naturalia, "Even scientific physicians tell us that one should pay diligent attention to dreams, and to hold this view reasonable also for those who are not practitioners but speculative philosophers." ¹⁵

Hippocrates, the "Father of Medicine," symbolized the change in the practice of medicine from mystical to naturalistic principles. He believed that the physician's role was essentially to understand and assist nature, to know what humans were in relation to food, drink, occupation, and the effects each of these had upon each other. He was a model of the Asclepian mode of gentleness and concern, love and dignity. As Hippocrates stated, "Where there is love for mankind, there is love for the art healing." ¹⁶

Hippocrates was of the opinion, that whilst the body sleeps, the spirit is awake, and transports to all places where the body could have access; and it sees and knows all things which the body could know and see when awake, and touch all that it could touch: In short, that it hath all the operations that the body, now asleep, can be capable of when awake.¹⁷

While dreams and visions are universally the most common method of inquiry into cause and cure of disease, never has the inquiry been so systematized and integrated into the standard cultural practice of medicine as well as during the Grecian era.¹⁸

The Dark Ages

After the decline and fall of the Greco-Roman civilization, the progress of Hippocratic medicine and healing came to a standstill. During the Dark or Middle Ages the learned doctors of theology took the place of the physician. Once again the ancient demonological theory of the origin of mental and physical illness prevailed. This time it was in the guise of the Christian churches and the expounded beliefs of the period. Certain methods of healing were acceptable within the teachings of the Church, these included: astrology and alchemy along with the Catholic Sacrament of Penance which was an important empirical step towards a future cathartic type of psychotherapy. In the thirteenth century Pope Innocent III founded the healing orders of the Catholic Church. This marked the beginning of monastic medicine which brought loving care and true understanding to those sick in body and in mind.¹⁹

The laying-on-of-hands method of healing was widely used in and through the Middle Ages in the Western world. This method dispenses altogether with the use of other external physical or chemical paraphernalia. Bodily contact between the patient and the healer and their personal relationship is all that is needed.

An abstract of a mystical and religious aspect of the ritual of the laying-on-of-hands is illustrated in the following account of miraculous healing attributed to St. Francis of Assisi. St. Francis was bathing a leper. He began to wash him with his own hands, another Brother pouring on the water; and by divine miracle, wheresoever Saint Francis laid his holy hands upon him the leprosy left him and his flesh remained perfectly sound.

The idea of laying-on-of-hands differs from culture to culture. They have, however, one thing in common: belief in a healing power which is transmitted from the person of a Christ-like healer or some royal personage through physical contact to a diseased part of the stricken person.²⁰ The Royal Touch as practiced in various culture and especially the kings in medieval Christian world was a variation of this same theme.²¹

During these Dark Ages it was the wise women, the witches (as they were often called) who maintained the continuity in the use of folk medicine during these times. The wise women, steeped in the pagan ways, were wholly shamanic in their regard for the unity and life of all things, and in their attempt to use the forces of nature for healing purposes. They knew the herbal remedies and magic incantations, and their ability to soothe pain and heal, commendably, survived through the Middle Ages.²²

Christianity advanced the theory that disease was caused by Satan, not by pagan spirits; therefore, pagan medicine could have no role in its cure. The Church expunged the exquisite surgical and herbal skills of the Greeks from the roster of available treatments. This brought the standard of physical medicine to an all-time low. With the decline of physical treatment, medicine of the imagination flourished. The treatment methods as specified by the early Church were: shrine cures, processions and pilgrimages to holy places, relics of saints and martyrs. The divine sleep of the saints continued where the Asclepian temples ended. The patron saints of the Church were substituted for Asclepius and the miracles of healing continued. Thus, the methods of the shamans and the wise women--healing in non-ordinary reality and invoking visions of spirit guides--has been a part of Christianity since its inception. Only the names have been changed.²³

The Sixteenth Century

The official end of folk-medicine occurred in 1518 when physicians and surgeons united together, and the College of Physicians was established. The Acts of Incorporation clearly defined who could and could not practice medicine. Thus magic, as well as surgery and medicine, was expressly forbidden by political action. This also began the period of the Inquisition, where between the years 1500 and 1650 A.D. an estimated nine million women were murdered, many for being suspected of practicing medicine.

They were accused of having the magical power to affect health, both in the ability to heal as well as to cause illness and death.²⁴

During this same period a German physician Theophrastus Paracelsus (1493-1541) became one of the towering figures of the Renaissance. Some consider him to be the Martin Luther of medicine, and the Renaissance Christ of Healing, others considered him a drunken quack, an arch-charlatan. It was Paracelsus that took the techniques of the wise women and incorporated them into medicine. So healing practices became associated with the avant-garde within licensed medical practice primarily through the work of Paracelsus. He cured and quarreled and made medical practitioners think.²⁵

Paracelsus was a firm believer in divination from the stars: in the "correspondences." between Man and the Universe--between microcosm/macrocosm--and in the healing powers of certain preparations. He was an alchemist and astrologer with a wide breadth of medical experience who spoke with the voice of the seeker for scientific truth, in rebellious defiance of ancient Galenic tradition or scholastic dogma. Hundreds of years before the development of modern psychiatry he declared: There are two kinds of diseases in all men: one material and one spiritual... against material diseases material remedies should be applied. Against spiritual diseases spiritual remedies.²⁶

This sixteenth-century physician and alchemist Paracelsus invoked the power of dreams, light from a clear morning sky, and the patient's visualizations as adjuncts to his medical interventions. Paracelsus envisioned the vital role of such factors and influences of symbolic visualization in a healing process which involved body, mind and spirit. Many innovations in the healing profession and in basic research into the nature of consciousness itself have rediscovered this ancient wisdom.²⁷

Pre-Cartesian medical thinking was invariably holistic, and the tenet of the inseparability of mind, body and spirit in concerns of health care was consistent with the existing world view. When the world view changed to incorporate the Cartesian model of dualism--the separation of the function of mind from that of the body--the holistic approach became logically inconsistent and hence was dropped for the newly accepted concept.²⁸

The Seventeenth Century

Modern psychology models and healing concepts are deeply based in seventeenth century philosophy and assumptions about individuals and the universe. These philosophies and laws are the cornerstone of the present consensual modern world view.

Cartesian dualism relates to the philosophy of Rene' Descartes (1596-1650) who was perhaps the most influential person responsible for shaping the present world view. He was a French mathematician and philosopher. Descartes shared the same belief as the English philosopher Francis Bacon (1561-1626) in the use of new logic and methods in the acquisition of knowledge. Bacon believed that the only safe way of arriving at knowledge was by the careful observation of nature, the collection of data, and the making of cautious generalizations that do not go beyond the data. Bacon and Descartes emphasized the importance of systematic and methodical observation and experimentation in natural science. Descartes, unlike Bacon, saw the key to knowledge being in mathematics. He understood and attempted to make explicit the methodological assumptions of the successful physical scientist who regarded mathematics as the sole key needed to know nature's secrets.

This concept is the basis for the analytic reductionist methods used in modern science. Lincoln Barnett states: "Modern science was born when Galileo began to explain how things happen and thus originated the methods of controlled experiments which now forms the basis of scientific investigation."²⁹

Galileo Galilei (1564-1642) believed contrary to Aristotelian thought, that mathematics was the instrument for discovery while logic was the instrument only of criticism. He believed mathematical reasoning reveals the real world. Galileo was the first to combine empirical knowledge with mathematics and is therefore seen as the father of modern science.³⁰

Descartes is perhaps best known for his formulation of the dualism of mind and matter. Descartes's famous sentence "Cogito ergo sum" -- "I think, therefore I exist" -- has led Westerners to equate their identity with their mind, instead of their whole organism. The mind has been separated from the body and given the futile task of controlling it.³¹

The "Cartesian" Model allowed scientists to treat matter as dead and completely separate from themselves, and to see the material world as a huge multitude of different objects assembled into a Great Machine.³²

The English philosopher and mathematician Isaac Newton (1642-1727) held this mechanistic world view and made it the foundation of classical physics. Newton's methodology involved the analysis of observed facts, deducing the mathematical principle within the event and formulating a fundamental principle, which then, by observation and experimentation would reproduce the same results over and over.³³

Newton viewed the physical phenomena of the universe in the three-dimensional space of classical Euclidean geometry. It was an absolute space, always at rest and unchangeable. All changes in the physical world were described in terms of a separate dimension, called time. Time had no essential connection with the material world. Time moves forward with the past, present, and future occurring in that order. The fundamental laws of nature searched for by these scientists were seen as the laws of God, invariable and eternal, to which the world was subjected.³⁴

All physical events are reduced, in Newtonian mechanics, to the motion of material particles caused by their mutual attraction, the force of gravity. According to Newton's view, God at the time of creation, created the material particles, the forces between them, and the fundamental laws of motion.³⁵

It was Galileo who first quantified the physical world, Descartes who presented a picture of the universe as a Great Machine, and Newton who formulated the laws by which the Great Machine runs.³⁶

When the world view changed to incorporate the Cartesian model of dualism, the basic concept and structure of all sciences including medicine changed. As Descartes himself asserted that there was nothing included in the concept of the body that belongs to the mind, and likewise nothing in the mind that belonged to the body. This concept of humankind provided implicit permission to dissect, bisect, examine, and otherwise invade the human body without fear of damage to the soul. The result of this thought was that in the core practice of medicine, the relationship between the body, mind, and soul lost its status. Also lost as well was the healing aspect created by the mind in regards to physical illness and vice versa.³⁷

One of the obvious manifestation of the division of mind and matter in this modern era is the split in the structures of the healing professions. Generally, physicians attend to the body, psychiatrists, and psychotherapists are concerned with the mind, and the clergy is concerned with the soul. "...Western healing processes and rituals are characterized by their specialization."³⁸

The Eighteenth And Nineteenth Century

The Austrian-born physician Anton Mesmer (1734-1815) discovered a new principle in healing and psychotherapy called "animal magnetism". Mesmer regarded all illness as a manifestation of disturbances in this mysterious ethereal fluid which linked all things, animate and inanimate, together, and which made a person equally subject to the influences of the stars and to those influences emanating from people themselves. This magnetism, thus described as animal, in contrast to "ordinary", magnetism.

While these theories incorporated ancient astrological and magical concepts, it was in his practical approach with his patients that Mesmer hit upon a discovery of immense importance. He discovered that by applying what he believed to be magnetic passes he was capable of inducing peculiar trance-like conditions in his patients. Sometimes these magnetic influences resulted in spectacular cures of such organic disorders as blindness, convulsions, paralyses or "congestions" of the liver or spleen.³⁹

Mesmer was generally found in disfavor by most of the scientific community which concluded that his results were essentially based on his patients' imagination or due to mechanical friction, imitation and the like. Mesmerism although perhaps founded on unscientific premises, was, in effect a new method of psychotherapy. It was the first step toward the development of modern scientific hypnotism, hypnoanalysis and the current psychoanalytic methods of treatment.⁴⁰

The English surgeon James Braid (1795-1860) was interested in investigating the pretensions of mesmerism from a skeptical perspective. In the course of his investigations he concluded that animal magnetism did not in reality exist. He also concluded that certain phenomena could readily be induced by particular manipulations but he was unable to explain the *modus operandi* by which they were induced.

He coined the words to describe the phenomena namely: neuro-hypnotism (nervous sleep) and neurohypnology (doctrine of nervous sleep), and finally settled on the word hypnosis, which has become a common word in many languages. Braid concluded that hypnotism was merely a simple, speedy mode of throwing the nervous system into a new condition, which may render it eminently available in the cures of certain disorders. This was an important stepping stone for the works of Liebeault, Bernheim and Charcot, and for the early experiments in hypnosis and hypnoanalysis by Breuer and Freud.⁴¹

A French doctor, A.A. Liebeault (1823-1904) has the distinction of formulating a psychological theory of hypnotism that incorporated the use of suggestion in inducing hypnotic sleep. The method of suggestion consists of the transmission by word or gesture of certain ideas to the mind of the sleeping subject. The ideas were aimed at bringing about certain physical and mental processes in the organism. Liebeault suggested that both sleep and hypnosis results from a withdrawal of the person's attention from reality, and both presuppose the subject's willingness to fall asleep.

Hyppolite Bernheim (1837-1919), a disciple of Liebeault, raised the study of hypnotism to the status of academic respectability. He made use of "positive" and "negative" suggestions as a method of treatment; e.g., he

suggested a sense of well-being or the disappearance of symptoms to his patients. He also concluded that hypnotism is not a necessary prelude to suggestion; it facilitates suggestion when it can be induced; but other suggestions may sometimes succeed when that of sleep is ineffective. Bernheim sought to better understand the human condition on the basis of psychological phenomena discovered in the hypnotic state, especially those described as automatisms and post-hypnotic suggestion.⁴²

He essentially re-established the use of suggestive therapy which was the basis of shamanic and certain other healing techniques.

The Modern Era

Sigmund Freud (1856-1939) Austrian neurologist experimented early on in hypnosis and hypnotherapy learning the Jean Charcot's method of treatment. He also learned from Joseph Breuer another Viennese physician, the benefits of the cathartic or "talking-out-your-problems" form of therapy. In 1860 the great German physicist and philosopher Gustav Fechner (1801-1887) had demonstrated that the mind could be studied scientifically and that it could be measured quantitatively. The impact of the founding of the science of psychology by Fechner had a great impact upon the intellectual development of Freud.⁴³

Freud's major achievement was the development of the psychoanalytic system of thought and the psychoanalytic method of treatment. He based his theories--and his new method of treatment--upon painstaking observation and therapeutic experimentation in case after case. Freud had a brilliant career as a neuropathologist, psychoanalyst and student of the human mind in its dynamics, cultural and anthropological aspects.⁴⁴

Psychoanalysis is firmly grounded in an active model of mental processes. Freud's views on personality were based on the activities of mental processing and in the belief in unconscious levels of mental activity. Freud also developed motivational principles that depended on energy forces beyond the level of self-awareness. Moreover, for Freud, the development of personality was determined by individual, unconscious adaptation to these forces. Psychoanalysis carried the implication of mental activity further than any other system of psychology of its time.⁴⁵

Freud considered religion as barely distinguishable from magic and considered ritualistic taboos and observances of religion as symptoms of a collective compulsion neurosis which may at best save the individual from developing their own compulsion neurosis. The spiritual aspect of the individual was not within the realm of Freud's psychoanalytical model.⁴⁶

C. G. Jung (1875-1961) like Alfred Adler and Otto Rank was an early associate of Freud. He shared with him the dawning insight into the dynamics of mental processes; into the deeper aspects of dreams; understanding the part played by the unconscious motives in health and disease. Jung, like Adler, rejected Freud's thesis of sexuality as the principle factor in neurosis. Jung suggested that the libido embraces the sum total of the vital energies of the human, not just the sexual energies. He also extended the scope of the unconscious beyond that which has been repressed by the individual. The individual unconscious, he maintains, merges into the collective unconscious, common to all humans of all races and all historical periods. The collective unconscious itself is the repository of what he described as the primordial images or archetypes. It forms the universal powerhouse from which human creative energy, myths and religions are derived. The occasional break-through of these archetypes into individual consciousness may give rise to mental illness.

The balance between the conscious and unconscious parts of the personality with the particular way an individual wishes to relate to the outside world, is responsible for the two major types of personality described by Jung, the extrovert and the introvert type, and the various subgroups which can be discerned from these two classes.⁴⁷

From Jung's point of view, religion is a factor indispensable to our culture. So, a spiritual aspect had been added into psychotherapy at least to a certain degree within this therapy model.

In this modern era there are many schools of thought and practices in psychotherapy and it is not the purpose of this study to discuss all the different founders and methodologies. The modern era of psychotherapy has evolved into what has been called the "four forces" within the psychology. The first force is classical Psychoanalytic theory, the second force is Behavioristic, and the third force is Humanistic Psychology, and the fourth force is Transpersonal Psychology.⁴⁸

There are many branches within each of these general categories, and only the general philosophy of the founder or founders shall be briefly stated.

The Psychoanalytic force was a study of the psyche and Sigmund Freud was the founder of this "force" within psychology. This is a psychology of the mind, the conscious and unconscious. Humans are viewed as energy systems. According to the orthodox Freudian view, the dynamics of personality consist of ways in which psychic energy is distributed to the id, ego, and superego. Since the amount of energy is limited, one system gains control over the available energy at the expense of the other two systems. Behavior is determined by the balance of this psychic energy.⁴⁹

Behaviorism was the most significant movement in experimental psychology for the first three quarters of the twentieth century. It was formally initiated by an American psychologist, John Brodus Watson (1878-1958), in a famous paper, "Psychology As The Behaviorist Views It," published in 1913. In this paper Watson spelled out the fundamental faith of behaviorists.⁵⁰

Watson defined the essential contrast with mentalism: The subject matter of psychology is to be behavior, not mind or consciousness; its methods are objective, and introspection is to be rejected. Behavior is not to be interpreted or explained by reference to mental processes.

Psychology, as the behaviorist views it, is a purely objective branch of natural science. Its theoretical goal is the prediction and control of behavior. Introspection forms no essential part of its methods, nor is the scientific value of its data dependent upon the readiness with which they lend themselves to interpretation in terms of consciousness. The behaviorists, in their efforts to get a unitary scheme of animal response, recognize no dividing line between humankind and animals. The behavior of human beings, with all of its refinements and complexity, forms only a part of the behaviorist's total scheme of investigation.⁵¹

The behaviorist's view of human nature is frequently distorted by the oversimplified explanation of the individual as a helpless pawn of fate who is solely determined by environmental and genetic influences and reduced to merely a responding organism.⁵²

In 1964 in Old Saybrook, Connecticut, humanistic psychology as a social movement within psychology was launched. Leading figures in the psychology of personality and in humanistic disciplines participated: Gordon Allport, Henry Murray, Gardner Murphy, and George Kelly of the founding generation; Charlotte Buhler, representing a European tradition of research called "life-span development," and Carl Rogers, Abraham Maslow and Rollo May, who became the intellectual leaders of the movement.⁵³

If psychoanalysis is considered the first force and behaviorism the second force within twentieth century psychology, then the third force may be any movement that is not psychoanalytic or behavioristic. Within this third force is existential psychology, phenomenological psychology, and humanistic psychology. Humanistic psychology in most of its manifestations gives priority to human experience, the meaningful life of the common-sense world with its tragic and comic events, that makes contact with its embodiments in works of art and documents of the humanities.⁵⁴

The initial character of humanistic psychology was provided by Rogers, Maslow and May. Carl Rogers introduced the concept of client-centered therapy.

Abraham Maslow developed a hierarchical theory of motivation and personality. Rollo May brought in existentialism which from his perspective viewed humankind as being vulnerable, incomplete and needing God's validation.⁵⁵

The third force of psychology has a great number a psychotherapy models within this large umbrella. Yet all of them provide a central focus on the positive aspects of being human such as: human beings possess the capacity through self-consciousness to transcend the immediate situations in life. Each individual is responsible for directing and shaping their life and destiny. We, as human beings, are by nature in search of meaning and personal identity. Anxiety is a basic human characteristic and is a by-product of change. Lastly, human beings strive to become all that they are able to become.⁵⁶

This psychology model sees the uniqueness of the human being in relation to itself and to others but does not include one's spiritual nature, nor one's relationship to the universe.

Transpersonal psychology emerged as a branch of psychology in the late 1960's as an outgrowth of humanistic psychology under the leadership of Abraham Maslow, Stanislav Grof, Anthony Sutich, and others. Transpersonal literally means across or beyond the individual person or psyche. It refers to an expansion or extension of consciousness beyond the ego boundaries and beyond the limits of time and/or space and is concerned with aspects of psychology related to ultimate human capabilities and potential that have no systematic place in positivistic or behavioristic theory, classical psychoanalytic theory or humanistic psychology.⁵⁷

Transpersonal psychology covers the empirical study, application, and theorization about a wide variety of topics. Some of these topics are: life, cosmic awareness, cosmic play, individual and species-wide synergy, the spiritual paths, theories and practices of meditation, compassion, and transpersonal cooperation.⁵⁸

Much of the rationale for transpersonal psychology starts with a questioning of the basis for knowledge in orthodox scientific psychology. The transpersonal position is that there are several ways to obtain and prove knowledge and that there are many states of consciousness all of which should be important in psychology. The altered states of consciousness (as in dreams, trance, ecstasy, or hypnotic conditions) may have special laws different from those of ordinary waking state.⁵⁹

Psychology is, primarily, the science of consciousness. Its researchers deal with consciousness directly when possible, and indirectly, through the study of physiology and behavior, when necessary.⁶⁰

A coherent organization of research and theory in transpersonal psychology has yet to be developed. In alliance with its predecessor, humanistic psychology, transpersonal psychology takes an antireductionist stance towards the sources of human experience and focuses on the phenomenology of consciousness--especially those states of consciousness that apparently transcend the impression of personal isolation, centrality, and self-sufficiency. As an interdisciplinary and cross-cultural movement, the transpersonal orientation presents many challenges to conventional psychology.

Transpersonal psychology recognizes that all psychologies are essentially models, and as such, that no one model is "the Truth," but rather only a necessarily limited image and pointer of reality. Transpersonal psychology, therefore, views different psychological models as embodying partially valid data and theories. Moreover, it suggests that these models may be complementary rather than oppositional. Transpersonal psychology is, therefore, particularly interested in broad integrations among Eastern and Western psychologies. The transpersonal model is not intended to invalidate earlier models, but rather to place them within an expanded context of human nature.⁶¹

One can see that transpersonal psychology not only has the body, mind and spirit back together within a psychological and philosophical framework but also has a cosmological and ontological construct as well.

Summary

One can gather from this very brief history of the healing arts, which includes both medicine and psychotherapy, that the accepted practices at any given time are greatly affected by the thoughts from science, religion, philosophy, sociology, etc. In essence, consensual reality of the society has a great impact on the beliefs and practices of the practitioners in the healing arts. Each era in history has had a different perspective in who was responsible for the healing arts and what were the socially acceptable practices that were to be utilized.

Since the beginning of the Dark Ages in Western Europe, most Western cultures have had both traditional and non-traditional methods in the healing arts. In certain periods of history such as the Inquisition, the use of non-traditional methods by practitioners not recognized by the political/social structure in power, met with serious consequences, such as losing one's life. It is important to realize that the non-traditional methods were at one time the traditional methods for healing and treatment. Many of these methods have been used for many thousands of years apparently because, "they work."

The modern era of the healing arts has been greatly influenced by the structure of scientific thought and scientific methodology which started to develop in the seventeenth century. In this period and up through the twentieth century, the concepts of the separation of the body, mind, spirit reached its heights, with the expectation that the problems of humanity would be solved by science. The great laws of motion and gravity were constructed which defined a very orderly and predictable universe based on a function called "time." Advances in mathematics increased substantially in this modern age period. The use of higher mathematics, called probabilities and statistics, greatly assisted in creating the paradigms of the modern era.

In this period, still extant, the concept of specialization fits very well into the concept of reductionism. In other words, if one separates the mind from the body one has reduced the whole (mind/body) into two separate parts. The basic concept is to reduce to the smallest functional unit and understand the smallest component in order to understand the whole. An example of this concept of reductionism would be the concept of a dual brain, as with right-brain, left-brain theories. In psychotherapy, there are a multitude of models and theories all directed at different aspects of human nature. This form of specialization can be confusing to both the practitioners and the clients, for each therapy model may approach a problem from a different perspective, using entirely different techniques to achieve the same goal.

If the basic foundation of medicine and psychology, namely scientific thought, is being expanded and modified by modern physics, then one would expect that changes within the other fields of science would also undergo changes.

The advent of new thinking from a number of different areas in science, and the recognition by some astute individuals of some shortcomings of the present models of psychotherapy and the healing arts has again initiated a transformation in concepts. These new concepts are presented in later chapters.

CHAPTER II

THE EMERGING PARADIGMS AND THEORIES

Introduction

All modern day sciences are founded on the reductionist, dualistic, and materialistic assumptions of the paradigms of the Newtonian, Cartesian era.

Thomas Kuhn author of The Structure of Scientific Revolutions (1962), defines a paradigm as: A theory which over time and general use becomes a law and, for most individuals, is unthinkable to challenge. Theories are open for challenge and changes, but a law is no longer subject to challenge or change. The concepts of gravity, motion, and time are some of these theories that became a law or paradigm.

Recent research and theoretical investigation in several areas of science are challenging many of the basic theories of science. The areas that are of particular interest include: psychosomatic and psychophysiological research, modern physics, and the nature of consciousness.

This chapter summarizes some of the new emerging theories and models that are challenging the concepts that are the basis of most of the present day sciences. While the implications for healing and psychotherapy shall also be noted in each section, a fuller development of their significance will follow in subsequent chapters.

Mind-Body Interaction

Contemporary research in the "mind-body interaction" has taken place in many fields. These include: psychosomatic medicine, neurophysiology, clinical biofeedback, and visualization.

Perhaps the greatest amount of research that supports the new paradigm that the body and mind are interactive and can not be separated is the study of psychosomatic illness. This area has received a great amount of attention since stress-related illness, both mental and physical, is the greatest threat to the health of individuals living in the highly industrialized Western cultures.

Kenneth R. Pelletier, Director of the Psychosomatic Medicine Clinic in Berkley, California, and Assistant Clinical Professor at the Langley Porter Neuropsychiatric Institute, University of California School of Medicine, has consolidated a great deal of the research into the nature of the interrelationships of the mind and body. He is considered one of the foremost experts in this area.

Pelletier points out that the prevailing concept of the brain prior to the 1950's was dualistic. Researchers tended to dichotomize between cortical and subcortical brain functions. Psychologists also regarded the two areas as more or less two separate entities and categorized human behavior as either cortical or subcortical in nature.¹

Early in the 1950's, researchers in neuroanatomy discovered an elaborate system of interdependent feedback loops between the cerebral cortex and the brain stem (subcortical) through a network of nerves called the "retical activating system," the RAS. This research provides the basis for postulating a more integrated relationship between the cortical and subcortical functions.

Structurally, the reticular system is a column of cells occupying the central portions of the midbrain up to the thalamic area. The reticular system appears to be totally responsible for selecting and screening stimuli from the autonomic nervous system prior to their being registered in the cortical or more conscious area of the brain. The RAS is one of the best pieces of neurophysiological evidence for a profound interconnection between the mind and the body.²

Another neurological structure that is important in understanding the mind-body interaction is the hypothalamus. The hypothalamus in the midbrain controls a multitude of physiological processes like body temperature and hunger. Additionally, it is the primary activator of the autonomic nervous system, and regulates the pituitary gland which is the master endocrine gland.

The hypothalamus is connected with the body's limbic structures which are primarily concerned with various aspects of emotion and behavior. According to Pelletier:

Of primary importance in terms of stress is the fact that the hypothalamus clearly seems to respond to emotional/psychological stimuli from the limbic system and to intellectually perceived stress stimuli from the cortex. Since it in turns activates the endocrine systems, it appears to be a critical link in the chain of events through which psychological stress produces a physical reaction.³

Pelletier summarizes the importance of this recent research:

The study of brain neurophysiology, and particularly recent information having to do with the integrative function of the reticular system, has much to teach us about stress and the genesis of psychosomatic disorders. It demonstrates graphically that the body and mind function together and cannot be regarded as independent of each other.

In the past, researchers have tended to view the nervous system and the higher centers of brain as an aggregate of separate circuits, each performing a particular task. More recent evidence seems to indicate that the nervous system is a unified, holistic system, with the reticular system performing a primary integration function. This new model suggests a continuum of mind/body interaction, with the reticular system mediating conscious awareness along that continuum.⁴

In traditional medicine, psychosomatic refers to a disorder which persists in the absence of clearly diagnosed organic pathology. Despite the apparent lack of organic pathology, the symptoms and the person's complaints of distress continue. To some practitioners they assume that the disorder is nonexistent, imaginary, or in short, has no real basis. In the holistic model of health care, this term conveys the fundamental interaction between mind and body which is involved in all diseases and all processes affecting health maintenance.⁵

The holistic concept of psychosomatic medicine could perhaps be called a philosophy in medicine which is directed to the study of human beings as a totality in both health and disease. Then applying the conclusions of such a study to the diagnosis, prognosis and treatment of the whole individual.

Most standard medical books attribute anywhere from 50 to 80 percent of all disease to psychosomatic or stress related origins. Pelletier and other researchers generally place that number at 90 percent.⁶

Medical science is coming to the understanding that the mind is not walled off from the supposedly involuntary activities of the autonomic nervous system. The evidence from a number of medical institutions is that the brain is an advanced apothecary, producing or ordering the endocrine system to produce the changes in the body's chemistry. In this way, the mind can govern the ability of the body not just to overcome pain but to regulate such functions as respiration, digestion, circulation and even the way cells reproduce.⁷

Nikolas Tinbergen, recipient of the 1973 Nobel Prize for Physiology and Medicine, states this concept most concisely: "The more that is being discovered about psychosomatic diseases, and in general about the extremely complex two-way traffic between the brain and the rest of the body, the more obvious it has become that too rigid a distinction between mind and body is of only limited use to medical science, in fact can be a hindrance to its advance."⁸

Stress and its manifestation in psychosomatic disorders is the most evident single factor contributing to the "afflictions of civilization."⁹

Research studies indicate that changes such as marriage, divorce, job change, addition to the family, death of a loved one, geographic relocation and the like, can produce stress. Positive life events can produce abnormally prolonged stress responses in the same manner as negative events. All that counts is the intensity of the demand for adjustment or readjustment.¹⁰

Human stress reactivity is basically a psychophysiological process which enables individuals to respond to the multitude of challenges confronted each day. It is one of the body's most sensitive and vital survival systems. Humans respond to major stress in the same manner that animals do, they are roused to a fight-or-flight reaction. Animals can deal with a threat through flight or flight, whereas most people, generally speaking, are denied those options through social conditioning. The body enters into a state of stress preparedness. The messages are transmitted throughout the neuroendocrine system which causes significant changes in one's biochemistry. In animals, this state of readiness subsides by the action of fighting or fleeing and the body rebounds into a state of deep relaxation and ultimately back towards homeostasis. In humans, if the negative psychological state is allowed to persist, the physiological stress response also continues.¹¹

Therefore, it is advantageous to know methods to release any negative psychological states associated with the stress and, perhaps, develop different belief systems that minimize or eliminate the negative psychological states that are created by one's mind.

When a body fails to adapt or overcome stress, "diseases of adaptation" are frequently the result. These are simply ordinary diseases which develop as a consequence of chronic stress. The disorder cannot be attributed to stress alone, but to the fact that the body, in attempting to adapt to stress, may create physiological conditions which precipitate disorders or predispose an individual towards pathology. In the human body, the weakest link in the chain of vital physiological processes will succumb first.¹²

Even in the course of a terminal illness, individuals will have unanticipated periods of spontaneous recovery when they deeply desire to live.¹³

Periods of illness, stress, or crisis in a person's life can at times provide for profound personal transformation. Both physical and psychological illness are potentially regenerative rather than inherently degenerative.¹⁴

William James, in 1890, roused himself from a prolonged depression with the realization that he had infinitesimal but omnipotent freedom to choose between one thought and another. When one exercises their omnipotent freedom independent of all of life's circumstances, one's sense of; being trapped, blaming, neurotic anxiety, and fear of death itself fades rapidly.¹⁵

Another interesting facet of the mind-body interaction is the "placebo effect." Placebo is usually defined as "an inactive substance or preparation given to satisfy the patient's symbolic need for drug therapy and in controlled studies to determine the efficacy of medicinal substances."¹⁶

In more holistic terms, "placebo" has come to connote any aspect of the healing process which cannot be attributed to a physical or pharmacological effect. This includes the patient's volition, doctor-patient interaction, life style changes, and a host of other variables which are essential aspects of a holistic model.

The placebo effect has been reported to account for healing in from 30% to 70% of all drug and surgical interventions. Placebos, like imagery, hypnosis, and biofeedback, surely must have a direct effect on the immune system, but how it works has yet to be carefully researched. The placebo is actually granting permission to heal.¹⁷

One thought-provoking case history is often cited as evidencing the paradoxical strength and delicacy of the "power of belief." The classic article reported by Bruno Klopfer titled Psychological Variables in Human Cancer (1957). The case involves a man with advanced lymphosarcoma who was included in an experimental study of the now discredited chemotherapeutic agent Krebiozen. After one dosage, his tumors disappeared. However, when reports were published indicating that the drug was ineffective, he again became bedridden. In an attempt to save his life, the man's physician told him not to believe what he read and that he was going to be given "double strength" Krebiozen, which was actually an injection of distilled water. Following this, the man again went into rapid remission. Later, however, when both the AMA and the FDA pronounced the drug worthless, the man died within a few days.¹⁸

Clinical Biofeedback

The term "feedback" is a term that was coined by the early pioneers in radio around the beginning of this century. Mathematician Norbert Wiener, a founding father of research in feedback, concisely defined the term as "a method of controlling a system by reinserting into it the results of its past performance."

Biofeedback is simply a particular kind of feedback, feedback from different parts of our body, the heart, the circulatory system, the different muscle groups etc. Biofeedback training is the procedure that allows a person to tune into their bodily functions and, eventually, to control them. Without such training most people would never be able to receive feedback from their internal world, feedback that is necessary if a person wants to gain mastery over all aspects of their behavior.

In short, biofeedback is the process or technique for learning voluntary control over automatically reflexly regulated body functions.¹⁹

Biofeedback training, in one sense, is very old. Zen Masters, Yogis, etc., have been doing it for centuries by developing a high degree of self-discipline, patience, and introspective power.

The modern day approach is to rely on instruments (when it is necessary) in the initial training stages of biofeedback to get the person aware of themselves; then, once they're pointed in the right direction, let them continue alone.²⁰

This is what biofeedback training accomplishes and the manner in which it works. Every conscious and unconscious body state gives off energy that can be measured. Small increases in hand temperature will cause more heat to be released from the hand. Similarly, increases in muscle tension will accelerate electrical activity at the surface of the skin. The biofeedback machines monitor these subtle energy shifts and translates them into light flashes, clicking noises or some other signal accessible to a person's normal senses. Subjects connected to this special equipment are actually able to produce a sensory show of body states.

Once a person is able to recognize body state, she/he soon learns to control them at will. Nobody really knows why this happens; only that it does. The machines are only a temporary necessity. After a little practice--the time varies, depending upon what body function the person is trying to control--the person is able to carry on the control without the mechanical instrumentation.²¹

There are three basic types of biofeedback machines: The EEG machine for controlling brain waves, the EMG machine for controlling muscle tension, and the temperature feedback machine for controlling blood flow in different parts of the body.

The EEG (electroencephalograph) machine, used to control and monitor brain waves, resembles portable tape recorders. It comes with three electrodes which are easily attached to three points on the head and are designed for alpha and theta brain-wave training. Brain-wave training presently has no known medical evidence to suggest that this type of training is harmful in any way. It is a way to learn to become relaxed and quiet.

The EMG (electromyography) machine, used to control and monitor body-muscles, generally is sold only to responsible professionals where the public can use the equipment under direction of properly trained personnel.

The EMG equipment can be dangerous, either, because the user uses the machine in an incorrect way (monitoring and altering a muscle which wasn't intended to be regulated) or treating bodily symptoms without medical supervision.

The same concerns expressed for EMG machines also applies for Temperature feedback instruments as these instruments should only be used under a doctor's or scientist's supervision.²².

In the average person, activity in the voluntary nervous system (the craniospinal nervous system) occurs in the normally conscious domain and the autonomic nervous activity occurs involuntarily and unconsciously. The autonomic nervous system is controlled by the subcortical brain structures. Visceral, circulatory, glandular, and other such basic processes are dependent upon the autonomic nervous system. Its two classes of activity, sympathetic and parasympathetic, act together; essentially, one controls the upper limit of physiological activity and the other the lower limit.

For instance, if excitement speeds up the heart too much, a built in control circuit (the parasympathetic) operates to slow it down. If it slows excessively, another control circuit (the sympathetic) acts to speed it up.²³

Many involuntary processes of the body are regulated by these two functions. Blood flow in the peripheral parts of the body however, the arms and legs, hands and feet, are controlled only by the action of the sympathetic section of the autonomic nervous system. In order to fully understand what is involved in the process of raising the temperature of the hand, one needs to understand the regulatory process that is involved in such an undertaking.

Just what is it that the person learns to control? At first glance one would say it is skin temperature. But just below the skin, it is the blood volume that is being regulated, and this is directly proportional to the diameter of the blood vessels. When the blood vessels increase in diameter, blood volume increases, and within seconds the temperature of the finger begins to rise. The diameter of the blood vessels in turn is regulated by smooth muscles in the vessel wall. In the hand this smooth muscle is controlled exclusively by the action of the sympathetic section of the autonomic nervous system, and this, in turn, is regulated from a center of vascular control that lies in an involuntary part of the central nervous system.²⁴

The regulator then is found in the brain subcortex that normally functions outside the realm of consciousness, and in order to learn voluntary control of hand temperature, one must develop a kind of awareness of normally unconscious involuntary events. This awareness can be accomplished with biofeedback.

The only way that one can warm the hands intentionally is to increase the blood flow. The major way the blood flow can be increased, with all other things being equal, is to decrease sympathetic firing. Sympathetic firing is controlled from the hypothalamus in the brain. Because this control center regulates blood flow throughout the body, when a person learns to warm the hands, vascular relaxation and rebalancing often occurs over the entire body. Learning to warm the hands at will, then, is essentially learning to decrease activation in the sympathetic nervous system. The stresses of life activates the sympathetic nervous system, also known as the "fight or flight" system.²⁵

In the training of biofeedback passive concentration or passive volition is the technique used to obtain the desired response. In the example of hand warming, if people try to force their hands to get warm with active will power, the hands almost always get cooler. If the subject then stops this strategy, the temperature of the hands usually increases. Passive volition is nothing more than telling the body what to do, usually by visualizing the desired state, then detaching from the situation, and allowing the body to do it.²⁶

To summarize all this is to say that voluntary control of involuntary systems can be developed using a feedback system which brings into awareness the effects of change upon the system. The actual process of making the change still appears to be out of person's awareness, but through visualizing and feeling the change that is desired, the body changes accordingly.

The Greens have demonstrated and said:

"Every change in the physiological state is accompanied by an appropriate change in the mental-emotional state, conscious or unconscious, and conversely, every change in the mental-emotional state, conscious or unconscious, is accompanied by an appropriate change in the physiological state." The principle is closed, which means the body affects the mind, the mind affects the body, and the new body state affects the mind, and so on. Whenever these psychophysiological operations are coupled with volition, psychosomatic self-regulation occurs.²⁷

In the wake of right brain/left brain models that have developed from the study of right brain/left brain, what has been found in biofeedback training is that often it leads to a synthesis of these characteristics. Quite often what happens when a person uses this training in self-regulation of physiological problems is that personality changes accompanied the physiological changes. In order to change the physiological state, they had to change their emotional and mental states.

A common area in the use of biofeedback is the use of brain-wave activity, namely the four levels or frequencies of the tiny oscillating voltages that emanate from the brain. In 1958 Joe Kamiya came upon the idea to use EEG output as a way to provide feedback to a subject to see if she/he could change the brain rhythms at will. The area he chose for this work was the occipital cortex (the visual cortex at the back of the head) and he found that subjects could rapidly learn to control the rhythm.

The major part of brain-wave research has been concerned with the occipital part of the head. The brain surface just below the occipital area of the skull is the visual projection area of the brain. The occipital cortex is essentially a screen, and the eyes are two cameras that give us information about the frequencies and intensities of light. The screen displays the retinal activity and this picture mixed with previous images from past experience gives us a perception of what we think we see. Perception is not exact and accurate, as most people believe, but is different for each person, in part because of different past experiences.

The lowest frequencies, in the delta band are the longest and slowest. They range from 0.5 Hz to 4 Hz. When people produce delta in any significant amount they are generally found to be asleep or otherwise unconscious. The next higher band of frequencies, from 4 to 8 Hz makes up theta. Theta rhythms are usually associated with near-unconscious or subliminally conscious states. The presence of theta is often accompanied by hypnogogic or dreamlike images. It is not a daydream-type experience, but a projection of impulses from unconscious sources. Unlike in a daydream, the content is not consciously followed but seems to appear suddenly out of nowhere.

Alpha rhythms from 8 to 13 Hz are associated with a more aware state than theta. Thus most untrained people can not maintain full consciousness during theta production, but do so during alpha. Occipital alpha generally appears when a person closes their eyes. If a person's eyes become glazed while you are speaking to them, you can assume they slipped into alpha and no longer hear what you are saying.

By contrast, beta (13 to 26 Hz and higher) is usually associated with active attention, often focused on the outer world but including thinking concretely.

To summarize brain-wave patterns, when consciousness is alert and focused, beta is found. When consciousness is alert but unfocused, alpha is found. When a person becomes drowsy, or moves into a state of consciousness called reverie, theta waves tend to appear. In deep sleep, delta waves appear. Another kind of sleep associated with dreaming, called REM (rapid eye movement) or paradoxical sleep, shows a brain-wave pattern that looks like that of the awake brain, although the person is asleep by all behavioral signs.²⁸

Brain-wave experiences in these levels are not the same in all individuals. While the brain waves can be measured objectively by the frequency of the waves, the subjective experience of particular frequencies varies according to individuals. The effect of biofeedback training is for the individuals to simply learn what each state means to them so they can recognize it when ever they are in that state or brain wave frequency. As one psychologist says, one person's experience in alpha can be another person's experience in theta. The use of biofeedback is to achieve a calm state of consciousness.²⁹

Brain-wave patterns have no sensory concomitants, that is, there are no sensory processes by means of which one can detect the presence of brain-wave activity. What is sensed and controlled is not the brain-wave itself, but a state of consciousness, a concatenation of subtle existential cues.³⁰

Perhaps the most important aspect of the meditative therapies such as autogenic training, progressive relaxation and especially clinical biofeedback is that they teach people to exercise control over their autonomic or involuntary physiological functions. The training is in reality training in the elicitation of certain subjective states of consciousness that produce a harmonious integration of the voluntary and autonomic processes. The regulation of autonomic functions--heart rate, blood pressure, brain-wave activity, skin temperature, involuntary-muscle contraction etc.--is established only by surrendering all efforts to control them.³¹

One of the benefits of biofeedback has been the mind research that has developed with the advent of this type of instrumentation that allows the psychologists and other scientists to monitor the experiences of a person's mind through the corresponding changes within the physiology of the person. The study of the mind through the advent of biofeedback instrumentation has become a measurable and observable science.

In Dr. Barbara Brown's book Stress and the Art of Biofeedback she describes more than fifty major medical and psychological problems in which biofeedback has been used with either greater success than conventional treatments or at least with equal benefits. The mind/body ailments that respond to biofeedback treatment span the entire spectrum of illnesses human beings suffer: emotional, psychosomatic, and physical disabilities.³²

Probably no discovery in medicine or psychology compares in breadth of application or in scope of implications to the biofeedback phenomenon. More important than its multiple uses, more important perhaps than its apparent universality as a cerebral tool of humankind, is its potential for redefining therapeutics and therapies into new standards of practice in which the individual person assumes, or at least shares, responsibility for her/his own health or illness.

Biofeedback involves healing in the imaginary realms, and contains aspects of shamanism: Rituals are conducted in which the subject goes into an altered state of consciousness, takes an imaginary journey, and enters into a territory where healing information is available.

In biofeedback, the journey is inward and not into the upper-world and the lower-world of the shaman. Since ancient times, only a few hardy souls dedicated their lives to the healing of others with transpersonal healing (i.e., imagination). Now with the new knowledge of the body/mind communication system and proper teaching, humanity can all eventually learn to enter altered states of consciousness at will and exercise its own healing mechanism.³³

If one understands the principles involved in biofeedback and realizes that these principles can be modified many different ways for different phenomena, then one can understand how many experiences that appear to be paranormal or mystical in nature are merely working within the framework of the nature of humankind, namely the body/mind interrelationship.

Visualization

The emergence of creative visualization techniques as a therapeutic tool for both the professional counselor and the layperson has emerged as a result of the findings in recent brain research.

Perhaps the greatest contributor in this modern era is neurosurgeon, Dr. Roger Sperry, a recipient of the Nobel Prize in 1981 for his proof of the split-brain theory, which says that one's problem solving skills, physical and mental abilities, and even personality traits are strongly influenced by one's habit of using one side of the brain more than the other. Roger Sperry and Michael Gazzaniga in 1967 did follow-up studies of nine individuals that had undergone a special surgery which severs the corpus callosum, thus disconnecting the two halves of the brain. Subtle changes were discovered that indicated that the corpus callosum serves the vital purpose of letting the right hand know what the left hand is doing.

Each hemisphere was tested separately by masking one eye and then the other, and it was found that each hemisphere absorbed information in a different way and was unaware of the other's learning.

The left could identify, verbally, what fell in its line of vision; the right could point to or touch items in its line of vision. The few verbal expressions that came as a result of right-brain viewing were emotional and disjointed.

Sperry and Gazzaniga observed that the right hemisphere has very poorly developed grammar, is incapable of forming the plural of a given word, and lacks a feel for syntax.³⁴

Roger Sperry has been doing split brain research since the 1960's and has provided much information about the functions of each half of the brain. In these experiments, they were able to surgically separate and test the thinking abilities of each half of the human brain and found that each half of the brain has its own way of thinking and its own memories.

The left brain tends to think in terms of symbols and words while the right brain thinks in terms of sensory images. The left brain is used for the likes of logic, judgment, speaking, and mathematics ability, while the right brain is the source of dreaming, feelings, visualization, and intuition. The general findings are as follows:

Left Brain used for:

speaking
reading
writing
analyzing

idea-linking
abstracting
categorizing
logic
reasoning
judgment
counting and
 mathematical ability
verbal memory
using symbols
managing time

Right Brain used for:

awareness without description
seeing whole things at once
recognizing similarities
understanding analogies and
metaphors
intuition
insight
gut-level-feeling
synthesizing
visualization
spatial perception
visual memory

recognizing patterns
feeling our way
relating to the present

Dr. Sperry also concluded that there are some differences in the way each half of the brain deals with incoming information. Roger Sperry believes that an independent stream of consciousness resides in each hemisphere of the split-brain patient. He suggests that the surgical division of the brain divides the mind into two separate realms of consciousness. Such speculation naturally leads to the possibility of dual consciousness in the intact, normal brain under certain conditions.³⁵

The research in how the brain functions has greatly assisted in developing techniques for creative visualization which is also called mental imagery. Creative Visualization is the art of using mental imagery and affirmations to produce positive changes in a person's life. Creative Visualization is being used successfully in the fields of psychology, health, education, business, athletics, and the creative arts.

Imagery has always played a key role in a person's life. Imagery is the thought process that invokes and uses the senses; vision, audition, smell, taste, the sense of movement, position, and touch. It is the communication mechanism between perception, emotion, and bodily change.³⁶

A more correct definition of creative visualization is the art of using mental imagery to bring one's mental, emotional, and physical processes to be congruent with, and supporting of, the creation of a new belief. This definition fits the statement "your thoughts are your reality, and your reality is your thoughts." A person can be healed by their thoughts or slayed by them. Dr. Adelaide Bry author of Directing the Movies of Your Mind states: "Our beliefs about ourselves and our world govern all our experiences. Our images are self-fulfilling prophecies. What we envision in life is what we get." ³⁷

The use of Visualization is unique when compared to the Modern Western culture where almost all of our experiences are understood through the logical linear, analytical thinking process. The main way one communicates this kind of thinking, to oneself and to others, is through words. Words have become our primary way of knowing, of being with each other, and of understanding the world around us. In other words, visualization is a right brain function.

Directing the inner movies-of-the-mind is a special way of using one's imagination, which can change what is going on in a person's body as much as it can influence what happens in a person's day-to-day living. The movies-of-the-mind refers to visualizations, inner pictures, images, and more generally, the inner experience which has been known and explored since the beginning of time. The methodology has been updated as we are becoming more aware of how the body/mind functions.³⁸

Creative Visualization brings forth from the recesses of your mind uncensored information that is unflinching, accurate, interesting and meaningful. More specifically, movies-of-the-mind are :

- A method of developing inner awareness and control of the body's autonomic functions.

- A way to bring to consciousness what you really feel and understand as the meaning of the things that occur in your life.
- A way to get in touch with your imaginative powers.
- A source of information much vaster than words.
- A channel, for many, to personal and universal truths.
- And, most important, it is an act of conscious and deliberate creating.

