

The International Journal of Regression Therapy



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The organization for the new *International Journal of Regression Therapy* is continuing to publish the *Journal* formerly known as *the Journal of Regression Therapy* originally published under the auspices of two legacy organizations that do not exist today. It is felt by the Journal Policy Board that what was accomplished and begun by these organizations is too valuable to lose and too valuable not to continue. As the regression field gains adherents across the world this, the only international regression journal, is available to advance the regression discipline. For comments or questions go to the contact list at <http://journalofregressiontherapy.com/> or e-mail one of the members of the policy board. Find past Journal issues at www.Lulu.com for download or hardcopy at modest cost. Search capabilities by author, topic, index, and article are available at the *Journal* web site. Contact one of us if you have difficulty.

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Supporting Organizations

Thank you for your support of the Journal.

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If your organization wants to support the Journal, please contact one of the Journal Policy Board members. There is no fee and we welcome the endorsement. As of now, we are limiting the endorsement to regression organizations but not those primarily engaged in training.

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Editor's Comments

Once again, as one can see from the table of contents and the authors' section, this issue meets a key goal of its publication and that is to represent the regression field as it is practiced across the globe. It also contains two special notes: the first is a request for interested partners to host upcoming World Congress of Regression Therapy (WCRT) events. These occur every three years and are sponsored by the organization EARTH with the assistance of people or organizations in the host country. These are growing and dynamic conferences that truly unite the organizations and interests of those in the regression field from across the world. I'm sure if you are toying with the idea to help bring the congress to your local area, it will be useful to make contact with Dave Graham and formalize the idea. In fact, in our conference section you will find an announcement for the sixth WCRT to be held in Goa, India this September. Not only is it in a fascinating geographic and cultural area, but I can promise you that the presentations will not disappoint. The second special announcement is a survey conducted by the EARTH research committee to define the efficacy of regression therapy. This is a worthwhile endeavor, please participate.

Our historical article is from one of the great contributors to the regression discipline, Roger Woolger. This article comes from the Vol. I, No. 1, Spring 1986 *Journal*, then published under the auspices of the Association for Past Life Research and Therapies (APRT) and is one of the seminal articles dealing with the use of imagery in regression process as derived from the Jungian concept of "active imagination".

The next four articles deal with research, the results of investigations, and a discussion by Hans TenDam of the aims of research and criteria for its efficacy. Pavel Gyngazov brings us a fascinating multi-year investigation which attempts to answer the question: in a linear, chronological view of the evolution of consciousness, does the various reincarnations of a soul follow the increasing complexity of the phylogenetic scale or is it not limited to this structure? His research approach is unique and the results fascinating. He provides examples of his conclusions. The EARTH research committee provides the results of a survey. Like everything else, our regression field is not static and surveys are one way to keep up with the fast-moving stream of knowledge. Andy Tomlinson follows TenDam's editorial piece with his views on the direction of the evolution of regression therapy.

A number of early theorists added to the knowledge of the field by exploring early life and demonstrated that memories in regression can not only go back to the earliest days of life but also into the experiences in the womb. Albert Marotta shares the regression experiences of his clients to add to the knowledge about this stage of development.

In my professional experience, there is a marked increase in channeling, ET experiences and other non-Earth contacts of various sorts. Many of these events occur in non-normal states of consciousness. Leo Sprinkle has dedicated the better part of his professional life into an exploration of these experiences. Like Professor John Mack, Sprinkle concludes that these experiences are ultimately for the spiritual growth of the 'experiencer' (as Mack calls it rejecting the term abduction). So it is that his article, although written a few years ago about those who experience these contacts, is still relevant today and his lengthy reference list is useful to the modern regressionist. It is with his permission that it is reproduced here.

In my experience, the first of the blogs is an area that seems to come up in regression for European therapists much more than it does for those operating in the North America. This is the arena of Elementals. You will find this discussion very interesting. The second blog is the real-life experiences of Ann Merivale, an author and regressionist, who encountered the modern counterparts of a famous British composer and discovered she is a central figure in this reincarnation drama. Note, these two articles are placed in the blog section because they are either written in a familiar, non-academic style or the references cited are not normally used in academic/scientific writing. This is not to say they are less interesting or less valuable to readers. This section was added specifically to accommodate these types of submissions.

There are no media reviews for this issue. New media includes a book by the Singapore resident, Sheela Jaganathan, *Hello me!*, and a book in German by Erika Schäfer, *The sense of all that has been - The Holographic Model of Regressiontherapy*. I would like to see this one in the English language.

Finally, I want to appeal to all who read this journal to participate in it by submitting your articles, blogs, media reviews and new media. The journal can only be as interesting and informative as the submissions to it. If there is someone else you know who may have something interesting to say, but has not been introduced to this vehicle (the Journal), tell them about it and encourage them to submit. In this new instantiation of the Journal (the last three issues), only one article was rejected from inclusion. The editors and consulting editors go to great lengths to assist authors, when necessary, to raise the quality of their work as much as possible including citations, formatting, spelling and grammar.

Note 1: in the Submission Guidelines section we have standardized the format for verbatim client-therapist interactions.

