

RESEARCH IN PSYCHIC HEALING

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Introduction

Psychic healing (PH) is defined for purposes of this discussion as the deliberate influence of a person or persons on another living thing or things (animal or plant) by mechanisms which are beyond those recognized and accepted by conventional medicine. The term "paranormal" has been commonly applied to such influences in Western literature. This is a very misleading misnomer, as PH appears to be an ability latently available in many, if not in most people.

PH has been observed in numerous cultures, including early Chinese, Egyptian, Assyrian and Biblical and in modern native shamanistic and healing reports. The mechanisms used by healers to achieve PH may include focused wishes, meditation, prayers, ritual practices, the laying-on-of-hands, etc. It is difficult to know which of these elements are essential to achieving PH and which may be merely superstitious practices.

A substantial body of research has accrued to support a belief that PH exists beyond any reasonable doubt (Benor, in press; Meek, 1977; Krippner and Solfvin, 1984). This paper, therefore, starts with the assumption that the proper focus for future research lies in elucidating the mechanisms involved in its occurrence or non-occurrence.

Healer Reports

Most healers report that a focused state of mind similar to that achieved in meditation is the first step to achieving PH (Krieger, 1979; Leshan, 1974; Krippner and Villoldo, 1976). The term "centering" is commonly used, an image derived from the potters' wheel—the healer seeking to be in a balanced state, in tune with the center of his being and with the All. Some healers may not need to do this as a separate step, as they may be constantly in a centered state (Cade and Coxhead, 1978). Others appear to be able to enter such a state very rapidly (Miller, 1977).

The next step is to engage with the healee. This is commonly achieved by the healer's laying his hands in direct contact with the healee's body. Clothes are almost never reported to be a barrier. Alternatively, the healer may make "passes" (movements of his hands) around the body without touching it. LeShan has labeled this the Type II PH. Healers often report that they sense heat, tingling, cold, prickliness or other sensations in their hands when engaged in these practices. Likewise, healees often report that they experience similar sensations as the healers' hands move around their bodies. This is true regardless of whether on-body or near-body passes are used (Turner, 1969a). Healers report they can identify altered sensations in their hands as they make passes over specific points on the body which are in need of PH and that these abnormal sensations often return to normal following their treatments (Krieger, 1979).

Healers say that PH can be performed with equal effectiveness without passes and at unlimited distances from the healees, via "distant" or "absent" PH (LeShan, 1974; Turner, 1969c). This is achieved through a process of focused attention, meditation and/or prayer. It may also include visualizations of the sending of healing energies, of seeing the healee as whole and well, etc., (Estebany, 1982; Kraft, 1981; Knowles, 1954, 1956; Shubentsov, 1982). LeShan has labeled this Type I PH. Healees may report sensations of heat, tingling, etc., during distant healings, in the same way as experienced during the laying-on-of-hands (Turner, 1969c).

Although healers claim that any illness may be arrested, alleviated and/or cured by PH, they usually cannot predict who will or will not be helped. Pain is the symptom most consistently found to respond to PH. The list of illnesses for which reliable medical reports of unusually rapid cures via PH are available include: acute and chronic infections; cancers in all stages of development; vascular diseases; neurological disorders; and innumerable other problems, many of which had been deemed untreatable and incurable by conventional medical practitioners.

Healer Theories Explaining PH

External energies: Most healers feel that an energy is involved in PH. The source for the energy is postulated either to originate in the body of the healer (Krieger, 1979; Krivorotov, 1981; Meek, 1977; Safonov, 1981; Shubentsov, 1982; Turner, 1974) or in the cosmos at large (Kraft, 1981; Lombardi, 1981-4). The healer may thus see himself as the originator of the PH or as a channel for it. Some postulate more than

one type of energy, especially to account for both Type I and Type II healings.

"Normalizing" healee energies / psychophysiology: Disease is hypothesized to be due to learned mispatternings of body functioning. PH is seen as a release of the body from these learned malfunctions (which were superimposed upon the innate "intelligence" of the normal cells and organs), allowing the body to return to normal patterns of functioning (King, 1983; Ramacharaka, 1934). PH may thus involve either the imposition or replacement of healthy patterns by the healer or merely an interruption of healee disease patterns, with spontaneous return to normal function.

Invocation of external healing intelligences: Many healers believe that PH is brought about by the intercession of spirit entities, Christ or God (Edwards, 1953; Sanford, 1949; Turner, 1974). These healers commonly report that they actually see the involved spirits and communicate back and forth with them. (These healers are commonly called "spiritual healers." A more accurate term would seem to be "spirit healers," denoting the spirit involvement. Many such healers would argue, however, that a most important concomitant to their ministrations is the enhancement of healee spirituality as a result of the PH and that therefore the "spiritual" designation is the more appropriate.)

Many healers hold that a combination of the above apply and that the overlap in beliefs covers the entire range of possibilities. This makes the elucidation of PH processes quite a challenge, if one is to rely merely upon healer reports!

Possible Mechanisms for PH

(1) Energies

PK: Inasmuch as PK is presently understood to involve the apparent influence of mind over matter without *known* intervening physical matter or energy agencies, PH appears to have much in common with PK, if not actually representing PK in living systems. Evidence supporting this can be adduced from the observations that Type I healing appears to function without diminution over great distance (LeShan, 1974; Turner, 1969c). A spectrum of influence of mind over target matter is evident, from inanimate water and metals (a common PK target), to cells, [bacteria (Nash, 1982; Rauscher and Rubik, 1983), yeast (Nash and Nash, 1967) and other laboratory cell cultures (Kraft, 1981)], to plants (Loehr, 1969), to animals—including man (Turner, 1974). Individuals involved on both sides of the PH event report distinct sen-

sations suggesting energy flows, similar to the warmth and tingling occasionally reported by observers interposing a hand between the hand of a PK adept and the target object. A number of PK adepts are also healers (e.g., Kulagina, Manning, Vinogradova). Healers often feel that their PH involves the projection of an image of wellness and wholeness upon the healee. Some similarities exist in the mental states of healers and PK-ers, as in instances of PH and PK occurring in focused states of concentration (letting it happen) as well as in states of heightened emotionality and tension (forcing it to happen, as in PKMB "parties" and revival tents).

There is, however, evidence negating the likelihood of PH being identical to PK. Mental states involved in PH often appear to be qualitatively different from those in PK. PH usually includes reverence, whether in quiet or excited settings. PK often appears to involve a forced willing of the desired result upon the target object. This difference may be more apparent than real. Perhaps it relates to the differences between live and inanimate targets, or to healers' or PK adepts' attitudes towards their various targets; or to differences in intent in the two processes—PH assaying to alter the internal structures or functions of a complex target organism, whereas PK seeks usually to move an object.