A person may say she/he does not know how to do creative visualization, to which the answer is that she/he has been doing it all the time. Everything that happens in life is connected to a person's positive and negative inner images. Since the person probably was not aware of them, she/he had few or most likely no disappointments associated with them.³⁹

Most visualizations will be a combination of receptive and programmed visualization, with one of them predominating. Receptive visualization starts with a theme and then lets the movie roll of its own accord. Programmed visualization holds a positive picture in the mind in order to create the pictured situation or a symbolic representation of it.

In receptive visualization, one goes into the images and allows whatever comes up to simply be there. It might be sights, sounds, or other sensory images, or it might be feelings, or both. This is done without judgment, without insisting on any particular result and without censorship.⁴⁰

Another way to use visualization is to recreate an experience. To recall an experience or event from one's past in order to develop an understanding of how it affects one's present life patterns. One can also create an original experience one never had before or combine these two methods together in what is called "reframing a past experience from one perspective to another perspective." This can be accomplished by a guided visualization.

Programmed visualization may be used for different kinds of goals. They might include healing, teaching oneself a new skill, rehearsing a coming event, etc. It is the deliberate use of the power of the mind to create one's own reality. One's life is limited by what one senses as possible. As one creates more possibilities in one's life, one also creates more options in obtaining these new possibilities.

The most essential ingredient in programmed visualization is to form in one's mind a very precise and clear picture of what one needs and then hold it, affirm it, and see it as being yours.

It is important to describe what the term visualize means before the process is described. It is not at all necessary to mentally see an image. Some people will see very clear, sharp images; some will see fuzzy ones. Some see in Technicolor, others in black and white. Some see nothing but sense a picture or image, others just sort of "think about" it or imagine that they are looking at it. All of these are called visualization. As long as what you experience is other than words, it is called a picture.⁴¹

Four basic steps for effective creative visualization.

1. Set the goal: decide on what exactly you want to have, work toward, realize or create.
2. Create an idea or mental picture of the object or situation exactly as you want it.
- 3 Focus on the idea or mental picture often, both in quiet meditation, and also casually throughout the day when it comes to mind.
4. Give it positive energy: Focus on the goal, think about it positively. Make strong positive affirming statements to yourself: that it exists, that it has come or is now coming to you.

Many techniques are now taught to use visualization in order to facilitate a healing. Most of the techniques are no more than improved versions used by laypeople and shamans for thousands of years. The following two examples are provided to demonstrate the simplicity of using this technique.

A physical therapist about to finish her master's degree was suffering from massive uterine hemorrhage. All the usual treatments had been tried and the only treatment left was a hysterectomy. Not willing to have an hysterectomy she went into seclusion for a week and during this time she visualized white light shining its healing rays into her uterus. At the end of the week, the bleeding had completely stopped. She had no idea that white light has been used for centuries in all parts of the world in precisely the same way she chose to use it.⁴²

Dr. Stanley Krippner, a well-known scientist who has studied healers, experienced some after problems from abdominal surgery. The incision failed to heal, and copious drainage from the wound indicated some internal problem was present. Dr. Krippner had one of his psychic friends who had a talent for diagnosing illness give him a diagnosis. She indicated that the problem appeared to be with four of the stitches, which were either misplaced or had worked their way into an irritating position.

He began to image the stitches coming out through the drainage tube. After two days, two double-knotted stitches popped out through the tube, and the incision healed promptly thereafter.⁴³

Visualization while widely used in non-traditional healing methods in the Western cultures has only recently been used by some of the more progressive practitioners of traditional medicine.

Dr. G. Frank Lawlis and Dr. J. Achterberg for the past decade have used imagery from a twentieth-century perspective of health and disease combined with ancient shamanic techniques. It was developed out of the belief that techniques that served the world so well as medicine since the beginning of recorded history should not be discarded but improved upon. In this way, the meaning of both the disease and the diagnostic imagery symbols are used to describe the disease and the defenses against it can be addressed.⁴⁴

Achterberg suggests that the finest medicine will be practiced by those who take the best from the shaman and from the scientist.

She indicates that these individuals who are trying to bring the two worlds together are practicing shaman/scientists. The modern shaman/scientists generally envision themselves as teachers or guides, with any healing or diagnostic benefit coming from within the patient themselves. Typically, they do not claim to be operating in the transpersonal mode of healing. Generally, they can best be described as ascribing to the preverbal notion of healing with the mind and imagination, regarding it as natural human ability.⁴⁵

Both the shaman and the shaman/scientist rely on common elements to create health: an atmosphere of trust and expectancy, an understanding of the meaning of disease in both a social and personal context, and the use of culturally sanctioned rituals and symbols.⁴⁶

If the prevention of pathology is the ultimate goal for health practitioners and laypersons, then the person needs to be considered as a whole person. The individual needs to be considered physically, psychologically, and spiritually, with the intent of gaining as much understanding as possible about their relationship with their total environment.⁴⁷

In a holistic approach, integrating techniques ranging from ancient meditative systems to twentieth-century biomedical technology, lies a new medicine with the emphasis upon the ability of all individuals to maintain a healing balance within themselves and a harmony with their environment.⁴⁸

The use of visualization is limitless, and as such it has been applied to nearly every aspect of a person's daily life. It now is starting to come to the forefront for the average individual, so that one can take some degree of control about one's life and make meaningful changes about one's self perceptions and physical well-being through the use of creative visualization.

Summary

The research reviewed in this section definitely indicates that mind and body are interrelated and cannot be considered to be separate, or dualistic as defined in Cartesian philosophy. As Dr. Elmer and Alice Green so clearly stated, the body affects the mind, the mind affects the body. If the body and mind were not one functioning system, that statement could not be made. This is a very powerful statement because it puts the power of health back into being the individual's responsibility. In other words, becoming healthy begins in the mind of the individual and the individual may choose to use health practitioners to facilitate one's own healing. More concisely, if one does not want to get well, or change the belief systems that are creating dysfunction in one's life, nothing can be done for them that is going to be effective or long lasting.

If, on the other hand, the individual wants to become healthy, that mental state is the main factor in achieving the healing. Other factors provided by the health care practitioners assist in the process of the elimination of pathology or dysfunctional thought patterns and behavior but only when the individual wants to become healthy. In some situations, what appears to be a miracle sometimes happens. Yet, perhaps, what appears to be a miracle is only an event that is operating within universal laws that are not yet understood within contemporary thinking.

A person is more than one's body. Every human being is a holistic, interdependent relationship of body, emotions, mind, and spirit.

The emerging health practitioners, as Achterberg indicated, will utilize techniques that have worked for thousands of years along with the techniques developed in present day. The therapist of this new generation of practitioners will use the knowledge of mind, body and spirit interaction in treating the total person. In doing so, much as the shaman does, the therapist will also use her/his total being, including the possible use of psychic and mediumship abilities both as diagnostic tools and a method to confirm what is being accomplished in the therapeutic processes.

All healing, mental or physical requires the use of the mind. The conscious use of this power can now become a natural part of the therapeutic process.

Modern Physics

Chapter I described the effects, in this modern era, that science has upon the beliefs and attitudes of the mainstream population. The prevailing world view in the healing arts, both medicine and psychotherapy, has generally stayed within the boundaries as defined by science, especially, physical science. The significance of recent developments in physics indicating the limitations of the former laws or paradigms is providing a foundation for a new world view.

Thomas Kuhn in The Structure of Scientific Revolutions (1962) says every dominate paradigm eventually moves to the limits of its methodologies and ceases to be creative. At that point, the increasing body of information that cannot be incorporated constitutes the emergence of an alternative paradigm to come to the fore. The underlying paradigm, on which basic research is founded, has the effect of determining what is considered to be legitimate versus spurious clinical practice.⁴⁹

In the scientific method of experimentation, a theory is first postulated and, experiments are conducted to verify that the theory appears to be correct according to the results of the experiment. If they do correlate consistently then the theory is accepted. Over time the theory is accepted by the general use of the theory and it becomes a law. Theories are open for challenge and changes, but a law is no longer subject to challenge or change. A theory which over time became a law, and, for most individuals, was unthinkable to challenge is what Kuhn called a "paradigm".

Scientific inquiry has two major functions the first of which is to provide what are called scientific facts. There are essentially two uses of these scientific facts: General statements of the relationships between determined aspects of nature which are referred to as "scientific laws" which tend to be expressed in mathematical formulas in the physical science. The other use of scientific facts is the application of these general laws to concrete situations for the purposes of verification, and specific prediction or control of these situations. These generalized scientific laws are to disclose predictable aspects of phenomena regardless of when or where they occur.

The second function of science is to provide a conceptual reorganization of the knowledge humankind has already acquired of the known aspects of nature. This function of science is to expand the range of conceptual knowledge through the discovery of more predicable aspects of nature which presently remains undetermined. In this regard, relativity theory is more accurate naming certain phenomena than Newton's concepts. Neither is comprehended in the other, nor reducible to it. Both concepts are correct.⁵⁰

Since science does not operate in a vacuum, new theories that are evolving out of modern physics affect all the sciences, including the biological, medical, and psychological disciplines.

Modern physics has had a profound influence on almost all aspects of humanity. It has become the basis of natural science which is the basis of technical science. However, the influence of modern physics goes well beyond technology into the realm of thought and culture, where it is creating a revised concept of the universe and one's relation to it.⁵¹

Pelletier suggests that major scientific discoveries like those of quantum physics, have far-reaching effects with the potential of significantly altering one's view of themselves and the universe of which they are a part.⁵²

Scientific revolutions are forced upon us by the discovery of phenomena that are not comprehensible in terms of the old theories. Much is at stake when an old theory is asked to be revised. To accept that nature is fundamentally irrational (governed by chance), which is the essential statement of quantum mechanics, is a powerful blow to the intellect. This new world view is as different from the world view at the beginning of this century as the Copernican world view was from its predecessors. It calls upon us to relinquish many of our closely clutched ideas.⁵³

It is very important to emphasize that no one is saying that modern physics is right and Newtonian models are incorrect, but rather, each is valid for a certain range of phenomena. Beyond its intrinsic ranges, any one model becomes inaccurate and needs to be extended, revised, and integrated with other perspectives.⁵⁴

Quantum Mechanics

A "quantum" is a quantity of something, a specific amount. "Mechanics" is the study of motion. Therefore, "quantum mechanics" is the study of the motion of quantities. Quantum theory says that nature is composed of particles (quanta), and the study of this subatomic phenomena is called quantum mechanics.

In the study of elementary particles, physicists discovered that Newtonian physics does not work in the microcosm. "Quantum mechanical experiments repeatedly produced results which the physics of Newton could neither predict nor explain." ⁵⁵

The concepts of quantum theory are difficult to accept. In one aspect it is clear that the particles within the atom were nothing like the solid objects of classical physics. An atom would need to be the size of a fourteen story

building in order to have its nucleus the size of a grain of salt. Subatomic particles are very abstract entities which have a dual aspect. "Depending on how we look at them, they appear sometimes as particles, sometimes as waves; ..." ⁵⁶ This same dual phenomena was discovered by Einstein in the properties of light.

The theory maintains that wave-like and particle-like characteristics are mutually exclusive, or complementary, aspects of light. Zukav explains that wave-like and particle-like behavior are not actual properties of light. They are the property of our interaction with light, namely the type of experiment utilized.⁵⁷

Niels Bohr's concept of complementarity arose when apparently conflicting results in elementary particle physics forced an expansion of the frame of reference of classical physics. With the acceptance of complementarity in physics, it was realized that observations which give conflicting (complementary) views of phenomena, when taken by themselves, could not be accepted as complete nor, therefore, as a totally correct description of nature. Ornstein postulated even further saying:

"It is conceivable, then, that the notion of complementarity offers a method of including both sensuous and intellectual knowledge of nature in a common frame of reference. The result, far more than mere compromise or amalgamation of the two viewpoints, could be a richer science, in which esthetic and quantitative valuations, each retaining its own integrity, would contribute equally to the description of nature ..." ⁵⁸

The major characteristic of quantum mechanics is probability. It is concerned with mass behavior, statistics, and the laws of probability and chance.⁵⁹ Pelletier summarizes this point:

Quantum theory is essentially based upon averaging procedures performed on multiple events. Quantum mechanics describes systems in statistical terms that generate the probability but not the certainty of a particular outcome.... All of modern science refers to probability theory, for it gives access to the phenomena that are individually unpredictable which can lead to very stable, average performances when treated in mass.⁶⁰

The most widely accepted model of quantum theory is called the Copenhagen Interpretation of Quantum Mechanics and was the first consistent formulation of quantum mechanics. "The Copenhagen Interpretation says, in effect, that it does not matter what quantum mechanics is about! The important thing is that it works in all possible experimental situations." ⁶¹

Zukav considers this as one of the most important statements in the history of science. This statement began the merging of the rational part of the psyche--typically left-brain thinking--associated with science, with the irrational--right-brain thinking--associated with perceiving whole patterns, which had been ignored since the 1700's.⁶²

Traditionally, a scientific idea of truth was anchored in an absolute independent truth somewhere "out there." The closer that one came in the approximations to the absolute truth, the truer the theories were said to be. The Copenhagen Interpretation eliminates the idea of a one-to-one correspondence between reality and theory. Said in another way, quantum mechanics sets aside the laws governing individual events and directly states the laws governing the whole. It is a very pragmatic theory, maintaining that whether or not something is true is not a matter of how closely it corresponds to the absolute truth, but of how consistent it is with our experience.⁶³

The philosophy emerging from quantum physics is that the universe is no longer seen as a machine made up of a multitude of objects, but rather as a harmonious 'organic' whole whose parts are only defined through their interrelationships.⁶⁴

The Copenhagen interpretation of quantum theory is not the only theory that is used to describe phenomena at the subatomic level. Yet, "The universal interconnectedness of things and events, however, seems to be a fundamental feature of the atomic reality which does not depend on a particular interpretation of the mathematical theory."⁶⁵

The following passage by David Bohm, one of the main opponents of the Copenhagen interpretation, confirms this fact most eloquently:

...We have reversed the usual classical notion that the independent "elementary parts" of the world are the fundamental reality, and that the various systems are merely particular contingent forms and arrangements of these parts. Rather, we say that inseparable quantum interconnectedness of the whole universe is the fundamental reality, and that relatively independently behaving parts are merely particular and contingent forms within this whole.⁶⁶

Modern physics had two further developments starting in the 1930's, one experiential and the other theoretical. Both contributed to the abandonment of the concept of a basic elemental particle as a building block as prescribed by classical physics. Experimental physics has continually found new particles recognizing that there are more than two hundred such elementary particles. As more and more particles were discovered, it became clear that

they could not be called "elementary." The general belief among physicists now is that there is no elementary building block.⁶⁷

This belief is supported by the theoretical developments in physics. In the experimentation with particles, it became clear that the particles confined to dimensions the size of nuclei move so fast that their speed comes close to the speed of light. Every description of natural phenomena involving velocities close to the speed of light has to take into account relative theory.⁶⁸

What is needed to fully understand the phenomena in the nuclear world, is a theory that incorporates both quantum and relative theory. Such a theory has not yet been found and presents a great challenge to modern physics.⁶⁹

Relativity Theory

While a whole team of physicists worked out the quantum theory, the relativity theory was constructed in its complete form almost entirely by Albert Einstein. His Special Theory of Relativity published in 1905 marked a turning point in human thought.

According to relativity theory, space is not three-dimensional and time is not a separate entity as put forth by Newtonian physics. Einstein concluded from experiments that time and space are intimately connected and form a four-dimensional space-time continuum in which the coordinates of space and time were constantly having to be readjusted to take account of one's point of view.⁷⁰

Concepts derived from relativity theory also bear a direct relationship in medical research and practice. Space is no longer shown to be three-dimensional and time is not a separate entity. They are inseparably interconnected in a four-dimensional continuum referred to as "space-time". The separation of space and time are so absolutely central to Newtonian physics that the advent of the relativistic paradigms that have now emerged necessitate a fundamental change in our understanding of nature. For modern physics, the fundamental particles are no longer three-dimensional building blocks, but rather bundles of energy. Modern physics indicates that mass is a form of energy, that energy is stored in mass, and that matter and energy are inseparable aspects of the same space-time reality.⁷¹

The special theory of relativity shows that events which happen at the same time in one frame of reference may occur at different times when seen from another frame of reference. Thus words like "past," "present," and "future" have no meaning in the universe at large unless they are relegated to a specific frame of reference. Each frame of reference could be any of these stated periods, so there is no absolute time which flows equably.⁷²

In 1915, Einstein developed a theory that would be valid for all frames of reference and would describe an event regardless of how it moved relative to any other. The General Theory takes into account that all objects are subject to accelerations and follow curved trajectories which are due to the presence of other masses and have traditionally been described as forces of gravity. The basic premise of the general theory of relativity is that the laws of the universe are the same for all systems, regardless of their state of motion.⁷³

According to the general theory of relativity, the gravitational field of matter has the effect of distorting or causing a curvature of the space-time continuum in its vicinity. As the size of the mass increases so does the amount of curvature. The curvature around the earth is infinitesimally small and nearly undetectable. The mass of our sun, which is significantly larger than the earth is great enough to be detected.⁷⁴

While the general theory of relativity has not been confirmed conclusively, it is the most accepted, consistent and elegant theory of gravity and is widely used in astrophysics and cosmology for the description of the universe.⁷⁵

One cosmological model of the universe based on the general theory of relativity was proposed by mathematician Kurt Godel in 1949. His model suggests that there is sufficient mass in the universe to curve space right around on itself--such that the universe as a whole can be viewed as an enclosed, rotating sphere. The majority of physicists do not agree that the known mass of the universe is as large as Godel's model indicates. The calculations of universal mass by physicists are continually being revised upward and may yet reach the critical amount suggested by Godel. His model has accurately predicted certain phenomena such as black holes and remains an important concept in physics.⁷⁶

A summary of quantum and relative theory in regards to particles as noted by Fritjof Capra:

Quantum theory has shown that particles are not isolated grains of matter, but are probability patterns, interconnections in an inseparable cosmic web that includes human consciousness. Relativity theory, so to speak, has made the cosmic web come alive by revealing its intrinsically dynamic character; by showing that its activity is the very essence of its being.⁷⁷

Summary

The concepts that have emerged from modern physics have revised many concepts of the human's relationship to the universe and has challenged the paradigms from which the world-view is constructed.

The concept of reality has been redefined without past, present and future. The quantum physicist indicates that everything in the universe is connected, not just the mind and body. The individual is a part of the cosmos or absolute, which is a concept from transpersonal psychology.

The physicist describes matter and energy as inseparable aspects of the same space-time reality. The physicist also says that a human being cannot observe phenomena at the subatomic level without affecting it. This means that perhaps all observances of nature are affected by the observer. The human is seen as a participant in the process of nature.

The laws of Newton are still considered by physics to be applicable to the everyday sensory reality of human experience. The theories of quantum mechanics and the theory of relativity provide insight not only to the realm of physics, but to different states of consciousness and assist in the understanding of certain paranormal experiences.

As no single theory works completely for the different levels of physical reality, it is therefore logical to postulate that no single explanatory system can account for different levels of consciousness and the data obtained from those levels.

So, while the new physics presents a broader picture of the universe as a whole, the relevance of the implications of these new discoveries is highly dependent upon the consciousness of each individual. Lawrence LeShan believes that the evidence supports the concept of a multi-tracked universe or multiple realities. This concept will be discussed in "the nature of consciousness" section.

The Nature Of Consciousness

Perhaps the greatest challenge to the paradigm of scientific materialism is the contemporary research and theories about the nature of consciousness.

If, as stated earlier, by William James, Robert Ornstein, Carl Jung, and a host of others, psychology is a science of consciousness, then it is both necessary and appropriate to review the new research in consciousness.⁷⁸

Ornstein states that there is a cultural and scientific academic evolution in process. Academic people are now interested in "Altered States" of consciousness, meditation, mind-expanding drug states, esoteric psychology, parapsychology, new age thought and Eastern religions. Academia is developing an interest in areas that previously only interested other segments of this society.⁷⁹

Interest in human consciousness is growing rapidly in our society and is reflected in such activities as meditation, biofeedback, altered states of consciousness, guided imagery, parapsychology, and Eastern religions. Pelletier believes the recent theories of quantum physics, the increase of Eastern meditative and religious systems, the uses of psychedelic drugs, and the rise of human development centers, and a renewed interest in the functions of the mind, all convey and necessitate consideration of a science of consciousness.⁸⁰

Robert Ornstein also supports the premise that there is a need to study consciousness. Ornstein states:

it is time once again to open up the scope of psychology to areas of thought that have not been fully represented in contemporary research, and to return to its primary source, to the analysis of consciousness, but now employing the technological and methodological advances that have been made in the course of the past century.⁸¹

It has only been in recent years that the study of the mind and the activities related to consciousness have been considered suitable for serious scientific study. Prior to this, they were felt to be occult disciplines appropriate for study by anthropology or religion but not by experimental science. This belief has changed.

Since the 1950's, scientific investigations have studied traditional meditative techniques with trained yogis and Zen monks in a natural setting. Biofeedback investigators demonstrated that humans could learn to control autonomic functions if given adequate feedback about what they were doing. This subject was discussed earlier. The availability of instrumentation that can measure changes in the subjective states has allowed "states of consciousness" studies to become respectable scientific territory.

A method to study the phenomena of consciousness has been proposed by Charles Tart that is compatible with the essence of scientific methodology. He states that scientific methods can be reduced to four basic principles: good observation of the phenomena; to describe the techniques, conditions and results fully so a second experimenter can repeat the observations for consensual validation; the necessity to theorize logically; and the testing of theory against predicted, observable consequences. He firmly believes that it is possible to develop a science of states of consciousness, a "state-specific science," which adheres to all of these requirements even though the experimental variables are not manifested in the external environment.⁸²

Pelletier would like to develop a science on non-objective phenomena within existing scientific theory. He notes that science is considered to be logical, rational, inductive, and dealing only with observable phenomena, whereas mysticism is described as being intuitive, holistic, deductive, and concerned with the unobservable phenomena of internal states. The division between science and mysticism has persisted despite striking examples of the integration of scientific and mystical knowledge. He cites the following examples of this integration: the equating of the two hemispheres of the brain with two modes of consciousness; the demonstration of voluntary control of the autonomic nervous system by means of biofeedback training; the discovery of similarities of concepts in quantum physics and Buddhism; application of meditative techniques in the relief of disorders; and the profound reassessment of the limits of scientific inquiry. He states:

In essence, both science and mysticism share a mutual goal, to know the nature of reality, and even to share a common vocabulary. Both attempt to formulate a paradigm, or model, of the universe that would be agreed upon by all individuals who are adequately skilled in that method of inquiry. Although these two approaches superficially appear mutually exclusive or even antagonistic, a great deal of modern research reveals that they share a common ground.⁸³

While consciousness is a subject extremely broad in scope only certain aspects of the subject will be discussed in this section that will attempt to move towards an increased understanding of the subject from several perspectives. The topics to be covered here include: the neurophysiological basis of major modes of consciousness, levels of consciousness, and meditative states of consciousness. Implication of this area of study in psychic and mediumship abilities and in healing shall be noted.

The Brain

Modern research on the brain is primarily focused on understanding the dynamics and methodologies of how the brain functions. Contemporary research in the neurophysiological basis of two modes of consciousness has been highlighted by the research in the functionality of the two hemispheres of the brain.

In the previous section on mind-body, the connection between the cortical and subcortical functions was described as vertical communication by means of the RAS. Now the communication in a horizontal mode between the right and left hemispheres of the brain will be discussed.

The cortex of the brain is divided into two distinct hemispheres which are joined by a bundle of interconnecting fibers called the corpus callosum.

The right side of the body is mainly controlled by the left side of the cortex, and the left side of the body is controlled mainly by the right side of the cortex. In human vision each eye views both left and right sides of the vision field. However, the brain receives left and right visual field separately because of a cross over point called the optic chiasm. Signals from the left field of vision of both eyes travel to the right visual cortex. Conversely, the left visual cortex receives signals from the right visual field.⁸⁴

Modern research in the split-brain theory of Roger Sperry which was described in the section on visualization has presented substantial information on the functions of the two hemispheres. In most persons, the two hemispheres tend to specialize in the functions that they govern. The left hemisphere has been found to be predominantly involved with analytical, logical, and intellectual thought, that is, with verbal and mathematical abilities.

The right hemisphere appears to be responsible for orientation in space, artistic endeavors, body language, and the recognition of faces. It seems to process information more diffusely and is more intuitive, holistic, relational, and simultaneous in its mode of operation.⁸⁵

Robert Ornstein in his book The Psychology of Consciousness provides the following functions of each hemisphere:

The Left Side

Connected to the right side of the body, and the right side of each eye's vision.

Deals with inputs one at time.

Processes information in a linear manner. Has a lineal and sequential mode of operation.

Deals with time. Responsible for the faculty of expression or, language.

The Right Side

Connected to the left side of the body, and the left side of each eye's vision.

Demands ready integration of many inputs at once.

Processes information more diffusely. Has a nonlinear and simultaneous mode of operation.

Deals with space. Responsible for gestures, facial and body movements, tone of voice, etc.

Responsible for verbal and mathematical functions

Responsible for spatial and relational function; awareness of our bodies; our orientation in space; recognition of faces; artistic endeavor; recognition of pitch.

Specializes in memory and recognition of words.

Specializes in memory and recognition of objects, persons, and places, etc.

Normally tends to specialize in logic and analytical reasoning or thinking.

Normally tends to specialize in intuitive and holistic perception of thinking.

The seat of reason.

The seat of passion and of dreams.

Psychologist Robert Ornstein believes brain research shows that the distinctions between the two hemispheres of the brain are not simply a reflection of culture or philosophy. Ornstein believes that what used to be a belief in an Eastern intuitive consciousness versus a Western logical form of consciousness now has a physiological basis in the different functions of the two hemispheres.⁸⁶

The conclusions drawn from these studies is that the two sides of the brain operate differently and independently.⁸⁷ Michael Gazzaniga summarizing split-brain studies stated in 1967: "Taken together, our studies seem to demonstrate conclusively that in a split-brain situation we are really dealing with two brains, each separately capable of mental functions of a high order."⁸⁸

Several other studies provide interesting insights into brain functioning that are useful in therapy and healing. Alan Baddeley is/was Director of The Medical Research Council's Applied Psychology Unit at Cambridge. While at Stirling University he was responsible for some interesting research in context-related learning. He engaged six subjects to learn lists of words while underwater, and then compared their recall of the words underwater with their recall of a second list of words learned under water but recalled on dry land. Words both learned and recalled underwater were dramatically better remembered than words learned and recalled in different environments. Baddeley's underwater experiments shows that the context, or the environment, in which one learns can have a powerful effect on the ability to recall. The context presumably provides clues which enable one to code information more completely for subsequent retrieval from the file. The experiments also suggests that when normal people forget, the faulty component is recall, not the memory store itself.⁸⁹

Dr. J. R. Lackner at Brandeis University devised an experiment on unconscious understanding. The experiment entails the person being tested to listen with their left ear to a sentence which may have at least two interpretations, and tries to paraphrase it. At the same time a second sentence is played into the right ear which could clarify the ambivalent sentence. In most cases the subject's response has been influenced by the right ear sentence, even though the person was not conscious of hearing it. This means that the brain can analyze and comprehend language unconsciously as well as consciously.⁹⁰

The ancient yogic techniques for changing mental or physiological states prescribe alternating one's breathing between the two nostrils. Research at Davis Center for Behavioral Neurobiology, Salk Institute for Biological Studies, indicates that the nose is more than a mere olfactory device. It is an instrument for altering brain activity. EEG tests show a consistent relationship between nasal airflow and cerebral dominance. The researcher, David Shannahoff-Khalsa, feels that this work demonstrates "the individual's ability to noninvasively, selectively, and predictably alter cerebral activity and associated physiological processes" and also implies that humans need not be helpless victims of a given emotional state. If one wants to alter an unwanted state, just breathe through the more congested nostril.⁹¹

Research into mental suspenders which evade the left brain and access the right brain operates in two ways. One method is to overload the left brain with details, the second is to starve the left brain of information until it falls into boredom. Both methods gain access to the right brain. This process is used in whole brain problem solving. The steps are as follows:

- a) Define problem as simply and as briefly as possible--left brain.
- b) State in positive terms what you want--left brain.
- c) Now convert the goal into four-year-old language--right brain.
- d) Memorize that childlike message and say it aloud several times.⁹²

The dominate right person are usually easily hypnotized and are sometimes even affected when someone else is the subject. Milton Erickson's hypnosis model is to overload the dominate brain, which provides access to the nondominate brain, and then work with the nondominate brain.

Factors contributing to Suspension of the left brain:

- A. Deprivation of food, sleep and/or sensory stimulation.
These conditions literally starve the left and can produce an hallucinogenic state.

- B. Overload of words, arguments, or demands for concentration. These exhaust the left, which then allows the right-brain takeover.
- C. Music, rhythm, cadence, marching, flashing lights, chanting, undulating movements and repetitious sounds can induce trance.
- D. Extreme physical comfort can allow you to glide to the sensate right; extreme physical discomfort provokes you to flee there to avoid thinking about the pain.
- E. An attitude of acceptance by the subject greatly aids suspension of the left. Probably dominant rights are more prone to be accepting because they are less analytical than lefts.⁹³

In the area of listening, Dichotic research has discovered several interesting aspects about listening. Musical, emotional messages appeal to the right brain via the left ear, while the right ear prefers informational, language input. Doreen Kimura a researcher at the Montreal Neurological Institute found that when competing verbal material is presented to both ears, the right ear (left brain) has a clear superiority in response accuracy and reaction time. Dichotic listening has been utilized in therapy for altering behaviors, self image, etc. The technique used is for the right ear to hear a straightforward lecture in a nearly expressionless voice.⁹⁴

Another interesting phenomena is that the brain operates in cycles. The brain operates in ninety-minute cycles, alternating between performing verbal and spatial processes (left and right-hemisphere tasks) more efficiently. Similar cyclical shifts between hemispheres is evident during sleep. Dreaming occurs during REM (rapid eye movement) cycles approximately every ninety minutes throughout the night. Daydreams and other wakeful flights of fancy also manifest in ninety-minute cycles.⁹⁵

Pelletier also concludes that: "It appears that each of the separate hemispheres registered specific sensations, perceptions, mental associations, and ideas; each had its own learning process and its own separate chain of memories, all of which seems to be largely inaccessible to the other hemisphere." ⁹⁶

Most researchers caution not to confine brain functions exclusively to one or the other hemisphere, nor to put an importance on one hemisphere over the other. As pointed out in the central theme of Jacquelyn Wonder and Priscilla

Donovan's book Whole Brain Thinking, to be a totally functioning person one needs to be able to utilize the full functionality of both hemispheres all the time.

To synopsise, the right and left brain are like two separate streams of consciousness each with its' own learning process and memory. This is an important concept because it appears that in healing there are two distinct memories; one in the mind which is beliefs, and another in the body which is emotions, stored as locked in energy called a "block". Both the memory in the mind and the body memory need to be resolved within a therapeutic intervention. The brain can analyze and comprehend language unconsciously. The lack of memory in most cases is the lack of recall which is enhanced in an altered state of consciousness. These two concepts are relevant in the use of altered states of consciousness type therapy. First, to recall an event that created a dysfunctional pattern, and secondly in the use of other-than-consciousness forms of therapy to have the individual construct a new reality about that event, a process called reframing.

The methods used in other-than-consciousness therapy is to gain access to the unconscious mind by overloading the left-brain so that it will shut down and provide access to the right brain. The last important concept is that one can change one's mental state by changing one's breathing patterns, so a person is never without a method to change one's state of consciousness.

Ordinary Consciousness

The functionality of the brain in normal wake state has the appearance of two major modes of consciousness. Ornstein states that the structure and function of the two separate hemispheres suggests that two major modes of consciousness coexist in each individual. "Within each person the two polarities seem to exist simultaneously as two semi-independent information-processing units with different specialties." ⁹⁷

Pelletier describes this hemisphere asymmetry in terms of "two modes of mental operation" or "different cognitive styles" or a "difference in the processing of information" as a division of labor. Pelletier concludes that this division of labor seem to be brought about as a matter of psychological efficiency. Pelletier believes that the intact brain does not function independently. "Rather it is likely that the hemispheric functions are highly integrated and the relative contributions of each side to a task are dependent upon the demands of the situation and the differential capacities of the hemispheres within a particular individual." ⁹⁸

Most of the research indicates that the activities of the brain alternate between the two hemispheres or functions, selecting the most appropriate

and inhibiting the other. It is not clear how this process occurs but methods have been developed to teach whole brain thinking. It appears that one can develop or at least improve in the process of becoming a balanced, nondominate hemisphere type person.

Creative holistic thinking requires the utilization of hemispheric interaction. "The two hemispheres working together have the capability to produce a kind of thought that transcends the capacities of the hemispheres working in isolation." ⁹⁹

Robert Ornstein, a research psychologist at the Langley Porter Neuropsychiatric Institute and professor at the University of California Medical Center points out that there has been an increasing understanding of the interactive and constructive nature of ordinary awareness perception by psychologist and physiologist. ¹⁰⁰

The general viewpoint, outside the disciplines of psychology, philosophy, and esoteric thought, has been that the human experience is what is "objectively" perceived in the external world. This view assumes that the external world is fully registered in consciousness through sensory input and, thus, personal consciousness or subjective experience is a complete reflection of the "objective" reality. ¹⁰¹

It is well known that one can experience objects that are not physically present but that are perceived as if they are. This occurs when people hallucinate, imagine, distort, and dream. It is also well known that the physical environment contains physical properties of which it is impossible to be consciously aware of due to the limits of the human sensory system. ¹⁰²

The human environment contains an enormous variety of continuous and simultaneous stimuli to the senses: visible and invisible light waves, radio waves, sounds, smells, energy from magnetic fields, gravity, gaseous matter in the air, thoughts, feelings, internal organ sensations, muscular activity, pains, and so on. ¹⁰³ Ornstein states:

These process all occur simultaneously, and continue as long as we are alive; yet we are certainly not aware of each process at each moment. Our personal consciousness, then, cannot fully represent the external world or even the internal world, but must consist of an extremely small fraction of the entire "reality". ¹⁰⁴

One general statistic that is used in Neuro-Linguistic Programming is that the conscious mind can interpret data at 5 - 9 bits of information per second, whereas the unconscious mind can interpret well over 200,000 bits of information per second. The exact accuracy of the numbers is not important.

What is important is that even when one doubles one's awareness capability one still does not consciously have a very big representation of our internal or external world. When one learns to have conscious access to the unconscious part of one's mind then these figures become less significant. This will be discussed in the section on levels of consciousness.

Ornstein's description of the process by which one makes sense out of the world is one of selection and construction. He describes the psychology of awareness as:

We first select the sensory modalities of personal consciousness from the mass of information reaching us. This is done by a multilevel process of filtration, for the most part sorting out survival-related stimuli. We are then able to construct a stable consciousness from the filtered input... Each of us selects and constructs a personal world in several ways, our sense organs gather information which the brain can modify and sort. This heavily filtered input is compared with memory, expectations, and body movements until, finally our consciousness is constructed as a "best guess" about reality.¹⁰⁵

Research does indicate that stimuli that does not get processed into consciousness through the RAS are subliminally registered out of conscious awareness and does affect the individual.¹⁰⁶

Ornstein asserts that what is called consensual reality, is in fact validation with the senses. One's agreement on reality is subjected to the common shared limitations that evolved to ensure specie survival. Most humans may agree on certain events only because of being similarly limited in one's very structure as well as limited by one's culturalization. It is very easy to confuse common agreement with an external reality.¹⁰⁷

The process of sorting information and constructing awareness in order to ake sense out of the world has many names in psychology. Some of these terms are: unconscious inferences, personal constructs, category systems, transactions and so on, depending on the writer's psychology modality.

Individuals tend to become emotionally attached to things which give them pleasure or fit their construct of the world. Data that does not fit this world view generally is discarded and rejected. If the individual's paradigm of the world is the same as the consensual reality of another person, that rejection would seem rational to them also.

Personal consciousness is a complex process of evolved selection and personal construction, Ornstein reviews this process;

The sense organs discard most of the input information reaching us. The brain further limits input, by selectively inhibiting the sensory activity, sending down efferent signals which can modify stimulation even in the receptor itself. Our sense and central nervous systems select by responding primarily to changes. We quickly learn to "habituate" to the constancy's of the world. Further, we sort the input into categories that depend on transitory needs, language, our past history, our expectations, and our cultural biases. Finally, we must construct a stable consciousness from a heavily selected input, ... ¹⁰⁸

Ordinary consciousness is object-centered; it involves analysis, a separation of oneself from other objects and organisms. This selective, active analytical process enables one to achieve a relatively stable personal world in which one can differentiate objects and respond accordingly. The concept of causality, linear time, and language are the essence of this mode. One can also state that much of Newtonian physics applies at this sensory state of reality. One walks on the ground so therefore gravity must be a reality; yet it is still only a perceived reality.

Levels of Consciousness

While most people are aware of ordinary or waking state of consciousness as just described, an ever expanding number have experienced other states of consciousness, just as the shamans and mystics of all ages have. The eminent William James expressed the concept of other states of consciousness in The Varieties of Religious Experience and quoted by Ornstein in the Nature of Human Consciousness:

Our normal waking consciousness, rational as we call it, is but one special type of consciousness, whilst all about it, parted from it by the filmiest of screens, there lie potential forms of consciousness entirely different. We may go through life without suspecting their existence; but apply the requisite stimulus, and at a touch they are there in all their completeness, definite types of mentality which probably somewhere have their field of application and adaptation. No account of the universe in its totality can be final which leaves these other forms of consciousness quite disregarded. How to regard them is the question,--for they are so discontinuous with ordinary consciousness. Yet they may determine attitudes thought they cannot furnish formulas, and open a region through they fail to give a map. At any rate, they forbid a premature closing of our accounts with reality.¹⁰⁹

Tart uses two terms in describing consciousness. A discrete state of consciousness (d-SoC) which he defines as a specific pattern of functioning of the mind. Although this d-SoC pattern may show a range of variation in its specifics, it still remains the same overall pattern. Thus, one recognizes a variety of patterns as a house even though they vary substantially in form. A discrete altered state of consciousness (d-ASC), is a radical alteration of the overall patterning of consciousness when compared to ordinary waking d-SoC. Thus, altered states of consciousness (ASC) are distinct from normal consciousness in that ordinary stimuli are processed in a significantly different way.¹¹⁰

Most people experience several altered states of consciousness in addition to their normal, waking state: the dreaming state and hypnogogic and hypnopompic states (the transitional states between sleeping and waking). Other ASC are those produced by alcohol, marijuana and psychedelic drugs, meditative states, so called spirit possession states, and hypnotic or autohypnotic states.¹¹¹

In previous sections many of the old paradigms have been discussed along with the new emerging paradigms that are either complementary to existing paradigms, as in modern physics, or are a replacement paradigm, as in mind-body duality. In a sense a paradigm and ordinary consciousness are quite similar. Each constitutes a complex, interrelated set of rules and theories that enables one to interact with and interpret experiences within an environment. In both cases the rules are mostly implicit: the scientist forgets that their paradigm is only a theory and subject to further testing; the individual experiencing waking consciousness forgets that it is a greatly filtered, arbitrary way of organizing consciousness and comes to believe that it is simply a natural way of perceiving things.¹¹²

Value judgments in relation to ASC experiences are highly dependent upon whether such states are acceptable or taboo within a given culture or subculture. Many non-Western cultures have developed means whereby persons can integrate ASC experiences within culturally acceptable roles and styles of behavior. In orthodox Western cultures, ASC experiences are generally perceived from a negative viewpoint. The implicit paradigm, based on scientific training, and cultural background is that most such experiences are unreal, and pathological.¹¹³

Perhaps the foremost thinker and writer on consciousness and transpersonal psychology is Ken Wilber. In his book Up From Eden: A Transpersonal View of Human Evolution he proposes that human evolution is really a consciousness evolution in which there is a spectrum of consciousness and that these levels have always existed but not necessarily accessible by all human beings.¹¹⁴

According to the perennial philosophy, the path of transcendence follows what is called the "Great Chain of Being," which is purported to be a universal sequence of hierarchic levels of increasing consciousness. The Great Chain of Being moves from matter to body to mind to soul to spirit in Western terminology. History from this perspective is basically the unfolding of consciousness, starting from the lowest (matter and body) and ending with the highest (spirit and ultimate wholeness).¹¹⁵

Wilber outlines eight steps in the Great Chain of Being:

1. Nature: Physical nature, and lower life forms; matter in the form of the first protohuman forms of life.
2. Body: Highest body forms, especially high typhonic (Cro-Magnon Man), low typhonic (Neanderthal) and magical. Typhonic simply means that early man was undifferentiated from nature and animals thus all were magically one.
3. Early Mind: Verbal, mythical, membership, paleological and bicameral.
4. Advanced Mind: Rational, mental-egoic, self-reflective.
5. Soul: Psychic, shamanistic (Nirmanakaya).
6. Soul: Subtle, saintly (Sambhogakaya).
7. Spirit: Causal, sagely (Dharmakaya).
8. Spirit: Ultimate, absolute (Svabhavikakaya).

The subconscious (pre-personal) exists in 1, 2, and 3. The self-conscious (personal) exists in 4. The superconscious (trans-personal) exists in 5, 6, 7, and 8.¹¹⁶

"The divorce between soul and body, takes the life out of the body, reducing the organism to a mechanism. The body became a mechanism. In this dehumanized human nature one loses contact with one's own body, more specifically with one's senses, with sensuality and with the pleasure-principle. And this dehumanized human nature produces an inhuman consciousness, whose only currency is abstractions divorced from real life--the industrious, coolly rational, economic, unimaginative mind."¹¹⁷

This concept provides an interesting perspective on the present day mainstream consciousness which Wilber indicates is at level 4.

According to orthodox psychiatry and anthropology the shaman has been viewed, not as a super-person but as a super-psychotic. This is because the shaman insists that she/he is able to demonstrate phenomena that the psychiatrist and anthropologist 'know;' are nonexistent. The shaman sees the world from the level 5 consciousness and the psychiatrist is looking at it from a level 4 and concludes that the shaman is in a state of pre-personal consciousness. Wilber states: ..."It can now be said with absolute assurance that the shaman--the true shaman--was the first great voyager into realms of the superconsciousness." ¹¹⁸

The shaman has succeeded in integrating into consciousness a considerable number of experiences that, for the profane world, are reserved for dreams, madness, and postmortem states. The shamans and mystics of primitive societies are considered--and rightly so--to be superior beings; their magico-religious powers also find expression in an extension of their mental capabilities.¹¹⁹

The shamanistic religion is viewed as extremely crude, very unrefined, and not very evolved. They emerged from the subconscious into the lower realms of the superconscious yet they interpreted what was experienced from the lower conscious perspective. At the very summit of its vision, the shamanistic experience disclosed nothing less than that sense of an immortal inhabitant within the individual which is announced in every mystical tradition.¹²⁰

Wilber suggests that the shamanistic trance is a very-low grade transcendence state of the superconsciousness. The level five consciousness relates to bodily ecstasy, of swooning in release, and generally accompanied by psychosomatic changes of a dramatic and overt variety, all of which results, in certain psychic intuition and powers. The next level speaks of subtle light and bliss, beyond the gross physical body, and is usually accompanied by a drastic quieting of the gross psychosomatic body and a release into the subtle realm, at its peak, a revelation of One God, One Light, and One Life (level six). The last class is the dissolution of experience itself, the radical undercutting of the subjective/objective duality in any form--all of which results, at its peak, in the Supreme Identity of the soul and the One God-Light, so that both God and soul are united, and vanish into, the ultimate unity of Atman (levels 7/8). These classes are successively closer approximations of that Ultimate Source and represent successively hierarchic structures of superconsciousness, levels 5 through 7, leading finally to the Origin and Condition of all three realms and classes (level 8).¹²¹

Wilber presents a concept of "levels of consciousness" that has within its concepts both Eastern religions and mysticism, and Western mysticism, and yet exemplifies most experiences of altered states of consciousness found in meditation, certain forms of psychic phenomena, mediumship, and individual spiritual experiences.

Meditative States of Consciousness

Most Transpersonal Psychologists consider that the mystic state is to be an integral part of the self-realization process and, thus, an important area to understand.

There has been a tradition in Eastern cultures, and religious mysticism on the whole, to deliberately seek and cultivate ASC experiences through various systems of meditation. Pelletier and Garfield state that common denominator in all mystics across spiritual disciplines is the movement through successive stages of experience. The initiates undergo rigorous discipline which is designed to prepare them to be able to integrate these ASC experiences.¹²²

While there are many forms and techniques in meditation, LeShan suggests that there are two goals in meditation; the first is to attain a second way of comprehending reality and, secondly, the increased serenity and competence in being.¹²³

Ornstein states that the aim of meditation has been called the removal of "blindness" and the awakening of new perception. "Enlightenment," "illumination," or awakening are terms often used in describing progress in the disciplines.¹²⁴

According to Wilber, what we see in the stages of present-day meditation is the unfolding of the higher levels of the Great Chain of Being, and therefore we are seeing the average mode of human consciousness (consciousness on the whole) moving from level 4 mental-egoic to that of level 5 psychic. The exoteric and esoteric curves are intersecting one another. Self-consciousness faces transition to superconsciousness. The average individual at large can start to become a transcendent person.¹²⁵

This movement to the level five requires a stable rational-egoic level in order to begin the movement to the higher level of consciousness. In other words the shadow--the hidden beliefs in one's subconscious needs to be healed. One does not and cannot reach the transpersonal without first establishing a healthy personality.

The individual, in the course of developing and maintaining her/his ego or personae go through the process of splitting the ego into those personae which are acceptable and those which are unacceptable, unwanted, or feared. The unacceptable personae are alienated as the "shadow," or "subconscious personae". The subconscious personae, or shadow, becomes a hidden face, a secret personality that perpetually surprises, distorts, and edits the conscious communication of the ego. The shadow persona is the way an individual refuses to own and author her/his own self. The shadow is a source of misinterpretation, and mistranslation of (or parts of) one's linguistic self and its narrative history. The shadow is largely verbal and syntactical structure along with non-verbal energy (id) and images.¹²⁶

Part of therapy is the digging into the narrative history of one's life text in order to discover at what page of the unfolding text one first began to (unconsciously) misinterpret, edit, and distort that text via shadow authorship. From this point, one can more easily reconstruct, and reinterpret, the misrepresentations and hidden tales of that shadow, so that ultimately, the egoic and shadow narrative tales are reunited into a larger and more accurate interpretation of the meaning of one's entire life text.

In short, the ego has to accept authorship (responsibility) of the text of the shadow and accept ownership of the communication coming from the shadow. In this manner the ego becomes a 'real person'. The ego, in assuming ownership and authorship of the shadow's communication and text, can then integrate it into a larger and more complete understanding of one's life, thus moving towards autonomy and integrity, towards a higher unity on the way to Unity.¹²⁷

The human being is a compound individual, compounded of matter, prana, verbal-membership, ego, soul and spirit. The material body is exercised in labor; the pranic body is exercised in breath, sex, and feeling; the verbal-membership mind is exercised in communication (and the beginning of praxis); the ego, in mutual personal recognition and exchange of esteem (culmination of praxis); the soul, in psychic and subtle transcendence; the spirit, in absolute absorption into the All. Each level of the compound human individual is exercised in a complex system of ideally unobstructed exchanges with the corresponding levels of the world process at large.¹²⁸

As one can see from Wilber's perspective that the aims of meditation while having the goal as enlightenment--or whatever other word one chooses for the same realization--also includes the goal of therapy to rid oneself of dysfunctional beliefs that are in the subconscious mind. In fact, true meditation goes beyond most therapy models since, most traditional therapies only focus on problems that interfere with one's functioning in normal society, not issues that impede spiritual evolution.

There is some degree of overlap in the aims of meditation and psychotherapy as stated by Pelletier and Garfield:

In psychological terminology, the aim of meditation is to allow a person to gain awareness of these feelings, motives, and values that had been previously held out of awareness. Accomplishment of this end is achieved by engaging in prescribed techniques for freeing attention from immediate and distracting sensory stimuli in order to pay closer attention to the more subtle stimuli that unconsciously shapes perception and behavior.¹²⁹

The use of meditation in conjunction with psychotherapy combines interpersonal, intrapersonal and transpersonal work and is supported by an intellectual construct that assists the individual to advance on all aspects, physical, emotional, mental, and spiritual.