Note 2: the American reader will notice that several articles and notices in the Journal are written in the British style, including spelling and grammar. It was

Winston Churchill who once remarked that the Americans and British are separated by a common language.

Warm regards and enjoy this issue of the Journal,

Rich Stammler

Special Notes: One

The World Congress for Regression Therapy: A Call for Partners

Every three or four years the World Congress for Regression Therapy (WCRT) moves from one international venue to another, bringing regression therapists together from different cultures and different training backgrounds. Therapists give and receive workshops for each of us to learn and share our knowledge, skills and insights. It is a powerful and beneficial experience for many regression therapists and according to feedback, the opportunity for sharing and socialising is the 'icing on the cake'.

The next congress, WCRT6 will be held in Goa, India in September 2017 working with a theme of 'Unlocking Creativity', organised on this occasion by a partnership between EARTH (Earth Association for Regression Therapy) and Clover Leaf Learning Academy of Mumbai. You can find details of this world congress, including the process for registration here: <http://www.regressioncongress.org/>. This follows a long line of events since the first WCRT in The Netherlands in 2003, moving on to India, Brazil, Turkey and Portugal over the years, and growing bigger and more diverse on each occasion. The last event in Porto in 2014 held a theme of 'Body Healing Mind, Mind Healing Body' attracting therapists from North and South America, Asia, the far East and Australasia as well as a strong European contingent. The participants included numerous medical doctors, psychiatrists and psychologists, as well as the full or part-time therapist. All shared their particular perspective on regression therapy. The event became full about three months before the event and numerous applicants had to be turned away, so we have looked for a larger capacity in India as we expect that trend to continue.

Over the years EARTH has been the main backer and organiser that enabled the event to take place, so the organization seeks partners to work with us to help stage future congresses. The partner will take on the role of local organiser interested in holding the event in their own country. This can help to galvanise interest in regression therapy and also bring international expertise in the practices of the indigenous therapists.

If you wish to know more about this proposal, please contact: info@earth-association.org at your earliest opportunity.

We hope to hear from you.

David Graham, President, EARTH

Special Notes: Two

Does Regression Therapy Actually Work? News of a Survey to Help all of us find out

by David Graham, President, EARTH

<http://survey.earth-association.org>

This article describes a client survey conducted by Earth Association for Regression Therapy (EARTH) to evaluate the effectiveness of regression therapy in addressing a wide range of personal issues experienced by clients. Further than that, it invites participation in the project to all that have experienced regression therapy.

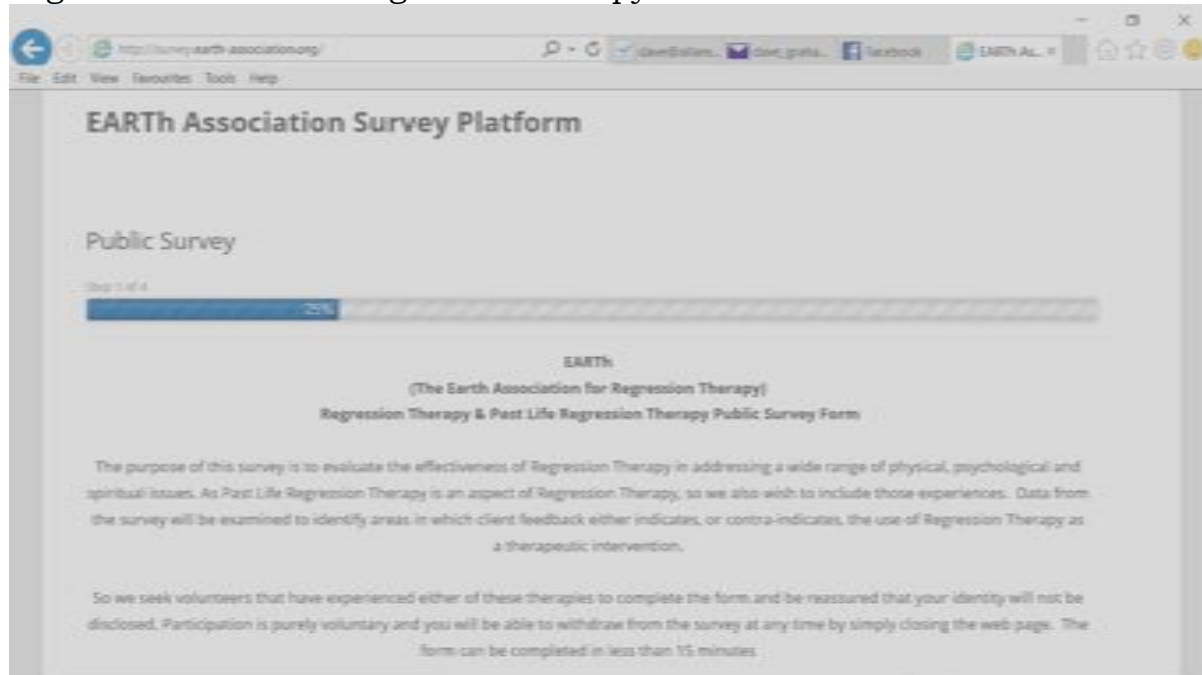
First of all, a little bit about us. EARTH was founded in The Netherlands in 2006 and has since outgrown its original purpose of providing a meeting place and creating common standards for professional regression therapists within Europe. It soon began to attract members from around the globe and has now become a world-wide association dedicated to promoting the profession of regression therapy as widely and effectively as possible. Many of our members are also medically qualified in various professions within their own country. EARTH promotes professional standards of therapy and training, with each of our members committed to follow this code of conduct.