Healers report clear sensations of energy fields around healees, serving both as sources of information regarding the physical state of the healee as well as an access-mode for PH intervention. On the sensory side this may again be more a point of similarity between PH and PK, in that a number of healers point out that objects may be distinguished by the various tactile sensations of their palpated energy fields. The accessing of living organisms for PH via their fields, however, appears to be different from modes of influencing PK targets, in which fields are not described in the PK process.

Telepathy: Some evidence suggest that living organisms are surrounded and interpenetrated by organizing fields (Becker and Marino, 1982; Schwarz, 1980). Rather than the healer projecting an active energy, he may simply telepathically influence the organism to relinquish its disease "templates" or patterns of self-perception. In support of this are numerous healer reports that what they do is to convince or simply allow the healee to believe that he is whole and well. Philippine healers say that their materializations of objects and gory psychic surgery are designed for this purpose and to prevent the healee from bringing back his disease through disbelief in change and persistence of the diseased self-image (Stelter, 1976). Others, such as native Amer-

ican (Boyd, 1974) and Kahuna (King, 1983) healers report similar reasoning behind dramatic PH rituals.

That a person can drastically influence his own body is amply witnessed by conditioning techniques which produce biochemical alterations in physiology, even extending to immunological responses (Locke and Hornig-Rohan, 1983) and suggestive or hypnotic techniques which produce hematological changes (e.g., reduced bleeding, even in hemophiliacs), blisters, etc. (LaBaw, 1970). All of these could be activated by a healer. This explanatory mechanism for PH is further supported by evidence for the existence of telepathic hypnosis (Vasiliev, 1976).

Apparently negating the likelihood of telepathy as a PH mechanism is the evidence for PH effects from experiments with bacteria, yeasts and plants. It seems unlikely, at first glance, that these seemingly mindless organisms could respond to telepathic suggestions in order to produce PH effects in themselves. Closer scrutiny of parapsychological literature begins to produce evidence that such organisms may possess some forms of consciousness or intelligence (e.g., RNG experiments [Edge, 1978]). There are also reports of psi adepts that they sense an awareness in such organisms (Tompkins and Bird, 1973) and Sheldrake's evidence (1981; *Brain/Mind*, 1983) for morphogenetic fields. Thus, telepathy cannot be ruled out as a possible PH mechanism on the basis of PH effects in non-human organisms.

PH energies: A body of evidence suggests that one or more energies may be involved in PH, including apparently altered hydrogen bonding (Miller, 1977; Dean, 1982) and surface tension in water produced by PH (Miller, 1977). There is altered crystal formation from solutions of copper salts treated with PH (Miller, 1977) and similar effects on water and enzymes produced by magnetic fields as those produced by PH (Miller, 1977). There are reports of apparent storage of PH effect in inanimate materials, such as water, paper, cloth, etc. (Dean and Brame, 1975; Grad, 1976; Loehr, 1969; MacDonald, et al., 1977; Miller, 1977; Turner, 1969b), as well as linger effects (Wells and Watkins, 1975) and enhancement of growth in plants watered by PH-treated water and by water treated with magnets (Miller, 1977). Ultraviolet light has been observed to emanate from the hands of healers (Krippner, 1980; Krivorotov, 1981) and there has been exposure of photographic plates placed next to healees during PH (Moss, 1979; Turner, 1969a; Watkins, 1979). Sensations in healers and healees of energy flows during PH (Turner, 1969a, c) have been noted and reports of a clinical (Bandler and Grinder, 1979; Boerstler, 1982) and experimental (Alrutz, 1976; Vasiliev, 1976) nature which indicate that the breathing of the healer or experimenter may have an effect on target organisms. There

has been photographic evidence of alterations in the Kirlian aura of healers and healees before and after PH treatments (Johnson, 1975; Moss, 1979), as well as some other interactive effects between individuals' Kirlian auras, related to rapport between subjects (Steiner, 1977). There are reports by clairvoyants of visible aura interactions between healer and healee and changes in their auras during healings (Schwarz, 1980). Some healers report that their treatments are directed solely to the aura or energy body of the healee (St. Clair, 1979), which is said to act as a template for the physical body's functions. There are some isolated, sketchy reports of interference with healing by electrical storms (Turner, 1969b). The weight of evidence at present seems to favor this theory. This, in turn, may have a bearing upon elucidation of the nature of PK processes, assuming the involvement of PH with PK to be also correct.

Standing against the energy theories are some healers' reports that performing a PH does not involve a "doing," but rather a "being" (LeShan, 1974). This way of being involves a disengagement of linear thinking, while maintaining a caring, loving, embracing attitude towards the healee and developing a sense of oneness with the All. This may prove to be a truer explanatory mechanism (than linear energy hypotheses) in some holographic or other system of understanding of the mechanisms of occurrence of these PH phenomena. Alternatively, these states of mind may ultimately prove to be merely the mental states of the healers which are necessary for accessing the PH-effective state(s) or for opening the healing energy channel or focusing the healing lens of the healer's mind.

(2) *"Normalizing" mechanisms*

Most normal psychophysiological functions are very complex and as yet only partly or even poorly understood. Processes such as the maintenance of organ integrity during periodic replacement of cellular elements, or cessation of cellular divisions when repair of tissues is complete have no adequate explanations in conventional medical theory. Malfunctions of the body due to psychophysiological factors are somewhat better understood. Conventional medicine views these as resulting from psychological anxieties which produce physiological malfunctions. The mechanisms involved may include: neurological (voluntary and autonomic) influences upon gross and microscopic (as in blood vessels) bodily musculature; neuro-hormonal alterations affecting multiple homeostatic mechanisms in every bodily organ and, only recently demonstrated, immunological conditioning. Theories re-

garding tension and relaxation and conditioning are adduced to connect mind and body processes.

Much remains to be clarified before we can say that we properly understand these mind/body interactions. Without pretending to know all the mechanisms involved, however, we can observe that mental states and attitudes strongly influence bodily functions. People with a healthy outlook on life seem to have healthy bodies. People with anxieties, depressions and negative attitudes tend to be more disease-prone. Healers in many cultures approach the person in a holistic fashion, working on his attitudes as one of their accesses to curing his physical ills. Western holistic medicine is starting to rediscover these approaches. The healer may engage the healee through social interactions (invoking cultural traditions), through social-interactive (vs. telepathic) suggestive techniques and by eliciting his conscious cooperation in altering his attitudes regarding his well-being or illness. These approaches may help the healee's body to apply its presumed native intelligence to resume more normal function and to conquer or relinquish disease.