To summarize, Pelletier and Garfield state that the recent and extensive investigations in the area of meditation suggest: "Significant physiological and psychological alterations in the direction of what most researchers agree is improved functioning leads us to conclude that meditation can indeed be a potent tool in the development of the human potential."¹³⁰

Meditation, fundamentally, is a means of becoming more attuned to the self as well as the psychological and biological environment. In an enlightened mode of existence (which is the purpose of meditation) perhaps the afflictions of civilization will no longer be a plague.¹³¹

Pelletier and Garfield summarize the view of consciousness that they believe recent research and theory support:

Altered states of consciousness constitute a substantial portion of an individual's psychological processes and functioning. Ordinary perceptual processes, which normally dominate consciousness, are modified or suspended, permitting altered experiences of ordinary stimuli. Certain phases of acute psychosis, drug-induced states, or meditation states represent conditions of special receptivity to external and internal stimuli that are ordinarily excluded from awareness. Access to these states is either imposed or consciously sought out, and it is incumbent upon psychology to synthesize Eastern and Western concepts of altered states into a comprehensive system in order to derive maximum possible insight into these altered perceptions of reality.¹³²

Intuition

There is little doubt that there are many aspects and levels of consciousness. Different traditions call them by different names but the experiences are for the most part the same. Within the different aspects of consciousness is that realm called intuition. Whether intuition should be considered an aspect of psychic ability or not is a difficult question. Lets say that it's part of being human.

Intuition is defined in Webster's New Collegiate Dictionary as: immediate apprehension or cognition; the power or faculty of attaining direct knowledge without evident rational thought and inference.

Intuition has the following characteristics: it is immediate and direct, not meditative or progressive as in thinking; it is holistic, an immediate apprehension of a whole, and not different parts later put together to form a whole.¹³³

In activating and utilizing intuition one is putting at the disposal of the individual a function which generally remains latent and unused thereby leaving the person incomplete in their development. Intuition provides an instrument of cognition and another approach to reality, and the means of interpersonal relationships through the intuitive understanding of other human beings.¹³⁴

Assagioli regards intuition as one of the least recognized and least appreciated, and therefore one of the repressed cognitive functions. Repression of intuition is produced by nonrecognition, devaluation, neglect, and lack of its connection with the other psychological functions. Intuition, according to Jung is on both the personal level (day-by-day) and a spiritual level and therefore can assume different aspects, but remain fundamentally the same.¹³⁵

Roberto Assagioli, in a paper titled Psychosynthesis: A Technique For The Use Of Intuition, states: "We cannot conceive a true and successful therapist who has not developed and does not use the intuition." ¹³⁶

Intuition then is a process that every human being possesses and utilizes to one degree or another. Just like any other process, it can be developed through the recognition and acceptance of receiving information without using rational thought or logic.

Trance States

A Trance state is one of the specific altered state of consciousness described by Charles Tart. While trance states are generally attributed to hypnosis, some of the characteristics of the different levels of trance also apply to meditation, visualization, biofeedback exercises, etc. Perhaps the term, altered state of consciousness is the more correct term and is one that can be measured using the brain-wave measuring equipment. Some people are concerned about the use of altered states of consciousness not realizing that the home television is a device that puts one into an altered state of consciousness.

The term hypnosis was coined in the 1840's by James Braid, a Scottish surgeon and refers to a sleeplike state that nevertheless permits a wide range of behavior responses to stimulation.

Raphael H. Rhodes, a consulting psychologist in New York City, developed a theory on hypnosis after an extensive study with some of the country's most able hypnotist and his own extensive work in the field of hypnosis and its psychological application. The substance of his theory is based in part on material in T. J. Hudson's Law of Psychic Phenomena, first published in 1893.

The Theory of Psychic Relative Exclusion is a rather simple theory which states:

1. Every person has two minds, the objective mind and the subjective mind. The objective is that which controls the senses: hearing, sight, taste, touch, and smell. The subjective mind is that which controls memory.
2. The objective mind is capable of both inductive and deductive reasoning. The subjective mind is capable of deductive reasoning only; it cannot reason inductively.
3. These two minds are ever present in each individual, in a relative state of seesaw balance.

A general understanding of the theory helps to understand the mental activity of people, whether they are awake, asleep, or hypnotized. In the wake state the objective mind is in control, sensory activity is strong. Utilization of the senses keeps the objective mind in force, and the subjective mind is then correspondingly recessive. Because of this temporarily recessive state of the subjective, memory is poor during times of active use of the senses. Stimulation of recall is achieved by relaxing the objective interests which allows the subjective mind, controlling memory, to

advance to the forefront. The greater the objective interests are cast off, the greater the subjective mind comes to the fore with consequent improvement of memory.

Ordinary sleep is achieved through a gradual recession of the objective mind. When the senses have dulled sufficiently, the individual is asleep. When a person sleeps, the subjective mind is in control. That is why dreams are sometimes so unusual. What would be rejected or dispelled in waking state, through the inductive processes of the objective mind, is accepted as a true generalization by the dominant subjective mind.

Daydreaming, and reveries are flights of the subjective mind unfettered by the inductive processes of the objective in repose.

The theory also explains the phenomena of hypnotism. To secure hypnotic sleep, the hypnotist induces the objective mind of the subject to recede, thus bring the subjective mind to the fore. But instead of coming to the fore as in ordinary sleep, without being controlled by, or subject to, any other mind, it comes to the fore with the expectation of being controlled by, and subject to, the suggestions of the hypnotist. This expectation of the subjective mind is the nature of an accepted generalization, and this explains the hypnotist's resultant control. Autohypnosis is a variant condition in which the subjective mind advances with the expectation of being controlled by the subject's own objective mind.

Hypnosis may then be defined as a condition in which a shift in the relative positions of the subjective and objective minds has been consummated, and in which the subjective has been brought to the fore with the expectation of being controlled either by the hypnotist or by the recessive objective mind. The process which achieves this result is hypnotism. When it is induced by the hypnotist, and the subjective mind advances with the expectation of being controlled by the hypnotist, it is called hypnotism by external control. When the subjects themselves induce the subjective-objective shift, and the subjective mind advances with the expectation of controlled by the recessive objective mind, the process is called Autohypnosis, or autohypnotism, or self-hypnosis.

Methods of securing hypnotic control are numerous and yet very similar. They all attempt to induce the subject to think of something so insignificant that for all practical purposes the subject is thinking of nothing at all. Physical and mental relaxation on the part of the subject is essential before hypnotic control can be established. Hypnosis requires mutual cooperation between the subject and the hypnotist in order to produce results.

Relinquishment of hypnotic control may be positive or negative. It is usually positive: The hypnotist suggests that upon a certain signal the subject will awake. The suggestion is accepted like any other generalization, and thereupon at the given signal the subjective mind recedes, allowing the objective mind to come forth. Negative relinquishment of control would follow from an extended absence of any suggestions from the hypnotist, in consequence of which the objective mind of the subject would gradually advance and the subjective mind would correspondingly recede: In effect the subject would pass into a state of natural sleep and then awaken latter on.

Degrees of hypnotic control are defined by L. W. Davis and R. W. Husband in A Study of Hypnotic Susceptibility in Relation to Personality Traits. This scoring system has been accepted by many psychologists as an index of the gradation of suggestibility.

Depth	Score	Objective Symptoms
Insusceptible	0	
	1	
	2	Relaxation
Hypnoidal	3	Fluttering of lids
	4	Closing of eyes
	5	Complete physical relaxation
	6	Catalepsy of eyes
	7	Limb catalepsies
Light trance	10	Rigid catalepsy
	11	Anaesthesia (glove)
	13	Partial amnesia
	15	Posthypnotic anaesthesia
Medium trance	17	Personality changes
	18	Simple posthypnotic suggestions
	20	Kinesthetic delusions; complete amnesia
	21	Ability to open eyes without affecting trance
	23	Bizarre posthypnotic suggestions
	25	Complete somnambulism
Somnambulistic	26	Positive hallucinations, posthypnotic
trance	27	Positive auditory hallucinations, posthypnotic
	28	Systemized posthypnotic amnesias
	29	Negative auditory hallucinations
	30	Negative visual hallucinations; hyperaesthesias

Hypnotic states can occur without a hypnotist. Automatic writing is a curious state wherein the subject's hand writes automatically with no reference to what is in the conscious mind. Crystal gazing is another everyday phenomena that utilizes the unconscious mind that is very near the surface and uses vision as the outlet.

Speaking in tongues, or automatic speech or glossolalia is another phenomena where by the subjects throat muscles appearing to run themselves without any conscious control from the person in question.

Hypnotic techniques have been in use since antiquity; healing practices by priests of ancient Egypt and Greece are striking examples. Miraculous powers ascribed to witches and the faith healing throughout the ages are probably related to hypnosis.

The psychotherapeutic value through hypnotic control is the utilization of the subject's increased power of recall during the hypnotic state and the implantation of suggestions in the subject's subjective mind, with posthypnotic effect. This increased ability to recall past events correctly is almost always greater in hypnotic state than it is in waking state. This increased recall ability is termed hypermnesia.

Despite active empirical studies of hypnotic phenomena, there is no single, generally accepted, explanation theory. The theory presented here is only one of many but it was presented because it provides the best all around explanation of the various states of consciousness and explains how psychoanalysis works. The other theories do not fully explain all the states of consciousness.¹³⁷

The research done in hypnotism does provide insights into observable characteristics that one might observe or experience while in any type of altered state depending on the depth one goes into an altered state of consciousness. The term trance state or altered state is generally used more than hypnosis, as control is not generally the object in therapy.

Full understanding of hypnosis depends on the state of psychological and psychiatric sciences. There can be no separate science of hypnosis. As there are improved techniques of describing and quantifying mental states and subjective experiences and greater knowledge of the physiology underlying attention and reality testing, then a more adequate explanation of hypnosis will become possible. However, hypnotic research will not wait for such achievements, but rather will contribute to them, just as hypnotic studies have already contributed insights about the unconscious mental process, and the powerful effects of expectations on behavior.

Alternate Realities

This section builds upon some of the concepts from modern physics and from the consciousness research. In modern physics one learns that there are other realities in which the laws of Newton do not operate, and other theories are being developed to explain certain behavior. The theory of relativity indicates that time, speed, mass, and energy can be different for different observers. In consciousness studies it was pointed out that sensory reality in the waking state is highly filtered, much of which is according to one's beliefs. This means that even in sensory reality everyone's concept of what is real is highly subjective and in no case includes the all of the perceived reality.

This brings one to the concept of multiple realities. This realm of consciousness is void of "things," and consists only of processes. In contrast to the brain, consciousness as experienced in thoughts, feelings, passions, hopes, memories, etc., are not located in space or anywhere in the space-time energy-matter dimensions like physical objects. The science of consciousness recognizes a distinction between the brain and the mind. The mind is capable of reflecting upon its own process as an observer and make adjustments to its beliefs that are no longer beneficial. This alteration in consciousness in the ordinary process of reality construction, can lead to new ways of perceiving and understanding, self, world, universe, and reality.

Pelletier suggests that the level of reality beyond determinism is that of consciousness which require different methods of observation.¹³⁸

LeShan prescribes to the concept of a multi-tracked universe defined by physicist Max Planck. LeShan states that modern science is presently aware of five tracks or realms which are necessary to deal effectively with the available scientific data. These five realms are:

1. The realm of the too small to see or touch, even theoretically. The microcosm.
2. The realm of experience accessible to the senses. The mesocosm.
3. The realm to large, or moving to fast relative to the observer to be accessible to the senses, even theoretically. The macrocosm.
4. The realm of meaningful behavior.
5. The realm of consciousness: the inner world of non-physical activity.¹³⁹

Each of these realms according to LeShan have their own observable characteristics. Each realm has its own laws unique to it and not to any other. Principles such as "space," "time," "causality," "experiment," or "observer" are defined differently for each realm. Therefore, occurrences in one realm cannot be explained by the laws of another system. Each realm requires its own system of explanation. According to LeShan: "These differences do not make the cosmos chaotic or unlawful. Observables within each realm are related by law to each other. There is no contradiction between one track, one realm of experience, and another. They are compatible but transcend each other." ¹⁴⁰

This can be illustrated by the definition of causation in two different realms. In the sensory realm (mesocosm) causation implies a connection between an event with some preceding fact or event, that is, event A will cause event B. This cause-effect prediction can be made with confidence in the mesocosm. In the microcosm it is impossible to predict a specific event will occur, only the probability of an event occurring based on statistical averaging of multiple events. In the realm of consciousness, it is not possible to establish any law such as whenever A is present, B will occur. This is due to the nature of the realm.¹⁴¹

The essence of LeShan's concept is that, if all realms of experience are considered "real" and since different realms may admit different explanatory systems, then there is no reason that human experience must be explained in any other manner than that in which it manifests itself. LeShan states: "There is no one correct way of describing how everything in the universe works. There are a number of different explanations, each proper, necessary and useful for certain parts of reality." ¹⁴²

Many aspects of human phenomena, although real, are not suitable for mathematical abstractions or quantitative analyses. LeShan suggests that in order to understand, a system of descriptions or explanations is needed for a particular realm, what is observed in that realm must first be identified. "To understand the laws of each realm or domain, we only need to relate the observables in that realm or domain." ¹⁴³

The realm of sensory, phenomena can be defined in visual terms and are defined in space and time. In the realm of consciousness, the phenomena is not a "thing", events like feelings, thoughts, or memories, for example, are non-quantifiable and do not lend themselves to measurement. Therefore, these events cannot be related to one another by the same explanatory rules that are used in the sensory realm.

LeShan, in his book Alternate Realities: The Search for the Full Human Being, describes four modes of being: The sensory mode of being; the

clairvoyant mode of being, the transpsychic and mythic mode of being. For purposes of understanding some of these principles in different realities only the first two shall be discussed .

The sensory mode of being is primarily adapted for biological survival. Essentially, its basic attention is to defining differences, boundaries, separations, similarities, and relationships between things. It is focused on separating, contrasting, and defining things in space and time. Some of the basic laws within which all occurrences must happen when reality is defined in this manner, includes the following:

1. All valid information directly or indirectly comes from the senses.
2. All events happen in space and time.
3. All events have a cause.
4. Causes occur before events.
5. Events in the past can be remembered, their effects observed, but not changed.
6. Events in the future can be changed.
7. Objects separate in space are separate objects; events separate in time are separate events.
8. All activity--movement--takes place through space and takes measurable time units to occur.
9. Action takes place only when one entity is in direct contact with another.
10. All objects and events are composed of parts that can be dealt with separately.
11. This is the only valid way to regard reality. All other ways are an illusion.¹⁴⁴

The clairvoyant modes of being are adapted to one's direct experience of oneness of all being and process, to the essential unity of the cosmos rather than its separation into parts, objects and events in the sensory mode. The entire universe is perceived as a "seamless garment" in which all boundaries, are arbitrary and unreal. Nothing can be separate or isolated in this mode. The universe is one vast flow-process not in space or time, but in a unitary space-time continuum. The basic laws of the clairvoyant modes of being includes the following:

1. All objects and events are part of the fabric of the total being and cannot be meaningfully separated from it. The most important aspect of any object or event is that it is a part of the total ONE....

2. Boundaries, edges, and borders do not exist. All things primarily are each other, since they are primarily one.
3. This lack of boundaries applies to time also. Division of time into past, present and future, are errors and illusion. Events do not "happen" or "occur," they "are."
4. Since no object or event can be considered in itself without considering the all of space-time, the concept of good and evil do not have meaning....
5. All forces or situations in space-time, or places where the fields of activity are weak or strong, move with a dynamic harmony with each other.
6. One can only be fully in this mode when one has, if only for a moment, given up all wishes and desires for oneself.... and just allow oneself to be and therefore to be with and be one with the all existence. To attain this mode, one must--at least momentarily--give up doing and accept being.
7. Valid information is not gained through the senses, but through a knowing of the oneness of observer and observed, spectator and spectacle. Once this complete oneness is fully accepted, there is nothing that can prevent the flow of information between a thing and itself.
8. The senses give a false picture of reality. They show separation of objects and events in space and time. The more completely we understand reality, the less it resembles the picture given by our senses, by the sensory mode of being.
9. This is the only valid way to regard reality. All other ways are illusions.¹⁴⁵

The clairvoyant mode of being is primarily adapted to deal with processes that are completely out of ones sensory range. They are not adapted to biological survival; one would not want to use them while driving a car. At the present time, says LeShan, these modes are mostly used by three classes of people. These are the theoretical physicist working with relativity theory in trying to understand how reality works; mystics in their journey to experience their oneness with the universe; and psychic sensitives attempting to obtain paranormal information. LeShan in his research of the mystic, medium, and physicist identified that they were clearly talking about an essentially identical construction of reality.¹⁴⁶

One can see similarities between Wilber's spectrum of consciousness and the experiential psychology concepts that evolved out of dedicated psychological research and experimentation. It would probably be safe to say that the clairvoyant reality described by LeShan probably has various levels before achieving that full state of being, even for only a moment. As Wilber described the necessity of creating boundaries for ego identity through the illusion of the senses and then the dis-identification of these boundaries as one moves to the higher levels of consciousness, closer to the Unity, one can see the parallels between LeShan's concepts and Wilber's.¹⁴⁷

In Wilber's book No Boundary he goes on to say: "The ultimate metaphysical secret, if we dare state it so simply, is that there are no boundaries in the universe. Boundaries are illusions, products not of reality but of the way we map and edit reality. And while it is fine to map out the territory, it is fatal to confuse the two." ¹⁴⁸

Summary

The work done by Lawrence LeShan is invaluable in the understanding of the process used in certain aspects of psychic ability and in healing which will be covered in greater detail in the chapter on parapsychology. Where Ken Wilber provides a philosophical construct of reality and consciousness, LeShan, modern physicists, and the researchers in consciousness studies at large have greatly assisted in the understanding of alternate reality, altered states of consciousness and the fact that the universe is perceived differently from these different states of consciousness and the governing laws are also different.

Charles Tart in his book Transpersonal Psychology's indicated that one can not explain an altered state of consciousness to a person that has not experienced such a state. The same holds true for all the higher levels of consciousness and alternate realities. One can only comprehend the highest level of consciousness that they have personally experienced and all of the lower levels beneath it.

For that reason, people have difficulty understanding something for which they have no frame of reference, such as a paranormal event. So they may choose to ignore it and hope it will disappear or decide that it could not have happened, or that they must have been hallucinating when they experienced the paranormal event. Or they may decide that ,perhaps, there is something beyond sensory reality and allow their map of the territory to become a little larger. This new map, perhaps, would include another dimension another reality to complement sensory reality in the same manner as there are multiple realities in physics. Sensory reality is a reality for biological survival.

Other realities extend beyond biological survival into transpersonal purposes of being. Now one has started the process of transformation of consciousness to include multiple levels of reality much like the shaman has for eons of time.

CHAPTER III

THE SCIENCE OF PARAPSYCHOLOGY

Introduction

Psychic phenomena has been known under one name or another to every society in recorded history; what was lacking until comparatively recently was the critical attitude in investigating their authenticity. This chapter will briefly discuss the origin of modern psychical research and a summary of the results of years of research with the main focus on mediumship, "extrasensory perception" (ESP), psychokinesis (PK), and healing.

The validation of such phenomena provides a greater understanding of the phenomena surrounding the founding of the great world religions, the experiences and results from true shamans and healers of all times, the occurrences of such phenomena in one's everyday experiences, and most important a greater appreciation of certain talents that can be utilized in modern day healing and psychotherapy practices. Dr. Jeanne Achterberg M.D., describes the emerging health practitioner as the shaman/scientists who have combined the ancient wisdom with modern technology.

Background of Psychical Research

Psychical research had its modern day beginning in London, with the formation of the Society for Psychical Research (S.P.R.) in 1882. The accent of this prestigious group of individuals was on telepathy and on survival of bodily death, as evidenced by the verbal communication of mediums. The founding of the S.P.R. served as a model for numerous similar societies in other countries, especially those of France, Germany, and Poland. In 1885, an American S.P.R. was founded under the leadership of William James, the discover of a brilliant mental medium Mrs. Leonore Piper of Boston.¹

Most of the early research was based on the collection of responses relating to spontaneous paranormal events which were evaluated by the S.P.R. and assembled into published finding within designated categories. The individuals involved in these societies were distinguished learned scientists, philosophers, psychologists and so on. Several were Nobel Laureates.²

The next major turning point in parapsychology--which was the new term for psychical research--was the founding of the Duke University Parapsychology Laboratory in 1927. J. B. Rhine and his wife and coworker-worker, Louisa were in charge of the newly formed parapsychology laboratory. This represented a bid on behalf of parapsychology for university status and for

recognition as an accredited academic discipline. It also represented the substitution of a quantitative, statistical approach rather than the search for qualitative evidence of a self-evidently paranormal character.

In order to meet the above stated goals the work done by Rhine was directed from a traditional scientific paradigm based on observable measurable experimentation of paranormal events, which were intended to be completed in such a manner that the results would be accepted by the scientific community.

The Rhine era produced the term extrasensory perception, which was replaced for most purposes by its acronym ESP. ESP designates, indifferently and under one single rubric, telepathy, clairvoyance, and precognition in all their many guises. The term psychokinesis (PK) was also coined to cover the parapsychical phenomena. This period of parapsychology was primarily focused on laboratory experiments. Testing individuals for ESP and PK abilities showed remarkable success in the area of ESP, and markedly inferior results in the area of PK when compared to ESP results.³

By 1951 there were a number of other research centers besides the Duke laboratory. Parapsychologists by this time were also interacting with other scientific disciplines. This allowed numerous researchers in other fields to become involved in parapsychology and the fields of investigation expanded greatly into all aspects of paranormal phenomena. This also created the environment where spontaneous phenomena was again being investigated. Louisa Rhine was probably most responsible for establishing research methods for evaluation of spontaneous phenomena, which most often provided the best examples of psychic phenomena.⁴

While the acceptance of the results of parapsychology research has been slow, in both the scientific community and the general public, in 1969 the Parapsychology Association was admitted to affiliation with the American Association for the Advancement of Science. There is an ever-increasing number of colleges in the United States and elsewhere where parapsychology is taught and accredited degrees are obtained in parapsychology.⁵

Mediumship

The issue of whether there is survival after death has been an age old question. When church and science separated, at least formally, in the seventeenth century the subject was still open for investigation for those who chose the adventure and risk of non-acceptance by the scientific community. Physical mediumship had gone through many years with fraudulent exposures so most of the work by the S.P.R. in England and the

United States addressed the phenomena of mental mediumship, the communication from a discarnate through a medium as a means to prove survival after death.

Mediumship was a well known phenomena in the late eighteen hundreds as the Modern Spiritualist churches had already been formed in Western Europe and America. It must be stated that not all mediums were Spiritualist. In fact many were not.⁶

Leonore Piper was studied for many years by researchers in both the United States and England. No evidence of fraud on her part was ever produced. Operating in trance, she delivered communication both orally and through automatic writing. Many skeptical investigators concluded that she received information by paranormal means, although they disagreed as to whether it was attributed to ESP or should be accepted as evidence of survival after death.⁷

There is a wealth of research data that suggests that life continues after death. Arthur Findlay, investigator of direct voice medium John Sloan, provides well documented scientific studies of this famous medium. He provided communication from the spirit world for fifty years, never accepting any financial gain for the use of his gift.⁸

A profound book When A Child Dies by Sylvia Barbanell provides detailed experiences not only of mental mediumship supportive of survival, but also physical materialization of deceased children.⁹

Dr. Carl Wickland, M.D. authored a book Thirty Years Among The Dead in which he recorded verbatim a large body of spirit communication with discarnate spirits that did not know that they were dead and were communicating through his wife, who was a trance medium. This really entailed psychiatry with a spirit.¹⁰

An example of mediumship in which the medium speaks in a different language presents a very interesting aspect to this phenomena which is called Xenoglossy. Xenoglossy is fluent spoken conversation between a control and a sitter in a language unknown to the medium. This case is described by Harry Boddington in his book The University of Spiritualism with the source material being the British Journal for Psychical Research (March 1928). The investigator was Dr. Neville Whyman an exceptional scholar, engaged in translation of obscure languages. He was also quite skeptical before the following experience. The medium, George Valianine, was an American business man who was very reluctant to come into the glare of public life.

In previous sittings sounds had come through that could not be identified by those present in the circle. It was at this point that Dr. Whymant was called in to try to identify the language being spoken. Elaborate precautions were taken to prove there was no trickery. The seance dragged on. After a period of time there came a weird, crackling, broken little sound, which transported Dr. Whymant's mind instantaneously from that room in New York to an apartment in China where he had heard the sound before. It was the sound of a rather poor flute, unskillfully played.

After this there came quite clear and distinct, a little low perhaps, the word Confucius (in Chinese), but there was something that struck him at once in the pronunciation. The word was pronounced perfectly and the tones were right, too. He knew how difficult it was to teach the correct pronunciation of the last syllable of that name. Dr. Whymant communicated with the voice using Chinese mandarin. He asked the voice 'Who are you' and for the third time the voice responded 'Confucius'. The Dr. then proceeded to ask specific questions in regards to Confucius' real name and other questions of lesser known information and received the correct answers in perfect intonation and pronunciation.

Whymant then asked the voice to explain an error which had existed in one passage of a Chinese classic that Confucius did not write himself. Before he could get the words out of his mouth the voice recited not only the full enumeration of the passage, but the passage itself as it stood in the present standard edition of the works of Confucius, and afterward recited it as it should be, correcting an error which had existed for two thousand four hundred years. The correct reading which Dr. Whymant wanted was a phrase in the 'Shih King,' or classics of poetry assembled and edited by Confucius.

The voice broke in, 'It should be read this way,' and then the voice recited the passage as it was in the standard edition of the 'Analects of Confucius,' and then stopped, and said, 'This is how it should read,' and gave a completely new reading from the point of view of sense.

Confucius affirmed his identity in the only way an invisible, disembodied spirit could possibly do it, by exhibiting knowledge that may justifiably be attributed to him.¹¹

The modern term "channeling" includes traditional mediumship, inspirational speaking and other Psi phenomena. There are a host of books that are presently available in most book stores that are identified as being channeled information. One person describes the experience as creating a "state of mind" where channeling is possible. While in this frame of mind it is

possible to access information which is not available in other states of consciousness. The information may emanate from spirit entities, people living in the physical, or from the self.¹²

LeShan exemplifies the parapsychology problems associated with the medium. He states: "Even after hundreds of hours conversing with mediums in trance, during which the medium claims to be someone who is dead, I see no scientific way to determine if these spirits are: (1) what they claim to be; (2) a multiple personality split-off; or (3) something else."¹³

Within modern parapsychology, mediumship is not one of the phenomena that is studied. The reason is that it does not fit into the realm of scientific experimentation utilizing the existing paradigms from traditional science.

While mediumship presently is not within the realm of parapsychology research, the evidence is overwhelming in support of the phenomena. This does not mean that every example of the phenomena is to be accepted without discernment. The source of the information is always a question from a scientific perspective. From the point of view of a person receiving information, quite often there is little uncertainty as to where the information is coming from. There appears to be confirmation through the quality of the information received, a sense of "knowing" who is there (clairsentience), or a visual (clairvoyance) or auditory (clairaudience) message that one receives to acknowledge the communicator.

Life after Life

Some researchers suggest that in order to totally accept the concept of spirit communication it is necessary to support the concept of life after life in a scientific manner. Most researchers in this area believe that this has been accomplished in several ways; i.e., the study of Near Death Experiences (NDE), Out-Of-Body-Experiences (OBE) and reincarnation.

Near Death Experiences

Interest in whether there is survival after death is not a new subject. It has been revealed in ancient books such as The Tibetan Book Of The Dead, The Egyptian Book Of The Dead, Emanuel Swedenborg writings, and most of the Sacred Religious Books, along with esoteric writings.

What has been missing from these past accountings is some type of scientific study or research that gives credence to these writings of the past. Modern day studies have been conducted by Albert Heim, Karlis Osis, Erlendur Haraldsson, Michael Sabom M.D., Elisabeth Kubler-Ross M.D., Raymond Moody M.D., and Kenneth Ring Ph.D.

Perhaps one of the best non-scientific studies in modern times was that of Dr. Raymond Moody, the author of Life after Life. This statement is made because Dr. Moody took the information that he gathered and created a best seller book that not only sold millions of copies, thereby exposing millions of people around the world to NDE, but also created an interest in the scientific and medical community to do more complete studies than what Dr. Moody did. This same statement also holds true for the works of the distinguished psychiatrist Elisabeth Kubler-Ross, the U.S.A.'s most renowned thanatologist.

The advent of new techniques in the emergency room of modern hospitals has provided the valuable information in regards to NDE's. People are now being brought back from what is defined as "clinical death" with these new techniques in resuscitation.

The core aspects of the Near Death Experience are as follows:

1. Ineffability
2. Hearing the news of one's own death
3. Feelings of peace and quiet
4. The noise
5. The dark tunnel
6. Out of the Body
7. Meeting others
8. The being of light
9. The review
10. The border
11. Coming back

The qualitative aspects of the Near Death Experience are as follows:

Ineffability: The respondents state that there simply are no words to describe their experience adequately. Not only do their perceptions, while in this state, defy linguistic expression, but so do their feelings.

Hearing the news: The respondents are aware of being on the brink of death or have temporarily gone over the brink into clinical death. This perception is experienced when they are apparently or clearly unconscious or comatose at the time of the episode. Quite often the person hears a doctor or other spectator in effect pronounce them dead.

Feeling of peace and quiet: Respondents tended to claim that their thinking processes were clear and sharp, and governed by rational, rather than emotional considerations. The thinking process appears to be enhanced during the NDE. Sensory awareness is heightened and tends to be sharp and precise. Essentially these are visual and auditory sensory awareness. Bodily sensations, along with olfactory and gustatory, sensations are entirely lacking. Sensory and thinking processes seem to work together to make the NDE experience vivid, distinct and subjectively real.

The noise: According to Moody, many near death survivors reported that their experience was heralded by an unpleasant sound, whistling wind or ringing or buzzing in the ears. Rings respondents generally reported silence (peaceful, brilliant) although some reported noise.

The dark tunnel: Respondents reported having a sense of entering a dark region. They had the sensation of being pulled very rapidly through a dark space of some kind. The transcendental experience generally began in this void or darkness and moved towards a source of brilliant light, which signaled the end of the dark region and the beginning of a transcendental environment of great beauty.

Out of body: Respondents undergo alterations of body, time and space. Bodies become light or absent, sense of separation from the physical body, some could see their physical body below them (autosopic phenomena). Time and space were either expanded, infinite or absent. This appears to be a distinct state of consciousness in which many ordinary features of perception and cognition are completely transformed or altogether absent.

Meeting others: Respondents indicated either feeling or seeing the presence of other spirits during the NDE. In some cases the spirit informed the person that they were not to die, they were to return. In some cases the being was a deceased relative, in a few cases it was a religious archetype.

The Being of light: Respondents indicated an encounter with a brilliant light, which was sensed as a being. Communication is reported to be direct, unimpeded transfer of thoughts.

The review: Respondents report taking stock of their own life. This generally is very rapid, yet incredibly vivid and real.

The border: Respondents having a feeling they were approaching some kind of boundary or threshold, a point of no return. Ring's respondents were mostly of a cognitive sense. Moody and Sabom's respondents also had visual boundaries reported.

Coming back: The event that terminated the core experience is the return to one's body, and eventually to ordinary waking consciousness.

Most people did not recall just how they returned to their bodies. This is remembered as a decision or a command from a spirit to return; the return itself is usually a "blank." ¹⁴

The research completed by Michael Sabom and Kenneth Ring in NDE provides similar data. In Dr. Ring's research 48% of the individuals experienced some kind of NDE. This correspond with Dr. Sabom research where 40% of the individuals in the study had some kind of NDE. This would indicate that a large number of the United States population would be expected to encounter some moderate to deep experience when or if they would engage in a Near Death Experience. Realistically, this probably applies to people all over the world, but, since the sample only represented people from the U.S.A. inference beyond that population would be statistically incorrect.¹⁵

Out of Body Experience offers similar experiences to Near Death Experience. Scientific Studies of Out of Body Experiences (OBE) are abundant. Crookall's work alone represents an analysis of thousands of cases collected from all over the world. Celia Green, and other English parapsychologists have reported the results of a survey of some four hundred OBE's. Charles Tart has conducted several laboratory studies of OBE's and has, in addition, hundreds of cases in his own collection. Karlis Osis has done considerable laboratory work dealing with these experiences.

Detailed accounts of Out of Body Experiences have been provided by Robert Monroe, Sylvan Muldoon, Hereward Carrington, Oliver Fox, Yram and Vincent Turvey. The list of scientific studies over the years of OBE's is much longer than what has been stated. The fact that OBE and NDE experiences exist or happen is not in question anymore by the open minded researcher or reader. The only question is: What can we learn from these experiences? What relevance do they have?¹⁶

There is abundant empirical evidence pointing to the reality of Out of Body Experiences: that such experiences conform to the description given by Near Death Experiences; and that there is highly suggestive evidence that death involves the separation of a second body, a double, from the physical body.

Dr. Ring concludes that the Out of Body Experience provides empirical referent for the possible origin of the concept of "soul." He also endorses the proposition that consciousness (with or without a second body) may function independently of the physical body.¹⁷

Osis, Haraldsson, Moody, Kubler-Ross and others insist that the facts do exist to accept the concept of "soul" based on the empirical facts. As Dr. Ring pointedly expressed in his book Life at Death the word soul has so many connotations from a religious aspect that he prefers not to use it. Since the word "soul" is predominantly a Western term, others such as Sabom uses the word "spirit" which has a somewhat less religious attachment in orthodox religion.

Science, because of its nature, can provide only empirical data that suggests a NDE event is highly possible. The individual person then must search for her/his own understanding of those results and integrate that conclusion within the context of personal beliefs. Religion and philosophy will provide many roads to follow, but in the end, the individual is responsible to come to her/his own conclusion based on her/his inner knowingness. In light of this statement researchers have a responsibility to society to present the information in a form suitable for the general public to interpret without prejudice and without making unfounded conclusions. Some authors follow this suggestion while others do not. The responsibility is not just one way, as the reader has the responsibility to discern what she/he reads.

This area of parapsychology is in a very exciting phase for everyone because so much research has been completed, with additional studies continuing the works completed by numerous individuals. One might say that the data is in, the books are written, and now it's up to open minded people to put the knowledge into action.

Reincarnation

Reincarnation as defined in Wolman's Handbook of Parapsychology, is a form of survival in which the mind or some aspect of it, is reborn in another body.

For the idea of reincarnation to have significance or even be considered as a possibility there needs to be some indication of survival in the first place, NDE provides that indication along with the research conducted with respect to "Out of Body Experiences," and Death Bed Experiences.

Incontrovertible evidence for rebirth is practically an impossibility because it cannot be proven that a person with memories of a previous existence actually was that remembered individual. This dilemma brings to mind the words of American psychologist William James, who said, "If you wish to upset the law that all crows are black, you must not seek to show that no crows are: it is enough if you prove a single crow to be white." For more than a quarter of a century, two investigators of past life memories--Dr. Ian Stevenson and Hemendra Banerjee--have done everything in their power to produce that lone white crow.

These two investigators have concentrated their efforts in testing and collating the spontaneous past life utterances of hundreds of young children living in many different parts of the world. Time and time again, they have matched the claims of these youngsters with real life historical personalities and locations. While their work has not produced a perfect white crow, the bleached out crow from their research would indicate that its existence is not easily dismissed.¹⁸

Investigation of reincarnation through hypnosis has been done by many researchers, Wambach, Cannon and Whitton to name a few.

Helen Wambach, a noted psychologist, professor and therapist, assembled over 1000 subjects in small workshops and under hypnosis regressed them to specific time periods in the past. She asked them explicit questions about the lives they were living then, their sex, appearance, and clothing, the landscape and buildings they saw, their food and utensils at mealtimes, their occupations or special skills, whether they used money or barter in trading, what they felt at the moment their spirit left the body at death. Each subject was given a posthypnotic suggestion that enabled them to complete the data sheet documenting the experience of that past life, and pinpointing the place on the map in which it was lived.

Dr. Wambach reasoned that no matter how convincing an individual regression might be, it could not produce the most valid proof of reincarnation. She concluded that if she regressed hundreds of people into past lives in specific time frames and places, with all consistently reporting the same obscure details of daily life, this result would indeed be difficult to explain away as fantasy. The time periods selected for the past life recollections under hypnosis were 2000BC, 1000BC, 400AD, 800AD, and 1200AD. Later this was expanded to 2000AD.

The results of her regressions were demographic data that agreed with population patterns and race distributions as described by modern demographers. Regardless of the sex in the present life, when regressed to the past all subjects split into 50.3 % male and 49.7 female lives, which accords with biological fact. The pattern that appeared was fewer people existed in ancient times with greater periods of time between incarnations. As the population increased the time span between incarnations decreased. The death experience as described by hypnosis respondents was very similar to that described by Near Death Experiencers.

The results of Dr. Wambach's studies left her "knowing," rather than believing in, the process of reincarnation. She explained, "If one is sitting in a tent on the side of the road and 1000 people walk past telling that they have crossed a bridge in Pennsylvania, one soon is convinced of the existence of that bridge in Pennsylvania." ¹⁹

Another notable that used hypnosis for regression was Dr. Alexander Cannon, an Englishman who regressed 1382 volunteers to time periods as far back as several thousand years before Christ. His original intent was to disprove hypnosis so he only accepted their testimony under duress. In 1950 Dr. Cannon wrote in The Power Within:

For years the theory of reincarnation was a nightmare to me and I did my best to disprove it and even argued with my trance subjects to the effect that they were talking nonsense. Yet as the years went by one subject after another told me the same story in spite of different and various beliefs. Now well over a thousand cases have been so investigated and I have to admit that there is such a thing as reincarnation.²⁰

Many practitioners have used hypnosis as a therapeutic modality to resolve issues in this life that stem from unresolved issues from a past life time, this process is known as Past Life Therapy. Some practitioners are Arnall Bloxham, Loring Williams, Denys Kelsey and Joel Whitton among many others. The work of Joel Whitton M.D., Ph.D. shall be used here mainly because it adds a new dimension that has not been covered in other works, namely, the life between earthly lives.

Dr. Whitton was a natural hypnotist by age fourteen. Developing an interest in reincarnation, he refined his techniques, amassed his medical qualifications and went on to become chief psychiatrist of the Toronto school system. He found that roughly 4 to 10 percent of the population was capable of going into deep trance. This group was equally forthcoming when instructed to travel back beyond birth into an earlier existence. "Go to the time you were incarnate before this life," he would say, and they went.

As Dr. Whitton gained a better understanding of the unconscious mind, he instructed his patients, while in trance, to bring traumatic past life memories into their conscious awareness. This resulted in rapid and dramatic healing which he himself cannot fully explain. Some serious mental and physical disorders simply evaporated as terrifying and disturbing memories worked a soothing magic of liberation through self understanding. Other patients progressively shed their illnesses and psychological problems as they made contact with an increasing number of past life and interlife experiences. Because past life regression sometimes worked where conventional medicine had failed, Dr. Whitton was dubbed the "Lost Cause Doctor."

There is no objective proof that those who have recovered from serious disorders through past life regression have actually reexperienced a former incarnation. The subjects themselves are convinced of the reality of the

experience, and Dr. Whitton, having spent nearly twenty years studying past life therapy is confident that the subconscious mind is yielding stored up knowledge of former incarnations.

Once a subject is guided to another lifetime, the hypnotic subject assumes a different personality, acknowledges a different body while being aware of sharing with this other self the same basic identity. Changes of sex and race is common place. The past life personality can be directed to any point between its birth and death and will often discuss freely the experiences of that lifetime in a voice that reflects its age, gender, culture, language, character and placement in historical time.

Dr. Whitton defined certain states of consciousness in order to assist in describing the levels of experience. They are:

Dissociative Consciousness: A state of being in which sleeping or waking consciousness divides into two or more streams of experience. The individual, however, is usually aware of only one stream at any given time. This category includes dreams, fantasy, deja vu, multiple personality states, past life memories and out of body experiences.

Affective Consciousness: The apprehension of subjective states, visual or emotional or both, that cannot always be expressed by language. Among these are love, hate, and other emotions, attitudes, and perceptions, and cosmic consciousness-- the oneness with the universe experienced by the mystic.

Metaconsciousness: A supreme paradoxical state of memory awareness in which the percipient loses all sense of personality by merging into existence itself only to become more intensely self-aware than ever. To experience metaconsciousness--direct memory of the interlife--is to reach beyond the three dimensional reality to learn one's reason for being and the nature of personal karmic involvement. So radically different is this other world that language cannot act as a go between and even symbols may fail to capture its essence.²¹

In working with thirty subjects who were capable of deep trance and achieving the metaconscious level, Dr. Whitton inadvertently gave a suggestion to a subject to "Go to a life before you were Martha" and the individual went to a discarnate life, rather than the past life that he had expected her to go to. Over a period of years he escorted more than thirty subjects into the timeless, spaceless zone of this ethereal environment of life between life.

The Experience: The inception of metaconsciousness produces drastic change in a subject's countenance. Every frown, every grimace, every intimation of fear, anxiety, and pain that had accompanied the death experience drains away to leave the face at first expressionless, then peaceful and relaxed and finally, suffused with wonderment. Said one subject, an engineer:

In experiencing a past life, one sees oneself as a distinct personality which engenders an emotional reaction. In the interlife there's no part of me that I can see. I'm an observer surrounded by images. This is the beginning of the life after life experience.

The archetype of transition, the tunnel, is a common feature in the experiences documented by Dr. Whitton, as well as some people meeting guides while still in transit. Most, however were met with a multitude of strangers at the end of the journey. Also reported was the brilliant light, transcendent scenes and all the other experiences reported in Near Death Experiences.

Nearly all who entered into metaconsciousness found themselves appearing before a group of wise, elderly beings--usually three in number, occasionally four, and in rare instances as many as seven. This group knows intuitively everything there is to know about the person who stands before them. Their role is to assist that individual in evaluating the life that has just passed and eventually to make recommendation concerning the next incarnation.

The life review has every moment played back in complete sensory detail. The soul realizes when happiness was thrown away or when thoughtlessness caused pain in another. Emotionalism is kept at a minimum as the judges gently assist the soul in an objective understanding of its actions within a larger context of many lives.

Planning the next life: The research shows that many people plan their next life while discarnate. The knowledge gained from the review process equips the soul to make the vital decisions that will determine the form of its next incarnation. The judgment board has much influence over the decisions incorporated in the next incarnation based on past actions. Group reincarnation, in which the same set of souls evolves through constantly changing relationships in different lives, recurred frequently within the group being studied.

Much of the time in the interlife is spent acquiring knowledge for the next life and the opportunity to put into action what has been learned. Most of the subjects found themselves hard at work in vast halls of learning. Doctors and

lawyers, for example, spoke of studying their respective disciplines during this interlife while others remembered applying themselves to the such subjects as the laws of the universe and other metaphysical topics.

Coming back to earth: Metaconsciousness makes it clear that whereas death is truly a homecoming, a welcome change from strife and struggle, birth is the first day of a tough new project. Some look forward with eagerness and anticipation to the challenges of earthly existence, but most view with reluctance the thought of surrendering the timeless, spaceless interlife for material inhibition. Some subjects felt pushed by cosmic pressure to renew its development within the confines of a physical body. Through metaconsciousness they came to learn why they were embroiled in the circumstances of the current incarnation.

Before entering the Earth plane, the subjects reported passing through a barrier which served to lower the vibrations of its consciousness. This provided a Barrier of Forgetfulness where the memories of the interlife were dissolved from the conscious mind. This prevents longing for the grandeur that was left behind and leaving the echoes of past deeds and misdeeds behind them. The soul, through the use of the body, emotions, mind and personality, begins to experience what it set out to learn from the plan developed in the interlife.

Dr. Whitton's subjects, whose religious backgrounds are as varied as their initial prejudices for or against reincarnation, have testified consistently that rebirth is fundamental to the evolutionary process in which we are enveloped. At death, they say, the soul leaves the body to enter a timeless, spaceless state, there our most recent life on Earth is evaluated and the next incarnation is planned accordingly.

After thousands of hours of hypnotic sessions, Dr. Whitton was obligated to agree with the ancient scriptures which decree that, in the vast majority of cases, enlightenment is a prize to be won only after a painfully slow journey of purification from body to body. Personal observation showed him that the oversoul--the innerself at work behind the various incarnate personalities--is dependent upon the purging process of rebirth for its growth and development.²²

It is not the role of science to present a conclusion that has every loose end neatly arranged with an answer for every question that might arise. Every human concept is based on some type of theory, known or unknown to the conceptualizing person. As human beings, we are each responsible to develop our own understanding of how this world of ours works, and how we might relate to this world more effectively to create more harmony within our existence. The concept of life after life, and reincarnation affects many

beliefs an individual might have about self and the construct of the universe. The intent of science is not to prove it conclusively, but, rather substantiate what has been found in the research data, allowing individuals to draw their own conclusions. The data is in and can be read by all who are interested in knowing more about themselves and the worlds around them. The white crow has not been seen. Each person needs to determine for himself if it exists.

Extrasensory Perception

Extrasensory perception (ESP) is a term that includes the phenomena of telepathy, clairvoyance and precognition. The glossary of terms in Appendix A provides a more universal definition of terms used to describe certain paranormal phenomena. A strict definition of these terms in parapsychology are as follows:

Telepathy: Extrasensory awareness of another person's mental content or state. It can also be precognitive in nature.

Clairvoyance: Extrasensory awareness of objects or objective events. It can also be precognitive in nature.

Precognition: Knowledge of a future event which could not have been predicted or inferred by normal means.²³

A modern term generally used by parapsychologists is called "Psi," which is a general term used to identify a person's extrasensory communication with the environment. Psi includes ESP and Psychokinesis (PK). Psychokinesis is defined as: The influence of mind on external objects or processes without the mediation of known physical energies or forces.²⁴

The reason for the more modern term "Psi" is the fact that it is difficult to design specific experiments for modalities of ESP and PK that preclude other aspects of psychic ability from coming into play. In testing for pure telepathy it is difficult to insure that PK or clairvoyance are not involved. According to Nash pure clairvoyance has been demonstrated, where as pure telepathy and pure precognition have not. Telepathy can have elements of clairvoyance in the experiment and precognition could have elements of PK affecting events.²⁵

Psychic phenomena can take place spontaneously or they can be induced to occur. While spontaneous paranormal phenomena are studied in the natural environment, induced paranormal phenomena, namely ESP and PK, can be tested under experimental conditions. The paranormal event, whether

spontaneous or induced, may be manifested either by mental response shown by the subject's behavior, as in ESP, or by an object's physical response, as in PK.²⁶

While there are thousands of ESP and Psi experiments documented in many books and journals only a few will be referenced in this document so that the reader can become aware of the types of research data that is available.

Psychologist George Eastabrooks conducted a series of telepathy tests at Harvard University (1927) with overwhelmingly positive results and demonstrated that it is possible for an unselected group of subjects to evidence telepathy.²⁷

Douglas Dean in 1962, designed precognition tests that utilized an IBM computer to generate a random set of numbers after a group of executives had already recorded on a computer punch card the numbers and order that the numbers would be given. Each individual was given a different set of random generated numbers. These executives were from major corporations and were not readily accepting of ESP. The statistical results of these tests were outstanding in demonstrating the presence of precognition ability in thousands of executives.²⁸

Many experiments have been done that involve the use of telepathy to induce sleep or pain which was both observable and measurable with an EEG machine. These experiments are described in the book The Mind Race.²⁹

One experimenter was Dr. L.L. Vasiliev at the Leningrad Institute for Brain Research in the Soviet Union. The test described below was conducted hundreds of times in slightly different laboratory situations.

In the 1930's, in order to examine the electromagnetic hypothesis that psychic communication may be transmitted by ordinary electromagnetic radiation, Vasiliev constructed a cage made of steel sheets welded together. The upper half of the cage could be lifted off by means of a pulley in the ceiling. The experimenter climbed into the open box formed by the bottom, and the top was then lowered onto it. The box was light tight and pressure tight and had no electrical input or output.

In the next room, the subject to be put to sleep was told to squeeze a rubber balloon rhythmically, which would pneumatically put a mark on a moving chart that was recording the experiment. At a prearranged time the experimenter in the box would press on the side of the box to close a switch that would also mark the chart, and indicate the start of his efforts to put the subject to sleep.

The experiments' success would be indicated when the subject responding to telepathic suggestions to go to sleep would no longer squeeze the balloon rhythmically. After this, the experimenter would wait a randomly determined period of time and attempt to mentally awaken the subject, who would then resume squeezing the balloon as though nothing had happened. From the published data of these experiments, it usually took the sender two to three minutes of concentration to put a subject to sleep or to wake a subject up. This same type of experiment was conducted between Leningrad and Sevastopol, a distance of seventeen hundred kilometers, with positive results.³⁰

The Soviet experimental *modus operandi* has often been to shock a sender electrically or to have a sender imagine that they are choking or bludgeoning a receiving person, who is usually a friend of the sender. The receiver is then monitored for the presence of potentially adverse physiological effects of this attempted psychic manipulation.³¹

One such experiment by biophysicist Yuri Kamensky in the 1970's involved the use of telepathic transmissions of emotions by Kamensky to his partner, Karl Nikolaev. In these experiments Kamensky had imagined that he was strangling his friend. The physicians who were monitoring the experiment with an EEG wanted to stop the experiment because the patterns showed such drastic changes that they were concerned for Nikolaev's health and even his life. This experiment was done over a span of five hundred miles. Previous telepathy transmissions between the two people involved were visual images so the receiver at this time did not expect anything different. Nor had he any way of knowing, by ordinary means, what Kamensky had in his mind for each particular experiment.³²

Similar tests by researchers in the United States obtained the same results when the sender focused on lowering the blood pressure and heart rate of a laboratory rat. The observers watched and recorded the steady decrease of the rat's heart rate, all the way to death.³³

A number of other experiments in telepathy have been conducted, in both waking state and dream state, where the focus was for mind to mind communication, rather than induced physiological changes.

Howard Eisenberg and D. Donderi have conducted telepathy experiments in which both telepathic and nontelepathic groups were tested with favorable results supporting the presence of telepathic communication. Other telepathy experiments were conducted with positive conclusions supporting telepathy by Moss, Ullman, Krippner and Feldstein and Braud. Moss conducted a telepathy experiment in which each "transmitter" reviewed a slide and taped-music show, and both transmitters and "receivers" gave tape recorded

verbal impressions during the transmission periods. The conclusions resulted in matched protocols much more successfully in the telepathy conditions than in nontelepathic control conditions. Ullman, Krippner, and Feldstein's experiments demonstrated telepathic transmission from an observer, who viewed art prints and related objects, to sleeping subjects who incorporated the telepathic information into their dreams. Braud used muscle relaxation instructions to increase success in writing protocols that described telepathically perceived illustrations and obtained success while controlling the experiment so that positive expectations based on relaxation were not a factor.³⁴

Some general conclusions that have evolved out of Psi experiments are as follows:

- (1) Reports of spontaneous psychic experiences predominantly occur when the sender is involved in a strongly emotional situation and the receiver is relatively calm and relaxed.³⁵
- (2) The effects of recorded spontaneous cases also tend to be more dramatic than the modest but significant results usually obtained in laboratory experiments.³⁶
- (3) Belief in psychic phenomena clearly influence the direction in which PSI operates (e.g. Psi missing versus above chance performance in "goats" and "sheep").³⁷
- (4) No single personality type performs best in telepathy; instead, different people, for idiosyncratic reasons, are better at transmitting or receiving different types of telepathic information.³⁸
- (5) Spontaneous experiences of Psi seem predominantly to occur in altered states of consciousness (ASCs) involving withdrawal of attention from external (sensory) stimuli and a concomitant shift towards internally-generated stimuli (thoughts, feelings, images). ESP has perennially been associated with dreams and reverie states, as well as with deliberately induced ASCs such as hypnosis and meditation.³⁹
- (6) Dreaming is the most common ASC and also the most frequently reported mediator of spontaneous ESP experiences. Dreaming accounts for between 37 and 65% of the spontaneous ESP experiences reported in several international surveys.⁴⁰

An interesting finding in all aspects of ESP testing is that distance and time have no effect on the outcome of the results. Tests also have been

conducted in metal faraday cages, underwater, across oceans, and even from space with no negative or limiting effects from the environment.⁴¹

Clairvoyance in its many guises has been validated many times in both spontaneous phenomena and in laboratory experiments. There are many aspects of clairvoyance which are discussed in great detail in the parapsychology books by Wolman and Nash, to name only two of the many outstanding authors on the subject.

In the glossary of terms in Appendix A the reader can find a description of the many aspects and characteristics of this type of ESP phenomena.

A very useful application of clairvoyance in healing is that type of clairvoyance called "Medical Clairvoyance," which is the ability to see within the human body, its mechanism and to diagnose disease.

Barbara Ivanova a researcher and practitioner of bioenergy in Moscow contends that Psi, in general, and diagnosis and healing, in particular, can be taught. Barbara has developed a training program where, after several training sessions, many of her students were able to perform remote diagnosis, and successfully determine the nature and location of diseases, as well as locations of pains, internal scars, tumors, and so on. The most gifted students could occasionally receive the actual medical term for the disease without understanding what it meant. More often, students described some features and locations of disorders on the person, without giving the exact name of the disease.⁴²

Psychic diagnosis can be accomplished in many ways; intuitively "feeling" what is wrong with the body, "hearing" what is wrong from some unknown source, or "seeing" through the body as though it is invisible, and revealing the disease. Many healers can diagnose the illness by observing the area or field around the person. To illustrate the potential accuracy of such phenomena a study conducted in Moscow in 1980 stated:

"During the course of the six-week period, 43 people who previously underwent examinations in various medical institutions were examined by J. Davitashvili with the intention of diagnosing their conditions. Concurrence of the clinical diagnosis and the diagnosis made by J. Davitashvili yielded 97.3 %. It should be noted that in 49.7 % of the cases she diagnosed additional (concomitant) diseases which were confirmed in 86.9% of the cases during further polyclinic examination." ⁴³

This field around the person has been seen by clairvoyants in all of recorded history. The field has been called the "aura" in occult literature and

the USSR scientists call it a bioplasma field. This subject will be discussed in greater detail in the section on healing.

Dr. Shafica Karagulla M.D. a neuro-psychiatrist in the U.S.A. and author of the book Breakthrough to Creativity describes eight years of research in the field of extrasensory perception. She presents experimental evidence from some of her "sensitives" who could see into and through the human body. Their observation of states of health and disease correlated accurately with medical findings. Certain psychic sensitives were found to be pretty accurate in predicting the onset of a disease. The psychic sensitives insisted that this was not precognition because the energy body (aura) shows the condition many months before it becomes apparent in the physical body.⁴⁴

It appears that ESP abilities are part of our genetic heritage. Research has provided evidence that ESP can be increased by feedback on the results of testing and that Psi abilities have been demonstrated in lower living organisms.

Experiments using feedback led Charles Tart an American psychologist to conclude that individuals with considerable initial ESP ability can learn to increase it by means of immediate feedback, that is, by being immediately informed whether or not their response was correct. This hypothesis was verified in other experiments performed with an ESP testing machine.⁴⁵ Feedback has also been found to be very important in improving one's Psi ability and in differentiating between Psi information and mental noise.⁴⁶

In addition to humans exhibiting Psi abilities, evidence has been presented that suggests that lower organisms also exhibit Psi abilities. Supportive experiments have been conducted on birds, cats, dogs, horses, and rodents.⁴⁷

J. B. Rhine provides the following insight into the biology of ESP:

"It appears definite now that Psi is part of the genetic heritage of the organism, and so far no indication has been found either of an organic localization of the ability or of an equivalent of the sensorimotor organs." ⁴⁸

Carrol Nash, Ph.D. Professor of Biology, and Director of the St. Joseph's University, Philadelphia, PA indicates that most ESP experiments are no longer directed at proving extrasensory perception. He says: "Most parapsychologists believe that the experimental evidence for ESP has long been sufficient for its acceptance and that perusal of the numerous experimental reports in scientific journals should convince any open-minded skeptic of the existence of ESP." ⁴⁹

A Roper poll conducted in 1974 indicated that 53 percent of the American people believe in the existence of ESP, 68 percent of those with a college education expressed a belief in ESP as contrasted with only 26 percent with a grade school education. A survey of British subscribers to New Scientist magazine (the majority of whom are scientists or technologists) responded to a 1973 questionnaire with 67 percent considering ESP to be an established fact or a likely possibility.⁵⁰

In a poll conducted in the United States by Tornatore (1977) results showed that of the 609 psychiatrists who responded, 171 had experienced spontaneous paranormal phenomena, typically telepathic communication, most often in dreams. Based on their answers, he concluded that the relationship between the analyst and the analysand provided a good setting for the occurrence of ESP phenomena because of the mutual needs of both.⁵¹

One of the most rational and sober-minded psychologists of the West, Sigmund Freud, had a profound interest in such psychic events as telepathy. Freud stated his position on psychic telepathy very simply: "By inserting the unconscious between the physical and what has been regarded as the mental, psychoanalysis has prepared the way for the acceptance of such processes as telepathy." This has led some of Freud's followers to suggest that in some levels of the unconscious we find not fantasies, but telepathy. Freud suggested, that information is picked up by the psychic reader via thought transference (telepathy) from the unconscious of the person seeking the reading.⁵²

Psychokinesis

Psychokinesis is one form of physical mediumship. Physical mediumship also includes such phenomena as: levitation, table-tilting, materialization, direct voice, apports, psychic photography and raps. Genuine physical mediumship is rare, the most celebrated ones were Daniel Dunglas Homes, and Eusapia Palladino.⁵³

PK is the influence of an individual on the physical state of an object without physical contact or known physical intermediary. Paranormal influence on stationary objects was called "telekinesis" before the discovery of PK on randomly moving objects. Telekinesis is the term still preferred in the USSR and Eastern Europe. Elsewhere psychokinesis is the preferred term.

Psychokinesis is a phenomena that generally belongs in the category of spontaneous phenomena and has not had nearly the positive results in laboratory tests that ESP has.

Some examples of PK that are well documented shall be presented to indicate that the phenomena does exist, even if it may not consistently repeat.

J. B. Rhine conducted many laboratory experiments in the area of PK having the subject controlling the fall of dice. The ability of subjects to influence the dice psychokinetically persisted as the experimenters went through a variety of procedural changes to eliminate the possibility of manual manipulation of the dice to affect the outcome. The subjects continually exceeded the probabilities of chance even with all the controls of the experiment.⁵⁴

Metal bending has been repeatedly demonstrated by Uri Geller showing that he has the ability to bend and break metal objects such as keys, rings, and spoons, sometimes without touching them. The bending sometimes continued after the object left Geller's vicinity. At the point of bending, the solid metal became plasticized without an increase in its temperature. Examination of the fractured edges indicated that the bending resulted from internal changes in structure, rather than from external pressure. The English psychic Matthew Manning was observed to produce similar feats of paranormal metal bending. He discovered his ability after watching Geller perform on television, as did others, some of whom were children.⁵⁵

By means of strain gauges mounted inside a key, J.G. Hasted, Professor of Physics at the University of London, registered the paranormal bending of keys by several children who did not touch the objects. Some children also bent objects that were self enclosed within a glass tube forming an "s" shaped object out of a straight piece of metal without coming into direct physical contact with the metal object.⁵⁶

Alteration of weight through PK phenomena has been the subject of research for many years. Robert Hare (1855), Professor of Chemistry at the University of Pennsylvania, published the positive results of his experiments in PK phenomena. These experiments used an apparatus so designed that the medium could be in indirect contact with the object she/he was requested to move, but was prevented from producing the full movement that was observed by any muscular force of her/his own. One apparatus consisted of a wooden board 4 feet long, supported on a fulcrum 1 foot from one end and attached by a hook to a spring balance at the other end. A glass vessel filled with water was placed on the board near the fulcrum. A wire-gauze cage, attached to an independent support and not touching the glass at any point, was placed around the water, and the psychic had to affect the balance by simply placing his hands into the water which was in this wire-gause cage. Hare observed increases in weight by several pounds.⁵⁷

More recently Uri Geller was observed to increase by 1 gram the weight of a 1 gram mass measured by a precision laboratory balance under a bell jar.⁵⁸ Olga Worrall was also tested in affecting the weight of a coin. The coin placed between two layers of glass on a sensitive laboratory scale in a glass chamber, measured heavier when she sent healing energy and imagined it heavier, and lighter when she imagined it lighter, in a second experiment conducted after the success of the first.⁵⁹

The Russian psychic Kulagina paranormally tilted a pair of scales and was able to hold one side of the scale down even after 10 grams had been added to the opposite side.⁶⁰

Nina Kulagina has performed a number of PK experiments which included: producing skin burns on individuals, movement of metal and nonmetal objects, stopping the heart beat of a frog, whereby the interior part of the heart was torn apart, and "suspending" objects, weighing several dozen grams, in the air.⁶¹

In the 100 years plus of Psychical Research every aspect of physical and mental mediumship has been examined by experts. There is no single aspect of mediumship that does not have at least several individuals that were able to demonstrate the phenomena. The quality of the experiments or investigations has not always been up to the exacting standards that are utilized in modern day parapsychology. This would suggest that the possibility of any type of phenomena occurring is conceivable, and one needs to be open to such a possibility in order to properly evaluate a particular potential paranormal event. Each observer also needs to be assured that one is not trying to create a paranormal event out of a normal event, discernment is in order.

Dr. Gardner Murphy, past president of the American Psychological Association said: "If there were one-tenth of the evidence in any other field of science that there is in parapsychology, it would be accepted beyond question." ⁶²

Charles Tart in the article Preliminary Notes on the Nature of Psi Processes says the following:

"The careful research of parapsychologists over the last half-century has solidly established the existence of several types of paranormal (Psi) effects, viz., telepathy (mind to mind communication), clairvoyance (direct mental perception of a state of physical affairs), precognition (foretelling the future), and psychokinesis (the direct influence of mind on matter)." ⁶³

One of the problems that hinders the acceptance of Psi phenomena is the fact that the events or phenomena occur using modalities beyond what is considered normal sensory reality. (Please refer to The Detailed Discussion in chapter II. This again challenges one's beliefs about human nature and one's view of the world and how it works.

The science of parapsychology, like the science of consciousness, stretches the knowledge of self and humankind. Parapsychology is the scientific study of facts that do not fit in normal reality, the facts that cannot be reconciled with the concepts we ordinarily use to explain human beings and this world.⁶⁴ Psychic research, whether its called parapsychology, Psi, the study of the paranormal, or ESP research, is, in the most profound sense, the study of the basic nature of humankind.⁶⁵

A review of what has been discussed in regards to ESP and Psi phenomena in the areas presented shows that significant experimental data is available that is supportive of the fact that this type of phenomena can and does exist. Each experience of spontaneous or induced Psi phenomena would require investigation as to whether it is a case of true phenomena or not.

This statement by Ken Wilber perhaps summarizes the present status of Psi phenomena. Wilber says; "I personally find it most persuasive that the greatest psychologists--whom, by their very profession, we would expect a special sobriety--have quite explicitly come down in favor of the existence of some form of paranormal phenomena." From Freud to Jung to William James, the word has been that "the authenticity of this phenomena can no longer be disputed today." ⁶⁶

Psychic Healing

Psychic healing is healing effected by nonmedical means and inexplicable in terms of present-day medical knowledge. When the healer and healee are not within sensory range of each other it is called absent healing. The healing can take the form of prayer, the "laying on of hands," psychic surgery, etc.

This section shall focus on several aspects of unorthodox healing, namely the concept of energy, the human aura, and several typologies of healing methods. The main focus is to present research that has been done in the area of psychic healing, the methods in which it is accomplished, theories relating to energy and energy centers with the human body, and the context in which Psi energy appears to be involved in such activities. The concept of the mind-body connection has been established in previous sections along with the idea that many diseases are psychosomatic in nature. These accepted facts, along with the placebo effect, make the scientific verification

that psychic healing actually exists very difficult to prove. Most of the research has been directed in the effects of healing energy on plants, animals and inanimate objects that would not respond to suggestion, placebo effects, etc.

Psychic healing is the exertion of a beneficial influence by an individual or group of people over another living organism.

The existence of evidence supporting the concept and reality of psychic healing is abundant. Research studies have been conducted on the effects of PK on: yeast (Grad, 1965) and fungus cultures (Barry, 1968); bacteria (Nash, 1982); plants (Grad, 1967; Loehr, 1969); enzymes (Smith, 1972); hemoglobin (Krieger, 1975); animals (Grad, 1967; Watkins, G., Watkins, A., & Wells, 1972) and humans (Miller, 1980; Goodman, 1978).

How psychic healing occurs is the controversial question that still plagues researchers today. Nearly every healer talks about working with or feeling energy so, perhaps, the most appropriate area to review the findings of the researchers is in the area of energy.

Psi Energy

Robert Miller, Ph.D., an industrial chemical research scientist has conducted many research projects on PK phenomena, which he calls paraelectricity. The energy that is reported to emanate from a healer's hand accelerates healing of wounds on mice, causes changes in enzyme systems, and increases the growth rate of plants and yeast cells. There was some doubt that such an energy exists because it does not register on thermometers, radiometers, or other standard sensors.

Dr. Miller, and the renowned healer, Olga Worrall, conducted many experiments to test this energy theory. In the cloud chamber tests, healer Olga Worrall was able to create a moving wave pattern inside the cloud chamber in both touch and absent healing experiments. The conclusions per Dr. Miller is that "thoughts are things" and visible manifestations in the physical world can be produced mentally from a distance.⁶⁷

Dr. Miller also conducted biofeedback experiments with Olga Worrall and Dr. Tanous another noted healer, in which both healers demonstrated that when they were influencing the test subjects they were in alpha and sometimes theta states. The transition for these two healers was remarkably fast. Olga would switch from beta to alpha in 8 seconds whereas Dr. Tanous took a little more than one minute to make the transition. The conclusions of this experiments was that alpha state of consciousness is the most effective state

for psychic healing. Other tests included the effects of healing on plants, copper salts (crystals), surface tension of water, hydrogen bonding and molecular structure of water. The conclusion of these tests are:

- (1) A primary energy, different from heat, light, or electricity, is emitted from a healer's hands.
- (2) This energy may be detected and quantitatively measured by its effect upon the surface tension of water.
- (3) Crystal forming from solutions of cupric chloride will give visual indications of the presence of the energy.
- (4) Water which has been treated by a healer increases the growth rate of plants.
- (5) Water treated by a healer undergoes changes in hydrogen bonding.
- (6) Energized water is unstable and gives up excess energy to the environment or to any object in contact with the water.

"The results of the experiments indicate that a primary energy, different from the energies recognized by modern science, is emitted by the hands of healers. Because it is similar to electricity, but has its own unique characteristics, the energy had been given the name "paraelectricity." This primary energy is the "Life Force" of the ancient Chinese, the "Prana" of the Yogis, the "Odic Force" of Reichenbach, the "Orgone Energy" of Wilhelm Reich, the "Bioenergy" by Lowen, and the "Libido" by Freud.⁶⁸

Dr. Benor, M.D., has stated that he has personally confirmed reports from many healees and most healers (e.g., Alexei & Victor Krivorotov and Barbara Ivanova, USSR; Gordon Turner, Great Britain) that they experience sensations of heat, cold and tingling which both healers and healees experience during a healing treatment.⁶⁹ These sensation are generally referred to as, "feeling the energy."

These same effects have been noted by most authors on the subject of healing (Meeks, 1977; Sherwood, 1985; Bodine, 1985; Joy, 1979; Steadman, 1969; Brennan, 1987; Schwarz, 1980). Students and clients who have worked with me also reported feeling the energy in a healing session.

These sensations of heat, cold and tingling that both healers and healees experience during a healing, according to Dr. Benor, could, in reality, be a cross sensory perception called synesthesia. For example, some people can hear colors or can learn to differentiate color with their fingers. It might be concluded that, rather than actually sensing heat, cold or tingling the

individuals dermal nerve endings which sense color are being stimulated by a healing energy. This is consistent with the reports from both healers and healees in the observation of colors during healings.⁷⁰

Dr. Achterberg M.D. comments that heat, tingling, numbness or itching in the area of the disease are all compatible with an enhanced immune response.⁷¹

This concept of energy fields in and around the body is very ancient, and is a part of many schools of thought that were not hampered by materialistic or positivistic constraints.

Numerous healers all over the world report feeling sensations when they move their hands close to but not touching the body. While the sensations differ from healer to healer even on the same individual, if illness or injury are present, a different sensation is sensed near that part of the body. This suggests that there is possibly an energy field around the body.⁷² Kirlian photography also provides supportive evidence of an energy body surrounding the physical body. While there is debate over what is actually photographed in kirlian photography, there is a large series of reports that physical and emotional states of health and disease correlates with changes in the Kirlian images.⁷³

One other area that provides interesting support to some sort of energy field is the finding of direct current (DC) fields by several scientist in plants and animals. These "L-fields" as they are called, have voltages and polarities. If the field is abnormal, this is often an indication of disease in the organism.⁷⁴

Soviet biophysicist A. Gurvich proposed the Theory of the Biological Field (Moscow, 1944) in which Gurvich suggests that the main attribute of living organisms and even individual cells is a dynamic vibrating energy field that constitutes an integral part of any life form. He called this energy "bioenergy," and the field of this "life energy," a "biofield." This biofield concept provided the theoretical structure to conduct a remote biofeedback experiment in order to test it as a plausible explanation of integrative phenomena in the morphogenetic and metabolic processes.⁷⁵

The approach used in the remote biofeedback study was based on the concept of biofields and whether or not such fields could manifest a field-to-field inductive synchronization. In this experiment, one participant would voluntarily control her/his heart rate thereby inducing a similar change in the subject's heart rate so that they became synchronized. The results appear to support the assumption that subfields of "life energy" can manifest a field-to-field inductive synchronization. It was also noted in the experiment that, in

order to obtain the synchronization effect, the factor of rapport between the two individuals, be it of a biological or psychological nature, emerged as a variable of utmost importance.⁷⁶

The Soviet scientists in biophysics have come forth with some very interesting concepts relating to matter. Plasma is generally acknowledged as a fourth state of matter; some Soviet scientists describe bioplasma as a fifth state of matter. Bioplasma purportedly is a "particle soup" consisting chiefly of free electrons and charged ions which are generated by living organisms. Soviet biophysicist V. M. Inyushin describes bioplasma as one component of an organism's biofield. It affords a structure to the biofield and is constantly being renewed by chemical processes within the cells. In the interplay between organism and environment, some bioplasmic particles are absorbed from external sources while others are radiated into space in the form of "microstreamers" (channels of bioplasmic particles traveling through the air) and "bioplas molds" (fragments of bioplasma that have broken away from an organism). These radiations are the vehicles of much of what is referred to as PSI phenomena according to Inyushin. In human-plant communication it is claimed that a psychic sensitive can produce a rapid discharge of bioplasma from the plant which can be photographed.⁷⁷

This concept of energy, and energy-fields in and around the body supports the age old belief in auras that have been seen by clairvoyants throughout history.

The Aura

The aura can be defined as a complex energy pattern that may be seen emanating from animate and inanimate objects, also known as the energy field or bioplasmic body. The patterns may be multicolored, multilayered, and purported to relate to the character or quality of the person or thing.⁷⁸

Many psychics see what appears to them as an aura around the human body, which varies with the individual concerned and with their mental and physical state. Psychics do not necessarily agree as to the color of any particular person. The aura may extend from 1/4 inch to 3 feet beyond the body. While there is questionable scientific proof in the objective aura, an aura may be a way in which the unconscious mind presents paranormal information concerning another individual to the psychic's consciousness.⁷⁹

Dr. Benor agrees with Nash stating that; "There is reason to question whether the aura, as color, is the product of the mind of the person who sees it or whether it has an objective, "out-there" existence. There is a distinct case it might represent an energy field surrounding the body." ⁸⁰

Many gifted psychics have described the aura, the most notable are C. Leadbeater and Annie Besant who were both noted for their research into man's inner nature and powers. Leadbeater's best known works include Man Visible and Invisible (1902) and The Chakras (1927). Much of what these two gifted psychics wrote about has been compiled by A. Powell in his book The Etheric Double (1925). These books, and those of more recent times, not only describe the aura, but also the energy centers in the human body which are called Chakras.⁸¹

The first modern investigator of the human aura was Dr. Kilner who published a book called The Human Atmosphere (1911). Dr. Kilner expressly disclaimed any clairvoyant power and his work was based on investigations he made of people while viewing them through glass plates coated with a diocene dye. The conclusions that Kilner, a medical doctor, came upon was that, once the aura was fully formed, age did not produce any alterations, whereas disease did affect it.⁸²

Dr. Lowen, a Freudian psychiatrist and creator of Bioenergetics therapy is deeply involved in the actuality of energy in the body. An associate of Dr. Lowen, Dr. John C. Pierrakos studied the energy field. Dr. Pierrakos describes the energy field as such:

The energies within the body also flow out of the body in the same manner as a heat wave travels out of an incandescent metal object. When a person stands against a homogeneous background, either very light (sky) blue or very dark (midnight) blue and with certain arrangements so that there is a softness and uniformity in the light, one can see with the naked eye or more clearly with the aid of colored filters (cobalt blue) a most thrilling phenomenon. From around the periphery of the body arises a cloud-like blue gray envelop which extends for 2 to 4 feet where it loses its distinctness and merges with the surrounding atmosphere. It swells slowly, for 1 or 2 seconds, away from the body until it forms a nearly perfect oval shape with fringed edges. It remains in full development for 1/4 of a second and then, abruptly, it disappears completely. It takes about 1/5 to 1/8 of a second to vanish. Then a pause of 1 to 3 seconds until it repeats again, repeating the process. This process is repeated 15 to 25 times a minute in the average resting person (Lowen, 1974).

Different levels of excitation and intensity of feelings in the body are reflected in the field. One observes different color changes in the outer layers of the field that correspond to different emotions.⁸³

While the scientific experiments have not provided conclusive evidence that there is an aura or energy field, the objective evidence found so far is

consistent with the subjective observations of healers and clairvoyants around the world. This would tend to indicate that some sort of energy field is present around and in the body which can and does provide information about that individual's state of physical, emotional, mental, and purported spiritual health.

All these diverse reports seem to point to some sort of energy or field which may be involved in healing and other aspects of Psi. Another consideration might be that the healer merely triggers or releases telepathically this Psi energy within the healee. However, the nature of such telepathic transmission has yet to be discovered.⁸⁴

The scientific study of healing by Psi energy or paranormal abilities is very difficult because so many factors are involved that could also induce the healing to take place. Many researchers attribute positive results obtained by healers, not to an unknown Psi component, but rather to other psychological and psychophysiological and social causes. Such explanations include patient expectancy, faith in the healer, placebo effect, suggestion, shared world-views, unconscious psychodynamics, a supportive community, and psychosomatic effects. Naturally, all these can potentially exist in every healing environment, including traditional Western medicine and psychotherapy.⁸⁵

The phenomena of healing has been scientifically demonstrated in the laboratory, and the concept of some type of energy field in and around the body has been substantiated to a high degree and, therefore, there is a strong body of evidence that indicates that psychic healing is at least possible.

Since these healing abilities are scientifically known to exist, it might be useful to know some of the typologies that have been established by several of the most noted investigators of the healers of the world.

Typologies of Healing

One of the most distinguished parapsychological researchers who has investigated healers all over the world is Stanley Krippner, Ph.D., past president of the Parapsychological Association, the Association of Humanistic Psychology, and current director of the Center for Consciousness Studies at Saybrook Institute.

Dr. Krippner and Dr. Alberto Villoldo have written two books about healers and the methods that are used, these are, The Realms of Healing (1976) and Healing States (1987). According to Krippner and many other researchers, folk healers have operated throughout history in all parts of the world.

Krippner has divided them into five categories: shamans, spiritists, esoteric healers, sacramental healers, and intuitive healers. The basis for each category is as follows:

Shamanic Healers: Refers to the shaman as a tribe's "technician of the sacred," observing that they are a magician as well as a healer. Vivid descriptions exist of contemporary shamans such as Rolling Thunder, Isaac Tens, Gregorio, and Black Elk.

Spiritist Healers: Spiritist healers, believe that they incorporate discarnate entities during their rituals. Many times these are spirits of Christian saints, or other highly regarded religious figures, and many times they are spirits of deceased doctors and health practitioners that continue to work from the spirit plane.

Esoteric Healers: These healers follow various occult or hidden teachings such as alchemy, astrology, the Kabbalah, the Tarot, or tantra. The writing of Alice Bailey (1970) on Esoteric psychology has been used by various schools of healers.

Sacramental Healers: This healer generally works in a setting in which healing is invariably part of a sacred ritual. Kathryn Kuhlman and Oral Roberts are sacramental healers, as are the Kung bushmen of Africa, the Pentecostal Christians, and religious leaders like Sai Baba in India. They all often produce dramatic healing effects during their worship services.

Intuitive Healers: The intuitive healer undergoes no special training or initiation but responds to a call from God, or spontaneously begins to lay-on-hands or pray for the ill. Today's intuitive healers rediscover the process of healing, typically representing a world-view that is in contrast to their cultural upbringing and proceeding by a hunch. Examples of intuitive healers were Olga Worrall and Oscar Estebany both of whom worked closely with scientists investigating the effects of laying-on-of-hands healing.⁸⁶

These are the five typologies created, by Dr. Krippner, to categorize healers in the studies that took him around the world.⁸⁷

There is an other type of healer that is emerging, one who is trained to be a healer and who develops sensitivity to "invisible energies," and knowledge of body energy processes (received through conventional and/or intuitive means) to help and heal.⁸⁸

Two individuals in the U.S.A. that have done much in training healers are Delores Krieger, Ph.D.; R.N. and Lawrence LeShan, Ph.D. Dr. Krieger advanced a method she called "Therapeutic Touch" which was developed for university level teaching. In her book she writes, "Therapeutic Touch is

basically a healing meditation; that is, the primary act is to center oneself in a natural tension-free manner and to maintain that center throughout the entirety of the Therapeutic Touch process. Delores Krieger clearly summed up the psychic healers, irrespective of their world-view and the methods they use:

- (1) To center oneself physically and psychologically.
- (2) To use the sensitivity of the hand (or other means) to assess the energy field of the healee for cues differentiating the quality of energy flow such as heat, cold, etc.
- (3) To mobilize areas in the healee's energy field that are not flowing and are sluggish, congested, or static.
- (4) To consciously direct the healer's excess body energies to assist the healee to repattern their own energy.

The active role of the patient is of particular significance: it is not only the healer who can help the patient, it is the patient who heals himself.⁸⁹

According to Dr. Krieger, Therapeutic Touch can facilitate relaxation in the healee within four minutes. It is also a successful technique for alleviating pain and enables the body to begin healing itself. "There is hard evidence that treatment affects the healee's blood components and brain waves and it elicits a generalized relaxation response." What Dr. Krieger began to realize in doing Therapeutic Touch is that those things we talk about, like empathy, are based in what we call paranormal. The healer is deeply feeling what the patient is going through because of the bond to that individual. When dealing with people who are ill, a great deal of what we call 'paranormal phenomenon' becomes very real. Nurses in deep thought or meditation about their patient knew what changes took place in the patient before actually coming in contact with them again to verify the change. The paranormal is the most potent factor we have as human beings, says Dr. Krieger.⁹⁰

Dr. Lawrence LeShan is a humanistic psychologist, theoretician, researcher, and clinician who has done work in parapsychology. He is the author of The Medium, The Mystic and The Physicist (1975) and Alternative Realities (1976) which describe some of his experiments in alternate realities.

In the aforementioned books, LeShan describes his research in developing and testing methods to teach healing to himself and others. LeShan's theory contends that when humans are functioning in a manner that would be described within the general Western psychiatric climate as paranormal (when they appear to be experiencing clairvoyantly, telepathically, or

precognitively, or when they seem to be facilitating paranormal or psychic healing), they are actually functioning normally, given the range of human capabilities, but they are in an altered state of consciousness. That is, a state of awareness in which one perceives reality as structured differently, in a metaphysical sense, from the manner in which one usually perceives it. He defines the state of consciousness necessary for paranormal things to "happen" as the clairvoyant or flow-process reality.

LeShan trained himself to achieve the clairvoyant state, and others who, likewise, had never had a psychic experience. LeShan found that there seemed to be two kinds of healing, two kinds of experiences involved, which he called Type I and Type II. He found that some healers limited themselves to one or the other, while others moved easily back and forth between the two, sometimes blending them.

In Type I healing, the healer moved into a state of consciousness within which there was no individuation, rather an experience of oneness in the healer's consciousness, even if only for an instant. This experience is primarily a union of love, caring at an intense, deep, and profound level. It appeared that when this was fully and authentically enough accomplished, sometimes the healee experienced biological improvement. And the healer often felt better as well, not drained or weakened in any sense. Type I healing could be done at a distance or in the presence of the healee. It did not seem to matter. The Type I process required that the healer not attempt to influence or to heal, but only to be with the healee in a special way. All this occurred within the healers' consciousness while experiencing the world in the clairvoyant or flow-process mode.

LeShan found that Type II healing, on the other hand, did require the efforts and focus of healing. This form is commonly called the laying-on-of-hands. It can be done in combination with Type I healing or separately. In Type II healing the healer is using their "will" to achieve the healing, ego is directly involved in the healing process. The results do not seem to be as lasting as Type I, and some experiences with it indicate caution about its use. Occasionally it causes latent problems to become worse before they improved; various infections, when treated with Type II, have first intensified before improving. And, in that the healer is trying to do healing, it lends itself far more readily to misuse by the person seeking personal power. Type II healing does not require an altered state of consciousness.

In Type I healing the healee's organism appears to select without conscious effort how the experience will be used. The healer does not "try" to heal a particular problem. Often the results of an apparent effective experience with Type I healing will be the improvement of a condition other than that presented by the healee as of major importance.⁹¹

Persons who attempt to psychically aid a biological system often feel a sense of communication or communion. This sense of compassionate communication is precisely what LeShan (1975) and Goodrich (1978) attempt to teach in their "psychic healing" seminars; as their healers shift from their "usual sense of identity" into a "oneness" with the ailing person, Psi is said to facilitate that person's self-repair system. If Psi is involved in this effect, it may be telepathy as well as PK.⁹²

A person doing psychic healing typically does not feel that what is being done is being accomplished by oneself. This is true of the sacramental and intuitive healers who believe that God works through them and the spiritist who believe that they incorporate discarnate entities. It is also true of the shaman and esoteric healers who often attribute the cure to amulets, charms, crystals, herbs or rituals. In all the above stated typologies as well as with LeShan's Type I, all tend to eliminate the sense of ego-involvement with the task. In many PK tasks, subjects try "to make it happen" and often fail. When they shift to a conscious mode that is less egocentric and less goal-directed, PK suddenly may occur. If the PK task were to involve psychic healing the effect might be more powerful.⁹³

Perspectives On Healing

The psychic healers throughout the world diagnosis the patient and the nature of the disease or disorder in several ways.

- (1) Some healers have the patient describe their symptoms which is sufficient for the healer to start treatment. Many rely on feedback from the patient during the healing session, or from one session to another.
- (2) Some healers receive information about the disease and disorders by intuitive or clairvoyance means. This was described previously as medical clairvoyance.
- (3) Many healers diagnosis the illness by observing the area or field around the patient, the characteristics of which tell them about the illness. Often using their hands, they find heat, cold, tingling, pressure, electric shocks, or pulsations which inform them about the particular ailment. Many believe that the cause of the disease is initiated at the subtle energy level, the level of "prana," "chi," or "biofield."⁹⁴

Some healers will combine these approaches while conducting diagnosis, and continue to use one or more of them during the healing session. It is not necessary to have the patient with the diagnostician. There are numerous ways to perform the diagnosis and perform the healing at a distance.

Some healers observe the aura and/or radiation of the chakras and describe their diagnosis according to what is observed. The most interesting point is that, irrespective of whether healers use traditional terminology, such as the aura or etheric body, or use modern terminology, such as the biofield, their descriptions are essentially the same.⁹⁵

While some individuals claim that psychic healing abilities are inborn, others like Juna Davitashvili (USSR) believe each person is a potential healer and one only needs to develop this aspect of oneself.

Juna Davitashvili maintains that she can train an individual to become a diagnostician and healer within approximately one year, and emphasizes the need to open a school or have a special department in medical schools in order to teach "energy" healing.⁹⁶

Davitashvili is a senior researcher in the USSR Academy of Sciences. She also has been a practicing healer for a number of years and calls her methods contact and non-contact massage (bioenergy healing).

She indicates that, in scientific and clinical studies in which she has participated, specific, positive experimental data has already been obtained which scientifically establishes the existence of the phenomena of remote information-energy influence on living systems.

According to Davitashvili, "The directed and controlled remote action of one person on the physiology of another, with the purpose of changing their functional condition and healing, has become an indisputable fact."⁹⁷

Contact and non-contact healing have a broad spectrum of practical applications as a highly accurate diagnostic method, as well as for prevention and healing of many diseases. Davitashvili, in conjunction with medical professionals, developed the following techniques for introduction into practice:

- (1) A method of universal complex diagnosis;
- (2) A universal complex prophylaxis method;
- (3) A series of special methods for healing of specific illnesses (ischemic heart disease, auditory nerve neuritis, asthma, ulcers, skin diseases, nephritis, gastro-intestinal diseases, etc.,).

The success in the utilization of these procedures is based on the unique property of contact and non-contact healing to simultaneously and harmoniously activate and stabilize the activity of all functions of the organism.

"All the methods (including those for specific cures and even universal diagnosis) are directed to produce a healing influence on the mind and body, through a mobilization of all hidden reserve defenses. It permits the use of this method for effective early prophylaxis with the goal of a timely defense of the patient against a possible disease, rather than when they are already overcome by illness." ⁹⁸

She goes on to say that she believes that the use of contact and non-contact healing will allow us to help people suffering from diseases which have been considered incurable. She also believes that the methods of healing by hands (especially its preventative aspect) should become a matter of great humanitarian importance.⁹⁹

Another renowned Soviet healer, Victor Krivorotov, shares a view on healing that is commensurate with the Philippine and Brazilian healers. He expresses this point:

"The most important task of a healer is not only to restore local energy balance in a pathogenic zone of the body, but to explain to a patient how to transform their way of life, including nutrition, attitudes, and behavior patterns. A person who has mastered the art of bioenergy therapy clearly understands that without this inner transformation of a patient their recovery will be only of a temporary nature." ¹⁰⁰

According to Victor Krivorotov, the list of diseases which can be cured by bioenergy therapy is very wide and diverse. It includes both functional and chronic disorders: nervous disorders (dermatosis, radiculitis, asthenic syndrome, vegetative malfunctions, etc.), mental disorders such as: hypochondriasis, hysteria, neurosis, obsessive-compulsive, etc., and internal diseases.¹⁰¹

Krivorotov says that humankind has generally ceased to look inside themselves and, as a result, have decreased their level of sensitivity, and their internal feedback systems are ineffective. A person begins to feel a developing pathological process only at the stage when exclusive use of methods of intervention (including surgery) can give temporary relief. Generally, then, Krivorotov believes that contemporary medicine directs its efforts at individuals with low level feedback. He contends that the human being of the future will not need medical treatment at all, and during the transition period, bioenergy therapy (psychic healing) will become a prevailing method of treatment.¹⁰²

Victor Krivorotov foresees a yet more global consequence of the wider use of healing energy:

"When bioenergy therapy becomes widely used, the ethics of energy interactions between people will be developed. At the present we do not know how an energy active or energy passive person influences other people, since we are unaware of this influence. We do not know what energy incompatibility means and how one can avoid it. All these problems can be resolved when biotherapy receives the recognition of psychologists and sociologists." ¹⁰³

Irving Oyle, an osteopath physician for over twenty five years, and former medical director of the Headlands Healing Service in Bolinas, California, integrated the ancient techniques of incubation sleep into a holistic approach to the human organism on the physical, psychological and psychic level. He believed that if done correctly, this will effect healing on the physical level. The patients, in each instance, are invited into a milieu associated with healing, and encouraged to relax and drift into an altered state of consciousness that is near, but not quite at, sleep. During this state, images come forth that impart the diagnosis, and are sometimes associated with a remarkable cure.¹⁰⁴

According to Joan Steffy a healer and researcher of healers around the world, "The only thing lacking now is a commonly accepted system of how healers might be tested and licensed. While receiving an M.D. degree does not excluded the possibility that a physician can make mistakes, it is a form accepted by society which, in theory, guards the society from charlatans. When an appropriate test is found and reasonable arrangements for licensing of healers are made, then psychic healing and self-regulation can truly become an inherent part of the medicine of the future." ¹⁰⁵

Some changes have come about. Healers are allowed in hospitals in Great Britain and in Japan. The World Health Organization, in 1977, adopted a resolution urging governments "to give adequate importance to the utilization of their traditional medicine." Perhaps the most significant change was the 1980 change in the code of ethics by the American Medical Association that gave physicians permission to consult with, take referrals from, and make referrals to practitioners without orthodox medical training. While this move opens the way for physicians to initiate some degree of cooperation with non-traditional practitioners, it appears that not very many physicians have taken advantage of this opportunity.¹⁰⁶

Healing States

One aspect of the healing process is that it seems likely that the consciousness of the healer and healee enters into the processes involved in healing. At a minimum, the healer must project or channel energy. Generally this requires some action on the part of the healer, even if the act is to become inwardly silent or to allow (rather than will) the healing to occur.¹⁰⁷

Dr. Bernard Grad has provided the scientific evidence that even our normal waking state consciousness--which directly effects one's energy field--which can be in any number of emotional states has a direct effect on plants, and, most likely, a direct effect on the people around us.

Perhaps the most significant experiment conducted by Dr. Grad, and repeated many times by other people, demonstrates how a person's emotional state (energy field) affects water and plants that were given that water. A normally happy person held a bottle of water for 30 minutes, and a hospitalized depressed person held an identical bottle of water for the same length of time. Then he watered two sets of plants. The results were startling and statistically significant: those plants watered by the bottle held by the happy person, grew and thrived. Those exposed to the second bottle of water languished.¹⁰⁸

Perhaps that is why LeShan advocates the Type I healing state and most shamans and healers change their state of consciousness during the healing session.¹⁰⁹ Some people may perform better as healers after entering an altered state. They are able to leave their ordinary beliefs and behaviors behind, and assume new roles and identities that might give them the confidence to evoke the self-healing capacities of their patients.¹¹⁰

Shamans are men and women who are able to voluntarily alter their consciousness to enter "extraordinary reality" in order to obtain knowledge, power, and skills that can help or heal members of their tribe. Stated in psychological terms, "Shamans are tribal people who can self-regulate their attention so as to access information not ordinarily available, using it to ameliorate the physical or psychological condition of members of their social group."¹¹¹

The most detailed study of "states of consciousness" most conducive to healing is the work done by Dr. LeShan and Joyce Goodrich at the Consciousness Research & Training Project, Inc., in New York. LeShan concluded from his research that in Sensory Reality ESP is not normal, but in Clairvoyant Reality ESP is normal. The supersensory experiences of clairvoyance, trance, telepathy and so on depend upon a fundamental shift of one's awareness.¹¹²

LeShan has defined four central aspects of the Clairvoyant Reality that is consistent with the reality states of mystics when they believed that they were really comprehending "reality." The four aspects of the Clairvoyant Reality are:

1. There is a central unity to all things. The most important aspect of a "thing" is its relationship, its part in the whole. Its individuality and separateness are secondary and/or illusory.
2. Pastness, presentness and futurity are illusions we project onto the "seamless garment" of time. There is another valid view of time in which these separations do not exist.
3. From this other view of the world, evil is mere appearance: when we are in this other understanding, we do not judge with the criteria of good and evil (total nonjudgement, only observing).
4. There is a better way of gaining information than through the senses.¹¹³

LeShan goes on to say that both Sensory Reality and Clairvoyance Reality are valid and necessary. Sensory reality is necessary for biological survival and Clairvoyance reality could be said necessary for spiritual survival. Neither is comprehended in the other nor reducible to it. They are, as we have learned in physics, complementary views of the world, each supplementing the other, neither telling the whole story.

Summary

The research that has been accomplished by numerous scientists, psychologists, psychiatrists and medical doctors, to name only some of the professions that have taken an interest in this area of study, provides ample documentation from all over the world that psychic healing, called by its many names, really does work. As in any profession there is a wide range of capabilities, so it is presently difficult to quantify the abilities of a particular healer. It was also noted that the healee is ultimately responsible for the healing, so even an excellent certified healer is only one of many components in the healing process. LeShan and all the other researchers point out that healing is generally done in altered states of consciousness where much of the Psi phenomena occurs. This reality, or state of consciousness, as discussed earlier has a different set of laws which govern that state of reality which is much different than normal sensory reality in waking state. A number of medical practitioners are cited or referenced in the research who are now integrating certain healing techniques along with traditional Western methods. This aspect will be covered in greater detail in the next chapter.

The material presented so far fully substantiates the idea, suggested by Dr. Jeanne Achterberg, that we are coming to a time of the shaman/scientist. Whether, as a community of the planet, the planet reaches the global concepts described by Victor Krivorotov remains to be seen. What appears to be in the forefront now, is the acceptance by traditional health care practitioners of the tremendous healing power of the mind, and of the practitioners that know how to use this gift of healing at all levels, physical, emotional, mental, and spiritual. In many cases, the folk healers have accepted Western medicine as being more effective for certain problems and unorthodox healing best for others. Western health practitioners have basically resisted exploring methodologies outside traditional health care practices to provide immediate and minimal cost health care to their patients and clients. The high cost of Western health care is creating a situation where these changes will take place for the betterment of all people. True holistic health care, as described by Pelletier and others, will, eventually, become the traditional health care practice. This requires a new world-view towards who is responsible for health, and what are the accepted practices to obtain and maintain that health, putting the spiritual component back into all the health professions so the medical doctor, the therapist, and the minister--all--can speak of life and death as the same continuum.

CHAPTER IV
THE ADJUNCT USE OF PSI IN HEALING
BY OTHER PRACTITIONERS

Introduction

The previous chapters have provided the supporting data, and the reliability of such data, in sustaining the existence of Psi and healing energies, and that these methods of psychological and physical healing have been used since the beginning of recorded history. This chapter will review the literature which supports the use of Psi abilities in the current healing models, both in psychotherapy and in medicine. One must keep in mind that in most Western Countries, including the United States, the use of these practices are not generally condoned by traditional professional organizations and the political establishments that provide licensing of such professionals. Therefore, few medical doctors, psychologists and psychiatrists openly acknowledge the use of these abilities in fear of receiving negative publicity from other professionals and even certain clients. Knowing this fact one could assume, even though little published material exists presently on this subject, that the use of Psi and healing are being done within the framework of traditional methodologies.

Medical Practitioners

Dr. Shafica Karagulla, a brilliant neuro-psychiatrist became involved in research of Psi which she called Higher Sense Perception. In her book Breakthrough to Creativity (1967) she documents the fantastic findings that her research brought forth, mostly in the area of using psychic ability in diagnosis of medical problems which could be easily verified for accuracy by medical Practitioners. She was interested if any such medical doctors existed who had this ability for diagnosis of disease. She found several such doctors after gradually gaining the confidence of a few doctors that knew of doctors that had very remarkable reputations for diagnosis.