In addition to the more familiar mechanisms above, the healer may enhance his interactions via telepathic suggestions which complement his clairvoyant perceptions of the healee's condition. This may also provide an explanation for the perception of the healer that he is "one with" the healee during PH interactions.

Biological energy fields (e.g., DC body fields, auric fields, acupuncture meridians, etc.) have been explored by a few pioneering researchers in earlier decades and by some modern holistic medical practitioners as possible mechanisms for maintenance of health or production of disease (Burr, 1972; Ravitz, 1962, 1970; Schwarz, 1980). Such fields are postulated to be "templates" for bodily functioning in health and disease. Theoretically, a person may negatively influence his field by thinking anxious or other disturbed thoughts, producing consequent alterations in his body. These fields may likewise provide direct access for PH via healers' UV or other energy production or channeling in Type II healings. They may also provide for Type I PH via telepathic healer interventions which lead the healee to alter his own organizing biological field which then produces a healing in his body.

Objections can be raised that postulation of an organizing field is a specious, homunculus-type explanation, which merely leaves a rather nebulous and mysterious organizing field to be explained. Without apologies I agree to this objection, but point to some further evidence which may be a start in the direction of establishing the presence of and elucidating the functions of these fields.

Becker and Marino (1982) review a wealth of material pointing to

the existence of a DC field around the bodies of living organisms. The most convincing is that of Marsh and Beams (1952), who studied the species *planaria* (flatworms). These creatures have the remarkable ability, after being cut to pieces, of regenerating an entire worm from any piece of worm. Furthermore, they have an electrical body polarity which is maintained by each piece of worm. That is, the head-end of each piece retains the same polarity as the original head of the worm, relative to the tail. Invariably, the head-end of each piece regenerates a head and conversely for the tail-end. However, if an external polarization stronger than that of the piece and of opposite polarity is superimposed upon the piece, a head will grow where the tail should be and vice versa.

Softer evidence may be gleaned from psi-sensitives' reports. Claims are made that spirits exist on contiguous planes of reality. A growing body of research evidence supports a belief in survival of a person after death (Osis and Haraldsson, 1977; Ring, 1982; Sabom, 1982) and in reincarnation (Stevenson, 1974a, b; Wambach, 1978), which may begin to provide clues to explain some of the connections and interactions between spirit(s) and their own bodies, as well as influences of spirits on others' bodies. The spirit body may represent a field phenomenon, perhaps identical with the aura.

Sheldrake's hypothesis of morphogenetic fields extends the concept of intelligence to include a species-specific consciousness, established presumably via telepathic communications between members of the species. This lends support to other observations of group-consciousness effects which may have consequences in the physical world. The Philip phenomenon (Owen and Sparrow, 1975) and "thought forms" (Besant and Leadbeater, 1971) reported in parapsychological literature also seem to be in this category, though perhaps less well supported as field effects rather than individual PK enhanced by group process.

Rather than discard organizing field hypotheses because they are once-removed from the more easily studied physical world, I suggest we might better seek to study, to understand and to incorporate them into our weltanschauung.

(3) Spirit help

Spirits are reported by sensitives and healers to be interested in helping with the ills of humanity. There has been ample review of the apparition phenomenon in parapsychological literature so that extensive discussion here seems superfluous (Gauld, 1977). Suffice it to say that healers very frequently say that they are assisted by spirit entities who

inform and guide them in their PH work. There are also reports of PH mediumship, in which spirits are said to possess the healer during his healings in order to provide diagnoses or prescriptions or even to perform psychic surgery (St. Clair, 1974) via the agency of the healer's body, which is temporarily under spirit control. During such mediumship, some diagnostic information has occasionally been transmitted in terminology which is totally unfamiliar to the healer and some even as xenoglossy (Fuller, 1975).

Directions for Further Research

There are several levels of approach for studying PH. Each appears to have much to offer in our search for an understanding of our place in the cosmos. The possibilities are endless and only a few provocative suggestions are raised here.

Molecular events as reflected in such experiments as those on PH-treated water and on crystallizations from copper salts seem to provide the most specific information regarding mechanisms of action of PH. The report of Douglas Dean on a new crystal structure in water (1982) is especially provocative. There are reports that such changes in water may last for years. Replications and extensions of such research to other fluids would be helpful. A study of dilution factors in such water might provide unusual findings, if the alterations are in the field of the water rather than merely in its molecular structure, as is suggested by proponents of homeopathy.

A number of healers report that healing energies can be stored within substances such as paper and cloth through Type II healing methods. One healer even reports that such stored energy can be transferred from one object to another. These reports warrant further investigation as to the varieties of materials which can or cannot serve in this capacity. (Many theoretical questions can be raised, such as whether this phenomenon is an actual storage of PH energies, a means for clairvoyantly interconnecting healer and healee, or merely a magical belief. My personal impression is that both of the first two speculations will be confirmed and not the third.)

Biochemical analyses of PH effects would be the next level of study. Reports on enzymatic changes under PH sorely need replication and extension. Spectrophotometric analyses of serum or other body fluids seem warranted to see whether altered hydrogen bonding is present following PH on the subject.

Studies of bacterial responses to PH under varying biochemical and other stresses offer elementary *in vivo* systems for elucidation of PH

action. Rauscher and Rubik's pioneering work in this area is to be commended (1983).

Genetic systems, which include a random recombination of chromosomes, would appear to promise fruitful fields for study of PH, assuming similarities between PH and PK and following the conformance model for PK. It would seem a simple test to attempt to influence the probability of occurrence of genetically inherited traits in plants and animals. Nash (1984) has made a nice start in this direction.

Human research promises to be enlightening. Studies of personality, belief systems and other psychophysiological variables in healees which might increase or decrease responsivity to PH would be fruitful. Strauch (1963) made a nice beginning in this area, reporting that anxiety and intellectualizing abilities correlated negatively and simple belief in healing correlated positively with response to PH. Much more remains to be done here. For instance, healers claim that belief in PH or in the healer is not essential to successful healings, but that disbelief in one's ability to recover from one's illness can block healing. Much more exploration must be done before one can be certain that the above are valid observations. More formal psychological testing, including variables such as internal vs. external locus of control; MMPI; Tennessee Self Concept Scale; suggestibility; state and trait anxiety; facility in meditative practices; IQ, etc., might yield further variables correlated with responsiveness to PH.