One such doctor admitted that he was able to diagnosis a patient by observing the field of force (aura) which he could see around the patient. He indicated that what he saw in this field told him about the conditions and function in the physical body. In the physical body he could see where nerve currents were blocked or not moving in a healthy fashion. In these circumstances he often applied magnetic healing energy and could observe the effects on the nerve currents. With regard to the endocrine system, this doctor could see moving vortices of energy associated with each gland. By

observing any disturbances in the vortex of energy, he could associate the precise physical condition that accompanied certain disturbances. This doctor also reported seeing incipient conditions in this energy body which had not yet manifested in an actual physical condition. At times, he could predict how and when a physical ailment would manifest in that person. Dr. Karagulla later discovered a number of medical doctors that had similar abilities. All of these Practitioners used standard diagnosis procedures in addition to their psychic abilities and generally did not disclose the use of Psi abilities in order to protect their medical standing.¹

A similar type of medical doctor is Sigrun Seutemann who operates a medical and homeopathic treatment clinic in West Germany. She uses her highly developed natural psychic abilities in diagnosing patients' illnesses, which at times amounts to 90 patients per day. At age 29 she was healed of a congenital heart condition by Tony Agpaoa, a renowned psychic surgeon and healer in the Philippines. She states that, as a child, she was psychic and gradually developed the abilities to the point that she could diagnose illness. By observing the effects of minerals and herbs on the aura, she was able to prescribe these in a way most effective for the patient. She says: "Today I could not serve so many patients as the 90 per day who sometimes come to me, if this gift had not become so well-developed."²

A wonderful autobiography of a medical doctor that went from a life threatening disease to leaving his medical practice and exploring the realms of healing involving the body energies, the chakra system, and higher levels of consciousness viewed from a medical model perspective is all detailed in his book Joy's Way (1979). Many of the concepts and application of these concepts already discussed in this and previous chapters are covered by Dr. Joy in his book of transformation.

A more controversial aspect of paranormal healing is the phenomena called psychic surgery. While this is a very unique phenomena it does provide interesting insights into what might be obtainable within the realm of human consciousness. The examples discussed in this section were all investigated by scientists, medical doctors, and those trained in the detection of fraudulent psychic phenomena.

The problems that occur in the case of psychic surgery, where materialization and dematerialization occur, is that it lends itself to sleight-of-hand on an off day. This has always been a problem with physical mediumship back to the early days of the Psychical Societies and the mediums that they investigated. The examples cited here reflect experiments where the removed materials and blood were tested and confirmed to be human. At other times, the materialized blood, etc. did not test out as human, which presents a lot of confusion about the phenomena.

To believe that the phenomena can happen all that one needs, is one case where it has happened. So far numerous cases have been submitted that substantiates that it is within the realm of possibility.

Perhaps the most renowned healer of modern times was Ze Arigo, the son of a Brazilian mechanic, who could barely read or write. Yet, in trance, he claimed to incorporate the spirit of Dr. Adolph Fritz, a German physician who supposedly had died in World War I. Using only a scalpel or a simple knife that was rarely cleaned he would perform surgical operations. He treated almost every known ailment, and he saw as many as 300 patients a day, diagnosing and treating them in minutes. Arigo died in an automobile accident in 1971.³

In 1980 Dr. Fritz appeared again, this time operating through the hands of Dr. Edson de Quieroz a physician in Recife, Brazil. This time Dr. Fritz is working within the establishment as the medium is a recognized doctor even though his methods are anything but established procedures. Dr. Fritz would often diagnosis clients in less than three minutes. His assistants, two nurses and a physician, write out directions for the use of drugs and herbal remedies that are prescribed. Often the prescription was for a drug popular in the 1900's, in which case the assistants would find a more contemporary substitute. When asked how the diagnosis was done so rapidly, the assisting physician explained that the diagnosis had already been done on the spirit plane and the doctor simply was communicating the results from his colleagues in the spirit world.

A number of Dr. Fritz' patients are themselves medical doctors who prefer his methods to the traditional methods. Several investigators were medical doctors who witnessed the methods used by the Doctor and followed up with the patients on their experiences in this form of medicine, all of whom reported that they experienced no pain.

In the case of both Arigo and Dr. E. de Quieroz the operations were/are performed with crude implements and without aseptic techniques or anesthesia. There has been no case of infection resulting from the methods used by Dr. Fritz even though according to Western medical practices there should have been numerous cases of infection.⁴

The difficulty that arises in the investigation of psychic operations performed by Philippine healers such as Tony Agpaoa and others, is that some of these psychic operations are valid, although they are very difficult to verify from a Western medical viewpoint. In his laboratory Dr. Hiroshi Motoyama says that various blood specimens, tumors, and cancerous tissue removed from a patient during an operation he observed in Tokyo by a Philippine healer had

been confirmed as specimens that did, in fact, belong to the patient undergoing the operation. His results were confirmed by other university and hospital laboratories.⁵

While sometimes the materials removed in psychic surgery test out as human in laboratory tests, many other times they do not. To know that it can happen, as verified by many researchers ⁶ indicates that it is within the realm of possibility and, perhaps, that is where it should reside until further studies are done on this unique phenomena. With the meager knowledge of the limits of Psi, it would be unwarranted to hold that psychic surgery is an impossibility.

While the rest of the scientific community are denying the possibility of these capabilities, or struggling to decide if they exist, these Practitioners, and many more, are out there using the abilities now just as the shamans and healers have been doing for 20,000 years. It is obvious from the statements by these Practitioners that much can be added to the what is presently being utilized in traditional Western medicine. Those mentioned, and not mentioned, are the modern day shaman/scientist described by Achterberg who have integrated the best of both realities, Western scientific knowledge and higher levels of consciousness that provides additional awareness and skills to the individual. The doctors mentioned here have shown that these two realities are complementary to each other and, in doing so, provide a higher degree of service to the patients. Perhaps the day is coming where these qualities will be looked upon favorably by all concerned, medical associations, licensing bodies, and the general population.

Psychotherapeutic Practitioners

Throughout the world there are psychic readers who perform a service to those who utilize their services. Throughout the Western cultures there are psychotherapists who perform a service to those who utilize their service. In many cases, an individual may chose one or the other, depending upon previous experience, word of mouth, or just happenstance.

This section will discuss several areas in relationship to Psi abilities and psychotherapy. These areas will include: discussing the Psi phenomena that can occur between the therapist and the client; and psychotherapists who utilize psychics as an adjunct to their own therapy model with certain clients. The later area also includes using the psychic abilities by the therapist or client as an adjunct to psychotherapy.

First, it must be said that the literature in this area is rather sparse, with the exception of the Psi phenomena that occurs between therapists and clients.

There is very little published material comparing the psychotherapeutic practices and skills of psychics who do readings, with the interventions of conventional psychotherapeutic practices.⁷ There is even less published literature where the therapist is using psychic abilities as an adjunct to psychotherapy.

Psi Between Therapist and Client

Many investigators have commented on the apparent occurrence of Psi phenomena in psychotherapy. Generally this is noted as telepathic communication between a client and the therapist.⁸

The occurrence of presumptively telepathic material during psychotherapy was first reported in 1921 by the Viennese psychoanalyst, Wilhelm Stekel, who noted that such occurrences seemed to be related to strong affects, such as love, hate, jealousy, and so forth. It remained for Freud, who reported such occurrences in 1922 and 1933, to make the fundamental observation that telepathic material followed the same laws in the unconscious as any other material, both during therapy and otherwise.⁹

In 1933, the Hungarian analyst, Istvan Holos, not only confirmed the general observations of Stekel and Freud, but noted also that the telepathic material he observed during therapy seemed to mirror events in his own experience. Such material, he stated, was always highly charged with affect in that it related to unpleasantly toned ideas or feelings he had been attempting to repress. The patient's telepathically charged material, he noted, emerged much like a slip of the tongue, except that it was the patient who made "his" slip.¹⁰

Similar observations were made by the Italian analyst Emilo Sevadio and the American analyst, Nandor Fordor. Eisenbud indicates that he first confronted presumptively telepathic material as soon as he began his psychoanalytic and psychiatric practice. It became apparent to him, as it had to others, that patients, in their dreams and associations, occasionally mirrored his experiences; and moreover, they mirrored affects and conflicts that he would rather have repressed. Later he discovered similar observations were made by Pederson-Krag (1947), by Ehrenwald (1950), Ullman (1970), Marie Coleman Nelson (1958), Elizabeth Mintz (1983) and others.¹¹

Eisenbud goes on to say:

After several years of observing this kind of material, yet refraining from bringing any of it to the attention of patients. I took the plunge, but not without considerable hesitation and misgivings: I began pointing out and basing analytic interpretations on the material. To my

surprise not one of my patients rushed for the door with a frightened backward look. In every case, the interpretation turned out to be useful for the understanding of what was going on in treatment--especially in the transference and, just as significantly, in so-called "countertransference," that is, in my hidden feeling about the patient.¹²

While Eisenbud concludes that, according to his experience, bringing Psi-conditioned material to a patient has never seriously backfired. Making a patient aware of presumptively Psi-conditioned material is never done solely to demonstrate Psi. Psi for Psi's sake, he soon found, tended to sidetrack the more important work of therapy.¹³

There is a significant amount of data that supports what Eisenbud states, so one can assume that such Psi is a natural phenomena that can and does occur.

Psychotherapists and Psi Practitioners

This topic shall be discussed from two perspectives, one in which the psychotherapist will refer a client to a reader for possible insights into a presenting issue, and the second situation is where the psychotherapist works with both the client and/or a medium to remove a spirit, or spirits from within the client. The use of a psychic reader in a referral situation shall be discussed first.

Psychic readers who claim to have psychic abilities do "readings" for clients in which they attempt to reveal and clarify unconscious intrapsychic material, interpersonal relationships, and possible futures. Psychics, at times, are involved in counseling clients with symptoms similar to those treated by psychotherapists. Some claim that they can help much more quickly with sessions of only one half to one hour in 3-12 months.¹⁴

Dr. Benor is one of the few psychiatrists that acknowledges the use of psychics as an adjunct to therapy when he deems it appropriate. Benor indicates that clients come for a psychic reading when they have questions revolving around certain issues namely:

- (1) Practical decisions to make, such as business investments, geographical relocations, job changes, etc.; and
- (2) Psychological problems involving intrapsychic or interpersonal conflicts, life-stage adjustment difficulties; and a variety of emotional crises.¹⁵

Benor suggests that the belief that the readers are omniscient facilitates the clients' opening up and revealing conflicts that are on their minds. This access via Psi abilities to material of all kinds from the client frequently addresses hidden strengths, or latent talents, which have laid dormant and underdeveloped within the client.¹⁶ While the reader may provide a rapid uncovering of unconscious material, this is quite consonant with very direct intervention type therapies such as Neuro-Linguistic programming, and Milton Erickson's type hypnosis.

Dr. Benor relates that his personal experience with several psychic readers whom he works with in pointing out unexplored, underemphasized, and even unmentioned or unrecognized conflicts are very useful. As an eclectic psychotherapist he refers some of his clients to these psychics for occasional readings. These clients have found the readings to be helpful in pointing out strengths and relationships they had ignored or neglected. Clients have benefited, according to Benor, especially in sessions wherein the psychics explain the client's cosmologies, which include cyclical patterns for moods, good and bad fortune, relationships, etc. During these times of despair, the reading provided a ray of hope which occasionally had striking therapeutic benefits. Benor provides three case studies to demonstrate the positive effects resulting from psychic readings within the therapy time period, which he says illustrates ways in which such consultations with a psychic is a useful adjunct to therapy.¹⁷

Perhaps the concept of possession does not quite fit the traditional Western psychiatric model but there are a number of psychiatrists and psychologists that support that concept that this type of phenomena can exist. In certain other cultures, the existence of such an event is accepted and a part of their world-view. Based on clinical work by Adam Crabtree (1985) it appears that such possessions can occur even when such beliefs are not within one's world-view.

Two noted parapsychologists Stanley Krippner, Ph.D. and Alberto Villoldo, Ph.D., have researched this phenomena along with many other forms of unorthodox healing all over the world. What they found was several Brazilian psychiatrists that utilized mediums in the therapeutic process of removing undesirable spirits in their clients.

One such psychiatrist is Dr. Eliezer Mende, M.D., who has concluded that epilepsy, schizophrenia, and multiple personality disorders are most often caused by spirit possession, and subsequent removal of such spirits will result in remission of the disorder. The unique aspect of Dr. Mende's treatment plan is to train the clients in mediumship so that they have control of the situation and learn to only allow high spirits to use their body and mind.

Dr. Eliezer Mende, M.D., has his facilities outside of Sao Paulo, Brazil and claims an 85% success rate in healing of epilepsy and in recent years he has begun to treat schizophrenics and persons with multiple personality disorders, using the same mediumship healing techniques but with lower success rates.¹⁸

Mendes explains, "We encourage our guests (clients) to give full expression to their problems. You could say that we encourage the full expression of madness and of epilepsy. We then give them bioenergetic and psychic exercises that correct their improper use of altered awareness. After many years of observation, we have come to the conclusion that epilepsy, schizophrenia, and multiple personality disorders can result from inappropriate states of consciousness. Therapeutic exercises help to organize the patients psychic energies and teach them to manage their highly developed, yet poorly trained mediumship and trance abilities." ¹⁹

"Mendes also claims that these diseases could also be caused by trauma from one's own past lifetimes, particularly when one suffered a shocking or painful death. These personalities from one's past could act as foreign entities that intrude on one's psyche, and must be dealt with as intrusive spirits." ²⁰

Mendes indicates that the basis of his therapy is hypnotic regression. This regression can take the patient back to childhood, or to a prenatal state when the person is still inside the womb, or even to a former lifetime. He believes, that to cure themselves, most epileptics must discover and resolve the highly charged emotional events that contribute to their illness which may occur in any lifetime.²¹

The healing process is accomplished by having one of the clinic's mediums incorporate the client's former personality or a disturbing entity and help the medium to psychologically integrate and discharge that experience just as if it had happened in this lifetime.²² The medium can act out, or incorporate spirits of the opposite sex, of different ages, of various ethnic groups, allowing repressed areas of the psyche to find expression.

At the point when the medium has incorporated the entity or personality, Mendes will utilize the necessary psychotherapeutic techniques that are required for intervention. This intervention is for the benefit of the possessing entity or personality, as well as for the client. It is not an exorcism, it is spiritual psychiatry for the entity's well being, so it can go to its proper place in the spirit world according to the Spiritist tradition.

Mendes believes that the releasing of a disturbing spirit or a painful event from the past, offers only temporary relief, and unless the client learns to

master her/his own psychic abilities, the condition will reappear. Mendes insists that mediumship be part of therapy because often a person's highly developed yet poorly trained psychic faculties will produce a variety of psychological and physical diseases.²³

Mendes explains: "An intruding personality, is an energy that has an identity of its own and usually presents itself as a person--a living or dead person." The purpose of the medium is to transfer the energy to them in which case they can discharge it. The healing of the client is through the liberation of these intrusive energies, either by the client's own efforts, or with the aid of a medium who can capture these energies and transform them.²⁴

Mendes believes that mediumship can provide both a medical and psychotherapeutic value. The physician says that: "It teaches people to work with their own energies. Mediumship is a biophysical practice that takes people into transcendental states where they begin to explore their extraordinary abilities and other dimensions of their emotions and thoughts. Mediumship results in an integration of the physical, emotional, and spiritual sides of the person. It is, therefore, a transcendental integration of the personality."²⁵

His treatment program also requires one family member to participate in the treatment program. This appears to be a significant factor in achieving the high success rate per Mendes and Villoldo. Krippner, while in Rio de Janeiro volunteered for a healing whereby the medium announced that he had picked up a "low river spirit" upon his arrival. Being quite willing, he dutifully fell backwards in the exorcism, just like the others he had observed. However he stated, "I was quite surprised at the feeling of dissociation and disorientation I experienced following the exorcism." It took him half an hour to regain sufficient composure to be able to walk up front to receive his final blessing. Krippner goes on to say that "whether one thinks of the spirit as discarnate entities or as subpersonalities, they are associated with the release of considerable unconscious material."²⁶

Spiritism has been used as an adjunct healing system in New York and Puerto Rico community mental health centers for several years. In several Puerto Rican community health centers a successful project, called "The Therapist-Spiritist Training Project in Puerto Rico," was designed to integrate Western psychotherapy with spiritism. In one mental health center, spiritist healers and health professionals met twice a week for three years. The first weekly conference included lectures by health professionals and spiritist healers, the second weekly session consisted of both groups providing input in case conferences regarding clients coming to the center.

The therapy practiced by the spiritist healers consisted of rituals and herbs, development of one's self spiritually and the meaning of life and the person's connection to the cosmos. The mental health psychotherapists also provided insights, but they focused on more practical aspects of the case. One remarkable case involved a client who was seen by both a psychiatrist and spiritist practitioners. When brought to the clinic she was given medication for her depression and visual hallucinations. The spiritist brought in four colleagues who allegedly exorcised eight spirits. She was discharged a week later, talking happily about her plans for completing her education. One of the psychologist also consulted with a spiritist during a time of divorce and purportedly obtained assistance from his spirit guides to win his court battles. He remarried again after working through his relationships with the spirit's help. This professional psychologist concluded that the spiritist had been far more effective in his case than the psychotherapy he had previously received.²⁷

The concepts for therapeutic intervention as utilized by the Spiritist doctors and healers are not foreign to Western psychiatry, though they do not fit into mainstream psychoanalysis. The most noted 'spirit psychiatrist' was Dr. Carl Wickland, M.D., who for thirty years treated discarnate spirits through his wife, who was a medium. While many of the techniques were different, the results were the same, that is, removal of the spirit from the patient via medium for the benefit of both the spirit and the patient. Dr. Wickland used static electricity to dislodge the spirit out of the patient and into the medium (his wife), at which time the doctor spoke to the spirit through his wife so as to enlighten the spirit that it was dead and to assist it to move to the spirit plane.²⁸

American psychiatrist Ralph Allison has worked with many clients with what has been described as "alter personality" which serves a definite and practical purpose. "Repeatedly," he observes, "I encountered aspects or entities of the personality which were not true alter personalities... I have come to believe in the possibility of spirit possession."²⁹

Modern day experiential research in this area has been documented in a book by Adam Crabtree (1985) along with the conclusions that he made in effectively treating some fifty cases of possession. First off, Crabtree distinguishes between multiple personality and possession in the following manner. "Possession involves the invasion of a person by an entity from the outside. Multiple personality involves the spontaneous emergence of a personality manufactured within."³⁰

Possession can be described as being voluntary or involuntary. An example of voluntary possession would be the use of mediumship as described earlier by Dr. Wickland's wife or Dr. Quieroz. In the case of involuntary possession, the host is unwilling as far as the conscious is concerned, but is willing at the unconscious level.

Dr. Villoldo describes the relationship in voluntary mediumship in the following manner:

In the case of mediumship incorporation, the spirit appears to facilitate the functioning of the medium. Rather than being conceived as an instance of multiple personality disorder, the relationship between Quieroz and Dr. Fritz (and Quieroz's other spirit guides) can better be described as a case of what psychologists often call "co-consciousness," in which more than one consciously experiencing psychological entity can exist within a healthy human organism. Each personality has some sense of its own identity or selfhood despite their relatively separate and discrete identifications.³¹

Crabtree has done extensive research in the area of multiple personality and possession. In the course of being a therapist Crabtree discovered that when he opened up his psychological framework for doing therapy he discovered this remarkable fact: "Some of my clients were actually telling me that they felt possessed by entities alien to them. They experienced these entities as personal presences dwelling within them and subtly communicating with them." ³²

In the treatment of clients that have characteristics of being possessed, Crabtree does not make any judgement as to whether they are real or not real from his perspective, he treats them as realities because that is what they are to the client.

Adam Crabtree went on to categorize the types of possession that he found in his therapy work. He divided the cases into the following typologies:

Possession by the deceased. This was the most common type of possession. The possessing entity most often was a blood relative of the victim or host, and commonly a parent or grandparent.

Possession by the living. This type of possession mostly involves family members and the possession was by some fragment of the personality of the intruder.

Possession by group-minds. A group-mind is a psychic entity formed by a group of individuals that concentrate on a particular idea or task. Family is an example of a natural group mind.

Possession by a past life. The emergence of a past life identity or personality in the conscious experience of the present individual.

Possession puzzles. These are cases that do not fit into any particular class. Example given by the author are, animal, or other nonhuman types of possession, some of which could be negative thought forms by others, or by oneself, as when one is taken over by one's own destructive intra-psychic creations.³³

Crabtree also discovered that the client did not need to believe in the objective reality of possession. He states that a number of his clients who disbelieved in--or at least had serious doubts about--the reality of their inner presences were, nonetheless, relieved of their condition.³⁴

The methods used by Practitioners in the removal of such entities fall into three methods: (1) exorcism or commanding the possessing spirit to leave; (2) Persuading it to leave using a variety of methods; and (3) starving the entity out by denying the possessor access to oneself, namely resisting all communication with it.³⁵ Crabtree found that exorcism was inappropriate in that, generally, the possessing entity required some sort of therapeutic intervention (which is supported by others in this field). When the entity stayed well hidden in the inner depths of the mind, then he would suggest extinction by the starvation method which generally resolved the problem.

Crabtree goes on to suggest that perhaps we are a multiple self as stated by Gurdjieff, James and others, and the toolmaker is the "ultimate self" and the tools are a multitude of little selves created in order for one to be more adaptive and clinically healthier. This source of unity self, which Crabtree calls for want of a better term, the "ultimate self" can lead to the ultimate goal which he calls self-possession. The self-possessed person realizes that having multiple personalities available to them is an indication of the array of tools at their disposal. Self-possession is brought about by consciously linking these multiple selves to their ultimate self, from which they come from. As the individual's consciousness residing in each of these personalities becomes more and more aware of the ultimate self as a presence, that connection is strengthened.³⁶

The concepts of possession described by Crabtree goes well beyond the concept of complexes described by Jung to explain this phenomena. Carl Jung described "complexes" as partial or fragmentary personalities which have intentionality and are capable of pursuing a goal. Jung referred to these "figures from the unconscious" as often "uninformed," and resembling descriptions of "the spirit of the departed" which needed to be brought into conscious awareness so that they stop harming the individual. As a method of treatment of complexes Jung often used automatic writing, spontaneous painting and artistic rituals as techniques to contact the unconscious.³⁷

In the course of traditional therapy many psychotherapists have observed the emergence of "subpersonalities" in their work with clients during hypnosis, guided imagery, and emotional catharsis. In cases of multiple personality, subpersonalities assume identities of their own and will often engage in outrageous experiences of which the individual has no knowledge. For most of us, our subpersonalities do not assume such autonomous power.³⁸

Psychiatrist E. Fuller Torrey suggests that there are more similarities than differences between shamans and psychotherapists and that the success rate of both is about the same.³⁹

The use of mediumship, whether for obtaining information or used as a tool for spirit removal, the comments by the Jungian psychoanalyst about Eileen Garrett are appropriate. From a psychological point of view, per psychiatrist Ira Progoff, commenting on the famous medium Eileen Garrett: "It makes little difference if a medium's voice is her own subpersonalities or those of a guide from the spirit world, because they serve the purpose of personality integration. Besides, they provide information which is not available in ordinary consciousness, and this information is useful to her clients." ⁴⁰

In the case of certain typologies of psychic surgery, the "discrete state of consciousness" that utilizes the knowledge of purported spirits to provide expertise that is not known by the individual in the "wake state consciousness," provides a valuable service to the recipients of these abilities.

What has been described in this section is not the norm for human consciousness in Western civilization. It does provide insights into the possibility that just might arise if one was to consider opening one's worldview to incorporate the contingency that such phenomena might exist.

Emerging Therapy Models

In chapter I the emergence of the fourth force of psychology, called transpersonal psychology, was briefly discussed. As stated earlier, transpersonal psychology is a psychology beyond the ego boundaries, and beyond the limits of time and/or space, and is concerned with aspects of psychology related to ultimate human capabilities and potential. This branch of psychology covers the empirical study, application, and conceptualization about such topics as: life, cosmic awareness, cosmic play, individual and group synergy, the spiritual paths, meditation, compassion, and transpersonal cooperation.

Transpersonal psychology recognizes that all psychologies are only models and as such no one model is the "Ultimate Truth," but rather a limited aspect of reality. In this regard, it views all psychology models to be complementary rather than oppositional. While transpersonal psychology is interested in the integration of Eastern and Western psychologies it is not intended to invalidate earlier models, but, rather, place them within an expanded context of human nature.

The following outline focuses on those areas that are most uniquely transpersonal.

1. Consciousness

The transpersonal perspective holds that a large spectrum of states of consciousness exists, that some are potentially useful and functionally specific, and that some are true higher states. The traditional Western view holds that a very limited range of states exist, and "normality" is considered optimal. Traditional psychology models define psychosis as a distorted perception of reality that does not recognize the distortion. From a transpersonal psychology model view point, any one state of consciousness is necessarily limited and only relatively real. Hence, from this broader perspective, psychosis could be defined as attachment to, or being trapped in, any single state of consciousness. From this point of view "normality" would be considered a psychosis if one was confined only to that reality of consciousness.⁴¹

2. Motivation

The transpersonal models tend to see motives as hierarchically organized in a manner similar to that first suggested by Abraham Maslow. Similar models can be found in several Eastern psychologies. Following Maslow, motives can be viewed as hierarchically organized according to their potency and primacy. Those motives with a physiological and survival basis, such as hunger and thirst, are seen as the most powerful and prepotent. When these are fulfilled, less powerful needs such as security, social belonging, and esteem are thought to become effective motivators in their turn. Following their satisfaction emerges the pull to self-actualization, the desire to become and realize all that one most truly is and can become.

Beyond self-actualization lie motives that predominate only in exceptionally healthy individuals and that have been recognized only in transpersonal and Eastern psychologies. One of these is self-transcendence, a drive towards modes of experiencing and being that transcend the usual egoic states and limits of experience and identity, the drive towards the transpersonal realms. Examples of people who

reach these levels--such as the prototypic sage, master, or saint of Buddhism, Zen, Taoism, or Hinduism, all egoic identity and motivation are said to have been transcended. Such a person is moved primarily by selfless service and to respond effortlessly, compassionately, and selflessly to the needs of others.

In ascending this hierarchy, a persons motives shifts from clearly physiological to more psychological. They also appear to shift from the strong to the subtle, from deficiency to sufficiency, from egocentric to selfless, from avoidance to approach, from external to internal reinforcement and from traditional psychology models to transpersonal models of psychology, sociology, and philosophy.⁴²

3. Identity

Traditional Western psychologies usually assume that a persons normal, natural, and optimal identity is egoic. However, Eastern and transpersonal psychologies suggest that the sense of self potentially is considerably more plastic than is usually recognized.

Transpersonal psychology suggests that our sense of self can expand to include both the mind and the world that we usually regard as "other" or "not me." Thus, those personality traits, emotions, motives, and thoughts that are condemned, repressed, and projected as a persons unrecognized shadow can be recognized and reowned as part of the persons self. Since the boundaries between what is "me" and what is "not me" can be changed, the individual can also identify with aspects of the world and humanity beyond the body, transcending the condition of separateness and isolation in recognition of the interrelated unity of existence.

The tools for such awareness are a variety of meditative practices and yogic practices aimed at refining awareness and directing it to a microcosmic examination of the self sense. The egoic self sense is revealed by this precise examination to be fundamentally an illusory product of imprecise awareness and with the dissolution of the egoic self sense, broader identification with humanity and the world generally occurs. In the deepest level of insight, the highest reaches of transcendence, and the furthest limits of development, the me/not me, self/other dichotomy breaks down completely, resulting in a complete loss of egocentricity and a sense of identification with all people and all things.⁴³

4. Defenses

The transpersonal perspective does not view defenses as necessary for effective functioning in healthy individuals, but rather, a maladaptive illusory process in which we attempt to protect what we think we are by reducing or distorting awareness. Since most people think they are an ego, then this egoic self-image is what is defended. The fundamental nature of defenses appear to be distortions of awareness designed to protect distortions of awareness.⁴⁴

With its interest in exceptional degrees of well-being, the domain of transpersonal psychotherapy may extend beyond traditional therapeutic goals and adjustments. While it addresses basic ego needs and aspirations, it does not stop there but is also open to considering the motives, experiences and potentials available to individuals who already have achieved a satisfactory level of coping. In acknowledging a greater potential for psychological well-being, it aims to afford those individuals who are ready to do so the opportunity of working at transpersonal levels. The ideal practitioner would have available a broad range of techniques and approaches from traditional Western psychotherapies, as well as skills such as meditation and yoga. In addition, a transpersonal therapist would also be expected to be familiar with the potential for inducing states, experiences, and degrees of well-being beyond normal ego development.⁴⁵

Transpersonal psychology is a psychology that seeks to expand the science to encompass all human experience and, as such, is more a process of definitions, subject to change as the knowledge of the field continues to expand. Frances Vaughan, Ph.D., suggests that a transpersonal orientation in psychotherapy is determined by the attitudes and values of the therapist, rather than the techniques one employs in the therapeutic process. One's personal beliefs about the nature of human beings and of psychological health and well-being are of central importance in transpersonal work. Yet, since transpersonal psychology does not support any particular belief system, this affirms the individual the freedom to choose whatever beliefs are their truths according to their personal experiences.⁴⁶

The transpersonal view includes the humanistic aspects. For example, each person is seen as capable of self-healing, and naturally seeks to enhance oneself, to grow and to actualize her/his potentials. In addition, this transpersonal view also recognizes and affirms the natural impulses towards expanding awareness of transpersonal dimensions of experience, while supporting a balanced integration of physical, emotional, mental and spiritual aspects of well-being.⁴⁷

The concepts of health and well-being thus extend far beyond the absence of pathology or disease. Each individual is to take full responsibility of her/his life, including states of consciousness and mental health. In light of this premise, it is necessary for therapists to have done this consciously themselves, since one can effectively teach only those values that one actually lives. The transpersonal therapist thus serves as both a model for the client and as a facilitator of personal growth. The goal is a state of being which the therapist models, and the client can observe its usefulness. The transpersonal therapist teaches the client to rely on her/his own inner resources for further growth and development.⁴⁸

Transpersonal experiences have been defined as experiences in which consciousness extends beyond ego boundaries and beyond the ordinary confines of time and space. They are within the spiritual domain and have an implied understanding and experiences in expanded or higher states of consciousness which would enable them to relate directly to the client's experience. In transpersonal psychotherapy it is not enough to intellectually know about the terrain of altered states, the therapist must have traversed at least some of the transpersonal terrain themselves in order to facilitate the passage of a client through what can be disturbing and unfamiliar territory.⁴⁹

The transpersonal level of therapy corresponds to the stage of self-transcendence, where one no longer experiences self as totally isolated, but as a part of something larger, with a feeling of connectedness with everything. This level does not exclude the lower levels such as ego and existential, it only subsumes these levels and goes beyond them, working with the experience of the individual, both as a separate entity and as an integral part of a larger whole.⁵⁰

In transpersonal therapy, the primary work itself is on consciousness. When one's consciousness changes, behavior changes. The more one is aware of one's own dynamics, the more one is capable of acting responsibly in the world. The therapy shifts away from contents of experiences to consciousness as the context of experience. One has created a reality within one's mind and lives one's life according to that reality and, thereby, is identified to that reality. One can alter that reality through the process of disidentification from that experience by becoming the observer, without judgment, in which she/he sees all aspects of personal experiences as a part of the growth process, in which she/he is the designer, not the victim, of her/his reality. When this is understood, the individual then focuses on what she/he wants and not what she/he thinks that she/he has.⁵¹

According to Vaughan, "What is discovered is that the contents of consciousness are always changing and that the effort to change or avoid what we call states tends to perpetuate them and give them undue importance." ⁵²

The successful outcome of therapy, according to Vaughan, at the transpersonal level is a notably marked shift in motivation by fully accepting the contents of experience and is motivated by the realization of connectedness with all life and by participation and service in the world. The therapist models "being" as well as behavior and provides a safe place for clients to discover who they are in the context of their experiences. The treatment will vary to suit the individual and the circumstances. What is transpersonal is not necessarily the content, but the context in which the process unfolds.⁵³

Transpersonal psychology, at some point in time, becomes the study of Essence. The study of Essence to date has generally been relegated to religion and metaphysics in the West. Now it comes to the forefront in a psychology model. The study of Essence is the study of one's soul. This Essence is the unifying center behind the personality. It is the knowing Self, residing in a realm beyond concrete reality, which contains the essentials about us, our purpose and unique mission in life. Transpersonal psychology acknowledges the indwelling spiritual component of the Self that is behind our body/mind, that is also an organic part of the human psyche.

One author has defined the process as three stages: Becoming, Awakening, and Being. The Becoming stage is namely personality development. This entails the development of the physical, emotional and mental bodies, and, when personified encompasses the qualities of Right Action, Right Feeling and Right Thought. At this point the person has an integrated personality, composed of three essential characteristics: physical well-being, balanced emotions and mental clarity. When one allows the natural drive at each level of consciousness to fully express itself, one moves gracefully and with ease toward personality integration.⁵⁴

The next step is Awakening. This is the bridge between personality and being, this is the process of Becoming. This reflects the notion of rebirth. That, if I no longer follow the dictates of my ego and surrender to the Higher Self, the self I really am, I will be reborn into truth. This is the process of separating the thoughts of the lower mind, from the thoughts of the higher mind. One learns to step outside of themselves to be an observer of self. The observer can see what is going on without distortion of the analytical mind or the static interference of the emotional reaction. One can also observe from a position of nonjudgement. Issues and events are no longer seen as good

or bad, black or white, but in terms achieving or not achieving an objective. This process prepares one to move into the realms of higher consciousness by preparing the mind. This is the converging point of the heart and the mind coming together to become in harmony with one another. Essence is dependent upon personality for its expression in the world. The Higher Self must attach itself to the Lower self for its existence.⁵⁵

The next stage is that of Being. Being is the formless world that is our human Essence. This higher world is identical to the lower world, only reversed. Being entails the development of three qualities that are the spiritual aspect of the three qualities in the personality: Active Intelligence (Higher Mind) to provide Illumination, Love/Wisdom (Higher Emotions) to provide Revelation and Love/Will (Being) to provide Transformation.⁵⁶

Transpersonal psychology is a psychology from the top down. This psychology model perhaps could be considered an enlightened model of human nature. The practitioner sees people in perfection and then attends to the blocks and misconceptions that inhibit individuals from realizing this potential wholeness. From a therapeutic approach one could say that there are four models of intervention to assist a person. The models are: medical, psycho-social, self-actualization and enlightenment. The medical model is the focus when a person is physically ill. This could be called a physical healing model so it includes all aspects of physical healing techniques. The purpose is to bring the clients health from below normal to normal physical wellness.

When a person is physically well, she/he will seek relief on the psycho-social level. The purpose of this level is to resolve intrapsychic conflicts and interpersonal relationship problems. There are many therapy models available for use in this area. The eclectic therapist can utilize the model most suitable for the client. The goal is normalcy or balance within one's psycho-social structure.

Once this level is achieved, some people will seek to go beyond normal functioning; they choose to seek the actualization of their potentials. The goal at this stage is to turn a person on to their strengths, talents, wishes and dreams, assisting them to live life more fully, enhancing what is already healthy and functioning. The human potential movement is an example of this kind of work.

When a person has advanced into the self-actualization level of functioning, if she/he continues to grow, the next stage is to begin seeking enlightenment (total conscious awareness of the human being and the universe). At this level the Spiritual paths are individualized. There is no one path appropriate for everyone at every stage. This level of growth has the

broadest perspective and it can utilize all the other models, when appropriate, without judging one as "good" and another as "bad." The person is beyond norms, what is, is. If the person has Essence or Soul memory (which can be recalled through conscious or other-than-conscious means) the individual can utilize that memory to transcend the lower levels of the personality into the higher levels. If one has no Soul memory one travels the path of the Outer World of Experience evolving unconsciously rather than consciously. Both paths will get to the same place, one only takes more time.

Transpersonal psychology is a psychology of spiritual development. It is this aspect, acknowledgment of the soul, that separates it from Humanistic psychology and the other psychology "forces."

Dr. James Fosshage, Director of Clinical Research of the National Institute for Psychotherapies, indicates that new developments in psychology are affecting the concepts and understanding of people and are increasing the utilization of human resources in the prevention and treatment of mental and physical illness.⁵⁷

The transpersonal therapist utilizes these new developments and integrates them within the structure of the therapy. The use of modern forms of Western meditation which have been devised are very practical and well suited for clinical use. Meditation provides a physiological and psychological effect on the meditator. Research indicates that meditation tends to elicit a profound state of rest in the body, with a predominate generation of alpha waves and occasional theta waves. Meditation also appears to affect personality both in an immediate sense and in terms of its ability to alter character traits.⁵⁸

Carrington also concluded that combining psychotherapy and meditation is frequently more effective than either of these interventions alone.⁵⁹

Meditation on the part of the therapist also appears to be of value to the therapeutic process. On occasion, during meditation valuable symbolic information has been received that provided valuable insights into the clients psychodynamics. Preliminary investigations into the practice of meditation by therapists showed a significant improvement in empathic abilities over nonmeditative therapists.⁶⁰

Since the mid 1970's a great number of humanistic and transpersonal psychologists, psychiatrists and psychotherapists have come to realize the overlap between parapsychology (Psi) and psychology. Carl Jung has written that, "We can no longer practice any psychology that ignores the existence of the unconscious or of parapsychology."⁶¹

Stanley Krippner and Gardner Murphy past president of the American Psychological Association, have been very outspoken about the need to have a new perspective about psychic phenomena, and the evaluation and utilization of such phenomena by both the therapist and the client. According to these two eminent individuals, a psychologist needs to be interested in devising methods to scientifically study the spontaneous ability of a sensitive or psychic, rather than attach undue importance to the narrow scientific model or techniques in parapsychology as developed by Rhine.⁶²

Traditionally, most psychoanalytic theorists hold that dreams represents one's past. According to Krippner, precognitive dreams present a concept of the universe which has no relationship to the past experiences of the dreamer. This concept differs greatly from the psychoanalytical model.⁶³

Jung often drew from Eastern philosophy in an attempt to understand such phenomena as precognition so that these paranormal events could be integrated into his own life.⁶⁴

Krippner indicates that while the humanistic psychologists accepts as valid a wider spectrum of human behaviors than most other psychologies these factors--including ESP and PK need to be integrated for the individual to attain self-actualization.⁶⁵

Krippner and Garner go on to say that biofeedback experiments show that ESP, as measured by card-guessing, appears to be activated by shifts in consciousness, as measured by the generation and suppression of alpha wave activity. The altered state of consciousness is considered as one of several valid modes of awareness by which an individual can develop a greater understanding of self and world.⁶⁶

Accordingly, the humanistic and transpersonal psychologist places a high value on creative and transpersonal experiences and could benefit from the reading of relevant parapsychological literature to increase her/his understanding.⁶⁷

The transpersonal psychotherapist needs to have experiential and theoretical knowledge of these transpersonal experiences, according to Stanislav Grof, M.D., and Scholar-in-Residence at the Esalen Institute in California. These experiences can evolve in a number of ways such as; psychedelic drugs, meditation, spiritual development, and spontaneous Psi phenomena. When they do not fit the reality of the recipient they can cause significant trauma to that person's psyche.

Certain transpersonal experiences can be expressed in terms of "objective reality." These include cases of precognition, clairvoyance, time travel, out-of-body experiences, traveling clairvoyance, and telepathy. Another broad category of transpersonal experiences that are not part of "objective reality," in the Western sense, includes experiences such as communication with spirits of deceased human beings, identification with archetypal figures and mythological creatures, encounters with suprahuman spiritual entities or various deities, activation of the kundalini (Serpent Power) and opening of the spiritual energy centers (chakras), experiences in universes parallel to ours, or consciousness of the Universal Mind.⁶⁸

Transpersonal and humanistic psychology, with its emphasis on openness, authenticity, and honesty in the patient-therapist relationship, creates a favorable position to incorporate ESP in the therapeutic process. The person-to-person relationship which is regarded as more important than the specific techniques one might use in the therapeutic process, also tends to create the environment where the patients may have telepathic experiences concerning their personal lives or that of the therapist."⁶⁹

There are several principles in effective psychotherapy that also apply to healing, whether accomplished with allopathic medicine or with unorthodox healing methods. These principles are:

- (1) A shared world view that makes the diagnosis and naming process possible.
- (2) Positive personal qualities of the healer that facilitates the client's recovery, generally these are rapport, compassion, and empathetic understanding.
- (3) Client expectations of recovery that assists the healing process.
- (4) A rationale to explain the illness.
- (5) Specific techniques, materials, and healing procedures that are appropriate to the illness and conducive to recovery.⁷⁰

Dr. James Fosshage also says that psychological factors, often elicited in a human interaction, have emerged as an extremely potent force in the healing process, whether the problem is predominantly emotional or physical. Regardless of the varied explanations of the illness, the most important factor is this two-person interaction where both have the utmost faith and confidence in the healing rationale and methodology.⁷¹

Carl Rogers, an eminent psychologist has said that "accurate empathy, nonpossessive warmth, and genuineness" are of crucial importance in producing effective psychotherapy. Rogers went on to say that "Intellectual training and the acquiring of information has, I believe, many valuable results--but becoming a therapist is not one of those results." ⁷²

The techniques utilized to "attune" to the healee by the healer, or the "tuning in" by the psychic in doing a reading are all methods to firmly establish rapport and empathy. In Neuro-Linguistic programming one learns to mirror another persons physiology to develop a understanding of their mental state. This process can also be used in healing or psychic readings where the healer/psychic paces the healee's/readee's breathing, and, when they are synchronized they are in tune and the healer can then know what is going on inside the client.

Psychic Counseling

A growing body of literature and individuals support the ever growing need for therapists that have knowledge of parapsychology in order to be more effective in their work with clients that have undergone, or are currently undergoing, psychic phenomena in life.⁷³

A rather new realm of counseling has developed in the psychotherapy field which can be defined as "psychic counseling." In the clinical sense this term means to be counseling individuals that have psychic experiences or spiritual awakening experiences that do not fit within their concept of reality and these experiences create problems in that individual's everyday life.

Parapsychology has shown, through numerous rigorous studies, that humans have a psychic potential that reaches beyond the boundaries of present scientific understanding. It presently remains up to the individual to somehow integrate psychic experiences and abilities into a personal conceptual framework. To become aware of one's own psychic capacity, however, may require a mental reorientation regarding one's previously held concept of reality, a modification of self-image, and a reconciliation with predominate societal attitudes. In response to this situation, psychic counseling has emerged to give credence to the psychic potential in humans and to facilitate the integration of the psychic experience.⁷⁴

Dr. Eleanor Criswell, Ed.D., Co-Director of Psychic Integration Institute (PII) and past president of the Association for Humanistic Psychology, along with several other psychotherapists designed a training program in psychic counseling. The framework for this client-centered approach to psychic counseling considers 1) the psychic experience 2) the psychic counseling process; 3) the psychic counselor; 4) counselors as psychic and 5) the training of the psychic counselors.

Psychic counseling differs, of course, from what is commonly called psychic readings in which ESP abilities of the reader are used in relating information about the individual. The psychic counselor focuses on the problem or concerns of the client which have been defined as having a psychic nature. Psychic counseling does not rely so much on the psychic capacities of the counselor as on the ability of the counselor to provide an atmosphere in which individuals can healthily integrate their psychic experiences with the rest of their normal living.⁷⁵

The Psychic Integration Institute differentiates between a client that is psychic and one that is sensitive according to the source of their experience. The person is classified psychic if their experiences are coming from other than themselves, such as a medium receiving guidance from spirit guides or other entities. If they derive their experiences from themselves in the manner of precognitive dreams or telepathic experiences, they are considered sensitives.⁷⁶ These definitions are not in accordance to parapsychology definitions and only apply within the context of psychic counseling as presented.

Psychic experiences may become perplexing, frightening, or disorienting to an individual. Whether a psychic experience becomes a problem depends on the capacity of the individual to assimilate the experience in a meaningful and positive manner. To the person who has had few or no previous psychic experience, even a common experience can be very frightening to them. Such experiences may include, hearing, seeing or sensing energies, or strange things around one's self, or the feeling of being outside of one's body. Many clients want to protect themselves from the unwanted experiences; others want to control the experiences so that they can regulate when they are having them.⁷⁷

Perhaps one of the most common psychic problems, is the lack of validation received by individuals regarding their experiences. Significant persons in the client's life fail to believe, let alone support, the individual who may be having psychic experiences for the first time. The non-acceptance of spouses and friends can serve to prevent acceptance by the person of innate psychic ability. Frequently such individuals have been hospitalized in mental institutions and have sometimes undergone electro convulsive therapy (ECT) and other somatic treatments in order to stop the psychic process.⁷⁸

Psychic development can be a problem if the unfolding is too fast and they are uncomfortable with their experiences. Others try to do it all now and get overwhelmed in their new experiences.

In the psychic counseling process, the psychic counselor works towards seeing the psychic experience through the eyes of the client to understand

how the person feels about the experience. In doing psychic counseling, one does not presume what is right for the client, but assumes that the client has the capacity for integrating the psychic experience. An attitude of unconditional positive regard for a client conveys to the psychic client an acceptance free of evaluation and judgement.⁷⁹

Psychic experiences are frequently misunderstood by others in such a way that the person has great difficulty in balancing her/his attitudes against the attitudes of others. It is not the function of the counselor to interpret the experience, but rather facilitate the client's exploration.⁸⁰

In facilitating such exploration, the client might begin by looking at the obvious. The client could be experiencing psychic experiences that were not solicited in one's practice of yoga, meditation, or other personal growth techniques which can awaken psychic abilities. Self disclosure by the counselor is a way of not robbing the person of their experience and yet conveying an empathic identification. Sometimes that is all the person needs--simply to know that another person has had a similar experience. This can have a therapeutic effect. A session can be a time of sharing, a place to receive affirmation.⁸¹

Criswell and Herzog go on to say that their greatest breakthroughs, their greatest insights and progress have come from attentive focusing on the client's description against the background of what is currently known about such experiences through parapsychological research and spontaneous accounts. The psychic counseling process usually follows a consistent pattern: there seems to be a movement from confusion and fear to understanding and increased self-acceptance. In the process of exploring the client's beliefs surrounding psychic experiences, the client begins to discover her/his personal power and explores what these experiences means in terms of everyday life. The next step is when clients begins to make self directed decisions about these psychic experiences in their lives. Having come to terms with their psychic natures, clients sometimes decide to use their abilities by developing their mediumistic tendencies through further study or by using them indirectly in their work, such as being a highly empathic psychotherapist.⁸²

In addition to having good counseling skills and the capacity to provide a supportive atmosphere for the integration of the psychic dimension, it is important that the psychic counselor have a good background in parapsychology. The counselor should also be familiar with the scientific, spiritual, and occult perspectives of the field, since the philosophical orientations and backgrounds of psychic clients are diverse. While transcending present therapies by focusing on the paranormal, the psychic counselor should have an understanding of current mental health models

and psychopathology. An underlying emotional disturbance or a severe disorder accompanied by psychic experiences may require a different counseling approach. The counselor must know when to refer the client to another specialist such as a psychiatrist, when the person is clearly psychotic, and to the neurologist, when they are exhibiting signs of possible brain damage. There are still other psychophysical conditions having Psi like experiences as a by-product, to which the counselor must be alert.⁸³

Every counselor has some psychic ability and is capable of utilizing these capabilities within the therapy process. Montague, Ullman, Jule Eisenbud and many other psychiatrists have reported phenomena which related to the psychic experiences of the counselors, psychotherapists, and psychoanalysts themselves. A number of counselors have noticed spontaneous psychic experiences during counseling, and some find it meaningful in their work. Apparent Psi information comes to the psychically oriented counselor in the form of intuitive hunches or images, sympathetic body sensations and other systems via any one of the primary sensory systems, clairsentience or "direct knowing." In learning to be aware of these images and sensations and trusting them, the psychically oriented counselor further validates her/his perceptions in the counseling relationship.⁸⁴

The program established by PII includes the training of the psychic counselor. According to Criswell and Herzog:

The psychic counselor must have a thorough grasp of traditional psychotherapeutic knowledge in the following areas: Psi and psychopathology; parapsychology research; spontaneous accounts of psi; psi conducive states of consciousness (i.e., hypnosis, meditation, sensory deprivation, biofeedback training and other altered states of consciousness); religious systems and psi; commonly held occult and metaphysical belief systems; historical accounts of psi; anthropology and cross-culture psi; accounts of gifted psychic, and so forth.⁸⁵

To better understand the global spiritual awakening and the need for this type of counseling, one need only review the history of the Spiritual Emergency Network (SEN). The SEN was formed by Stanislav Grof and Christina Grof in 1980 in response to a great international demand for a new understanding of "unusual" states of consciousness and experiences associated in the process of spiritual awakening. The SEN project has since been incorporated as an adjunct function of the California institute for Transpersonal Psychology in Menlo Park, CA. The world need is self evident. As of 1985, SEN had 41 regional centers around the world and 1500 transpersonal therapists, and counselors available for individuals having problems arising from spiritual development or practices.