Studies of types of diseases responsive to PH in general and to PH as performed by particular healers and PH systems (e.g., Reiki, Therapeutic Touch, LeShan methods) are sorely needed. Healers tend to be optimistic that any and all illnesses may respond to their ministrations. They may need to claim this in order to produce confidence in healees or in their own minds re their healing abilities. More likely, they have not observed, recalled or recorded sufficient numbers of cases to provide accurate answers to such questions.

Similarly, studies of particular symptoms responsive to PH or to particular healers or systems of healing are needed. For instance, pain is the most commonly reported symptom to respond, regardless of physiological cause. Is this due to stimulation of endorphins or enkephalins, the body's natural morphine-like substances within the brain? Is it due to psychological mechanisms without production of endorphins? Administration of Naloxone, a morphine-antagonist, prior to PH would give clues to these questions of practical and theoretical importance.

It is conceivable that pain reduction may be dangerous in some instances, as where the masking of a worsening physical condition would

lead to delay of surgery or other conventional treatment. Such problems have not been reported in any of the healing literature, though an occasional healer will mention that he is cautious not to endanger healees in this fashion.

Research on healers is sorely needed. Some preliminary reports on EEG characteristics of healers indicate that they enter meditative-like states rapidly and that the activity in right and left hemispheres appears to be synchronized in the more advanced healers. These and other physiological variables, including GSR, electrodermal activity at acupuncture points and chakras and bioluminescence in the UV range seem worthy of study. Synchronization of EEG and breathing of healers and healees may also be worth studying.

Study of similarities and differences between gifted PH and PK adepts appear warranted, to attempt to develop profiles which might elucidate whether PH and PK are similar if not identical processes. If there is an overlap in the two processes, one would predict that PKMB adepts, who alter the internal structure of matter, may have more in common with PH adepts than PK adepts who are skilled in moving gross objects around. Studies of those adepts possessing both abilities should be especially fruitful.

Another factor worth looking at is ultrasound, which has been reported to emanate from the cranium of PK adepts. This should be studied in healers as well.

Psychological variables and belief systems characterizing successful healers and especially the meditative states they enter while engaging in PH appear worthy of further study. LeShan has done pioneering work in this area. Much more remains to be clarified. For instance, some healers report that they are drained and tired following PH treatments; others report that they are energized when engaging in PH. Can these two types of healers be distinguished by psychological variables, perhaps such as belief in self-generated vs. channeling sources for PH energies? (The preponderance of healer-origin for PH energies in Eastern countries leans in this direction.) Or perhaps variability in healer effectiveness might be correlated with characteristics such as inner vs. outer locus of control, or other variables as suggested above for healees.

Cross-cultural studies of healers and shamans might reveal common denominators underlying successful PH in more striking fashion than studies in single cultures. Why shamans often engage in initiatory practices involving pain and death/rebirth themes seems a question worth pursuing. Do such practices produce more potent healers?

Medical clairvoyance by direct impression, by mediumship, or by

augmentation via radiesthesia and/or radionics has been widely reported, but little evaluated. This would be easy to study and would make an extremely valuable complement to conventional medical practice.

Healers' belief systems point to evidence for possible existence of spirits and other cosmological realities which Western science has tended to scorn as unverifiable. These beliefs may prove to be merely mental tools for entering and manipulating alternate realities, or they may help provide means for experimenting with those other realities.

The traditions of teaching and learning of PH under different Western systems may provide helpful clues to the PH process itself.

The motivational factor seems to be an important one in making PH a fruitful area for study. Clinical intuition and laboratory impression seem to indicate that when this variable is present and positive, parapsychological phenomena occur with greater frequency. PH might therefore prove to be one of the more fruitful arenas for parapsychological research endeavors. This variable may also prove to be a helpful predictor of response to PH.

The discomfort of persons whose paradigms are challenged by the existence of parapsychological phenomena may be alleviated by PH more than by many other psi events. This last is intended to be taken on two levels! First, the motivation factor to be healed of one's ills may make people more open to studies of PH. Second, PH can directly alleviate anxiety, so that PH demonstrations may inherently be more easily accepted by observers in contact with the presence of the healer. This factor is worth studying as it may relate to responsiveness to healing, but may also shed light on a serious stumbling block to acceptance of parapsychology in general.

My Personal Experience With Healing

My interest in PH was awakened by observing a physical change as a result of half an hour's PH treatment (Reiki PH techniques) of a young man. I could not explain this change with any medical mechanism. It clearly transcended and contradicted much of what I had learned in medical school. It left me doubting my senses and seeking to explain it away rather than to alter my belief systems. Fortunately, there was another physician there with me, undergoing the same struggle with retrocognitive dissonance. We were able to reassure each other that our senses had not betrayed us and to confirm that an unusual physical change had indeed occurred in this young man's body.

I knew immediately that I had found a subject which I wanted to

research. At first my involvement was entirely intellectual. I set out to do a double-blind study of Type I PH in surgical patients.

I debated long and hard before deciding to engage in first hand experiences with healing. My initial prejudice was to "stay objective," i.e., to study this fascinating subject strictly from a reviewer, observer and experimenter vantage point. As I began to comprehend PH (to "grokk" it, a term for more penetrating grasping of a subject to the depths of its most subtle nuances, borrowed from Heinlein's *Stranger in a Strange Land*, describes this better), I began to *feel* that this was a wrong way to go about it. Again, my words are chosen deliberately. Being around healers and immersing myself in the study of PH led me to heed and, eventually, to trust my feelings and intuitions much more.

So I started with a course in the LeShan method, taught by Joyce Goodrich. This provides intensive exposure to a variety of meditative and visualization techniques which are utilized to center and engage in Type I healing. Though this gave me a clear understanding of the process of "being one with" the healee in a dispassionately loving manner and left me with a greater appreciation for and facility in meditation, it did not give me any great confidence that I could do PH successfully.

I next took a course in Reiki healing, derived from Japanese traditions. This was taught by Ethel Lombardi, a Reiki Master, who was also the healer I observed who initially sparked my interest in PH. Reiki Level I healing involves the laying-on of hands with direct contact with the body. After learning the techniques and receiving an induction (opening up of healing channels by the Master), I joined a group which practiced these techniques weekly on each other and on people with various illnesses. This was an invaluable experience in that it provided group feedback regarding sensations of healee energy fields and energy flows, as well as PH energies and their effects on the healee's energies. In this group I had others with whom to compare notes when I felt heat, tingling, cold, etc. as I performed the prescribed patterns of Type II healings. It was thus that I could convince myself that I was not merely imagining the unfamiliar sensations in my hands, or merely engaging in wishful thinking when I reported I sensed emotional processes in the healees without their verbalizing any clues which could have cued me to what they were experiencing. This latter was fascinating to me. Most of the others in the group would report clairvoyant impressions of physical symptoms, while I would come up with impressions of emotional ones.