Spiritual development practices, which release the energy that has been bound up in the structures of the old self-image and world-images, and the issues that one has relating to these images, can be immense. This release of energy and the hidden beliefs in the subconscious mind can show the same symptoms as mental illness. There can be a broad range of severity, from horrendous to mild, depending perhaps on how vigorous the resources of a person's consciousness are, and how rich in its repertory one's psyche might be. The handling of it is the same throughout. Through this process one needs a partner that has wisdom and compassion or love. The partner is the transpersonal therapist.

Summary

According to the University of Chicago's National Opinion Research Council PSI Experience Poll in 1984, there is an increase in the respondents' willingness to discuss Psi experiences and beliefs. Some of the results of that poll are as follows; 67% of widows had contact with the dead; 67% experienced ESP and déjà vu; 31% experienced clairvoyance; 29% had visions; and 73% believe in life after death.

When 2/3 of the U.S. population have experienced some aspect of Psi, it's pretty hard to say that it does not exist. The fact that it does exist, and, to a very large segment of the population, in a very real, personal manner, indicates that it is a part of our human heritage. Psychic ability is yet another aspect of the human dimension that can be utilized for the betterment of one's self and humanity.

While very little has been written as to how they Psi skills can be utilized in the actual therapeutic process, it is self evident that such skills are used either consciously or unconsciously.

Some training centers now recognize the importance of developing and utilizing the full capabilities of the human psyche and its range of consciousness and experiences which include both the Psi experiences and the transpersonal experiences.

There is a saying in spiritual development to make sure that your spiritual teacher has already walked the path so you both don't fall into a hole. The transpersonal therapist or the transformational therapist must have walked, or is walking the path, so that she/he can counsel and assist others along the way.

The spiritual path to transcendence brings with it the release of the hidden and unwanted beliefs in the subconscious, the shadow, as these are barriers to the total Unity that one is looking for. In this regard, one becomes more

healthy on all levels as all non-truths or beliefs are released. The process leads to higher levels of wellness, but requires therapists and counselors that understand the process of spiritual evolution and transcendence.

If Ken Wilber and the New Age thought are correct about the uplifting of the planetary consciousness, higher states of wellness will eventually become the norm rather than the unusual. This means that the whole concept of health and health practitioners, mental and physical, also needs to be uplifted to that of the transpersonal models. This trend does appear to be starting as indicated by the new schools of transpersonal psychology that are emerging, and the new paradigms that are evolving from many traditions and disciplines.

CHAPTER V

**THE USE OF PSYCHIC AND MEDIUMSHIP ABILITIES
AND ENERGY IN PSYCHOTHERAPY AND HEALING**

Introduction

This chapter is the synthesis and integration of all the topics formerly discussed in the previous chapters within the context of a model for psychotherapy and healing.

Dr. Jerome Frank, M.D. has stated: In the realm of paranormal healing, few Western therapists have the interest or courage to ask how laying-on-of-hands or telepathic healing, relate to medical-surgical or psychological therapies. Dr. Frank goes on to say: "Perhaps, with time, the question will acquire increasing legitimacy." ¹

This section provides a model of therapy that fully utilizes not only laying-on-of-hands and telepathic healing but the full spectrum of psychic and mediumship abilities within the context of spiritual healing and psychotherapy. The healing model has been developed over the past five years and has been taught to other individuals for the past three years. The basic model is unchanged, only the skills used within the model has changed.

The model utilizes all of the aforementioned topics, including altered states of consciousness, body/mind and spirit interconnectedness, dichotic learning, meditation, imagery, healing energy, levels of consciousness, hypnosis, life after life, reincarnation, physical and mental mediumship, etc., within the concept of a therapy model. In fact, the therapy is to deal with the issues that surface during healing session.

In doing this type of healing and therapy, it is strongly suggested that the new models of therapy also be utilized. For the author, this includes the use of Neuro-Linguistic Programming, Milton Erickson type hypnosis, and Yoga psychology.

The model, that will be described in great detail, fits very well into the concept of Transpersonal Psychology, yet it is not implied to mean that any other individual in Transpersonal Psychology would agree with all or any of the methods, cosmology, or philosophies utilized within the context of this model. The client has no need to believe in the model for it to work. The only requirement on the part of the client is a desire to heal oneself.

The word "heal" as it is used within the context of the therapy model, is the healing of any emotional, mental and spiritual beliefs that interferes with one's union with one's Ultimate Self. The beliefs that create the pain or discomfort in one's life, and/or the beliefs that do not provide for satisfaction of the inner spiritual aspects of one's nature which creates separateness with one's Ultimate Self.

These beliefs, and the emotions related to these beliefs, have a tremendous effect on the health of the individual at the physical level as well. So the effects are also realized in the individuals physical body, as well as in one's psychological state. The shaman was/is a spiritual healer; her/his concern was/is for the spirit first and the physical, emotional and mental aspect secondly. Spiritual healing, be it on the physical, emotion, mental or spirit level, seeks to assist a person in her/his own personal evolution as a spiritual being.

Psychic healing, uses the mind to focus on getting rid of the presenting problem rather than the underlining issue that was manifested as the presenting problem, be it physical, emotional or mental. In psychic healing, the healer is projecting thoughts to create a physical, emotional, or mental change in another person, animal, plant, etc. The ego is very much involved in psychic (mind) healing.

The state of one's consciousness and the objective of the healing, in reality determines whether the healing is psychic healing or spiritual healing. In spiritual healing there is no personal objective for the healer, only what is in the highest and best interest of the healee. If the healee wants to leave the body and go through transition (death) that is fine, and the healing would be to assist in that transition and release negative emotions and thoughts from this life. If the healee wants to resolve the issue, that is fine. If they do not want to get well, that also is their choice and that belief would be expressed to them so that they are aware that they do not want to change. Not wanting to change generally is at the subconscious level and most often is not in one's conscious awareness, so bringing it to one's awareness may assist her/him in the future.

This chapter will also introduce several new subjects namely Neuro-Linguistic Programming, "Other-Than-Conscious" therapy and Yoga psychology which includes the concept of energy centers or chakras. While a general overview of these systems will be presented in this section, the Selected Bibliography provides sources where one can obtain additional information regarding these subjects.

No attempt will be made to justify or validate scientifically the statements and comments made herein. The concepts have already been covered to some degree in earlier chapters, and those concepts provide the foundation by which one can expand upon them. It's best to judge certain phenomena based on the realities at the time of the phenomena without bias in either direction. In the medical profession, drugs are used because they work, even when the scientists do not know why. The author also uses these techniques because they work. One tries to understand enough of what happens so that one can explain it--when necessary to the client or--to students learning the techniques.

This section shall first describe the concepts of Neuro-Linguistic Programming, Other-Than-Conscious Therapy, Yoga psychology and the energy centers or chakras. Next, a healing model philosophy will be described and how this concept is utilized in a therapeutic healing setting. Then some specific aspects of how this system assisted in physical and emotional releases, and psychological and spiritual interventions. Last, but not least, will be some comments about the model and how it relates to future aspects of healing models.

Neuro-Linguistic Programming and Other-Than-Conscious Therapy

A person that is interested in the field of therapy has many decisions to make, the most significant of which is what particular therapy model or models that she/he might endeavor to use as a working model. The author, just like others, had to sort through the vast variety of approaches of strikingly different procedures as psychoanalysis, person-centered therapy, rational-emotive therapy, psychosynthesis, bioenergetics, transactional analysis, gestalt, neuro-linguistic programming, primal scream therapy, Jungian analysis, hypnotherapy, family therapy, provocative therapy, and numerous other approaches to alleviating human suffering. Like some people, the author's approach is to utilize as many of the models as possible, so that he can enter into the clients model of the world and utilize the system that best fits their needs.

In a system of therapy which involves the use of Psi energy, issues come up very fast from both the body memory and the subconscious memory, so that it becomes imperative to have therapy tools that can effectively resolves these issues in a very short period of time. This is why Neuro-Linguistic Programming (NLP) and Other-Than-Conscious (OTC) Therapy became the author's principle methodologies in dealing with these issues.

NLP was formulated by Dr. John Grinder and Dr. Richard Bandler in the mid 1970's. OTC is a concept developed by Dr. Dave Dobson, which is much like the hypnosis techniques used by Dr. Milton Erickson. These two models do work well with each other, as NLP was derived mainly from the analysis of three exquisite therapists, including Milton Erickson.

A technical definition of Neuro-Linguistic Programming is a communication model that includes specific procedures for identifying and utilizing patterns in peoples internal thought processes and external behavior in order to improve the effectiveness of their communication. Neuro means a fundamental tenant that all behavior runs through one's neurology. Linguistic indicates that neurological processes are sequences and modeled through representation systems. Everything you say is what you are. Programming means a process of organizing the components of the system to achieve a specific outcome only to the individual.

In NLP, the theory is that everyone operates differently in how they communicate. NLP is based on the theory that communication behaviorally has three representative systems, visual, auditory, and kinesthetic. This was determined by its founders John Grinder and Richard Bandler after analyzing the techniques of Milton Erickson, Virginia Satir, and Fritz Perls.

The theory is that everyone receives information in all three representational systems but one filters it and tends to keep the information in the conscious mind in the systems one uses the most. One important point is that the human mind can process anywhere from 20,000 to 200,000 plus bits of information per second in the out-of-consciousness state and yet typically it can only process 7 plus or minus 2 bits of information per second in the conscious mind. So there is a lot of information received by our brain or mind but not brought into our awareness. NLP is intended to train one to be aware of more information that one receives, but, still, only a fraction of what is there in the other-than-conscious mind.

NLP is described as a process of communication that uses behavioral cues of a person in order to have more choices as to how to communicate with that person. NLP is only a tool to read the alphabet or cues of a person. The outcome is the effective communication that can result from the use of the tools.

The purpose of NLP is to expand one's conscious mind so one has more choices. The conscious mind represents what one knows, one's map, but the map is not the territory. As one expands one's conscious mind, one becomes aware of a larger part of the territory and, perhaps, even the territory may also expand to or beyond the Universal Mind.

One major theme of NLP is that in therapy one does not need to know the content of the problem. One learns to recognize the problem through the NLP alphabet and the client will tell you how to solve the problem again through the use of behavioral cues.

NLP and OTC both are therapy models that enter into a person's other-than-conscious mind so there is a need to respect the other-than-consciousness of other people. One's thoughts have a purpose, it may make them skewed from what is considered normal, but it is still theirs.

When entering another person's other-than-conscious mind, remember that, for what ever reason, things are out of that person's consciousness. What is in the other-than-conscious should be left there. A part of one's psyche decided that it was best for it to be there. The issue or issues can still be resolved in the other-than-conscious mind. It's just not telling the client what was done. It can be very inappropriate to tell them what they did not need to know.

The key is, that the client does not need to know "why" on the conscious level. If at a later time the other-than-conscious mind deems it appropriate for that information to come forth, it can and does in many cases. The therapist needs to respect the other-than-conscious mind and not bring information into the conscious mind that is best left where it is.

The NLP founders determined that the mind is lazy, and that it likes to put everything into patterns and do it automatically in the other than conscious part of our mind. This presents problems because one forgets the patterns that one created. One needs to break small patterns so we can give ourselves permission to break large patterns.

The behavior of a person also has patterns. The therapist or communicator learns to be an observer of these patterns to better understand the client and to present alternative patterns in a manner that is most receptive to the client. NLP is an effective tool to break patterns, whether they are behavioral or conceptual in nature. An elegant way to help people change patterns is to do it non-verbally by modeling behavior.

NLP emphasizes observation to detect minimal changes in a persons exterior behavior in order to better understand what is going on inside the person. In order to understand more what is going on behaviorally with a person one needs to get the big picture. In other words, look at a person and focus one's eyes at a point about 14 inches in front of them. It is also useful to use peripheral vision to see more detail. In this manner one is focusing on the whole person not just looking at one part of their body. This greatly increases the amount of physiological information one receives.

There are additional clues to understanding what representation system another person is using at any particular time. They are:

Visual Thoughts

Eye Movements:	up and left, up and right, and/or straight ahead with dilated pupils
Head Position:	head tilted upward
Breathing:	high in the chest; shallow or cessation of breathing
Voice Tempo:	quick burst of words; rapid tempo
Tone of Voice:	high pitched, nasal
Skin Color:	paling of color
Muscle Tension:	tight, high shoulders, tense abdomen

Auditory Thoughts

Eye Movements:	down and left; level and to the right; level and to the left
Head Position:	level; tilted to the left; turned so that one ear is directed to the speaker
Breathing:	even breathing with whole chest
Voice Tempo:	rhythmic, even tempo
Tone of Voice:	melodic, resonant
Skin Color:	even coloring
Muscle Tension:	rhythmic, even movements and tension

Kinesthetic Thoughts

Eye movements:	down and right
Head Position:	below the horizontal, tilted to the right
Breathing:	deep breathing low in the stomach
Voice Tempo:	slow tempo, long pauses
Tone of Voice:	low, deep, breathy
Skin Color:	increased, flushed color
Muscle Tension:	muscle relaxation; sudden, abrupt movements

Some key points to remember about NLP, and any therapy model, for that matter, are as follows:

- (1) Internal state determines external behavior.
- (2) What is perceived best by the person is always the choice taken.
- (3) Perception = Reality = Physiology or map but it is not the territory one lives in. The territory goes beyond the map.
- (4) Always check their physiology before asking a client to do anything, to insure that they (and you) are in a physiology sufficient to accomplish the task.

NLP also stresses that there is to be no judgment by either the client or the therapist. Right, wrong, good and bad are judgmental words and need to be removed from one's communications. The purpose of every decision that one makes is to improve one's situation, based on the best knowledge and abilities that one had at the time. The results may not be what one wants now, so additional options need to be added. The function of the therapist is to assist in creating new options. The old way is not removed, the therapists only adds new alternatives based on the immediate situation. It is creating a pattern that says: What is the best way to deal with this situation, in this environment that will provide the best results for oneself and those around oneself. Then that creative part of oneself starts creating new options to choose from which are more suitable in dealing with life's situations.

A major part of NLP is the Reframe. A frame is a nominalization of the parameters of context. One sees, hears, feels an event in a certain manner and comes to a conclusion, that is a frame. A reframe is a new set of parameters for that event. Simply put, reframing means changing a negative experience into a positive one by changing the frame of reference used to perceive the experience. This results in the full alignment of one's conscious and other-than-conscious resources creating enormous power to take action. This can be accomplished by using NLP or OTC techniques.

In NLP one is clarifying the communication patterns that a person is using so that person can define the problem and, in reality the solution. The person has the solution. It's only out of her/his awareness. NLP is used to create clear and precise communication skills through eliminating, if possible, or at least minimizing, unspecified verbs, nominalizations, generalizations, referential indexes, deletions, universal quantifiers, etc.

In OTC, the therapist uses the same patterns that are being eliminated in NLP to assist clients in creating a new mental reality. This new reality is within the client's own construct of how one wants to be in one's world, where the results of these realities is more useful and beneficial to oneself and others around them. An example of this type of pattern used by the author with a client is: "Create in your mind exactly how you would have liked that experience to be; add the sounds that you want to hear, from others and your own internal dialogue; and see the pictures just like you want them to be; and now feel the feelings that go with those words and pictures so you feel just how you want to feel; and now make any adjustments in the picture, sounds or feelings so the whole experience is just how you want it to be."

The construction of patterns used in OTC, or Erickson's hypnosis, are listed below and they use generalizations, deletions, unspecified verbs, etc., within the structure of the linguistics used by the therapist.

Causal Modeling

Cause-Effect: The hypnotist can make causal connections between immediately verifiable portions of the clients behavior and some desired behavior.

Implied Causatives: The hypnotist implies that a behavior being experienced by a client is connected to some desired behavior.

Mind Reading: The hypnotist claims to have knowledge of the internal, unobservable experiences of the client.

Transderivational Phenomena: The hypnotist engages the client at the conscious and other-than-conscious level. Communicating a story just outside of the client's conscious awareness so that the conscious mind is not making the selection of the meaning conveyed by the communication. The client's response is the response selected as the most appropriate to the other-than-conscious needs of the client.

Embedded Question: The hypnotist embeds the question within a verb to form an embedded or indirect question to the client.

Embedded Commands: The hypnotist embeds the command in a covert way that engages active participation on the part of the client at the unconscious level.

The use of linguistic patterns in OTC can be either direct or indirect. In direct mode, one may have the client consciously create a new reality about a past experience in one's mind using the different techniques mentioned. The indirect method is accessing the unconscious mind directly by overloading the logical mind with linguistic patterns so as to gain direct entry into the other-than-conscious realm through the intuitive side of the brain. The telling of stories that closely relate to one's experience also is a method of suggesting change. The mind looks for the deep structure of the message as it is trying to make sense out of what seems to be nonsense. Said in another way, the therapist is planting seed thoughts that the mind evaluates at the subconscious level outside of conscious awareness, and then, when and if it wants to, it makes decisions and acts upon them.

Since people generally do not like to change patterns, one can infer growth which will eventually generate change. These can be the seed thoughts that are planted in normal everyday conversation or planted specifically in the OTC in a therapeutic setting.

Rapport is generally noted as a necessary ingredient for the establishment of a positive relationship between the therapist and the client. NLP teaches one how to establish rapport by being aware of a client's total physiology and assuming that physiology. External behavior, that which one can see neurologically, is made up of the internal composition of the glands, chemicals, muscles, and emotions. So, if one mirrors a person's exterior physiology, one starts to get the same type of feeling that the other person is feeling and, hence, builds rapport with that individual.

The use of submodalities, which are the distinctions the mind makes in the way it represents an experience, is a tool in NLP to have a person intensify a resource in all three representative states so that a resource (past experience) is fully represented in all three channels. NLP practitioners believe that everyone has all the resources one needs within themselves and one only need to build on them. The resource may be strong in only one or two systems, for example visual or auditory, and will need other components added to it, or the person may want to make the experience even stronger than they originally remembered it in all channels. This can be done using submodalities along with other techniques.

Anchors are another term used in NLP to describe a process by which a particular state or moment in time is made available at another moment of time. Anchors are visual, auditory, or tactile (kinesthetic) and can be done

simultaneously in all systems or in one system. The person may or may not be aware of the anchoring. Anchors are used all the time by everyone, what is being described here is the use of them with a specific purpose. When a person has reframed an experience, those new feelings need to be anchored so that they can be accessed any time they might be needed. If one touches a particular part of one's body at that peak moment, that moment and touch are connected together. When one touches that particular spot another time that same peak experience will also come to the fore front.

One form of anchor is a reality anchor, which is beneficial to use when one is going to work in altered states of consciousness. In therapy, one is generally working in a regressed period of time. Simply put, this means you're generally in the past. Past can mean five minutes ago, five years ago, experiences in between lives in spirit form, or a past life, it means not in the present moment. The reality anchor is something solid in this moment in time. An example would be to ask the person: What day is it?, What city are they in?, Can you feel the chair you are sitting on?, What is your name?

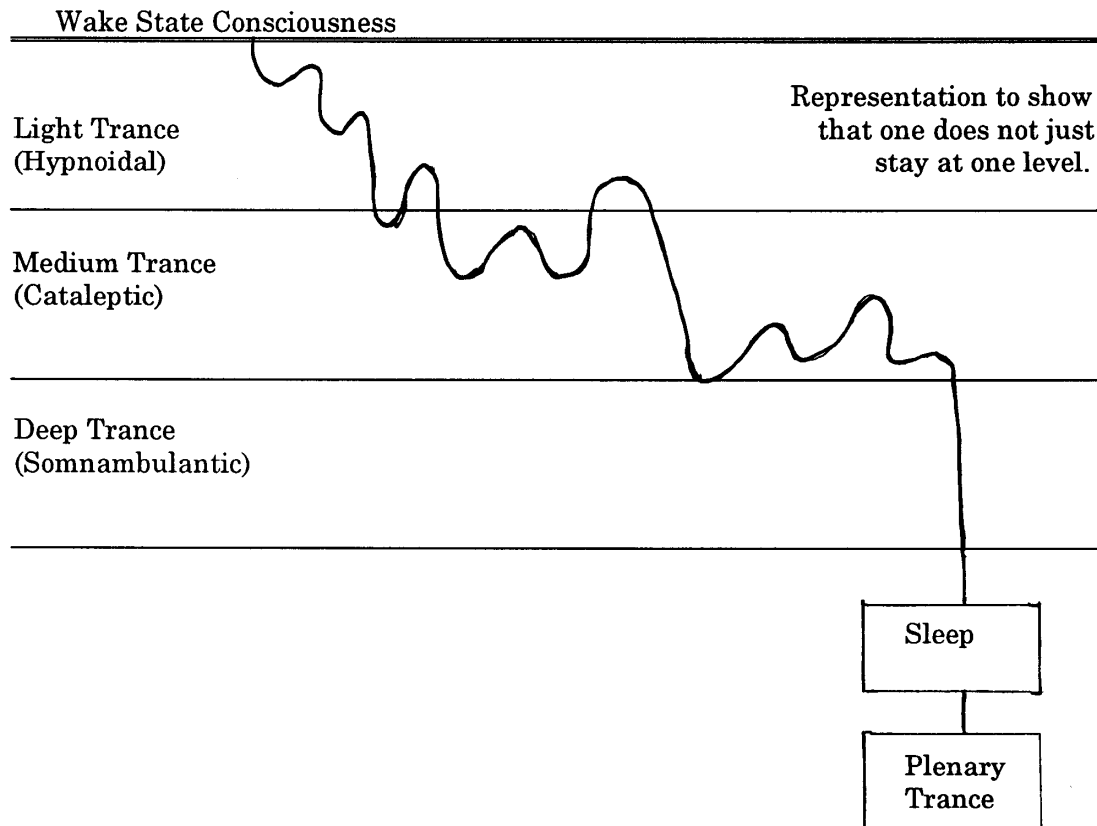
It is important to set a reality anchor before any therapy begins so, in case the client goes to an associated state of consciousness in a different moment in time, there is a solid reality for them to come back to.

Anchors are not new and everyone anchors situations and associated feelings all the time. When one hugs a person out of love one anchors that situation and feeling, when one hugs a person that is sad, once again, one anchors that situation. When one touches an anchor then that situation and physiology and feelings are activated.

The NLP model uses the law of requisite variety and applies it to the neurological behavior system. The representational system (RS), is related to our internal state (IS), is related to external behavior (EB), is related to our internal state (IS), is related to our representational system (RS).

It is apparent that this is a cycle. The more choices a person has in any given situation, the greater the variety of responses that would be open to them. In the same manner, if one wants to change a person's internal state, all one needs to do is change their exterior behavior. Changing their breathing through pacing is the fastest way to change their state.

NLP and OTC believe that we are always in various levels of trance, so in order to have some understanding of a formal trance state the following pictorial diagram may be of some help



There are characteristics for each trance state they are:

- Light Trance: Person recalls everything, fixation of the eyes and the dilation of the eye pupils, maintains a somewhat normal swallow reflex of 4-7 times per minute.
- Medium Trance: Person recalls almost everything (best for client work) tremendous shift in breathing (very shallow), disorientation takes place, swallow reflex disappears, slackness in muscle tone, able to maintain the same body position.
- Deep Trance: Person has no recall, state of amnesia to the conscious mind, other-than-conscious mind does have the information presented in this state.
- Plenary Trance: Very deep trance where all vital signs of life are nonexistent.

These trance states, with the exception of the Plenary trance, are experienced by every person as they go to sleep and wake up. Most people would experience a continuum of trance states moving in and out of all the levels, such as going from a medium state to a light state or deep trance state.

The other-than-conscious (OTC) mind keeps many things in amnesia from the conscious mind as it knows what is best for the organism. This needs to be kept in mind by the therapist so those items that are best left in the OTC are indeed left there. This is being respectful to that person. In therapy many times a person will go into a deep trance state of her/his own volition in order to work issues that are in the OTC and want to be left there. The person will have no recall of the work done in that state of consciousness and it is the responsibility of the therapist not to discuss what went on in the therapy session.

Neuro-Linguistic Programming provides the tools to use within any therapeutic model, for it truly is a communication model. The techniques came from the founders of other therapy models and were the tools of how these exquisite therapists did their work. NLP encourages one to expand one's map of the world. The author is a believer of that philosophy, and has added many additional aspects to his model of therapy. The major components which have been added are the use of expanded consciousness, use of healing energy, and the integration of spirituality within the therapeutic process.

Perhaps the greatest concept in NLP is the acceptance of the other-than-conscious mind and the use of it within the model for both the client and the clinician. The reason one can say this, is because the other-than-conscious mind can also include psychic abilities or what would be called ESP (extra sensory perception).

As a NLP master teacher once said, perhaps it should be called expanded sensory perception. If one keeps in mind that NLP is VAK (Visual, Auditory, Kinesthetic) and ESP for the most part is Clairvoyance (V), Clairaudience (A), and Clairsentience (K), then one might just see that there is a possible correlation between the two systems of communications.

The author firmly believes in the statement that: "One's thoughts are one's reality, and one's reality is one's thoughts." I also know that most of one's thoughts are beyond one's conscious awareness. Creating a new thought or belief in the conscious or other-than-conscious mind creates a new reality that is supportive of the new thoughts and patterns. Since it is the patterns of choice--because one creates them and one is continually modifying them to what one wants--one will always choose to use the new patterns being created.

The techniques that form the foundation for NLP and OTC create a methodology for making changes in one's thought patterns that are fast, efficient, and last indefinitely. The training in NLP and OTC is to learn the techniques consciously and then forget about them. The other-than-conscious part of us will remember just what to do and how to do it very elegantly. In other words let the intuitive mind do the therapy not the logical mind. This concept fits very nicely into the therapy model used by the author as it also is intuitive based.

Yoga Psychology and Energy Centers

It has been previously stated that psychology is the science of consciousness. While that is only a very recent conclusion on the part of some Western psychology models, it has been the basis of Yoga psychology for the past 4000 years or so. The direction of Western psychology has been pathology directed. The Western psychology models are built upon pathology. These models provide explanations and techniques for the intervention of dysfunctional behaviors and mental constructs. Yoga psychology is based on the concept that there are various levels of functioning. In yoga psychology this idea of different levels of being, each able to observe and control the one below, is central. The systematic exploration, development and experimentation with these higher levels is the purpose of meditation and yoga.

Yoga psychology is a psychology of spiritual evolution. The journey is a unitary process in the biological evolution of humankind. First is the psychological evolution from child to adult. Next is the therapeutic evolution from mental illness to health. Lastly, the development of unity consciousness: i.e., nirvana, satori, samadhi, or whatever one chooses to call it. What is often called "higher states of consciousness" and mystical is simply a completion of human development.²

There are five principle levels, or sheaths, described in the ancient writings and the more evolved levels are conceptualized as existing within oneself. Each sheath covers and obscures the more subtle awareness that is interior to it. These five levels or sheaths span the whole spectrum of human nature and provide a continuum for the basis of all growth and evolution. This concept provides a framework for development theory, the therapeutic process, and all the aspects of philosophy, and religion that focus on the unfoldment of one's higher potentials.³

The most coarse sheath is that of the human body, which is called the physical sheath of the Self. One is to learn mastery over the body. By learning to discipline one's body, one becomes physically supple, healthy and relaxed so that one can comfortably pursue the main aspects of yoga, which

involve mental and introspection processes. When one cultivates a relaxed and tension-free posture, one facilitates the process of introspection. Freud also discovered that having the client in a reclining position promoted relaxation which allowed the stream of free associations to flow more freely. The use of introspection is the tool to become aware of one's internal states. One tunes-in to the internal situations of the body so that changes can be made in one's habits and thoughts to provide a healthy environment. One can learn to control the inside of the body as demonstrated by yogis and people trained in biofeedback. In NLP one learns the importance of physiology in relationship to internal states. It is nearly impossible to be sad, with one's eyes looking up into visual. To be sad, one's eyes are usually looking down and to the right in kinesthetic.⁴

The sheath interior to the physical sheath is the energy sheath, which consists of breath. The energy sheath encased in the physical sheath has the same form as the physical sheath. The mastery of breath is the key to mastering the mind and passing beyond the mind into other realms of consciousness. The breath reflects a fundamental relationship with spirit. To inhale is to become filled with creative energy or spirit. To exhale is the elimination of that which no longer is needed. A purification of the living temple within oneself. Breathing is the only physiological function which is both voluntary and involuntary. The mind can regulate it, or its regulation can be left to the body. Breathing is the key to the interaction of body and mind. Breath also serves as a link between a person and the surrounding environment. The act of breathing unites one with the greater ecological system and pool of energy which integrates us into the greater context of nature.⁵

In the annals of history there are many references to body energy. The Chinese called the energy Chi; the Hindus, Prana; the Polynesians, Mana; Wilhelm Reich called it, Orgone and the Russians, bioplasma. Modern investigations of contemporary neuropsychiatrists have found a vital energy body or field which interpenetrates the dense physical body like a web of light beams.⁶

The concept of energy is fundamental in yoga psychology. The yogic notion of energy is unitary and includes both physical energy and mental energy. The term for this energy is "prana," which is the energy which underlies all activity, physical and mental. The pranic level or sheath might be called the level of pure energy. This pure energy manifests itself in both the mental and physical levels, though their basic nature is different. At the physical level the basic state is matter and at the mental level, thoughts. Within yogic theory there is a hierarchy of such levels which form a continuum. At each level there is a higher degree of consciousness than in the previous level. Each level has what is called an energy center, or chakra, located along the

axis of the body. Within the body are a great number of pathways or channels for the energy to move. This movement of energy can be controlled through certain breathing patterns. Different states of consciousness can be obtained by using certain breathing patterns. So one can see, then, that prana serves as an intermediary between the body and mind.⁷

The next sheath interior to the breath is the sheath that consists of the mind. The mental body is studied through introspection and meditation. The mind is not the brain. The brain is part of the physical aspect of one's self, like a computer, whereas the mind is like the program that runs the computer. One observes the functioning of the mind without being swayed or overwhelmed by thoughts. To the yogi the mind is both an obstacle to higher consciousness and also the bridge over which one may reach the higher consciousness. Development of control over the mind is deemed an important step in yoga psychology so that it can be used as a development tool.⁸

In the higher realms of consciousness one becomes aware of an even more subtle sheath, the intellectual or intuitive sheath, the buddhi sheath. This buddhi is a structure that grows in strength with the unfoldment of the personality of self. This higher mind can discriminate the tendencies of the lower mind that lead to anxiety and mental anguish. This buddhi is both a part of the lower mind and the higher mind. Through discernment and detachment from the activities of the lower mind, it eventually emerges to a vantage point which exists above the normal activity of the train of thoughts. The realm of pure buddhi is conceptualized in yoga as the fourth sheath which lies beyond the body, the energy and the mind.⁹

The subtlest sheath is attained as the buddhi eventually gives way to a more reflective state. When integration is complete, consciousness is expanded to the point where judgments are no longer necessary. One has global awareness, yet all is regarded dispassionately with no need to classify the phenomena of the world into "good" or "bad" categories. This global "witness" consciousness is called the "blissful sheath." Even beyond this global awareness, is consciousness without an object. This is called in yoga, the Self, or Purusha. Consciousness resides in the Self rather than in the mind. The Ultimate Self uses the mind as an instrument of knowing. According to yoga psychology the difficulties one has in living is created by being identified with those lower aspects of the mind and body.¹⁰

Yoga psychology is a development process by which one identifies with each more subtle sheath until one develops the discrimination and distance to observe it. The objective is to discover that the "I" is not the mind, the "I" is a center of pure consciousness. The buddhi and blissful sheaths do not

identify themselves with the other sheaths and do not yield to the passions of the body. In this manner they provide detached wisdom that assists one into liberation from that which one identifies with.¹¹

Yoga science is very complex and extensive. It includes a science of the body, an understanding of energy levels which govern the body's function, a study of the mind and higher states of consciousness, as well as a cosmology of the nature and structure of the universe. One of the aspects of yoga philosophy is the world of inner experiences, where one explores one's emotions, and learns about oneself. The framework to understand these inner experiences from different perspectives is provided by the concept of centers of consciousness, which are also called chakras.¹²

Chakra is a term that comes from Sanskrit and is a word which means center or circle. Within the body one has seven major chakras or energy centers. There are many minor chakras throughout the body. In acupuncture one talks about meridians and pressure points which are also associated with these energy centers. In Western medicine one has the endocrine glands and the nervous systems which correlate with these energy centers and their associated distribution systems.

The following table describes the seven major chakras, their location, and the major function of each chakra.

Chakra	Name	Endocrine Gland	Purpose
First Chakra (Sacral Plexus)	Root (Basic)	Adrenal Medulla	Elimination
Second Chakra (Lumbar Plexus)	Sexual	Gonads	Reproduction
Third Chakra (Solar Plexus)	Egoic (Navel)	Adrenal Cortex	Assimilation
Fourth Chakra (Cardiac Plexus)	Heart	Thymus	Distribution
Fifth Chakra (Carotid Plexus)	Throat	Thyroid, Parathyroid	Regulation
Sixth Chakra (Third Eye)	Brow	Hypothalamus, Pituitary	Transmutation
Seventh Chakra	Crown	Pineal	Integration

Eight Chakra (Foot)	Ground	None	Earth energy transducer, Inter- connectedness
Ninth Chakra (Higher Self)	Trans- personal	None	Cosmic energy transducer, Eternal life

Each of these energy centers has a level of consciousness associated with it. As one becomes aware of the nature of these centers, and their interrelationship, one comes to understand the differences between the various psychologies and therapeutic view points. The concept of therapy models based on levels of consciousness, in essence, connects all the models together. Each model of psychology is according to the needs of that level of consciousness. Each model basically deals with life situations at the level it is on or those below it. It would not effectively handle the higher level of consciousness situations as it would not understand the concepts at the higher level of consciousness.

The following table is taken from the book Psychotherapy East and West by Swami Ajaya formerly known as Dr. Allan Weinstock a noted psychologist trained in the Western tradition. This is a representation which explains the relationship between psychological models and levels of consciousness.¹³

Chakra	Mode of Experience	Psychological Theorists or Models
1- Muladhara (Root)	Struggle for survival	Primal scream therapy
2- Savdhisthana (Sexual)	Sensory pleasure	Psychoanalysis, Reich, Bioenergetics
3- Manipura (Solar Plexus)	Mastery, domination, conquest, competition inadequacy, pride inferiority	Adler, Ego Psychology
4- Anahata (Heart)	Compassion, service, selfless loving, generosity	Rogers, Fromm

5- Vishuddha (Throat)	Devotion, receiving nurturance, trust surrender, creativity, romance and unconditional love	Jung
6- Ajna (Brow)	Insight, witnessing	Yoga, Buddhist Psychology
7- Sahasrara (Crown)	Unitary consciousness	Advaita Vendanta

This concept of conscious centers in the chakras is very beneficial in the therapeutic process. In the first three chakras, the two sides of a polarity are experienced as being distinct from or in opposition to another. In the fourth chakra, one begins to understand the complementary relationships between both sides of a polarity. This duality is present in the fifth and the sixth chakra and converges in oneness at the seventh chakra, when universal consciousness is attained.

In therapy, one strengthens the ego if needed, then one integrates the ego in the heart so that it can move up the spiritual path and be a part of the person's spirituality. This is the path to becoming healthy and fully alive, for now one has found a purpose in life that is meaningful to oneself. One also knows everyone else has their purpose in life and no two people have the same purpose, so one is not trying to change others, only developing one's own self.

In the fourth chakra one leaves behind distrust, desire, pride of the lower chakras and begins to experience a greater sense of unity with others. This center is the heart center, where one moves from preoccupation with one's body senses and material possessions, to a new focus on that which transcends the individual.

In the fifth chakra, the ego surrenders its authority to a universal nurturing center of love and wisdom. The person remains identified with the more encompassing ego, but the center of one's interest is now moving closer to universal consciousness, which becomes the objective of growth. The person realizes the grandeur in all manifestation, from the largest to the smallest. The person becomes aware of the divinity present in and sustaining all existence. The stream of unlimited love flowing from the Divine Mother and Father of this universe is experienced and one realizes that one is loved unconditionally. Now one can begin to accept oneself unconditionally.

At the sixth chakra, one experiences even further disinvolvement with one's limited ego perspective of life situations. One becomes a neutral observer of the melodramas of life, experiencing an underlying unity of being. Finally, at the seventh chakra, one passes beyond all involvement with form and archetypes and realizes the highest form of nondual consciousness.

The chakras, when looked at as consciousness centers, can become integrated as a result of proper meditation or through psychotherapy. Each level of integration is a result of a synthesis that occurs between two polarities. The polarities synthesized at the Ajna, or Brow, chakra is that of the right and left aspect of the personality. The polarities of the throat chakra is that of giving and receiving. Polarities of the heart chakra that are synthesized have to do with the upper and lower halves of the body, and the positive and negative energies that they symbolize. The polarity of the naval chakra, or the solar plexus, has to do with activity and passivity in the sense of dominion and submission. The polarity between male and female resides in the genital or sexual chakra. The polarities involved at the first chakra are between "bad" and "good." Once the polarities have been synthesized at each level one has transcended the polarities of that chakra and moves to the next level for integration. The higher chakras generally are beyond the perspective of most modern psychology models with, perhaps, the exception of transpersonal psychology. All these levels are within the scope of the healing model being presented.¹⁴

Another aspect of the chakras as energy centers needs to be expanded. The energy chakras are, in reality, located in the energy sheath, or what has been called the etheric body in the West. The chakras act as energy transducers to the associated endocrine glands. Through the use of meditation, or other altered states of consciousness, one can redirect energy from one energy center to another to assist in facilitating the function of that center. In the same manner, mental energy can be converted to physical energy and visa versa. In the process of healing, the healer can also direct consciously or unconsciously the healing energy that one is sending to certain energy centers to facilitate the processes of that energy center.

Summary

NLP and OTC therapy models provide the tools to assist the client to replace old beliefs and patterns with new ones in minutes, and sometimes within seconds. Yoga psychology provides a map that can be used in regards to therapy models. The map is a representation of the evolution of the therapy models, but it is only a map, not the territory. It is apparent that each model probably can work very well for the people who are in that mode of experience or are living their lives predominantly out of that chakra or consciousness center.

The researcher believes that many clinicians go beyond any of the Western Psychology Models because one sees that these models do not assist people to move beyond the third or fourth level of consciousness.

In esoteric teachings, the lesson has always been to "know yourself" and to search for the meaning of life: "Why am I here?, What is my purpose in life?, From where have I come?, Where will I go?" These are inborn questions common to every human being and they arise when one starts examining life. These questions are not answered by the psychological models of the West.

When a therapy model is used that incorporates the body, mind and spirit, it then has the ingredients to be able to provide movement from one level of consciousness or chakra to another. By evolving to a higher consciousness center, one achieves a new world view, and the old conflicts or polarities are transcended.

Yoga Psychology does provide a path to the seventh chakra and into Unitary consciousness. Personally, I'm not a practitioner of Yoga Psychology but in reading about Yoga psychology models which are some 4000 years old, one can understand why they have a very complete system. Not only is it very complete, but it parallels much of my own thinking about the essence of life. The Eastern Model is to "know yourself" so one can understand the universe. The Western Model is to know the universe and then find oneself (if one can). The paradigms represented by both are needed, the Eastern and the Western philosophies.

The missing link in the Western Psychologies is the lack of spirituality within these models. Another issue is that, in Western countries, many people do not understand the difference between spirituality and religion. There is a vast difference between religion and spirituality. A religion is a set of dogmas, doctrines, and rituals. A student of religion is not allowed to think or search beyond these sets of rules. But, in spirituality, all of one's human resources are directed towards the search for the spirit only, which is ultimate truth. In religion, faith is never challenged, but in the path of spirituality, faith is established with the help of reasoning based upon direct experience. A spiritual person can be religious, but a religious person is not always spiritual.

The development of spirituality is a personal matter and is accomplished on the inner planes of consciousness. This can be done through groups, or reading books on the subject, but the integration of the concepts and the union of the soul and the mind can only be accomplished within the inner structure of the conscious and other-than-conscious mind. At this level, the purpose and direction of one's life takes on new meaning as these inner questions are brought to the surface in the search for the answers.

These questions are within every person: Who am I?, What is my purpose in this life?, From where have I come?, and Where will I go?

Many times these questions are at the heart of one's personal issues which become apparent in therapy. A transpersonal and transcendental view of the world greatly assists in assisting clients to find their own answers to these questions. This transpersonal view assists the client to discover her/his inner truths and the resources to accomplish her/his spiritual path.

The foundation has now been laid to describe what is called Integrated Interactive Expansive Therapy that is:

1. Integrated, in that the model incorporates the body, mind, emotional and spiritual aspect of the client.
2. Interactive, in that the client and the therapist have to be interactive at all levels of consciousness.
3. Expansive, in that the models of the universe are continually changing and one needs to be changing with them.
4. Therapy, in that the model is a remedial process.

THE HEALING MODEL

Introduction

This healing model has both a transpersonal and a transcendental aspect to it, in that the model utilizes transpersonal and transcendental states of consciousness.

The transpersonal state of consciousness provides access to psychic abilities such as telepathy, clairvoyance, clairaudience, clairsentience, retrocognition and precognition. Some individuals, like myself, also develop mediumship abilities to communicate information from: departed ones, the client's higher self, and helpers from the spirit world such as teachers, doctors, ascended masters, etc. These levels of consciousness also provide access to a wide variety of healing energies that can be used in the healing process.

The focus of the healing is to create what is in the client's highest and best interests from a spiritual development viewpoint. The client decides on some level what she/he wants to eliminate or change, and that is received by the therapist through both cognitive and psychic communication. The use of psychic abilities (Psi), mediumship and energy work are an active part of the therapy or healing session. Healing indicates a change or improvement in

either the physical, emotional, mental, or spiritual aspect of the person, or some combination of change on these levels. There is always a change in the client from a healing session. What that change will be is unknown, so the healer can not guaranty any specific results.

The healee, or client, is totally responsible for her/his healing. If the client does not want to get well or release the problem or belief, nothing the healer can do will be effective. For the most part, people do not know how to consciously use their innate healing abilities. Knowing this, most of the techniques I use elicit clients to actively participate in the healing process. The healer directs the client in how to do much of it themselves. There are two reasons to have the client's active participation. First, it is important to have the client's conscious mind working with the healer in the healing process rather than resisting or negating the effects. The second benefit is that it fosters a nondependent relationship with the healer. In teaching clients how to heal themselves, the healer is empowering them.

This supports my belief that people need to know as much as possible about healing themselves, and not give that responsibility over to another individual. The medical profession knows that the client's mental thoughts about getting well or not getting well are very powerful. Suggesting that the client is responsible for her/his own healing is really saying, that each person is to use her/his own inner guidance as to the types of healing methods to use, traditional and/or nontraditional and utilize them accordingly. The individual is to keep her/his personal power and not give it over to those selected to do the healing.

Before describing the methods I utilize in a healing, it is necessary to expand upon the concepts of the chakras given earlier. This discussion will include two additional major chakras, namely the Ground chakra and the Transpersonal point or chakra, along with the aforementioned seven chakras. There are a number of systems that refer to chakras and there are some slight differences between them. There is no right or wrong system, only differences of opinion.

First Chakra: is called the "Root or Physical Body Chakra" (Sacral Plexus). It provides physical identity and the physical survival functions. A sense of physical security, and cellular intelligence. This is also the seat of the primal or primitive brain. One could say that the DNA of the soul can be found in this chakra. When one is lacking in this chakra it leads to physical insecurity, and body fears.

Gland -- Adrenal Medulla	Color -- Red
Organ Function – Elimination	Element -- Fire
Contains -- Concept, original idea.	

Second Chakra: is called the "Sexual or Emotional Chakra" (Lumbar Plexus). It provides sensuality, sexual identity and generative creativity. When properly functioning it provides positive self-esteem, values of equality, and heroic capabilities. When one is deficient in this chakra it leads to sexual objective mentality, and primitive justice.

Glands – Gonads	Color -- Orange
Organ Function -- Reproduction	Element -- Water
Contains -- Feelings.	

Third Chakra: is called the "Survival or Egoic Chakra" (Solar Plexus). It provides personal power and mastery. It is the seat of the emotional brain. It provides selfless service, self mastery, and mental-emotional balance. When one is lacking in this chakra one yields to the ego-centered power drive, and one's need for immortality, it also creates alienation and anxiety.

Gland -- Adrenal Cortex	Color -- Yellow
Organ Function – Assimilation	Element -- Air
Contains -- Opinions.	

Fourth Chakra: is called the "Heart or Universal Connection Chakra" (Cardiac Plexus). It provides unconditional love, compassion, devotion, and cosmic power. When fully functioning its qualities are selfless love, courage, independence, and one's natural healing abilities. When one is lacking in this chakra one yields to hyperemotionality, imbalance, amorality, and cowardice.

Gland – Thymus	Color -- Green
Organ Function – Distribution	Element -- Earth
Contains -- The second or true feeling underneath the first feeling.	

Fifth Chakra: is called the "Throat Chakra" (Carotid Plexus). It provides knowing, creation, non-discriminating, psychic knowing, and creating by the word. When one is lacking in this chakra one yields to controlling through knowledge, with a sense of impotence in manifesting what they want.

Gland -- Thyroid, Parathyroid	Color -- Blue
Organ Function – Regulation	Element -- Ether
Contains -- Expression.	

Sixth Chakra: is called the "Brow Chakra or Third Eye." It provides intuition and cosmic seeing. When properly functioning one will experience clairvoyance, see clearly the multiple aspects of reality, express artistic creativity, and awareness of archetypal connections. When one is lacking in this chakra one yields to the inability to recognize the multiple aspects of things, being manipulative, and the lack of intuition.

Gland -- Hypothalamus, Pituitary	Color -- Indigo or Violet
Organ Function – Transmutation	Element -- None
Contains -- Inspiration, Insight.	

Seventh Chakra: is called the "Crown Chakra." It is the spiritual and master level of being. It is the release or surrender to the universe, or God within. When one is lacking in this chakra one yields to control, nor has a sense of essential goodness.

Gland – Pineal

Color -- White

Organ Function – Integration

Element -- None

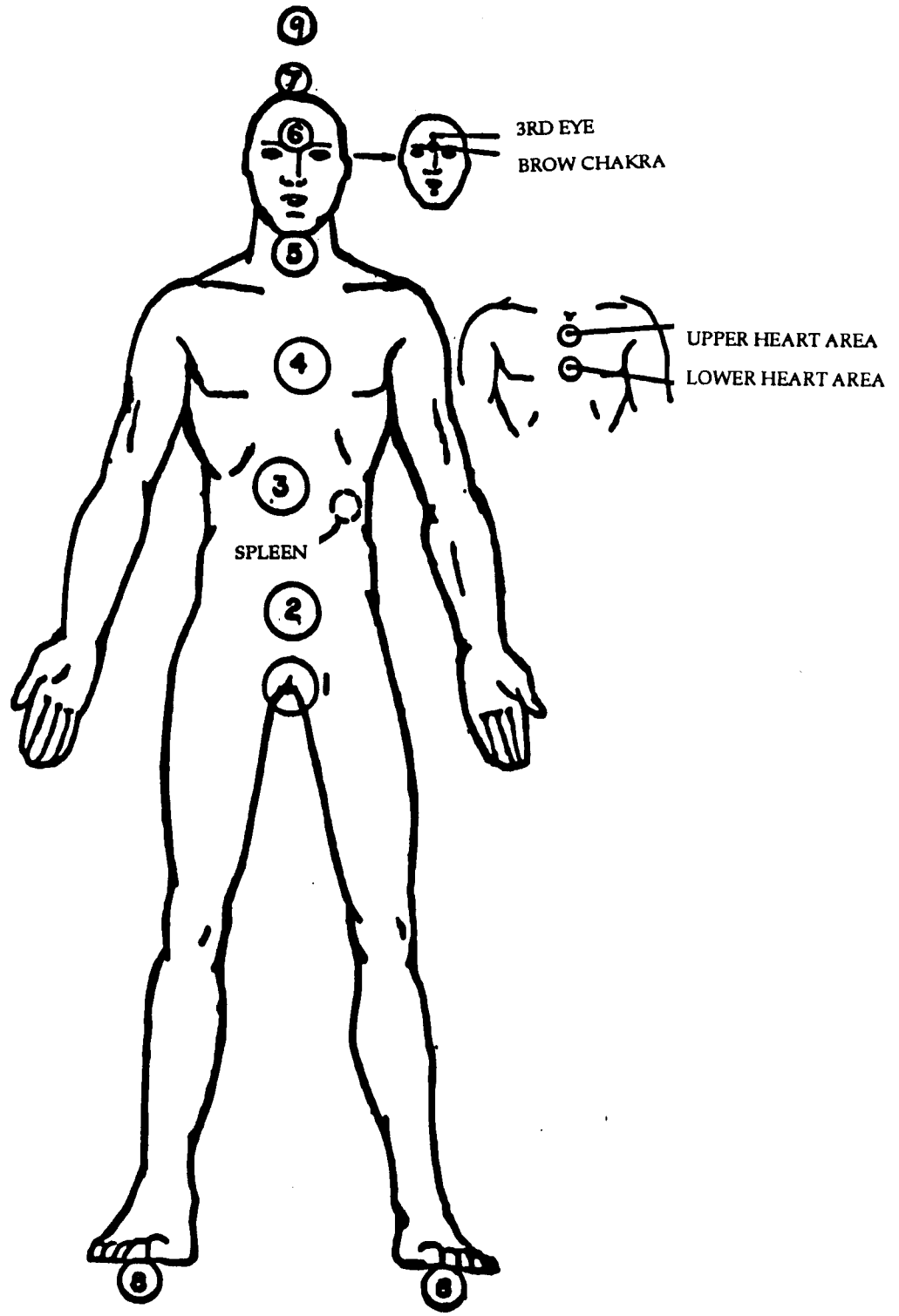
Contains -- Spirit.

Eight Chakra: is called the "Foot or Ground Chakra." It provides ones connection to Earth, the world and ordinary reality. When properly functioning one exhibits common sense, realness, solidity, and stability. This is the main chakra to provide the life energy to the physical body via the earth energy, which is sometimes called the mother energy or the female polarity. When one is lacking in this chakra one yields to the ethereal, unreal, and being flighty. When this chakra is closed down completely it stops the flow of vital energy to the physical body and the body dies. This chakra is located about a foot beneath the feet and is the largest of all the chakras.

Earth energy transducer -- Interconnectedness.

Ninth Chakra: is called the "Transpersonal Point or Chakra." It provides the connection to the sky, cosmos, and nonordinary reality. It is the complex cosmic connections, the God within and without. This is the chakra that provides life or nourishment to the soul. There is to be a balance of energy flow from the Eighth and Ninth chakras to keep one balanced. When one is lacking in this chakra one has lack of abundance, spiritual poverty. This chakra is located about a foot above the top of the head.

Cosmic energy transducer -- Eternal life.



A significant amount of the work accomplished in a healing session is removing blocked energy and emotions in these energy centers and in the energy distribution system which includes the meridians and many other energy paths in the body. Bioenergetics, Reichian therapy, and acupuncture all use aspects of this distribution systems. One part of the healing is to assist the chakras and the energy distribution systems to be functioning properly at the highest capability the client can assimilate at the time. The other is to change the mental beliefs that assisted in creating the emotional blocks.

It is also important to have the chakras in a balanced state, meaning that one chakra is not more or less active than its counter-part. The chakras function in pairs: that is, the first and the seventh, the second and the sixth, the third and the fifth, and all are balanced through the fourth which is the bridge between the three lower chakras of the body and the three higher chakras of the conscious or spiritual aspect of one's self.

Another point to consider is the fact that there are many types of energy available in spiritual healing. Energies have polarities. There is a female and male aspect of energy, and some energies are neutral (an even balance of the female and male aspects). Energy has different vibratory rates and intensities. Some healers, like myself, can hear the energies. Each energy has a unique frequency or tone that increases or decreases in volume according to the amount or intensity of the energy that is channeling through my body. It appears that different people prefer different types of energy according to their own needs. It is not necessary for the healer to determine what type of energy a person needs. But, the healer can be aware of the differences in the healing energy that she/he may be using in certain situations. In this manner the healer can consciously use certain types of energy for specific situations. This concept will be discussed further in the case studies.

Keep in mind that a person doesn't need to know anything that is being said about healing in order to do healing. There are many healing systems throughout the world that have been used for thousands of years that are effective in achieving positive results. The system being described is one concept of reality. There is no need for it to be correct or incorrect. This model provides a frame of reference by which I can communicate to others about what the healer and healee might experience in the course of the healing. Its only purpose is to provide a concept of what might transpire within a healing session in order to teach and explain certain phenomena to students and clients.

Methods Utilized in Healing

The easiest way to describe the methods used in a healing session is to provide a basic healing model and then describe the actual practices associated with the model. The terms healer and therapist are used interchangeably within this model, since healing with energy and therapy are involved. For the sake of convenience the term "healer" shall be used with the understanding of its multiple meaning.

The following steps describes the methodology that are utilized in this healing model:

- (1) The healer grounds her/his self.
- (2) The healer balances her/his body energy and enters into the state of neutrality.
- (3) The healer conveys her/his personal prayer or invocation to a higher consciousness.
- (4) The healer establishes an energy connection and psychic/spiritual connection with the client.
- (5) The healer performs a diagnosis of the client's energy centers, the energy distribution system, the aura, etc.
- (6) The healer establishes a trust level with the client.
- (7) The client is assisted by the healer, if needed, to identify the blocked areas in the client's body.
- (8) The healer makes sure that the client is in her/his body.
- (9) The healer inserts additional energy into the blocked area(s) of the client's body.
- (10) The client identifies the issues relating to the energy block(s), with the healer assisting when necessary. The healer also confirms what is sensed through Psi in support of the clients findings.
- (11) The client removes the energy block(s) with the assistance of the healer. Generally the client uses her/his own resources in the removal of her/his energy block(s). While the client is removing the block(s), the healer also removes energy block(s) in the client.

- (12) The healer assists the client in reframing the experience so that it has a positive outcome according to the client's new perspective.
- (13) The healer assists the client to create additional ways to deal with situations and anchors these new patterns with the client.
- (14) The healer has the client bring her/his own personal energy into the blocked areas so there is a flow of her/his energy in that area.
- (15) The healer integrates all aspects of the client's personality, ego, emotions, physical body, soul and spirit.
- (16) The healer balances the body centers or chakras of the client.
- (17) The healer brings the client back to wake state reality, with reality checks.
- (18) The healer grounds the client's energy, which assists them in becoming more aware of normal wake state reality.
- (19) The healer conveys a personal prayer or thanks to the higher consciousness, etc., that assisted in the healing.

These nineteen steps detail the process flow in this healing model. These steps are all utilized within a healing session. Generally, several of these steps are repeated as issues are identified and resolved in the healing session.

Since the actual healing session is unique to the personality, capabilities, philosophy, and cosmology of the healer or therapist, these steps will be described in a more personal manner.

The following description of the steps in a healing session can only be stated in generalities, as each healing session is unique to the client's personality and issues. The descriptions and methods used for these steps are intended to provide an adequate understanding of the processes that can be used in this model. It is not intended to describe all the techniques that can be used in the context of this model, and certainly does not describe all the methods that I use.

There is one part of the healing process that can begin before the healing model steps are utilized. The healer takes some time to center and balance himself/herself and then tunes-in to the client prior to a healing session.

One method to balance and center one's self is to visualize a grounding cord coming out of the base of your spine and to see, sense and feel it going down into the center of the earth. Then, bringing earth energy up from the center of the earth through your eighth chakra, the bottoms of the feet and continuing to bring it up through the legs and into the base of the spine, then up the spine to the first, second, third and fourth chakras.

Then visualize a ball of light above your head and bring your light, your essence, down through the crown center, down through the brow center, the throat center, and gently bringing your light into your heart center. Now you're connected to the earth and the cosmos. Start adjusting the flow of these energies so that you are balanced and centered in your heart center.

Once balanced and centered in the heart center, you can connect to higher planes of consciousness and still have conscious memory of the experience because you are connected to both the earth and the cosmic. Communication and reception or clarity of the information received from higher levels of consciousness are greatly improved in this manner.

In order to tune-in to the client, healers can take their consciousness up to their transpersonal point or higher self and connect their transpersonal point or higher self to the client's higher self by sending a beam of light which connects them together. After the healing session, the healer must retract the beam of light so the spiritual/psychic connection is released. In this way, the healer has already tuned-in to the client before the client has arrived for the healing session and has some understanding of what the client wants to do, at some level of awareness within the healer. On one occasion, just five minutes before a client arrived I started to have a slight cough and as the client entered the room she said "that's just how it started with me." In that instant, the cough immediately disappeared.

Since a healing session generally lasts for two hours, the client lays on a healing or massage table to be comfortable. The client remains fully clothed, except most clients prefer to remove their shoes, and lays on one's back with a pillow under the head and a small bolster pillow under the back of the knees for support. Some clients will need a blanket since the body temperature may decrease when they go into an altered state of consciousness.

Another important aspect of the healing process is the environment where the healing session takes place. An important part of this environment is the

type of music used during the healing session. I have found it to be beneficial to select the music based on the needs of the client, which can be ascertained intuitively by the healer. It is not uncommon to use different music for different parts of the healing session. I have found it to be beneficial to ask for inner guidance as to what specific music the client needs to hear during the healing.

Some people have very poor grounding and sluggish energy or "energy blocks" in their lower chakras. These people generally are more likely to be out-of-body or like to go out-of-body so it's best to use a grounding type music such as "Fairy Ring" by Mike Rowland or "Golden Voyage I" by Bearns and Dexter. Other people are well connected to their physical body. These people tend to have "energy blocks" in the upper chakras. In this case, music such as "Sky of Mind" by Ray Lynch or "Angel Love" by Aeoliah assists in opening these higher energy centers. "Angel Love" or something similar is used when I am guided to do some transcendental work. The client is guided to the upper realms of consciousness for a spiritual union with Spirit, God, Divine Mother, etc.

The music is played very softly because the physical senses are heightened dramatically when a person is in an altered state. So, even when the music is very soft--where it may be too quiet to hear in normal waking state--it can be very loud in alpha or theta state. It is suggested that the location of the speakers should be closest to the left ear of the client, so the music is going to the right brain. The healer can then sit or stand on the opposite side of the healing table adjacent to the right ear so that she/he has access to the left brain for doing linguistic patterning and reprogramming. The healer can also access the right brain by overloading the left brain (right ear) with certain linguistic patterns whereby the left brain becomes overwhelmed with too much information, and sends the information directly to the right brain for interpretation. All the linguistic patterns that I use, are said while I'm in an altered state, through the means of channeling from a higher source.

There are several standard ground rules that assist in providing a conducive healing relationship and setting. The rules are:

- (1) The room where the healing session takes place needs to be free from all auditory distractions. Disconnect any telephones, etc., so nothing within reason will interrupt the acoustical environment that is established.
- (2) The healer is to have everything she/he might need, such as facial tissue, etc., within an arms length so at least one hand is always touching the client.

- (3) The healer should never take her/his hands off the client once the healing session has started. This serves two purposes, one is to keep the energy flowing to the client and secondly to maintain the rapport, the kinesthetic and emotional connection with the client.
- (4) The client needs to know that she/he is safe and will not be abandoned by the healer. The touching reassures the client that the healer will never leave them while the client is doing the work. An intimate bond has been established and the client needs to know that it will not be broken until all the work of the session is complete.
- (5) The last rule is the healer shall never leave anything undone in the client's conscious or other-than-conscious mind at the end of a session. Every issue uncovered in a session is to be resolved in that session.

When I enter into the client's other-than-conscious mind in a healing session I want to have the work complete, that is why it takes about two hours for a session. In that length of time there is sufficient time to have the client: find the issues and any resistance that she/he has; go to the source of these issues wherever that is --this life, a past life or an issue from between incarnations, --and release the emotions attached to these issues; reframe the issues; and have the client discover how these issues were beneficial to them in this life. The healer or therapist is not to open up the client's conscious or other-than-conscious mind without putting everything back together, after the "dis ease" is removed and something new and healthy has been put in its place.

The healing session is now ready to begin. The client is laying on the table. The correct music has been selected. All potential external interruptions have been disconnected. The healer can now follow the steps outlined in the healing model.

The first step of the healing model is for the healer to ground oneself using the grounding cord meditation as described earlier or some other means to become connected to the earth energy. In doing the grounding meditation given earlier, the healer is also assured to be in her/his physical body and connected to both the earth and the cosmic energy. The next step is for the healer to balance her/his body energy and enter into a state of neutrality or non-judgment. This can be accomplished by the use of breathing patterns and visualizing the earth and cosmic energy being balanced in every cell of

one's body. The state of neutrality can be found by first thinking of a time when one was sad, then very quickly think of a time when one was joyful, then move to a point between these two emotions, a state of non-emotion. This is a "witness state," the state of neutrality and non-judgment.

The third step, if the healer is so inclined, is to say her/his own personal prayer or request internally to God, a higher consciousness, or whatever suits the healer. One such prayer is to the Universe or God, where one asks: "That only what is in the client's highest and best spiritual interests are to take place in the healing session."

The next step is for the healer to establish an energy connection and a psychic/spiritual connection with the client in a manner most suited to the skills of the healer. At the same time these connections are being established, the healer can also do a diagnosis of the client. A procedure that can be utilized to establish these connections is for the healer to go inside to her/his heart center and connect to her/his higher self, then to connect to the client's higher self, so that the client's higher self is guiding the healing session in the same manner described earlier. The healer is totally detached from her/his emotions and thoughts, and moves into a state of neutrality and non-judgment. From this level of consciousness, the healer, if so developed, can move up to all the higher levels of consciousness, including unity consciousness.

While each healer will have her/his own unique method to establish the energy and psychic/spiritual connections with the client. I use the "third eye" to make the energy connection to the client's body and to her/his energy distribution system. It is similar to using the meridian lines of the client in order to tune-in to the client's energy system or what in yoga is called the energy sheath. While tuning-in to the client's energy system in one's mind, you can also put your hands on each side of the client's head. Generally, as soon as I put my hands on the client's head, the client is in an altered state of consciousness. The client generally is experiencing REM within 30 seconds from the time the energy starts moving into the client's body from my hands and mind. This is long before the client is given any verbal suggestions to become deeply relaxed and be in oneness with her/his body.

The sixth step in the healing model is to establish a trust level with the client. Obviously a certain amount of trust had to be established prior to this point in time. It is necessary to establish a deep level of trust to do the type of healing that the client came to do. One way to establish trust or rapport is to place one hand on the client's stomach until you senses a level of trust has been established. This comes about rather quickly, as the client senses the healer's state of neutrality and unconditional love. Next, it is best to set

some reality anchors before the client goes into a deep altered state of consciousness. One way to do this is to use a special touch while placing one hand on the client's forehead and the other on her/his stomach --which also assists clients in connecting their thoughts and feelings. This provides a kinesthetic reality anchor and when verbal sounds are added it provides an auditory anchor as well. "Allow yourself to feel your body on the table" is an auditory and kinesthetic anchor.

The seventh step is to assist clients in identifying the energy blocks in their body. The energy that the healer puts into the body greatly assists this process, as does the reclined, relaxed position that the client is in. A part of this process is to have the client become completely relaxed, and the healer may give them suggestions, that, as she/he becomes more relaxed, the issues related to these energy blocks can float to the surface of her/his conscious mind. The first impressions that comes into the client's awareness are of great importance, even if it does not seem to have any logical sense at that time. The issues surfacing may be represented by a feeling, a picture, a word, a color, etc. The client verbally shares these with the healer and they are explored by the client at a deeper level with the healer guiding the exploration. The psychic abilities of the healer can be used to assist in guiding this exploration. Since the client is in an altered state of consciousness, she/he also has psychic and intuitive abilities and can access information that was out of conscious awareness.

This process can perhaps best be described in the following manner. As soon I put my hands on the client's body she/he starts feeling the flow of energy in her/his body. The client will feel sensations of heat, cold, tingling effects, twitching, etc., as the energy moves through her/his body. These sensations will at times intensify in a certain areas as the energy starts to build in that blocked area trying to break through the energy block. These sensations help the client to pinpoint the areas that have obstructions in her/his energy distribution system. It makes no difference where the healer's hands are located on the client for them to be aware of energy blocks. For example, I could have my hands on the client's head and stomach and the client could feel heat in her/his foot or leg, or some other part of her/his body.

The healer can assist the client in the discovery of what is going on within her/his physical and emotional bodies by having the client become very relaxed. This can be done by giving the client verbal suggestions to become very relaxed and to set aside all the issues of one's day. She/He can become more and more relaxed, deeper and deeper into a very nice, deep relaxed state. And as she/he becomes even more relaxed, she/he can become more and more in tune with her/his body, as she/he become more and more one.

Then the healer suggests: The client can start becoming even more aware of her/his body and any energy blocks that it might have, and the client can see, feel, hear, sense or know if there are any obstructions anywhere in the body, and she/he can verbally tell the healer what is found.

I also suggest that the client can talk to parts of the body, and the body will reply back to them by pictures, colors, feelings, impressions, words, thoughts, or knowingness. In this manner the client is starting to re-establish communications between body and mind. While the client starts this self awareness process, the healer can also do a diagnosis using clairvoyance or any other means most suited to the healer.

Many healers scan the body with their hands to sense what is going on in the client's body. I use clairvoyance and clairaudience to do the diagnostics. Clairvoyantly, I see the client's body as a light green color, any energy blocks show up as dark areas. At times the diagnosis is auditory, where I hear; "this is open" or "this is has a blockage," etc. It is best that the healer does not tell the client what is sensed, as the client has already been asked to go into her/his heart center to get in touch with what is going on inside of her/his body. When doing a body scan, observe all the chakras, all the energy lines, and the actual physical functioning of the body.

The purpose of the diagnosis is for the healer and the client to become aware of blocks in the energy system, not to do medical diagnosis. If a physical problem is sensed, suggest that it should be checked out with a medical doctor. On many occasions, I have found the client already had seen a doctor and wanted some healing done on the problem area.

Step eight is to make sure that the client's soul, essence or energy is in the body and if not, to assist them into it. This means, is the etheric or astral body --the one which leaves at night and goes traveling in the many realms --interpenetrated with the physical body or is it partially out, or all the way out.

Many times when clients have experienced some type of trauma in life, they decide that the body is not a safe place to be in, so they stay out-of-body most of the time. For others, the soul or essence enjoys the freedom of being out-of-body so that is where it likes to be. Also, a person can be out of her/his body without consciously knowing it, this is quite common.

If the client is out-of-body it also means that she/he is dissociated with what is going on within the body. No effective healing can be accomplished if the client isn't in the body. All the healing will be done in the mind and the

emotional pain will remain in the cellular memory of the body. Complete healing requires the releasing of non-productive mental and cellular memories, and new memories created that support the desired outcome of the client.

There is a dramatic increase in the amount of energy in the client when she/he is fully into her/his body, as compared to when not totally in it. This variation in energy can be easily sensed and/or observed by the healer. Clients also becomes aware of this energy increase when they are fully into the body, and will invariably comment on the changes they senses when completely in.

If the client is not in the body, the healer can invite the client's soul or essence into the body in the following manner. The healer can place a hand on the client's heart center, located just above the breast area, and ask the client to bring her/his thoughts down to the hand placed on her/his heart center. I also suggest to clients; to flow with the music and to see, feel, and sense the music flowing into their body. This provides a gentle way to move the client into her/his body. Using clairvoyance and clairaudience I sense if the client is fully in the body or not. Other healers may sense the client's body energy or field with their hands, to know if the client is fully into one's body or not.

Sometimes the client resists coming into the body. The healer needs to assist the client in healing the resistance by asking: How long has it been there?, What would happen if she/he came into the body?, etc. The healer would then have the client go back to the origin of the block. This will result in some type of regression into the past. Since the client is in an altered state she/he can easily find this information --the other-than-conscious mind knows every event that was ever experienced by that soul.

A healer that consciously uses one's psychic abilities has an advantage over the traditional therapist--who does not consciously utilize psychic abilities--in that the healer may know intuitively where the client is regressing to, and can go there with the client. It is best not to tell the client what her/his presenting issue is, even though the healer may know through her/his psychic abilities what the presenting issue is. The client also knows what the presenting issue is and the ways to resolve the issue. The only problem is that this information was out of her/his conscious awareness.

It is important for clients to find problems and solutions themselves and this is accomplished in OTC therapy. What the client discovers about herself/himself is accepted by her/him without any questions and then she/he can start creating a different set of patterns more conducive to what she/he wants out of life. If the healer gives the client the information, using

psychic abilities, there can be a lingering question as to its validity by the client. In this later situation, the client most likely would not start creating a different set of patterns or beliefs in her/his subconscious mind.

Step nine through thirteen describe a process that is utilized in a therapeutic intervention using energy to bring the issues to the conscious level and, in the use of psychic and/or mediumship abilities, to assist the client in resolving and releasing these issues.

The process of bringing issues into one's conscious awareness through the use of energy is based on the following concept. The human mind works with pictures and thoughts or beliefs. The body's reaction to these pictures or thoughts is called emotions or energy. When these emotions are not expressed by the body and the individual, the energy becomes locked in the neurology or cellular structure of the individual. This crystallized emotion, or energy, in the cellular structure is called an "energy block" because it interferes with the flow of energy in the body. This suggests that humans have memories stored in their mind and in their cellular structure which can be called "cellular memory."

When the healer uses energy to facilitate bringing these repressed issues into the client's awareness the following process takes place:

- (1) The energy that is being instilled by the healer into the client's blocked area, stimulates the client's recall of the emotion that is crystallized in the cellular memory of the client's body.
- (2) That repressed emotion is attached to a past event (picture) or belief in the client's mind. Recall of the emotion stimulates recall of the event or belief in the client's mind.
- (3) The healee releases the emotion with the assistance of the healer. The healee is then guided by the healer in reframing the event or belief that was attached to the emotion.

The use of energy greatly enhances the probability of repressed emotions and issues coming into one's awareness and being released in the process. This technique allows the healer and the healee to deal with both the cognitive memory and the cellular memory of traumatic experiences in one's life.

As the healer starts increasing the amount of energy flowing into the client's body, the client can feel it in her/his body using normal sensory perception. This energy can feel cold or warm and nobody really knows why it is different in different people. The obstruction relates to some event in one's life where she/he reacted in such a way that the emotion, which is energy, got blocked in some manner. If enough energy is sent into that obstruction it is broken up and the event comes into the conscious awareness of the client.

This is the point in which for no apparent reason the client starts to twitch or cry, etc. When the neurology of the client is releasing the locked in energy and emotions from a past event it is a sign that the healing process has started. Once one's physiology indicates something is happening within the client, the healer can ask the client: What is going on within you? The healer, using the Psi impressions that they are receiving, can confirm what the client's comments and physiology are showing them.

This is where I use NLP and OTC techniques, having the client go into her/his heart center to find inner resources and strengths. To have them find at least three alternate solutions to their issue or problem. To do this, you need to change the client's mental state so they are able to access her/his own wisdom. One technique to change the mental state is by changing the physical state. You can physically change your body position, or change breathing patterns to change your mental state.

Most of the time it is important to keep the way one has dealt with the issue or problem in the past because it was appropriate at the time they used it. The human organism wants to survive, and it did survive, it is here now. The therapy is to provide the client with additional alternatives. At this point the healer would reframe patterns in the client's conscious and other-than-conscious mind to create new choices. The linguistic patterns used by the healer includes; nominalizations, deletions, etc., so the patterns are not specific in content. The client creates new patterns in her/his other-than-conscious mind according to deep structure interpretation of the patterns used so that she/he creates beliefs which are more harmonious with her/his spiritual nature.

In a healing session I start sending energy into the blocked area so the client can see, feel, and/or hear the pictures, feelings, and/or sounds associated to the events that created the block. If the client can not seem to get a sense of what the issue is, quite often I am told by the client's higher self that she/he does not need to know where it came from. The client only needs to release the block and create a new concept of how she/he wants it to be.

An easy way to deal with this block is to have the client go into her/his heart center and ask that wisest part of them to tell them how to release the block. Then suggest that she/he go ahead and do it. Using psychic abilities, the healer can observe to make sure it's done. If needed, the healer can assist with energy work and verbal patterns to help break up the crystallized energy blocks and the issues behind the energy block. The healer can also do other-than-conscious reframing so the client has no need to know what the problem is to release it.

When doing a healing, quite often a large amount of time is spent getting the client's thoughts or consciousness into the heart center. The major issue found by them in doing this is the fear or pain from past traumas or experiences which they do not want to remember. In this case, quite often, the client gets a sense of getting down to the brow part of the body but has difficulty getting in any farther, as she/he starts seeing the pictures and remembering the pain with the pictures.

This part of the session generally involves having them know that they are protected, either by the healer being there, someone they know being there in thought, or bringing in someone from the spirit plane to be with them, either a relative or a religious figure; etc. If needed, and one is a medium, the healer may channel some information from the client's protector so she/he knows that they are there with them. Channeling the client's protector can be very comforting to the client and greatly assists in allowing the client to feel safe enough to do the healing work.

When the client senses that she/he has protection, the healer can then regress the client back to a time when "she/he" felt safe, before the block or fear was created. This could be back into the spirit realm before she/he was born, or back into the mother's womb, or some other time, the client is the guide. The healer follows psychically where the client goes. By going with her/him, the healer knows if she/he is in the spirit realm, or in a past life, or in the mother's womb, etc., and the client knows that the healer is there with her/him. I always sense something to say to clients that confirms to them that I know what is going on and where they are. The healer then asks the client questions so that she/he knows everything that she/he needs to know about the block or fear. In this manner, everything is discovered by the client about herself/himself, the situations that led up to the issue, the resolution, and creating a new reality with more understanding and more options in the future.

Many times the energy blocks which prevent clients from getting into their heart center are in the throat. When a person is not able to speak her/his truth, that energy creates an energy block. Most of the time these kinds of blocks were formed in childhood when the child perhaps was told not to

speaking unless she/he was asked to speak. Or the child felt that she/he could not speak up, or events happened in the family situation that were not to be talked about. These patterns were/are reinforced in later years by one's view of the world and how one thinks it is best to relate to that world, based on one's internal beliefs.

Once the client gets to the heart center, then the next major work begins. Many times the heart is closed down because one does not want to experience the emotions that are in the heart. It's not uncommon to find an unloved child or a child feeling unloved or unlovable. Most of the time these are childhood issues that are still very much in control. The body might have grown up, but the child still feels the feelings and is controlling the whole person. By putting your hands on the heart center and putting energy and unconditional love into the client's heart brings these issues to the surface very quickly. The energy breaks the emotional blocks and the issues and feelings come into the client's awareness.

Through the use of NLP and OTC therapy these issues are soon resolved. Sometimes I will be guided to take the client to the realm of the Divine Mother and Divine Father to be with the true parents of the soul. Their love is total and without conditions, so the client experiences true Divine Love. In this situation, the healer must go to the transcendental plane, merge and channel this aspect of the Universe, so it is a powerful spiritual experience for both the client and the healer.

Connecting clients to their personal energy for self healing, step fourteen, can be accomplished in the following manner. Once the client's heart center is open to receiving love, the healer can have the client visualize herself/himself going up to her/his transpersonal point to connect with her/his own healing energy. This healing energy, is pure love from the higher self. Then, the client brings this flow of love energy down into the her/his heart center and sends this healing love to every area in the body needing healing. This is the "well" that Jesus talked of, "where one would never thirst again," meaning one would know where the true source of love comes from. This source of love is eternal. No person can take it away from the client, only the client's thoughts can make them think that she/he is disconnected from this flow of unconditional love.

Step fifteen of the healing model is the integration of the ego, personality, emotions, physical body, soul, and spirit. This step is initiated when the healer senses that the healing session is about to close. The integration process can only take place once the body, and especially the heart center, has been made a safe place for the client to be in.

So, prior to the integration process, the heart center needs to be healed of any painful memories. The task is to build the heart center into a place where the soul can feel safe, a place in the body that can be as safe as the spirit world. A technique that I use to accomplish this with the client is a meditation that takes the client's soul to a place called "Home." In this meditation, I take the client's soul and ego to its spirit home. That safe place where the soul goes each night while asleep. This time the client does it consciously so the client can take the feelings, pictures, and sounds, from that ethereal place and anchor them in her/his heart center.

This creates a personal inner sanctuary in the heart center for the soul or higher self and one's spirit to reside. Once this is done the healer can invite the client's ego, personality, emotions, physical body, soul or higher self, and spirit to meet in the heart center and have them decide how they can learn to operate together in a cooperative way, to complete the spiritual plan created by her/his spiritual essence.

Quite often step fifteen also involves having the client participate in a process of disidentification. This procedure assists in the integrating of the physical, emotional, mental, and spiritual bodies or levels of consciousness. Many times it includes the programming that: "You have a body, but you are not the body; you have emotions, but you are not the emotions; you have a mind but you are not the mind, you are Spirit, you are Light, you are Love Divine."

The integration programming is always unique to each client and includes opening her/his physical, emotional, and mental bodies to a continuous flow of energy through the body to have it totally relaxed, cleansed, and revitalized with energy. Again, the client participates in the healing so she/he is guided by the healer in doing some visualization and energy work. Most of the time the client will say that she/he drifts in and out of consciousness and doesn't always hear what is said. I tell her/him that is fine, that other-than-conscious part of her/him hears everything that's said, and has it all stored away for use at a latter time. This process also concludes step sixteen, balancing of the energy centers in the client's body.

The next two steps, seventeen and eighteen, in the healing model are bringing the client back to wake state of consciousness. This involves giving the client suggestions that she/he is becoming more alert and more awake, and at the same time the healer would touch the kinesthetic reality anchors and verbalize the auditory anchors that were set by the healer at the beginning of the healing session.

When I get a sense that the session is complete I will start bringing the client back to waking consciousness and back into sensory reality by having the client become aware of her/his body laying on the table, etc., and then touch the kinesthetic reality anchors that were set in the beginning. I will start using my normal conversation voice (changing tone, timber, and inflections) which will fire the auditory anchors that were previously anchored. Soon the client is totally awake, and fully alert to what is going on in normal wake state.

It is best the client moves slowly as she/he starts to get her/his body fully functioning again. Most of the time the client will feel light headed with all the energy and the other things which happened during the session, so it is best that she/he gradually stand up next to the healing table so the healer can ground the client's excess energy into the earth. This is accomplished by the healer pressing on the tendons at the front and back of the client's ankles with her/his fingers for perhaps 30 seconds or until she/he has a sense the client is grounded. Sometimes it is helpful to suggest that the client think of her/his feet as roots of a tree and to have those roots go deep into the earth.

If one senses a need, the healer can do a reality check with the client by asking what her/his name is, or something similar to make sure the client's mind is functioning properly. Clients normally sit for a few minutes to reorientate themselves before leaving, and they may at times ask some questions about the healing session. My standard comment is she/he did a lot of "good work." I will confirm all the impressions the client comments about, but I do not add anything to the client's statements. One does not know what was done in the client's conscious reality and what was done in her/his other-than-conscious reality. It is best to paraphrase back to them what she/he said.

Sometime during the closing of the healing session or just after the client leaves, the healer would convey thanks to the higher consciousness, God, or the Universe, etc., for assistance in the healing session. This concludes the general descriptions of the healing model.

There are other issues that are encountered in a typical healing session. These shall be discussed to give a more complete overview of issues that present themselves in most healing sessions.

One common problem encountered in a healing session is connecting the client's mind and heart to her/his emotional center in the solar plexus. Emotions are experienced two places, the primary source of emotions comes from the solar plexus. These feelings are also felt in the heart center so they can be expressed. A healthy person feels the feelings in both places and releases them.

When people have had life experiences that were painful they generally detach from this area of the body to inhibit the emotional feelings they do not want to feel. This may be seen by the healer as a wall, steel plate, etc., that separates the body in two. The solar plexus area is where fears are stored. Clients may try to hold their fears in check through denying their existence or by using mental energy so they do not react to these fears. Sometime clients fear that if they start to let fears come out and be expressed they would not be able to control themselves. The fear then, is the fear of being overwhelmed by fear. The healer can suggest to the client to invite that part of self that has a fear, to bring that fear into the heart center and wrap it in love.

Propose the client to bring a beautiful pink light of love, down through the top of the head, down through the brow, and gently down through the throat and into the heart center. This love energy will assist in the healing of the fear, while the healer can facilitate the client in reframing the client's beliefs that created the fear.

This is yet another way clients can be actively engaged in the healing process by visualizing, hearing, and feeling things happening within them. In the mean time, the healer is telling the other-than-conscious and conscious mind that she/he can do it (heal self) any time she/he needs to, and that part of her/him that knows just what is going on, can do it before she/he even knows what she/he needs to know.

Another aspect in healing is the creation of a temple of wisdom within the client's heart center. Once the client's higher self, ego, emotions, and physical body are communicating and cooperating with each other, the healer can suggest the following statement. The mind is wonderful, it has a lot of knowledge, but the heart center and higher self have the wisdom. Wisdom is applied knowledge, each person has her/his own inner wisdom, her/his personal divine truths gained over eons of time. Now you are making the client's heart center her/his personal center of truth.

This creation of inner wisdom starts with simple yes and no questions as the client starts to scan her/his body. As the client is receiving answers, using psychic abilities, I can validate the client's answers and/or clarify them if needed, so it's experiential learning with direct positive feedback. The client is learning she/he can find her/his own answers and truths.

Scanning of the body by the client is for her/him to learn how to do self diagnostics. To communicate with the body and ask what it wants, etc. Another method for doing a body diagnosis is to have the client first bring her/his "mind" down to her/his toes and then to ask her/his toes two

questions. The questions are: Is everything in love and harmony?, Is all the energy there mine? After receiving the answers from her/his toes, have the client keep going up though the entire body asking these questions. While this is going on, the healer can scan the client's body, asking the same questions. Sometimes it takes a little time for the client to catch on, but every client that I have worked with has been able to find issues that she/he never knew existed using this method.

Again, the healer only confirms what the client finds. If the client misses something, the healer can remove it, or let the client find it later in the session. The idea is to reinforce the positive portion of what the client is doing. A phenomena that occurs quite often is the healer senses an energy block in the client. Then as the client brings her/his consciousness and energy into that area--during the client's self diagnosis--the energy block is removed. The blockage disintegrates as the client's energy is brought into that area.

Most individuals have had emotional experiences with other people. This creates an energy exchange between those people. If that energy exchange is not resolved, it remains in each person's physical body. It actually remains in the energy sheath which interpenetrates the physical body so it is sensed as being in the physical body. Based on numerous healing sessions I have done, this locked in energy can be from any lifetime, past or present.

When the client and the healer are using this method of scanning, both are looking for this type of emotional energy. Most people have another person's energy in her/his body, usually this energy is from a relative such as; mother, father, spouse, children, brothers and sisters, etc. The healer can have the client go into a state of neutrality and then suggest that the client return the energy to its source in neutrality --so the energy can be received by that person regardless of her/his present conscious state.

An example of this type of phenomena is suggested in a case where a client had an ankle that was very weak and the client had to take special care when he was jogging. In a healing session the client found some of his father's energy in that weak foot and when the father's energy was removed and the client's energy was put into that area, the foot was no longer weak.

One could speculate many reasons why the ankle was weak. In the healing session, the client was given a suggestion in his other-than-conscious mind that he could now walk in his own shoes, and walk his own path. The interesting part of this healing is that the client has never had any more problems with the ankle or his back. The fact that the client had a back problem was never discussed and was not a conscious focal point in the healing session, but a part of him knew about it and healed it too.

The procedure just described will also bring into the client's and healer's conscious awareness, most forms of possession which can then be removed by a properly trained healer.

The use of telepathy is useful in a healing session. Sometimes the healer may become aware of issues that are outside of the client's conscious awareness, such as childhood sexual or physical abuse, or the healer wants to communicate a message to the client's other-than-conscious mind that would be rejected by her/his rational mind based on the client's present knowledge or condition. The healer can mentally verbalize the information to be conveyed to the client through thought transfer or telepathy. On occasion, clients have commented that they sensed that they were being talked too, but they could not hear any words, and they couldn't exactly understand the thoughts they were receiving.

This technique can be used to deal with possessing entities when the client's rational mind would have a difficult time dealing with being possessed and fears that experience may create. In other words, it is possible to do an exorcism without the client knowing consciously what is being done.

When the healer is scanning the client's body and doing the therapeutic interventions she/he needs to be aware of the possible presence of multiple personalities and entities. Multiple personalities are integrated back into the person's personality structure so the whole personality can function appropriately according to the needs of the individual. The process for integrating a multiple personality in a client is through a technique called regression. This means to use certain methodologies to mentally take the client back to the time the multiple personalities were created. Then the healer assists the client to discover the purpose for its creation.

The multiple personality most often is created by an individual as a means of coping with certain aspects of her/his environment. Since the human organism is designed with a strong will to survive, the healer tells the multiple personality "thank you" for doing what it needed to do at the time in order for the organism to survive. In a way, you are acknowledging that this aspect of one's personality was created for a positive purpose as a means of survival. An act of last resort, when all other options appeared not to work. Then the healer assists the client in reframing the events leading up to the creation of her/his multiple personality so that the positive aspects of that multiple personality can be integrated into the total personality. The outcome is to assist the client in establishing a more appropriate way to live, according to what her/his inner nature or spiritual essence wants.

When the healer encounters a case of possession, the possessing entity is removed, if the healer is so trained in such techniques, as the entity only creates dysfunction in the client and, generally, has no useful purpose to the client's personal and spiritual well-being.

A case study that demonstrates the concept of multiple personalities is that of a client that had narcolepsy. This client in a healing session, saw in her mind a "little girl" on the other side of a veil and she likes to sleep. When I first asked the "little girl" to come over to this side of the veil, the "little girl" (speaking through the client) said: it was to frightening over here. After some dialogue between this "little girl" (speaking through the client) in the mind of the client and myself, the "little girl" finally came over from the other side of the veil into the client's heart center to be held and loved by the client's nurturing personality. The client indicated that she could see herself (the client) holding and nurturing this "little girl" on her lap. While the "little girl" was in the client's heart center, I explained to her, that a part of her is much older now, and that part of her will never let the abuse happen again and the world can be a safe place to be in. Besides, that wisest part of her (client's higher self) is going to take excellent care of her and give her lots of love. After additional reframing and healing, that "little girl" part of the client's personality did not need to sleep to escape from her perceived fearful aspects of life. In this example, the client had created a subpersonality in order to exist in the painful experiences of physical and sexual abuse during the client's childhood.

I would like to share some additional thoughts about healing sessions in general. When I start to do a healing with a client, the client may have a presenting issue that she/he wants to discuss with me. A detailed description of the presenting issue is not needed since the issue is only a symptom and not the cause of the client's discomfort. In fact, it is better not to have any content about a problem or situation, in that way there is less information to remove from the rational mind in order to do the healing work.

Some clients need to tell their story, so listen politely for awhile, and then say, "That you have enough information, it's time to get on the table and do the work." It is helpful to know what areas in the client's life she/he would like different so when you are doing the deep level repatterning with the client these issues can be resolved too.

Each client's perceptions about the life experiences she/he has encountered is unique. The healing model is intended to be flexible and accommodate the different needs of the client. Based on my personal experience, the following are some of the qualities needed by a healer using these techniques.

- (1) The healer has to be psychologically and spiritually evolved to a point of being nonjudgmental about all of life's events.
- (2) The healer needs to have total faith in her/his intuition.
- (3) The healer knows that she/he will be guided as to how to work best with each client. The guidance she/he receives will direct the healing session according to what needs to be accomplished by the client. This, generally, is a lot more than what the client's conscious mind was aware of.
- (4) The healer recognizes that the logical conscious mind would be restrictive in mapping out therapeutic strategies and, hence, much less beneficial to the client.
- (5) The healer recognizes that only the client knows in her/his other-than-conscious mind what the client's core issue(s) is and if she/he is ready to deal with the issue(s).
- (6) The healer trained in transpersonal levels of consciousness knows how to connect and converse with the client's higher self and the other-than-conscious part of her/his personality.
- (7) The healer allows the client's higher self to direct and participate in the healing session. In this manner the healer is continually obtaining information from the client's higher self on what issues to work on, and whether these issues are to be resolved on a conscious or other-than-conscious level.
- (8) Ideally the healer would have mediumship abilities which can present another dimension to the therapeutic process.
- (9) The healer of the highest order can enter into transcendental states of consciousness to facilitate healing and spiritual understanding in the client.
She/He can be in that state of total love and acceptance throughout the healing session.

Some clients are like an open book and will show psychically everything about herself/himself, even issues that she/he is not ready to consciously

know about yet. The healer needs to be able to ascertain in some manner which issues are to be dealt with in this healing session. In this way the healer knows what the client is ready to work on and what is to be left alone. Since this guidance is coming from the client's higher self, the healer most likely will still meet resistance from the client's ego in dealing with these issues in the healing processes.

Once the major issues are resolved, I like to have the client move her/his consciousness up to each of the higher chakras so that she/he can experience higher levels of consciousness and, of course, being trained in NLP do some anchoring so the client can access these levels easier by herself/himself, if she/he so chooses, in her/his own manner, when the time is appropriate. Clients will know when they can do it.

When the work is done, don't expect applause because most of what is done they don't know about, and, if you told them what you did, it may inhibit the work, so it's just a smile and a thank you.

Perhaps you would like to know a very useful method of using an anchor. One of my secrets is to use the client's breath as a physical anchor. The following is a linguistic patterns for doing this.

"As you breathe you're becoming more and more relaxed, and becoming more and more in tune with your own uniqueness, and you are becoming more and more aware of your purpose in this lifetime. Each time you breathe, you become just a little more aware of your purpose in life which was just out of your awareness, and now it is becoming more and more clear, more and more clear, very clear, and when you awake each morning it will be even more clear."

The use of NLP and OTC therapy are a natural complement to energy healing as the healing energy puts one into an altered state of consciousness which greatly assists in the effectiveness of the reframing, and in the creation of new thought patterns. One last item of importance is to make sure that the client goes into altered state before the therapist does, and the therapist comes out of altered state before the client does. The therapist needs to have total control of her/his states of consciousness.

The world view held by the healer or therapist has an effect on the levels of consciousness that one can assist the client in achieving in the healing session. Each ascending level of consciousness incorporates higher individual and universal truths. These higher truths incorporate all aspects of truth from the lower levels of consciousness. In one sense there is no such thing

as a non-truth, for all non-truths are only different aspects of a higher truth one has not realized. To assist one in developing a greater understanding of the processes and concepts conveyed in the healing model and in the case studies it is appropriate to share my world view.

The actions on the physical plane are perceived as a melodrama that is being played out by individuals, groups of people, nations, governments, the races, etc. From this level of consciousness there is no concept of right or wrong in these melodramas. The melodramas present opportunities for individuals to develop a higher level of awareness or knowledge. Life as a spiritual being is eternal, and one's incarnation on earth provides a playground to enact the learnings that one received on the spirit plane, prior to coming into incarnation. The learning experiences on the earth plane are focused to assist one's evolution of consciousness, which is the same thing as spiritual evolution. When one incarnates, the soul chooses the parents and the family situation into which she/he can best develop spiritually. Some souls choose very difficult situations in order to develop certain understandings.

In the West much has been said lately about karma. The concept of karma in the West is reflected in the statement: "One reaps what one has sown." In many cases it becomes a crutch or excuse for one's earthly situation. This is an inappropriate concept of karma. Karma from a past life can be thought of as developing an understanding of a certain polarity so that one can synthesize both aspects of a polarity and transcend the polarity. For example, a person that only knows how to "give" from past experiences or past lives, most likely would be put in a position of having the opportunity to "receive" in this life plan--which she/he created. The synthesis would be learning that "giving and receiving" are one action without conditions on the other person or persons, or one's self. The circumstances that she/he or the universe creates to develop that understanding is called the melodrama of life.

I also believe that each of us create or draw to us everything we have or experience. Once one accepts that she/he creates everything around them by her/his thoughts and beliefs, then she/he also has the power to change anything that she/he does not like. One can say, that the universe looks into one's mind and sends to that person whatever one's mind is focused on. If it is focused on struggling with survival, the universe sends one more of the same. If it is focuses on abundance, peace and love, then one receives more of that. We can create heaven or hell. The choice is up to each individual. This makes one totally responsible for one's thoughts, what one says, what one feels, and all of one's actions and, in doing so, one now controls her/his personal universe. One can no longer blame mother, father, the schools, a spouse, other people, nor can one blame God. One might accept the fact

that since one is in physical form, one's consciousness is not quite God-like, so, at times, one sometimes makes less than God-like decisions and that is fine because that is called experiential learning.

The same holds true when one's higher self suggests one course of action and one chooses to take another, after receiving the guidance one can say "thank you" and then one exercises one's free will. The higher self does not judge what one does, and it is one's best friend. If one follows the guidance of one's higher self, it could be called intuitive learning, if one goes a different path, it could be called experiential learning. Both, get the individual to the same spiritual point of development, one path may just take a little longer. Many times the experiential path is best for the person who is to become a teacher of that path. For example, the chemically dependent person can become an excellent teacher about the path called chemical use.

It is important to understand the manner in which I use certain words such as ego, personality, soul, higher self, and spirit. The ego is the executive of the personality and communicates the needs of the personality to the external world. It is our rational and irrational identities such as parent, child, student, teacher, worker, spouse, provider, spiritual person, etc. The ego also creates the boundaries of what is "I" and what is "not I." These boundaries are to be flexible for the transcendence of them, as one develops spiritually.

The personality can be thought of as the long term skills, attitudes, memories, behaviors, beliefs, and emotions that provide consistency to oneself and others, so they can say, "they know you." This personality is a surface structure created by us in response to our perception about the reality of our environment. In a true sense, it is not real, as it is only one viewpoint of how things really were when observed from one level of consciousness. When a perceived reality is observed from a different viewpoint, one creates a different reality. The deep structure personality is that of the Ultimate Self which will begin to emerge as one develops the higher levels of consciousness. The introvert will become introvert-extrovert, and the extrovert will become extrovert-introvert. The true personality of the spirit will emerge which utilizes a vast number of subpersonalities as a way to complete its tasks. The personality and subpersonality become the expression of the soul and, eventually, the spirit.

The soul is one's accumulated knowledge acquired through all of one's learning experiences. This includes all past incarnations and, also, the learning that takes place in the nonvisible realm between incarnations. The soul is a reflection of spirit, but it cannot remember its omnipresence state. The soul is the unifying center behind the deep structure of the personality.

The soul and the higher self are one in the same. It is the knowing self, which resides in a realm beyond concrete reality. The soul has the unique plan or purpose for one's mission in life, and is responsible for one's deep craving for spiritual growth. The soul or higher self is unaffected by one's thoughts or body conditions. The etheric sheath of the soul is always perfect, even when the physical body is diseased and in pain.

The spirit is that spark of God within everything created. It is the divine particle, the vital essence, the inherent actuating element in all life.

Integration of these aspects of the individual is what higher levels of consciousness, or spiritual development, is all about. The higher self has the plan and knowledge that one needs to carry out that plan in this life. The higher knowledge the soul wants to express and demonstrate on the physical plane. The higher self already has all the knowledge and tools to carry out the plan. Generally, they are not known in one's conscious mind. When one contacts one's higher self through meditation or other means, then one's conscious mind begins to remember its purpose in this incarnation. The higher self also begins to provide one with one's knowledge and resources to complete that plan. The conscious mind is the activator of this process. The higher self sits in abeyance awaiting its call from the conscious mind of the individual. The ego then becomes the executor of the plan to the outside world. The ego is to participate in one's spiritual development. One creates an ego for one's identity. The many roles that one has in life confuse the ego in understanding its true identity. Once the ego begins to know and understands that its true identity is the higher self, the ego moves towards eventually merging with the soul and then the spirit.

The higher self, or soul, needs the ego and personality to communicate and execute the plan or mission of the soul on the physical plane. The body is the vehicle for the soul to accomplish its task on the physical plane. The body is likened to a garment that one wears on the body. Each of us chose the body that we have for a specific reason. One is to care for the body just as one cares for one's car. We are to remember that the body is only a garment and not to become too attached to it. The trinity then becomes body, mind (ego) and soul, learning to be cooperative in completing the life plan of the soul. This means developing harmony between the body, mind, and soul.