I learned a little about Therapeutic Touch (TT) from a nurse who came to our Reiki group to demonstrate, compare and discuss this.

Later, I had the privilege and pleasure of participating in a workshop with Dolores Krieger, R.N., Ph.D. and Dora Kunz (a very gifted clairvoyant and healer) who originated the TT technique. I am still fascinated and puzzled by some of the differences between TT and Reiki methods and hope to pursue these to reach some understanding of the PH process.

More recently, I took another course with Ethel Lombardi in a method she is developing, called MariEl. This is a very potent variety of Type I healing. Using this together with Reiki techniques, I have helped several people deal with physical problems successfully. I must admit it still gives me goosebumps even to write this!

To say that my experience with healing has been transforming is an understatement. More than anything else, this has given me an appreciation for clairvoyant modes of knowing reality. That is, when doing PH I feel a oneness with the healee and a knowing of aspects of his illness which *transcends* linear modes of knowing. I use that word to denote not merely that this mode of knowing reaches other levels of reality, but that this knowing has the feeling of being more real and reliable than knowing derived from linear, left-brain processes. This is sometimes a rather strange, sometimes even weird experience, as I dialogue internally between what feels like my left (linear) and right (intuitive/clairvoyant) thought processes. For instance, when I suffered a long series of setbacks in setting up a research project in distant PH in surgical patients, I was puzzled to find myself less upset than I thought I ought to be. Being a psychiatrist, I engaged in much introspection and soul-searching to clarify whether I was merely rationalizing away disappointment or whether I could really be taking with such equanimity the apparent voiding of several years' intensive efforts. My conclusion comes more from the clairvoyant knowing that, indeed, I am okay in feeling okay, than from left-brain analyses which cannot be proven one way or another. And the whole experience (and many others which previously would have been terribly disappointing or in other ways distressing) becomes one of life's lessons, lovingly welcomed. This is not to say that I no longer feel pain or sorrow or other discomforts (e.g., I recently had a difficult spell with the death of my father). But these spells have a different quality to them, partaking of perspectives appreciated from other levels of reality.

Engaging in doing PH has also helped me find a place in the cosmos where I feel I belong; where I feel I am on my Path. In healing, I find that most of the little streams of my interests and training all combine into a powerfully flowing river of energy.

It is hard to put all these experiences into words. The reader is encouraged to taste of these other realities himself for a fuller appreciation of what I am describing.

Summary and Conclusions

Psychic healing (PH) is a variety of parapsychological phenomenon which deserves far more attention than it has received. There is sufficient evidence from controlled studies to support a belief in the validity of this phenomenon. Much remains to be done to clarify its nature. This paper presents some suggestions regarding the probable fruitfulness of PH research.

In PH research, perhaps more than in any other branch of parapsychological endeavors, there are promises for immediate benefits and applications. The integration of PH as an *adjunct* to conventional medicine appears long overdue. (Emphasis is placed on the term *adjunct*, as distinct from the commonly used term, *alternative*). There are numerous illnesses for which conventional medicine has only partial, symptomatically unsatisfactory answers. PH could be a most useful adjunct in such cases. It is a pity that insufficient knowledge is available to most Western medical practitioners, so that even within the more enlightened holistic medical movement PH is too often eschewed as too exotic to be used, advocated, or even written about in their journals. Hopefully, parapsychology will lead the way in researching this area of vital importance to humanity.

BIBLIOGRAPHY

- Alrutz, S. *Compte Rendu Du I Congres International des Recherches Psychiques*. Copenhagen: 1922, p. 278. (Details in: Alrutz, S. *Neuer Strahlen des Menschlichen*. Stuttgart: Organismus, 1924. Reviewed in: Vasiliev, L. L. *Experiments in Distant Influence*. New York: Dutton, 1976, p. 7.)
- Bandler, R. and Grinder, J. *Frogs into Princes: Neurolinguistic Programming*. Moab, UT: Real People, 1979.
- Becker, R. O. and Marino, A. A. *Electromagnetism and Life*. Albany: State University of New York Press, 1982.
- Besant, A. and Leadbeater, C. W. *Thought Forms*. Wheaton: Theosophical/Quest, 1971. Orig. 1925.
- Boerstler, R. W. *Letting Go: A Holistic and Meditative Approach to Living and Dying*. Wauertown: Associates in Thanatology, 1982.
- Boyd, D. *Rolling Thunder*. New York: Delta/Dell, 1974.
- Brain/Mind Bulletin*. "Do M-fields affect detection of hidden images." *Brain/Mind Bulletin*, 1983, 9, (1), 3. (Also in *New Scientist*, 1983, 1381).
- Brain/Mind Bulletin*. "Test supports Sheldrake theory." *Brain/Mind Bulletin*, 1983, 8 (15), 1.
- Burr, H. *Blueprint for Immortality*. London: Neville Spearman, 1972.
- Cade, C. and Coxhead, N. *The Awakened Mind: Biofeedback and the Development of Higher States of Awareness*. New York: Delacorte Press/ Eleanor Friede, 1978.