The emotions, which are the body's response to the pictures in one's mind, have two qualities. The lower emotions relate to the desires of one's ego. The lower emotions are one's response to one's mental expectations that were fulfilled or not fulfilled. The higher emotions relate to the higher self and whether one is congruent with one's higher self or not. In both cases emotion are to be utilized in the development of one's self.

The lower emotions acknowledge where one has attachments or identification with a belief or thought. The higher emotions let one know when one feels detached or disconnected with the higher self so that one can seek the source of the detachment and make changes, if one deems it necessary.

As the process of integration continues for the body, emotions, mind, personality and soul, a time comes when they become one aspect connected together with a thread of oneness. When the soul and the ego are integrated, one reacts much differently to the issues of life. The individual can remain at peace inside herself/himself while her/his exterior world still has all the events that are common to most people. The events that used to create stress and discomfort in her/his life are no longer perceived by the mind in that manner. The next phase is the integration of the soul and spirit. The spirit is always there, it just isn't recognized.

One can look at this relationship like a modern day telephone line. If you disconnect your phone, you can not call out or receive calls (give or receive information) the line is there and in good working order. The phone doesn't work until you plug the phone back in the telephone line. Oneness with Spirit is only blocked by the illusions in one's mind that separates one from that oneness. Conscious and other-than-conscious thoughts create the barriers to total unity. These barriers affect everyone at each level of the consciousness centers described in Yoga psychology. As they are removed, and replaced by higher truths, one moves closer to total unity. The distance to travel is based upon one's level of consciousness and one's motivation to move to higher levels of consciousness.

From the unity level of consciousness, one can say that it is the illusion of the personality and soul that interferes with this unity. The spiritual path is a path of higher levels of consciousness, a path of transcendence, a path of love.

The healing sessions assist the client to be free of some past beliefs and emotional pain that was separating her/him from her/his Ultimate Self or God Self. The healing facilitates the client in removing these barriers so that she/he moves closer to her/his true inner nature. This will be self-evident in several of the case studies to be discussed next.

Case Studies

It seems appropriate to describe briefly some of the circumstances that surround the types of clients that are involved in this type of healing and therapy, and some of the structure that is, or is not, utilized by the healer. Following this, several brief descriptions of case studies will be presented.

These case studies will demonstrate that energy, Psi and mediumship abilities are valid adjunct resources or tools for use in psychotherapy. The healer, or therapist, in these cases, is the author, so there might be some subjectivity.

The use of energy in physical and emotional releases, and psychological and spiritual interventions, in the manner that is described herein, creates a different client therapist relationship than traditional methods. The most significant, of course, is the levels of communication that are established within minutes of being together, but another major difference is that there is usually only one healing session for any given presenting problem.

There is no standard intake information, case history, psychological testing, etc. The client comes to the healers personal residence for the healing session. The client comes to the healing room. The healing takes place, with minimal verbal communication other than what transpires during the healing session and then the client leaves. Since most clients only need one healing session to resolve some major issue in her/his life, one does not usually see the client in a professional setting after the session is complete.

Most of the time, one does not know for sure how well the client is doing after the healing session, other than by getting referrals from them, so one assumes that her/his life is going much better.

On a few occasions, where there is major psychological problems involved, such as manic depression or schizophrenia, the client may require additional sessions in order to rebuild the client's personality structure.

Many of the clients which have been referred to me are victims of rape and incest or are having problems with being controlled by outside forces unknown to them. I also treat a number of psychological based issues such as: anxiety, depression, phobias, frustration, etc., that most everyone has experienced at sometime. Some clients are dealing with physical problems such as cancer, dyslexia, brain damage, and other body functioning problems, and are looking for healings that affect the physical level and addresses the psychological aspect as well.

Another type of healing that I am sometimes guided to do could be called a spiritual awakening, whereby the client has requested the universe to provide an awakening of her/his inner spirit according to her/his personal life plan. This type of healing entails a profound spiritual experience and opening of the mind and heart to a unique, individualized experience, of which the healer is only the instrument of those initiating the experience.

The focus of these sessions is healing the physical, emotional, mental, and spiritual disharmony of the client. The physical problem, for the most part, is the physical manifestation, of the disharmony at these other levels. There is no disease mental, physical, or spiritual that can not be resolved at some level, providing the client wants to be healed. There always will be changes on the emotional, mental and spiritual levels and quite often changes occur on the physical level as well. Physical changes may take time to manifest in physical form, yet sometimes there is an instantaneous change, so no boundaries are put on what can or can not happen in a healing session. As stated earlier, changes will result, whether they are the changes that the client is looking for is another question.

Case A

This client has had several healing sessions with this healer over the past years whenever she felt a need to release issues that interfere with her spiritual development. This client, by the very nature of some childhood trauma, preferred to stay out of the body much of the time. In doing so, it presented the opportunities for discarnate spirits to live in parts of her body much like a rooming house. They were not trying to control the client. These entities just wanted a body to be in. Sometimes it is safer in a body than in the darkness of the astral plane.

Since this client has had several entities removed from her in previous healing sessions, she has good intuition and can sense if some part of her personality does not seem to be a part of her. This client also is a medium and has a very wise guide that gives her information, and helps describe to her, what is going on within her. On this occasion, the client felt that another entity was in her, a small child that had died and came into her body from the astral plane (a dark gray place) when she was very young.

This child (according to the client) had been beaten many times and felt broken. This was a similar expression that the client had used many times before in previous healing sessions. The client indicated many times that she was afraid, that she was going to be beaten and broken as a child. Yet this fear did not seem to fit her description of her childhood. The client wanted to release this entity, either to the light or back to the astral plane, wherever it wanted to go.

This client was capable of allowing the entity to speak through her, allowing her guide to speak through her, and to speak for herself, and be conscious of all the communication that was taking place in the healing session. When the client was allowing the entity to speak through her, she described this part of the session from this perspective. The client was outside of her body, looking down at her body (client's body) and she was fully aware of what was being said by the entity, and the healer.

In this session, it was not long before the child entity was speaking through the client. In the dialogue that emerged it was evident that the entity did not want to leave the client's body, it did not like the gray scary place (the low astral plane). It did not want to go to the light in the ethereal planes either, it wanted a body.

This entity also was very angry as it said: "It did not deserve to be beaten and killed." There was a point in the healing where the entity was regressed back to the life where it was killed, but it was too overwhelming and the memories were shut down. Enough information was said by the entity, to provide some substantiation to what this entity was previously saying. The anger in this entity was too much for the entity to feel and release, and the entity was not interested in trying again to go back through the experience of dying in that other life.

The client was very attached to this entity, as it had been with her as long as she could remember. I sensed intuitively that she invited this entity into her body as a playmate when the client was very young. The client, at first, was willing to release this entity and let the spirit helpers--that I called in for this rescue work--take her (the entity) to wherever the entity wanted to go. Then the client was aware of her emotional attachment (energy cords) to the entity and became resistant.

Both the entity and the client went through a process of individual emotional releases (each using the client's body) as I did the appropriate psychological interventions, so both the entity and the client could separate from each other and each go their own way. The entity wanted to go into a new body that was her own, not somebody else's body. She wanted a new healthy body, too.

The client wanted to be free of the pain and anger that this entity had, and the idea that her body was broken. The client did her grieving for the loss of this friend and was finally ready to release the entity to the spirit helpers on the other side. At first she thought she was casting out this entity to be on her own, to go to the astral gray place or go to the light. I then asked the spirit helpers to take the child entity wherever she wanted to go, the astral plane from which she might find another occupied body, or the spirit world and her natural evolved position.

The entity asked if she had to stay long in the spirit world, as she really wanted a body all to herself. I then channeled some information to the entity that she would not be long in the spirit world. Her etheric body is healthy and she would have helpers assisting her in releasing the anger and emotions within her so that she could come into another body without all that anger. She also was informed, that for her, it was easier to heal the

anger in the spirit world than in a physical body. She liked the idea of doing the healing in the spirit world so that she did not have to go through it in a physical body, and she could be free and playful in a new body.

I then suggested to the entity to gather up all of her energy, and to leave the client's body by going up and out through the top of the client's head. And asked the spirit helpers to assist in separating the two emeshed energies and identities. The spirit helpers channeled, through me, the suggestion that the client is to exhale the emotions and beliefs of this child entity, until she sensed that they were gone, which is what the client did. I then confirmed when the entity's energy, emotions, and beliefs were released and the client also received a verbal confirmation from her spirit guide.

This client also has been diagnosed as having irreparable damage to the spine which, over time, we have been repairing. At the end of this particular healing session I was guided to do some molecular reconstruction work on her spine. Molecular reconstruction is the rebuilding of the individual's molecular structure in the energy sheath, which will manifest itself in a physical form, according to the true genetic patterning of the etheric body. This type of healing is only done when I am guided to do reconstruction by a higher guidance. In this type of healing one takes her/his consciousness to the plane of creation, a place called "all or none." This is a plane of pure energy and at this point one will start seeing massive colors of energy being moved around; rebuilding, and reconnecting whatever is to be done within that person's body, in one's third eye. One could speculate that the healer's psychokinetic energy is being utilized to stimulate the psychokinetic energy in the client so that the molecular work is accomplished. This type of healing can be done in touch healing or absent healing.

At the end of this healing, I was guided to start working on the client's spinal cord by visualizing lightning (energy) going from her neck to the base of the spine, and from the base of the spine to the neck. The client said she could sense it coming up, but not going down. So we did some deep trance work to reprogram the neurological channels to create new electrical paths down the spine, as the reconstruction was being seen in my third eye, and my hands were on the clients neck and the base of her spine to make an energy connection to her directly.

During this period of time I was doing linguistic patterns for changing the client's thinking patterns in her unconscious mind. These were said softer and softer, and then I stopped saying them verbally and just used telepathy. In the telepathy mode it was suggested to her that she can walk, dance, anything that she wanted to do, she can do. This was done with telepathy so

that the conscious mind would not reject it. Afterwards she said, even after I had stopped talking she knew I was still talking to her but she could not make out what it was that was being said. In this case, the telepathy was directed to her other-than-conscious mind, because her conscious mind would reject the messages that were given to her, based on her medical history.

This case fairly well describes how one can do energy molecular reconstruction healing. The removal of an entity that is in a client's body is also very typical of what I get involved with. My experience is that most entities are not trying to actually possess the person in the sense of taking full control of the body. There are such entities that do fit into that control category and that will be discussed in Case B.

In most cases the entities just wants a human body to live in. The problems that the possessed person encounters when this happens is that they have feelings or beliefs that do not make any logical sense based on the known biological and psychological history. For example, this client's great fear of being beaten to death. This type of possessing entity is rather easy to remove and assist to its rightful place in the spirit world. Just to dislodge it and not assist it in getting to where it needs to go, would be very inappropriate healing. All aspects need to be properly taken care of in healing, whether it's of this physical plane or the spirit plane.

Case B

In the initial telephone conversation to set up a healing appointment with this client, the client's voice indicated that she was very anxious and distraught as she expressed great concern about the fact that she sensed she was possessed by something very negative. This client indicated that she was experiencing almost total control of her body and thoughts by some force within herself. This force talked to her, using very suggestive statements that it loved her. The client was very concerned about the behaviors exhibited by her (the client) when this entity was in control, she indicated in the telephone conversation that these actions were very disruptive to the family life. She did not convey what these disruptive behavior patterns were, but she did say that her husband had already made an appointment for the client to see a psychiatrist and she wanted to be free of this thing before she had to go to this doctor.

This entity had a lot of control over this client, so much so, that, when she tried to drive to the location for the healing session, she said the entity scrambled the her thoughts to the point that she could not drive the car. The client turned the car around and went back to her home and had her husband drive her to my home for the healing session. When the client

called and said what happened, and that she would be late for the appointment I said to the client, that the entity knew that it was going to be removed from her, and was only trying to control the client so it would not be removed from the client's body.

This client was very receptive to the healing energy and getting into the presenting issue. Within minutes after the client got on the healing table, the client started to talk in a completely different voice than what she used prior to getting on the healing table. From previous encounters with this type of phenomena I knew it was an entity, or multiple personality of the client, that was talking. From the vibrations that I was picking up from this energy inside the client, and the intuitive information I was receiving from the client's higher self, I was certain that this was a possessing entity and not a multiple personality.

The voice that spoke through the client's larynx said in a very slow speaking voice, "I am God." The words were very slowly pronounced, and the mouth very wide open, with exaggerated jaw movements like it was very difficult to speak. The entity's vocabulary was very limited. As this entity was speaking through the client, I saw a "three" in my third eye, which indicated the development age of this entity was somewhere around three years old. In the course of doing healing and therapy with this entity, I was aware that the client's spirit was totally out of the body, and was hovering above the client's physical body. Later, the client said she could hear everything that the entities were saying, in the healing session. That night, seven entities were removed from the client's body. It appeared that only one entity was the source of most of the problems and was the leader of this group of entities.

In the healing session the first intervention was to confront the entity and tell it that it was not God. I told the entity that I have been with that essence called "God," and you are not God. After a few of these same exchanges where the entity would say "I am God", and I would say "You are not God," the spirit finally accepted the fact that it was not God. I then asked the entity if it wanted to go to God, because there were many spirit helpers with us in the healing session that would take the entity to God. The entity was also reminded that according to Universal Law it had to leave, it had no choice, because the client was now taking control of her body, her space.

The entity was then told (in a very forceful voice) that it had to leave the clients body, to go see God, to go to its realm or place in the spirit world where it would be taken care of. The mouth opened very wide and the spirit finally left the client's body after several more minutes. Using clairvoyance, I could see the spirit helpers taking this entity across to the other side where the entity would receive the counseling that it needed.

In the removal of an entity that is very negative and disruptive in the life of the possessed client, it is appropriate to use whatever means the healer has available to her/him to forcibly remove the entity from the client, if such force is needed. In this case, the force was applied not only by the me, but by other helpers in the invisible world, who assisted in removing the entity and taking the entity to where it could get individual treatment.

After the removal of this entity, the client was instructed to start doing the body scan, asking the question: Is all the energy in this part of her body hers, i.e., her toes, etc.? The client then encountered another entity in her feet. The client was directed to ask the entity if it had a name. The client replied that the entity's name was Jeff, and that this was the entity that talked to the client, as a voice inside of her, telling her that it loved her.

The client was asked what Jeff represented, the client replied, pain. Then, Jeff took control of the client's body. I then asked Jeff if he would leave the client's body and he said, "no." It was then time to try to get some information regarding this entity as it seemed to be the entity that was really causing the pain and problems in the client's life. The next question asked the entity, Jeff, was how long he had been in the client? Jeff responded that he had been in her since the client was 10 years old. Then I asked Jeff, how old was he at the time he entered into the client's body? He said, "Four." The last question asked Jeff, was if whether he was a spirit or a person, and there was silence from the entity. Jeff was unable to sense if he was living or dead. My intuition was telling me that Jeff was a child that lived nearby the client when she was 10 and Jeff died for some reason and went into her body rather than going to the spirit world.

No further questions were pursued, as time was running short, and this entity called Jeff needed to be removed. The helpers from the spirit world were there in the healing room and they would take this entity to the other side where further therapy could be done by the helpers.

This entity did not want to leave willingly so it had to be forcibly removed using certain healing techniques and with much assistance from the spirit helpers. The entity called Jeff was taken to his rightful place in the spirit world where he would get the therapy he needed. In this same ordeal, several other less powerful entities also left the client's body. These entities said, since Jeff is gone they might as well leave and go with him, so they all left, with no real effort on the my part. In total, six entities had been removed and the body was empty of possessing spirits as I did a scan of the client's body.

Then all of a sudden, the client had another entity speaking through her, and then I realized that the client as a "medium" was doing "soul rescue work," so we quickly got rid of that entity, and closed the client's crown chakra so I could do some reprogramming with the client.

Now it was time to call the soul, or higher self, of the client to come forth and enter into the client's body. I then asked the client if she had a special angel that she would like to be her protector and control as a medium. She asked for Michael, the Archangel, so I called upon Michael, whom I work with most of the time in these types of situation, to send an angel to be the client's protector and to guard the client's transpersonal point so that nothing could come into the body that was not the client, or something that the client's higher self wanted to allow into the client. The client was an excellent medium so one did not want to interfere with her being a medium of the "light beings" if, and when she wanted to do mediumship. During the time that this exorcism was going on, the client later reported that she had a vision of Jesus in the room, many hearts, and bright lights flashing during the healing experience.

A suggestion was given to the client, while she was in altered state, that, for now, it would be best not to use her mediumship abilities until she was in a better mental state to control the phenomena. After the healing session, I suggested to the client that she should not do any channeling or mediumship work until she sensed that she was ready for it, and, also, the fact that she did not need to be a medium, it was her choice if she used the gift or not.

The removal of these entities was only a small part of this healing session. The reason I can say this is that the client's belief system about being in her body, and taking control and responsibility of her body is of greatest importance, otherwise the client may allow other entities into her body again at a later time.

This client had been sexually and physically abused in childhood and, also, is recovering from chemically dependency. So the client's history suggested that she, most likely, did not feel safe in her body. After the entities were removed, and the client's essence was totally in the physical body, the healing was then directed to these past experiences so they could be released and reprogrammed. The client's throat was blocked and she could hardly speak, so some healing on her throat was in order. A suggestion to the client that she give permission to that "little girl" within her, to sing to God was all that she needed to start sing tones which restored her voice back. Many times, any kind of vocal action will break up the crystallized energy, so the client does not need to rant and rave about a negative experience to release the energy block.

The next step in this healing was to have the client go deeper into the sexual abuse and the pain in the client's body from the abuse. This client had done a lot of psychotherapy in this area so the mental memories were fairly well resolved, it was only the body memory that needed the most healing work. She moved through this part of the healing very fast and was able to speak to her mother about her (client's) anger towards the mother for allowing the abuse to happen. The client also expressed her anger to her father for abusing her. While the client was doing this verbal expression, healing energy was being sent into her eyes, by having my hands near the client's eyes, so that the pictures in the eyes were being cleansed and released along with the feelings associated with the pictures in the body with the healing energy. Verbal suggestions were also given to the client to erase and release the pictures that she no longer wanted to have, and all the feelings associated with those pictures. A healer can focus the energy like a beam of light, and erase the memory in the mind, much like one can erase a computer memory chip using light or energy.

In this healing session I did two checks to see if the reframing and healing was complete. The first, was to switch to using male energy and to watch how the client's body reacted to the energy. If the abuse memory was still there in her body, the body would provide feedback by its physiological changes. The client's body did not change in any manner so it appeared the healing had been complete in the body memory. The next check, was to regress the client back into the experience with her father. If all the emotions were released and the client had forgiven the father and herself and she had released the issues totally, then there would be no emotional or bodily reaction to the regression. In this case, the client remained very peaceful as she looked at and experienced her childhood again. Since the client's body did not show any outward signs of negative reactions and her face remained in a neutral and/or loving expression one can be certain that the mental and physical memories of that experience had been released and reprogrammed. The healing work was complete.

This type of client is not what one deals with on a daily basis, with the exception for the abuse issues, those are very common but they are not always in the conscious mind. That type of situation will be discussed in the next case. This client was one of the few that has kept in contact with me, two weeks after this healing session she sent a card saying everything was going fine now, no more problems. A year later she sent a Christmas card saying that, all is well.

Case C

This case involved a young women, age 18, who requested a healing because she had a sense of some sexual molesting at about age thirteen but

could not seem to remember anything about it. She wanted to be hypnotized so that if there was such an experience it could be brought into her conscious mind. The client was informed that I would not do that. I informed that if the experience is in her unconscious mind, it's there for a purpose and it's not up to the healer or therapist to bring it to the client's conscious mind.

The client was told that all the therapy that she needs can be done right where the memory exists, in her other-than-conscious mind, and, if she is supposed to have a conscious memory of the experience, that will happen on its own accord.

With this understanding the client decided to do the therapy, providing she could have her boyfriend with her at the healing session. Generally I do not have anyone else present at a healing since it may affect what the client is willing to deal with in the session. In this situation, it seemed appropriate to have the boyfriend in the healing room with her.

When the client and her boyfriend arrived for the healing session there was a brief discussion about what possibly could happen in the healing session. Both the client and the boyfriend were told that she may have no conscious recall of what went on in the session and that the boyfriend has the hardest job of all, because he is not to discuss anything that happens in the healing session. He was told that he could confirm anything that she recalls, but not to add to her memories, any other details or experiences that he remembers. Since the client had requested to have conscious recall of the session I agreed to give her higher self a post hypnotic suggestion. The suggestion was that if it was in her highest and best interest to remember that experience consciously her higher self would allow that to happen.

In the healing session, almost as soon as I put my hands on the client's head and started to run the energy, she was in a deep trance state and into the presenting issue. The client had total recall of the sexual encounters and was able to give detailed accounting of the individual, dates, times, places, clothing that each were wearing, and what happened in each encounter. In most cases the client was in a situation where she felt that she could not scream or say anything verbal so this locked-in energy was released in screams, etc., along with the pain and sadness of the events in the client's life.

While the events that the client described were oral sex, her physiology in the genital area was going through a great amount of emotion release. I sensed psychically that there was childhood sexual abuse in the genital area. The physical twitching and turning of the genital area of her body indicated a releasing of the body memory of that trauma. The client was releasing the

locked in memories and the pictures associated with those memories. The pictures of this early childhood sexual abuse is what I was sensing psychically.

In this case, the reframing of the sexual abuse events that the client was consciously going through were done in such a manner that they also reframed and released all other inappropriate sexual experiences known and unknown. In this way, the client did not need to consciously remember any similar experiences from the past.

This was a very intense and emotional healing session with tremendous emotional, vocal, and physical releases to these experiences. Near the end of the session the client had become very calm and relaxed as she moved into the integrating process and stated to bring in her own self love. A suggestion was given to the client to go to a time where she could fully enjoy her sexuality with another person that she enjoyed being with. These experiences were then anchored into her physical and emotional body.

When the healing session was complete and the client was back to wake state she asked me and her boyfriend: Did anything happened? In this healing session the client went into a deep trance state and resolved--with the assistance of the healer--all the trauma and conflicts in her other-than-conscious mind. This client never needed any inductions for relaxation or to go into this deep trance state. A part of her did it, on its own. She did receive the suggestion for conscious recall as requested, but to this day I do not know if she has conscious recall or not. I suspect that she probably did remember soon after the healing because the experience was so close to her conscious mind.

An opinion why this event, which apparently was so close to the client's conscious mind was blocked from her consciousness could be viewed in this manner. The molesting experience was blocked from the client's conscious mind, because that experience could have activated the client's recall of the early childhood experiences. In the pictures that were observed clairvoyantly by myself, the early childhood experiences were much more traumatic, than the molesting incidences she recalled in altered state. The twitching and spasmodic releases in the client's body were consistent with the areas of the body being abused in the pictures observed from the early childhood experiences. Since the childhood issues were released in this session, and there was no need for the childhood experiences to come into the client's consciousness, the experience at age 13 was no longer a threat to her psyche. The childhood experiences could very easily come into the client's consciousness after the healing, with no detrimental effects to the client's psyche.

Case D

This healing session was one that took place in a healing class that I taught. Each student in the class has a healing session in which the other students practicing healing techniques on them. I also demonstrates certain techniques and assists the students in doing what they were taught in the class.

This client was in a very peaceful state on the healing table, and everything was going along very well. The healing, as the client described it, was more of a union with her own self love, rather than solving any big emotional issue. Healing is on all levels and the client was receiving what she desired. This was a very peaceful and gentle healing. The client's face would get an extra radiance at times, and then her face would be filled with a big smile, then back to that inner peace for awhile, and then back to the smile as this continued for nearly an hour.

Towards the end of the session, an inner knowingness within me indicated that I was to bring in the client's higher self and her oversoul's essence into the client's heart center. In order to do this, I use something like a guided meditation, which lifts both the client and myself to a higher level of consciousness. As one verbally guides this meditation, one feels an uplifting change within oneself. In this case there was a knowingness that I was to move to a yet a higher plane of consciousness to bring in some information to the client.

I felt myself moving to the plane of God, which is one of the higher planes. As my consciousness and body went through the necessary changes for the connections to take place, my whole body became electrified and felt changed inside and out. My boundaries became unlimited and a great heat was felt in the room. The six students not receiving the special experience fell into a deep trance state. They had no recall of this event. Only one student (client) and myself were at a level of consciousness where we could still communicate with one another.

Then a powerful loving voice came through me saying: "You came here to minister to my children. Your preparation in this life is to serve that purpose." The rest can only be summarized as I went higher into the energy, where the only interest is giving the information to the individual that is to receive it, not in remembering every detail that happened and what was said in specific words.

The voice continued, and said basically that: "The only seminary that is meaningful is the seminary with God. Put love in your heart and your mind in your heart and only teach what you know as your own truth. In this manner

you will not teach a non-truth. On the lower planes there are seminaries and they learn and become ministers but they may not know me. Many are ministers to creeds and know me not in their hearts. The true minister knows me, as I know them. We have awakened your mind as to your purpose. You have free choice to accept this ministry if, and when, you feel ready to do it." Then I channeled from this same essence, an ordination ceremony, as the client had accepted the invitation to the ministry.

At the close, the energy subsided with great joy in both of our hearts. I explained that this did not mean that she had to do anything different in her everyday life. Many saintly people do their work without ever being known to others. It is to be an open channel for high spiritual thoughts and beliefs that are to be released into the fourth and fifth levels of consciousness so others can tap into these thoughts as they open up to higher levels of consciousness. Planting the new beliefs and concepts for future generations over the next millennium.

This I call a Spiritual Awakening type healing, which I've been privileged to participate in a number of times. This is not an experience that anyone can come up to a healer and say "I want a Spiritual Awakening." It happens, when according to one's divine plan, one's higher self says it is to happen and the healer becomes an instrument of that individual's plan, just as it is in any other type of experience one has.

As one who has experienced this type of encounter, personally, I offered the recipient counsel about the integration process that one goes through as the awareness quickens within one's self. A spiritual encounter of such magnitude generally means major changes in one's personality and one's beliefs about oneself, others and the world. One's life goals usually go through some major alterations too. She was told that there is no need to rush into one's work, it will unfold in a natural order. One's daily occupation may not even change, only one's thoughts and attitudes may change. One's priorities in life generally change significantly and how one utilizes one's free time is likely to change. One may direct this time towards selfless service to assist raising the spiritual consciousness of humanity.

This type of healing experience is on the soul and spirit level. One does not participate in this type of healing very often, but one never knows what can and will happen on the healing table.

Case E

This client felt very disconnected from her spiritual essence. She knew, intellectually that she was an aspect of God, but she did not feel any connection, no sense of love flowing into her. This healing session was

focused on self love and reestablishing the client's spiritual connection with God. This could be described as lacking in one's seventh chakra. This person also is a medium who is capable of being conscious of the entity or spirit that is using her body as a vehicle to communicate through, much in the same manner in which this healer also functions. In this way, one can have a dialogue between the entity or spirit and one's self.

This healing session involved connecting the client to her heart center and then taking the client's consciousness up to her transpersonal point to make a good contact with the client's soul or higher self. My expectation was that, if that is done, the client should again feel that sense of oneness with God also. In this case, it did not happen the way it always had in the past with other clients. This soul was feeling this same disconnectedness that the client experienced. This was not only a new experience to me, it also moved me out of neutrality, as the logical mind started to say: What do I do now?

At the instant that question presented itself in my mind. The client's guide spoke through the client and said: "The soul was as disconnected from God as the client was and I need to do healing with the soul." The guide further indicated that this soul had incarnated many times to resolve this issue but each incarnation only created further disconnectedness from God.

This was my first encounter in doing therapy, and regressions with the soul of a client. In this case, the soul was regressed back to a time where it felt connected to God, the Source, whatever name the client chooses to call it. The soul went back to a point in time just before it was split off from the Source as an individual soul creation. The soul's connections to God were remembered and, since the client's soul and conscious mind were together on this journey back to God, the client's mind was also reconnected with God.

In this same healing, the client also dealt with her angry soul, which felt it was forced to incarnate when it did not want to. The soul remembered being in an etheric school and preparing for this incarnation, but the soul was removed from school by two beings who told her that it was her time to incarnate into human form. The soul indicated that it tried to tell these two beings that it felt that it was not ready to incarnate. The soul did not think it knew everything that it needs to know for its next life in a body. This soul did not want a body yet!

As one might guess, the client had quite a struggle in the birthing process as did the client's mother. The client also had early childhood experiences that were not very loving in nature, which reinforced the client's thoughts that she did not want to be here on the physical plane. The healing covered all the above stated issues and involved my channeling much information to the

child aspect of the client's personality, and to the client's soul, so that these issues could be resolved. In fact, they were resolved and the client says that, she is connected to her spiritual self and is happy to be here on the earth plane.

This type of encounter has been experienced with other clients, where the client's soul also needed spiritual psychotherapy to resolve incorrect cumulative knowledge and experiences of the soul, through many, many incarnations. Rather than removing the false learning or illusions that the mind and soul had created, these incarnations seemed to create a stronger barrier to the truth of one's inner nature. Since there is no such thing as a lost soul, one only needs to reestablish the connection that the soul can't remember. The spiritual connection is never lost or broken, it is only perceived as lost or broken in one's conscious or unconscious mind. As such, regressions and spiritual psychotherapy are beneficial in establishing this connection again. Spiritual awakening is making a connection so one is enlightened.

Summary

This type of healing and therapy quite often removes problems that the client does not even know exists within her/him. The client comes in feeling one way and leaves with a new perspective on life, and feeling much different, usually without know exactly why. This type of therapy requires that the therapist have a humble ego because one gets very few thank you's, and since the work is done in one session, you do not even get to see the client at the next visit because there is no next visit. When clients asks if they need to come back to see me, I tell them they will know if there is a need to come back. Otherwise, know that everything was taken care of.

I have found over the years that some people want to get well and others do not. Some want to get well right away and others want to go very slowly. The people that want to get well right away come to practitioners like myself, the others stay away from people who might get them well right away. It gets down to becoming responsible for self. If you get well, you're expected to become responsible for oneself. This model of therapy begins with clients taking total responsibility for everything that happens in their life, so they have the power to change what they do not like.

This hardly scratches the surface of the methodology that I use but its purpose is to share some concepts and, perhaps, stimulate some quest for a new understanding and awareness for the reader. Whether you know it or not your reality has been changed just by reading this book, just as my reality has also changed, for I had to reassess all my studies for several years and, in doing so, expanded my reality a little bit more.

So all therapy models are only a starting point and how far one goes beyond that starting point is an individual choice. Some want the universe! What do you want? When are you going to start the search, that has already begun, and will continue to begin, as much as you would like it to, for as long as you want it to be?

Future Aspects of Healing

Those questions: Who am I?, Where did I come from?, Why am I here?, and Where am I going?, are not addressed by most of the present day therapy models. Therapist and clinicians on their own sometimes add these dimensions to their personal therapy model, but they are not a part of an over-all model. Perhaps that is good, in a way, because the models are incomplete and one can added to them. The fallacy of having a model is not telling one that it is incomplete, and each person needs to search beyond the model. NLP and OTC not being psychotherapy models per se, tell you to go beyond, go to the other-than-conscious mind and trust the information that you get, and then to say thank you.

The spiritual aspect of humankind needs to be within the construct of the therapy model being used by a practitioner in order for that person to move to the higher levels of consciousness. The spiritual aspect of humanity needs to be present in the upper portion of the fourth chakra or level of consciousness as this is the union of the lower body (physical, emotional and mental) with the spiritual body. This is the beginning of one's conscious spiritual development.

The spiritual aspect of a person does not come into play until the person's egoic consciousness is located in the heart center, from there, it can move up to the higher levels of consciousness as more understanding and wisdom is integrated, and as one starts obtaining some answers to those four questions, that now become the driving force within oneself.

With this striving to develop one's spiritual dimension, new dimensions in therapy and healing are in order. These issues are so far beyond where traditional psychotherapy is focused, that they totally miss the dominant issues of human nature. As one can observe in the case studies presented, a spiritual aspect of the issue was important for full resolution of the presenting problems with which the client was dealing.

Evidence from many diverse areas is supportive of entirely new concepts of the universe, both the microcosm and the macrocosm. The concept of how the human organism functions within this universe is continuing to evolve. The answers are not here, the exploration is only beginning. The maps are expanding and so is the territory. New models of healing, both physical and

mental, are and will expand greatly as the higher levels of consciousness are explored and integrated into functional working models of healing. These new models will be subject to continual change and updating as the new information is gathered.

These changes will incorporate more and more of the limited knowledge and techniques described herein. This is only the beginning-not the end, and certainly we're not returning to the shaman of old. This is adding to the cumulative knowledge of human kind, which includes the knowledge of the shaman and the scientist, as Dr. Achterberg so eloquently stated it in her book Imagery in Healing (1985). I believe that the human mind can expand beyond that of the shaman or the scientist and go into much higher realms of consciousness than either have dreamed of by combining the positive aspects of each.

Many therapists I have met in the training workshops for healing, spiritual and psychic development, are using these skills right now, today. They may not be as overt as I, but each does what her/his inner guidance suggests. Some therapists are traditionalist and will follow that path, others like myself will break new ground and follow that path, and a greater number will follow the middle path to be the bridge between the old way and the new way, and they will follow that path.

The old ways are not working very well. Clients ask me: "Why do psychiatrists, psychologists and therapists keep doing therapy the old way when they could break a pattern in one session?" What is the answer? I do not know, but I am certain that, when you're interested in your spiritual growth and doing the spiritual work that each one of us came here to do, there's no time to spend five months, let alone five years, in therapy.

It has been demonstrated that hands on healing and absent healing works, and that we all have some degree of Psi ability and it works. We now know the power in the mind can cure the body, or kill the body depending on what the client or patient wants to do.

Until the mind is healed, the body cannot be healed. Cancer and other diseases will come and go, but more will be created until the human mind starts to create total wellness in thought, then, with or without modern medicine and psychiatry, people will be totally well.

The healing of the mind goes back to those four basic questions stated before, when those are explored and answers start being received from the higher mind, then changes take place on all levels. Purpose is given a new identity, and when one has purpose, one puts one's energy into it.

Then action occurs, and with action change. The lifting of consciousness becomes a self-perpetuating activity of the higher self wanting union with the Ultimate Self or God, known by its many names.

This written expression from the viewpoint of one who understands a small degree of what expanded consciousness can do for one's self and humanity, is a testimonial to all that can, and will, be done in the future. The present boundaries to human consciousness are to be removed, so that full capabilities can be utilized. These capabilities go far beyond the imagination. In the context of our presently limited use of consciousness.

This healer graciously awaits the future evolution of his own consciousness and the healing skills and techniques that are being developed and will continue to evolve. Perhaps others have a similar goal if their path is similar, or perhaps they are the bridge and will lead others to the higher levels of wellness and consciousness. If you're one of the old guard you will be left behind, as others will no longer wait for the old ways to finally work. They cannot work, because the Essence is not within them, they are without true purpose. They will fall into decay, into the past, as does all that no longer serves a purpose.

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APPENDIX A

Glossary of Terms

- Apparition:** A visual appearance, usually manifesting only once or rarely, which suggests the presence of a deceased person or animal, or of a living person or animal not within the sensory range of the percipient. The form is similar to the human body, or physical appearing objects that often are perceived tactually, audibly as well as visibly. Their appearance is generally erratic and are likely to appear or disappear suddenly.
- Apport:** An apport is a product of physical mediumship. The materialization of small objects such as stones, flowers, small animals, plants, birds, etc. They are likely to appear or disappear suddenly. The arrival of objects by paranormal means in a closed space, indicating the passage of matter through matter. Also see Teleportation.
- Astral Body:** A term to denote a "double" or replica of the self, which is said to leave the physical body during an out-of-the-body experience, or at the moment of death. It is also called the etheric body.
- Astral Projection:** Out-of-the-Body travel occurs when the physical body is separated from the etheric body, but the silver cord still remains connecting the two. The astral body coincides with the physical body during hours of full, waking consciousness; but in sleep the astral body withdraws to a greater or lesser degree; usually hovering just above it, neither conscious nor controlled. A spontaneous or induced experience in which one's center of consciousness seems to be in a spatial location separate from one's physical body. Also called Out-of-the-Body Experience. A conscious experience of seeing the physical body from this outside position is called autoscopic. They can look upon their physical body or be drawn into it again automatically by reason of shock, fright, or a vivid emotion.

Aura: The complex energy patterns that may be seen emanating from animate and inanimate objects, also known as the energy field or bioplasmic body. The patterns may be multicolored and multilayered relating to the character or quality of the person or thing. The aura is a field of radiation, an emanation, around the body. It is a concentrated field of glowing energy that predominates primarily around the head and around the head and upper shoulders. However, this personal force field can be seen the full extent of the body.

Automatic Writing Writing that is done by an individual without their conscious awareness; writing or script produced without the involvement of the mental processes or conscious effort. The spirit controlling only through the subconscious part of the brain which moves the hand.

Clairvoyance: The term comes from the French and translates "clear-seeing." Extrasensory Perception of objects or objective events. Clairvoyance generally is associated with the perception of static images like photographs, symbols and "scenes played out" like an imaginary movie. Subjective Clairvoyance is when the seer discerns from the interior side of consciousness. Objective Clairvoyance is when the personality presents a distinct physical appearance.

Subcategories of Clairvoyance are:

X-Ray Clairvoyance: The ability to see into sealed objects and rooms.

Medical Clairvoyance: The ability to see within the human body, its mechanism and to diagnose disease.

Traveling Clairvoyance: The ability to change one's perception; to travel with the mind and to describe a distant sight. Also called Remote Viewing.

Platform Clairvoyance: The ability to see or perceive discarnate (a person not in the physical body) personalities.

Within the umbrella of Clairvoyance the following are considered a facet of Clairvoyance.

Clairvoyance: continued Clairaudience: This term comes from the French and means "clear-hearing." This can be experienced as hearing voices or more commonly is experienced as a thought. Words, numbers, phrases or whole sentences may be perceived in this way. Put another way it is the experience of receiving paranormal information through auditory impressions.

Clairsentience: This term comes from the French and means "clear-sensing." This is psychic perception by sensing conditions that pertain to the communicating entities, people, or objects. The physical sensations experienced by the receiver that relates to the person or objects state of health or emotional condition. Gut feelings or hunches are also examples of this gift.

Clairgustience: This term comes from the French and means "clear-taste." This can be experienced as receiving paranormal information through either taste or smell or both.

Cross - Correspondence: A complex form of automatic writing where communication from the other side is given in bits and pieces to two or more mediums such that the complete message is not clear until the separate fragments are put together.

Deja Vu: French term that means "already seen." A sense of familiarity associated with a current event or situation and the feeling of having "lived through" that same situation in an identical manner at some previous time.

Direct Voice: The materialization appears to be the production of a larynx or vocal organs using ectoplasm from the medium in order for the discarnate to communicate through. Many times a trumpet will be used to amplify the sound and is supported by the materialized ectoplasm.

Discarnate A disembodied being; i.e., a spirit. Entity:

- Ectoplasm:** It is a contraction of the Greek word Ektos meaning "exteriorized," and plasma, meaning "substance." This exteriorized substance issues from the medium's body orifices and forms a shape or figure. It is definitely matter and tangible where as an apparition is intangible. It is invisible and intangible in the primary state, and when materialized it assumes a vaporous, liquid or solid condition in its various degrees of condensation. This material also is called psychoplasm or teleplasm.
- Exorcism:** A casting out of evil spirits, demons and unfriendly discarnates through incantation or adjuration.
- Ghost:** An apparition which is observed more or less regularly over a period of time in a specific house or locality and sometime conveys vertical information about the former history of the locality.
- Glossolalia:** Speaking "In Tongues," that is, in a fabricated or unknown language; it usually occurs in a religious context or is attributed to religious inspiration.
- Hauntings:** Hauntings are by spirits of the dead; restless spirits that make recurrent appearances. Two main factors traditionally for hauntings are; an old house and restlessness of a spirit. The first represents an unbroken link with the past, the second is believed to be caused by remorse over an evil life or by shock of a violent death.
- Healing, Absent:** Paranormal healing effected when the healer and healee are not within sensory range of each other.
- Healing, Unorthodox:** Healing effected by non-medical means (such as prayer, Laying-on-of-hands, psychic surgery, etc.) and inexplicable in terms of present day Western medical knowledge.

Inspirational Speaking: Also called (Channeling)	The speaking of thoughts that were suggested by spirits, most frequently without one being aware of it. The normal powers exalted and expanded with or without apparent assistance from discarnate individualities. A form of mediumship in which the medium is not rendered wholly unconscious. It varies from an abstract consciousness to a partial or intermittent entrancement. In this phase, the spirit does not thoroughly control the nerve center through which the organs of speech are manipulated, and therefore only impinges upon the magnetic aura of the medium and directs its thoughts upon the brain, which acts as a sort of receiving station.
Karma:	What you sow you will reap in this life time or another. It is cause and effect. It does not mean an eye for an eye or a tooth for a tooth as stated in the old Testament. An understanding of wisdom will be presented to you in a life situation that is meaningful to your learning based on your past actions.
Levitation:	The raising of objects or bodies in the air by paranormal means.
Lucid Dream:	A dream in which the dreamer is aware they are dreaming.
Lucidity:	An early term for clairvoyance.
Magnetic Healing:	Healing system that begins with making magnetic clearing passes from the trunk to the extremities over the affected areas. The healer as a living electric dynamo, distributes electrical energy in what is called saturation passes.
Materialism:	Belief in power and matter. A theory that physical matter is the only functional reality and that all beings and processes and phenomena can be explained as manifestations or results of matter.
Materialization:	The visual appearance of a discarnate entity that has clothed itself with matter (ectoplasm). The spirit appears in a tangible bodily form; or a portion of the body appears. Materialization is a manifestation of physical mediumship and is considered exceptionally rare.

Mediumship: The phenomena of a spirit or discarnate communicating through a living person (a medium).

Physical Mediumship: The spirits of deceased person or spirit communicates through paranormal physical happenings in the mediums environment through raps, objects moving, materialization, and direct voice.

Mental Mediumship: The spirits impress pictures and sound images upon the medium's psychic perceptivity or else uses the hand or voice apparatus to communicate by speech or by writing.

OBE: Out-of-the-Body experience, see Astral Projection.

Obsession: Suggests external control by an obsessing entity. The entity can be living or a discarnate and exerts influence from without. Also see Possession.

Parapsychology: A field of study concerned with the investigation of evidence for telepathy, clairvoyance and psychokinesis. The branch of science that deals with PSI communication, i.e., behavioral or personal exchanges with the environment which are extrasensorimotor (PK) not dependent on the senses and muscles.

Possession: Means that one's body or personality has been invaded and subsequently controlled by a foreign entity, from the inside. The entity generally is a discarnate, but can also be a living persons subpersonality, thought forms, and non-human entities. No possession can take place unless the person gives consent in some manner. Not taking responsibility for your body or mind leaves the door open for a possession. All obsessing or possessing entities are not to be considered negative. Guides or Guardian Angels etc., are committed to our welfare and assist us to grow towards spiritual maturity. And, it is quite common to invite these spirits into one's space for learning. Many mystics seem to merge with their concept of GOD. Sometimes the term subjugation is used instead of possession.

- Precognition:** Prediction of random future events the occurrence of which cannot be inferred from present knowledge. Predicting the future through psychic processes. One thought is that the event has materialized in the etheric plane and most likely will occur.
- Premonitions:** A warning in advance; forewarning; a presentiment of the future. There is a predictive element in premonitions, but the details are frequently lacking; there isn't the preciseness so often present in precognition. One thought is that the event has not yet materialized in the etheric plane so it is not necessarily going to happen if other events change.
- Prophecy:** To speak as if divinely inspired. A prediction of something to come, acquired paranormally or by psychic means. To predict with assurance or on the basis of mystic knowledge. Two most common methods of obtaining this paranormal information is through a trance medium or from dreams.
- PSI:** PSI is the English language equivalent of the 23rd letter in the Greek alphabet, and is the scientific term for ESP and PK phenomena.
- Psychic:** A person sensitive to non-physical forces. A person who perceives and interprets PSI energy; unlike a medium who contacts discarnates or spirit guides for information. Psychic comes from the Greek psyche meaning "soul."
- Psychic Dreams:** Dreams are series of thoughts, images or emotions occurring during sleep. Freud indicated that dreams are the language of the unconscious mind. Jung indicated that dreams represent efforts by the dreamer to discover their psychic development. If the source of the dream appears to be paranormal in nature then the dream could be called a psychic dream. Reverie is seeing an object in a dream like state.
- Psychic Surgery:** A form of unorthodox healing in which portions of diseased tissues are removed without the use of instruments. Bleeding, infection, etc., are inhibited paranormally.

- Psychokinesis:** The influences of mind on external objects or processes without the mediation of known physical energies or forces. The paranormal movement of an object. The older term "Telekinesis" is still preferred in the USSR and Eastern Europe.
- Psychometry:** The term literally means soul measurement, in Greek "psyche" means soul and "mentron" means measure. Psychometry is also called object-reading. Psychometry is the ability to obtain information about an object or its owner by psychic means, either by touching or handling the object or by being in proximity of the object. An imprint of energy in the matter that is near permanent, has a complete history of the matter or its owner and this is where the information comes from via the use of psychic means.
- Poltergeist:** The word is of German origin and translates; poltern (noisy or rattling) and geist (spirit). A noisy unusually mischievous discarnate held to be responsible for unexpected noises, movements or breakage of objects etc. They differ from hauntings, in that apparitions are rarely seen. Parapsychologist generally associate this phenomena with PK and it often seems to center around the presence of an adolescent.
- Reincarnation:** The soul's rebirth, incarnation, in the form of a human.
- Retrocognition:** Knowledge of a past event which could not have been learned or inferred by normal means.
- Scrying:** Externalizing one's own thoughts or visualizing other peoples by gazing at a fixed point like a glass of water, a glass ball called a crystal, a blank tray or any polished material and comparing various types of thought pictures which appear on the surface with each other.
- Sensitive:** A person who has frequent PSI experiences and can at times induce them at will; similar to a medium, except that communication purporting to come from the deceased are usually not involved.

Spiritual Healing:	Utilizes a natural process arising from a natural source. It serves as a stimulus for natural healing process but its reaction takes physical effect upon the physical organisms of the body. It directly brings the Spiritual mind and physical body into a state of temporary flux. Further more, the healing is directed at the root cause of the problem and not the physical manifestation that is present. If the physical manifestation is to be removed, that will happen on its own accord.
Stigmata:	Bodily marks or pains resembling the wounds of the crucified Christ and sometimes accompany religious ecstasy.
Survival:	Continued conscious existence in disembodied form for at least a period time after bodily death; differs from immortality in that eternal existence is not implied nor is it ruled out.
Synchronicity:	Term used by Jung to indicate the acausal but meaningful coincidence in time of events having the same or similar meaning, and related to archetypal forces; the simultaneous occurrence of a given subjective state and an external event which appears to be a meaningful parallel to that subjective state, or vice versa.
Telepathy:	A process of "mind to mind" communication without using the senses. Also known as mind reading. Telepathic communication may be perceived word for word, or as a general impression of another's thoughts. It can also be precognitive in nature.
Teleportation:	A form of PK phenomena in which objects move over a distance and through other objects.
Trance:	A state of sleep or unconsciousness that is self induced or induced by another. The degree of trance varies from mild dissociation to one in depth. A light trance is called "hypnoidal," a medium trance is called "cataleptic" and a deep trance is called " somnambulantic." Sleep is referred to a state of suspended consciousness during which the powers of the body are restored. This is a deeper state of trance than those named before. The deepest level of trance is called a "plenary" trance where all vital signs of life are non-existent.

- Trance Medium: The conscious manipulation of the mental facilities and the senses of the medium by a spirit, via the psychic organism that controls the physical. A physical body adaptable to manipulation by discarnate entities. The mind and senses of the sensitive must be responsive, as well as attractive, to those who desire to communicate. The level of trance utilized will vary from light trance to deep trance.
- Transmigration: The soul's rebirth, incarnation, in any form. The individual could return as an insect, an animal, etc., depending on the quality of their previous life. This school of thought is very primitive and not generally accepted anymore.
- Xenoglossy: The act of speaking in a recognized foreign language not normally learned by the subject; in recitative xenoglossy the subject merely utters, as from rote memory, fragments of the language, while in responsive xenoglossy they can converse more or less freely in it.