- Dean, D. "Research in healing: Effects on water." Presented at Workshop on Healing Research at the combined 100th anniversary of the Society for Psychical Research and 25th anniversary of the Parapsychological Association meeting, Cambridge, England, August 1982.
- Dean D. and Brame, E. "Physical changes in water by laying-on-of-hands." *Proceedings of the Second International Conference on Psychotronic Research*, Monaco, 1975, 200-201.
- Edge, H. "Plant PK on an RNG and the experimenter effect." In W. G. Roll (Ed.), *Research in Parapsychology 1977*. Metuchen, NJ: Scarecrow Press, 1978, pp. 169-174.
- Edwards, H. *The Evidence for Spirit Healing*. London: Spiritualist Press, 1953.
- Etebany, O. Personal Communication, 1982.
- Fuller, J. G. *Avigo: Surgeon of the Rusty Knife*. New York: Simon and Schuster, 1975.
- Gauld, A. "Discarnate survival." In B. B. Wolman (Ed.), *Handbook of Parapsychology*. New York: Van Nostrand Reinhold, 1977.
- Grad, B. R. "The biological effects of the 'laying on of hands' on animals and plants: Implications for biology." In G. Schmeidler (Ed.), *Parapsychology: Its Relation to Physics, Biology, Psychology and Psychiatry*. Metuchen, NJ: Scarecrow Press, 1976, pp. 76-89. (Also in the *Journal of the American Society for Psychical Research*, 1965, 61, (4), 286-305.
- Johnson, K. *The Living Aura: Radiation Field Photography and the Kirlian Effect*. New York: Hawthorn, 1975.
- King, S. *Kahuna Healing: Holistic Health and Healing Practices of Polynesia*. Wheaton, IL: Quest/Theosophical, 1983.
- Knowles, F. W. "Some investigations into psychic healing." *Journal of the American Society for Psychical Research*, 1954, 48, (1), 21-26.
- Knowles, F. W. "Psychic healing in organic disease." *Journal of the American Society for Psychical Research*, 1956, 50 (3), 110-117.
- Kraft, D. *Portrait of a Psychic Healer*. New York: G. P. Putnam, 1981.
- Krieger, D. *The Therapeutic Touch: How to Use Your Hands to Help or Heal*. Englewood Cliffs, NJ: Prentice-Hall, 1979.
- Krippner, S. *Human Possibilities: Mind Exploration in the USSR and Eastern Europe*. Garden City, NY: Anchor/Doubleday, 1980.
- Krippner, S. and Solvvin, G. "Psychic healing: A research survey." *Psi Research*, 1984, 3, 16-28.
- Krippner, S. and Villoldo, A. *The Realms of Healing*. Millbrae, CA: Celestial Arts, 1976.
- Krivorotov, V. "Some issues of bioenergetic therapy." In L. Vilenskaya (Ed. and Trans.) *Parapsychology in the USSR. Part III*. San Francisco: Washington Research Center, 1981, p. 30-41.
- LaBaw, W. L. "Regular use of suggestibility by pediatric bleeders." *Haematologia*, 1970, 4, 419-425.
- LeShan, L. *The Medium, the Mystic and the Physicist: Toward a General Theory of the Paranormal*. New York: Ballantine, 1974.
- Locke, S. E. and Hornig-Rhan, M. *Mind and Immunology: Behavioral Immunology 1976-1982*. New York: Institute for the Advancement of Health, 1983.
- Loehr, F. *The Power of Prayer on Plants*. New York: Signet, 1969.
- Lombard, E. Personal communication, 1981.
- MacDonald, R., Dakin, H. S. and Hickman, J. L. "Preliminary studies with three alleged 'psychic healers.'" In J. D. Morris, W. G. Roll and R. L. Morris (Eds.), *Research in Parapsychology 1976*. Metuchen, NJ: Scarecrow, 1977.
- Marsh, G. and Beams, H. W. "Electrical control of morphogenesis in regenerating *Dugesia tiprinum*." *Journal of Cell and Comparative Physiology*, 1952, 39, 191.
- Meek, G. W. *Healers and the Healing Process*. Wheaton, IL: Theosophical, 1977.
- Miller, R. "Methods of detecting and measuring healing energies." In J. White and S. Krippner (Eds.), *Future Science*. Garden City, NY: Anchor/Doubleday, 1977.
- Moss, T. *The Body Electric*. New York: St. Martin's, 1979.

- Nash, C. B. "Psychokinetic control of bacterial growth." *Journal of the Society for Psychical Research*, 1982, 51, 217-221.
- Nash, C. B. "Test of psychokinetic control of bacterial mutation." *Journal of the American Society for Psychical Research*, 1984, 78, 145-152.
- Nash, C. B. and Nash, C. S. "The effect of paranonally conditioned solution on yeast fermentation." *Journal of Parapsychology*, 1967, 31, 314.
- Osis, K. and Haraldsson, E. *At the Hour of Death*. New York: Discus/Avon, 1977.
- Owen, I. M. and Sparrow, M. *Conjuring up Philip: An Adventure in Psychokinesis*. New York: Harper and Row, 1976.
- Ramacharaka, Y. *The Science of Psychic Healing*. Chicago: Yogi Publishing Society, 1934.
- Rauscher, E. and Rubic, B. A. "Human volitional effects on a model bacterial system." *Psi Research*, 1983, 2, (1), 38-48.
- Ravitz, L. J. "History, measurement and applicability of periodic changes in the electromagnetic field in health and disease." *Annual of the New York Academy of Sciences*, 1962, 98, 1144-1201.
- Ravitz, L. J. "Electromagnetic field monitoring of changing state functions." *Journal of the American Society for Psychosomatic Dentistry and Medicine*, 1970, 17, (4), 119-129.
- Ring, K. *Life at Death: A Scientific Investigation of the Near-Death-Experience*. New York: Quill, 1982.
- Sabom, M. B. *Recollections of Death*, New York: Harper and Row, 1982.
- Safonov, V. "Personal experience in psychic diagnostics and healing." In L. Vilenskaya (Trans. and Ed.) *Parapsychology in the USSR, Part III*. San Francisco: Washington Research Center, 1981, pp. 42-45.
- St. Clair, D. *Psychic Healers*, New York: Bantam/Doubleday, 1975.
- Sanford, A. *The Healing Light*. St. Paul, MN: Macalester Park, 1949.
- Schwarz, J. *Human Energy Systems*. New York: Dutton, 1980.
- Sheldrake, R. *A New Science of Life: The Hypothesis of Formative Causation*. Los Angeles: Tarcher, 1981.
- Shubentsov, Y. *Healing Seminar*, Philadelphia, July 1982.
- Steiner, I. R. *Psychic Self-Healing for Psychological Problems*. Englewood Cliffs, NJ: Prentice-Hall, 1977.
- Stelter, A. *Psi-healing*. New York: Bantam, 1976.
- Stevenson, I. *20 Cases Suggestive of Reincarnation*. Charlottesville, VA: University of Virginia Press, 1974. (a)
- Stevenson, I. *Xenoglossy: A Review and Report of a Case*. Charlottesville, VA: University of Virginia Press, 1974. (b)
- Strauch, I. "Medical aspects of 'mental' healing." *International Journal of Parapsychology*, 1963, 5, 135-165.
- Tompkins, P. and Bird, C. *The Secret Life of Plants*. New York: Harper and Row, 1973.
- Turner, G. "What power is transmitted in treatment?" (Part 1 of 4-Part Series.) *Two Worlds*. 1969, 199-201.
- Turner, G. "I treated plants, not patients." (Part 2 of 4-Part Series.) *Two Worlds*, August, 1969, 232-234.
- Turner, G. "I experiment in absent treatment." (Part 3 of 4-Part Series.) *Two Worlds*, September, 1969, 281-283.
- Turner, G. *A Time to Heal: The Autobiography of an Extraordinary Healer*. London: Talmy, Franklin, 1974.
- Vasiliev, L. L. *Experiments in Distant Influence: Discoveries by Russia's Foremost Parapsychologist*. New York: Dutton, 1976.
- Wambach, H. *Reliving Past Lives: The Evidence under Hypnosis*. New York: Harper and Row, 1978.
- Watkins, G. K. "Psychic healing: The experimental viewpoint." In W. G. Roll (Ed.), *Research in Parapsychology 1978*. Metuchen, NJ: Scarecrow, 1979. pp. 21-23.
- Wells, R. and Watkins G. "Linger effects in several PK experiments." In J. D. Morris, W. G. Roll and R. L. Morris (Eds.), *Research in Parapsychology 1974*. Metuchen, NJ: Scarecrow, 1975, pp. 143-147.

DISCUSSION

MORRIS: I was delighted by the breadth of coverage of your talk. I do have a request for some further comment on one of the trickier issues and that is the problems that exist in evaluating healing success. First of all you have to select the measure you are going to use in relation to the claims of the group you are working with, especially in cross-cultural research. And then once you have selected a measure, you have to know how to go about actually implementing it to your satisfaction.

BENOR: What I have wanted to do for a number of years is to set up a double-blind study of healing in surgical patients. We want to look at criteria such as doses of pain medicine used, hours or days with post-operative fever, hours or days that tubes have to be left in the body, hours or days until bowel sounds and bowel functions return, when urinary catheters can be removed, days in hospital, etc. If this is done on a double-blind basis with distant healing, it is an excellent paradigm for demonstrating whether or not distant healing is effective. It is possible with many different illnesses to get a *before* and *after* evaluation of specific symptoms. If it is done in a double-blind fashion, it should be possible to demonstrate whether healing is effective or not. As to implementing such a study, that is another ball game. The medical establishment is very uncomfortable with this. It took me six months to get a hospital research committee to accept that distant healing would not be dangerous, not only in and of itself, but to their reputation as a hospital. Maybe it would scare patients away, they thought. So there are problems there, but I do not see them as insurmountable. I have recently been in the Middle East and there is a doctor in Gaza who is willing to do it. This will be a nice long distance project if it can be worked out.

PALMER: You made a fairly strong statement about the validity of psychic healing and the evidence for it. My reaction to that would depend somewhat on what you meant. I think you can clearly make a case that many people *feel* they have benefited from paranormal healing. But I suspect that what you meant referred to actual physical effects in contrast to what you might expect by way of spontaneous remission. I am not aware that any studies like this have been done. On what do you base the statement that there is strong validation for paranormal healing?

BENOR: There are many studies that have been done on yeast, bacteria, plants and mice. There is one study where the systolic hyperten-

sion of a group of close to 50 people was reduced with distant healing relative to a control group. The patients did not know that a study was being done.

PALMER: That is certainly the kind of research we need. I might just suggest, since the bulk of the evidence seems to be with non-human systems, that we need to be very careful exactly how the claim is made, so that people who are listening to or reading that understand exactly what is meant.

BENOR: I would like to share a personal experience in response to that question that has to do with the actual doing of healing myself. I have been present at a healing where I was the principal healer and another where I was present and another healer did the healing. The target in one instance was a lump which was presumed to be cancerous. It showed up on X-ray and radiologists advised immediate exploratory surgery. In both instances the mass changed dramatically. In one case it was reduced in size, became softer, and the tenderness disappeared. In the second case the lump disappeared and could not be found in surgery. So it is not just on a theoretical basis. I cannot say for sure whether hormonal changes due to fright or wishful thinking did not bring that about. But there are enough reports of this sort, some of them well documented with X-rays, that go beyond anything explainable by orthodox medicine. Physicians will use the phrase "spontaneous remission" to explain such cases. I claim that spontaneous remission is healing. I do not see anything in the words "spontaneous remission" that explains it.

PALMER: Right, it is a very non-explanatory kind of term. I think that we do need more research into healing. Perhaps the most disturbing thing that you said was about the resistance that you are encountering in trying to get research done.

MORRIS: I would like to hear some elaboration on the comparison of healing traditions within different cultures, with regard to selection of the definition of success. We could do it from within our own culture or within the framework of another culture, or try to find cross-culturally acceptable definitions of success in healing.

BENOR: Your point is a very cogent one. When we look at healers—the Philippine healers especially—who produce such allegedly dramatic effects, it turns out that a lot of these effects have been produced by the healers themselves by sleight of hand. We begin to wonder whether there is any meaning in their brand of healing. And what is it that they are doing? If one starts to look into their culture one finds that their systems are very different from ours. They feel that what they are doing is helping the patient and it does not matter, they say, how they

do it. They are out to convince the patient that something is occurring and the patient goes away feeling that something has occurred and perhaps that is what brings about the healing. His own belief that he is better may make the patient better and may actually bring about physical changes. Now, when we try to apply our criteria to what they are doing we end up with cheating, lying, fakery and we tend to discard the whole business.

We also run into problems when we ask the patient "What do you mean by getting better?" That is a cultural problem, because there are some diseases which are described only within certain cultures. Emilio Servadio did a study of Italian peasants and found that they have total body illness—"I ache all over." Now, there is no medical diagnosis for "I ache all over." And yet that was one of the maladies that was very successfully treated by the healer. If we want to do field research, we have to allow for illnesses which will be similar to our own concept of illness and also for illnesses which will be outside our cultural framework and which we cannot evaluate by our cultural standards. There has to be someone from the local culture to do the pre- and post-treatment evaluation. If this is used and if double-blind procedures are used there is a fair degree of reason to believe that what is seen may be an effect of psychic healing. We have seen from a study of Solfvin's recently that it may not be a healer doing it; it may be that the researcher or janitor of the researcher is doing it, so he is the healer instead of the person who is alleged to be the healer.

HEARNE: I have had much experience with the effect of psychological suggestion and its absolutely remarkable powers. I do not think you have really discussed this adequately in the paper. I think it is rather slippery to say that first of all you get a psychological state and that invokes some sort of a psychic, mystical experience. Purely psychological phenomena can have immense effects on the human body and mind. Psychosomatic factors loom extremely large in virtually all illnesses. And from the work of T. X. Barber and others, you see that such aspects as social compliance and conformity halo effect, a whole range of well-known psychological phenomena can entirely account for changes in behavior in certain structured situations. Now these are surely variables which should be discussed, simply because any experimental design concerning healing will have to attempt to eliminate them. The effects of suggestion are absolutely remarkable in dream research, for instance. Just to touch on hypnosis in dreaming, one of the last remaining claims of the hypnotist was that if you hypnotize someone before he goes to sleep he will dream of something that night and you will get a REM shortening effect. Now this was found by

Stoyer in 1966. It is still much quoted in the literature. Well, at Liverpool University a group of us simply did a control experiment but with no hypnotic induction procedure whatsoever and we got exactly the same results. This is the power of suggestion. This has not really been brought out enough in your paper. Of course, there may be psychic effects, but the critics always say that you have got to consider suggestion.

You talked about being at one with the patient or healee, as you say. I have done some work on the matter of EEG and healing and it has been observed that the EEG power of the healers decreases while that of the patient increases. Maxwell Cade has suggested that an actual transfer of energy from the healer to the patient was demonstrated. I performed a study using a subject in three conditions: (1) where the subject simulated healing a book; (2) where the subject just sat there role-enacting being healed and (3) where the subject performed mental arithmetic. Using Fourier transform analysis it was found that the EEG power followed a similar pattern, but that mental arithmetic also gave a level similar to that of so-called healing. So the results could be more readily explained in terms of cortical arousal while healing or performing mental arithmetic. EEG alpha waves disappear on concentrating, while in the being healed condition the patient sits in a relaxed fashion and the alpha power is markedly reduced. This seems to be a more reasonable explanation.

BENOR: Your points about suggestion are extremely well taken and I really glossed over that for lack of time. Under hypnosis, such factors as bleeding in hemophiliacs have been altered. With conditioning it is possible to alter the immunological status of the body. The self-corrective powers of the body are really exceptional and go far beyond what conventional medicine is generally aware of. These factors absolutely must be controlled for in healing studies of this sort. I wanted to have a control group in my research project which would not be told that anything was being done and that would be a baseline control. I wanted another group which would be told that healing was going to be done, but it would not be done. Just the power of suggestion would be studied in that group. Then there would be a third group which would have healing done and would be told that healing might be done. In addition, it is possible to suggest to a patient coming out of anesthesia that he is going to feel relaxed and will heal rapidly. This has been shown to be extremely effective in bring about self-healing. There are ways thus to find out if healing produces a factor of rapidity or quality of healing, other than mere suggestion.

HEARNE: I agree that if you can separate that from the massive

effect of suggestion, which, in my experience, I cannot emphasize enough, then that is the way to go about it. But you mentioned hypnosis. I just do not know of a hypnotic experiment that stands up. When you really analyze them the whole area becomes very, very dubious.

BENOR: Well, I think it matters little in this case if you control for suggestion, that is if you include a group that receives suggestion and a group that receives suggestion plus healing and a baseline group that receives neither. If you have comparison groups then you have a fair idea of what is contributing to the differences if any occur.

HEARNE: Well, that would certainly be a worthwhile experiment.

BENOR: Also, to your second point. I said that there was a definite effect in Kirlian photography between pre- and post-healing. I did not state anything about the EEGs being changed pre- or post-healing. The EEGs in healers have been found to vary in a number of different ways and not very consistently. The one finding that appears to be repeated in several studies is that of the right and left brain being synchronized during the healing. Those healers who are more effective seem to be able to enter this kind of balanced state and to stay in that state better than other people.

HEARNE: I think sometimes we tend to misinterpret these findings of one hemisphere dominance. A lot of emphasis is put on trying to seek this state of having equal power in the two hemispheres when, in fact, mental retardates also have equal power in the two hemispheres.

BENOR: They may be good healers.

HEARNE: They may be, but we have to think carefully about what we say about that.

SCHOUTEN: You often use the phrase "healers say." I am a bit hesitant about that, because both a colleague of mine and myself have some experience with what healers say. My experience has been that they say many, many different things. So I wonder if you know how general your statements are. Healing is a fascinating subject, that is clear, and there is no doubt that psychic healing is effective. There are so many studies in the medical literature. What bothers me is that you start out by saying healing exists, which I grant. Then you give a definition in which you introduce distant healing. I think there is ample evidence that healing exists, but the evidence that distant healing exists is much more rare. As Dr. Hearne said, we also know from placebo studies that the body is able to recover on its own to some extent. What bothers me about your approach is the insistence that we should study a distant healing influence. I mean it is interesting if it exists. I agree with you there, but if you are interested in healing, in the mechanism by which healing works, as a matter of strategy I would first look at

what in the patient himself creates the healing and then whether it is really necessary that the healer exerts a distant influence. The type of study you mentioned was carried out last year in Holland. A colleague of mine did a study with about 30 healers and 60 patients. It was about asthma. It was a double-blind study. Some measurements were subjective. On a daily basis subjects had to score how they felt, how their attacks were, how many attacks, how strong the attacks were. For objective measurement a peak flow meter was used and one other piece of medical equipment which was very complicated. Both the controls and the patients who knew that they were being treated improved to the same extent. So it looked, at least from this study, that the fact that they thought they were treated was the important thing and not whether they were in fact treated.

BENOR: The factor of distant healing has not been studied very well, but there is a fascinating report by Robert Miller. It dealt with a blade of grass connected to a very sensitive transducer. He was measuring the rate of growth of the grass. He had Olga Worrall do a distant healing from several hundred miles away. That blade of grass started to increase its rate of growth and maintain that rate of growth during the next twenty-four hours 800 percent greater than during control periods. I do not know whether you can take data from one blade of grass to be meaningful, but there are many healer reports that at the time of healing the healee feels something going on. Now, whether this is just telepathy and nothing more, or just suggestion and nothing more we do not know. Joyce Goodrich did a study in which she told the healees that at a certain hour of the day healing would be sent and that they should write down their impressions of how they were feeling. In half the cases healing was not sent at that time. Independent judges looking at the reports could tell to a significant degree whether healing was or was not being done at the time that they wrote down their impressions. The evidence is very fragmentary. I agree with you, more needs to be done.

HANSEN: You seem to be advocating doing research on psychic healing utilizing human subjects and I am wondering if this might not be a bit premature. I know of at least one healing study in which apparent psi missing did occur and I am just wondering what the dangers might be. Perhaps we are just sloughing off those a little too easily.

BENOR: Your concern is one that is shared by most people who hear about psychic healing. They say if a healer can think positive changes into me, can he not also think negative changes into me? The reports of both the healers and the healees have consistently been in the positive direction, that negative effects do not occur. I have been talking with

people for about four or five years intensively about this and have reviewed the literature exhaustively. The only negative effects that are reported are of pain being eliminated when people were concerned that perhaps they ought to have some pain to let them know whether their illness was progressing or not progressing. And that was just a conjecture. No one has come up with a case in which the elimination of pain proved to be dangerous. There have been reports of healers actually bringing about the demise of animals, in one case a rat, in another case a cow. It is hard to know what to make of those isolated reports. Bacteria have been killed by healers. Healers themselves say that if they send positive healing, then very positive results will occur.