This project was created and launched by the Research Committee of EARTH with an intention to gather evidence that either supports or contraindicates the use of regression therapy to address a wide range of personal issues experienced by clients. We chose to create a website that is easily accessible to all potential contributors. But we have not listed it with search engines because we only wanted those that have experienced regression to actually use it.

Deciding to make the survey on-line was a part of our intention to make it as simple as possible for those ex-clients that wish to contribute yet lack enough personal time to offer too much detail. In that respect, the form can easily be completed in less than ten minutes for those wishing to give only the basic details of their experience. The survey also accepts contributions from those that do not wish to give their name. In that sense, all contributions are accepted in confidence and any identities that are disclosed will not be published or shared with anyone else or organisations beyond EARTH.

As the purpose of the survey is to find evidence to establish whether regression therapy actually works or not, so questions were designed to bring out the

issues that applied at the time of therapy. We want to understand the client's original motive for the regression therapy sessions.



and any other issues that came up or were addressed as a part of the therapy. Participants are able to choose from a wide range of physical, psychological, and spiritual issues or explain their motive for choosing regression therapy if their issue is not listed. The survey also asks whether any other treatments were received at the time. Most importantly, we want to know whether the regression therapy lead to any kind of benefit in the short term and then, if it is still making a difference in the longer term.

Each contributor to the survey will receive acknowledgement via email, and then an invitation, if you wish, to share your story on an EARTH web page. <http://www.earth-association.org/category/testimonials/> (identity will not be disclosed). This alone can add to the therapeutic process and can also inspire others to seek help for their own personal issues.

Ultimately we hope the survey will be regarded as substantial evidence of the capability of regression therapy to make a difference for a range of people struggling with their own personal issues. It may be, when we review the submissions we can see a particular type of issue responds well to sessions in different cultures, with different therapists. It may also demonstrate that it does not. That is the nature of a survey and the valuable information that may result from it.

Regression therapists will already have their own understanding of the effectiveness of the therapy. If that be so, this survey can be a vehicle for those that have experienced it to give their side of the story.

Please select the reason for your visit to the regression therapist. *

Tick 'Physical Symptoms' box to display a range of common answers and select one that applies to you. If none apply to you, just untick the 'Physical Symptoms' box to done that section.

Continue by ticking the 'Psychological Symptoms' box. Tick any that apply to you or untick the 'Psychological Symptoms' box if none apply.

Continue by ticking the 'Spiritual Interests' box. Tick any that apply to you or untick the 'Spiritual Interests' box if none apply.

If there was a further reason for visiting the regression therapist that is not already selected, then please tick the 'Other' box and briefly give your reason in the box that appears. Otherwise leave the box unticked.

Please check at least one option.

2100 Physical Symptoms
 2200 Psychological Symptoms
 2300 Spiritual Interests
 2400 Other

Physical Symptoms *	Psychological Symptoms *	Spiritual Interests *
<input checked="" type="checkbox"/> 2101 Allergies	<input type="checkbox"/> 2201 Addictions	<input type="checkbox"/> 2301 Akashic Records Visit
<input type="checkbox"/> 2102 Auto Immune System	<input type="checkbox"/> 2202 Anxiety	<input type="checkbox"/> 2302 Ancestor Connection
<input type="checkbox"/> 2103 Back/spine/neck pain	<input type="checkbox"/> 2203 Curiosity	<input checked="" type="checkbox"/> 2303 Extra Terrestrial Encounters
<input type="checkbox"/> 2104 Bones/joints	<input checked="" type="checkbox"/> 2204 Depression	<input type="checkbox"/> 2304 First Incarnation on Earth
<input type="checkbox"/> 2105 Cancer/tumour	<input type="checkbox"/> 2205 Dreams/Nightmares	<input type="checkbox"/> 2305 Future Life Progression
<input type="checkbox"/> 2106 Diabetes	<input type="checkbox"/> 2206 Eating Disorders	<input type="checkbox"/> 2306 Incarnation on Other Planet
<input type="checkbox"/> 2107 Digestion	<input type="checkbox"/> 2207 Family Ancestry	<input type="checkbox"/> 2307 Life Between Lives

We encourage regression therapists reading this appeal to make any past clients aware of the project, so they can decide whether they wish to contribute. You can find the survey here <http://survey.earth-association.org/> If you are a practitioner, please also feel free to offer your own contribution of a time when you were a client for regression therapy.

Articles

Imaginal Techniques in Past-Life Therapy

by Roger J. Woolger

Introduction

The notion that physical and psychological illnesses may be derived from the psychic residues of events in previous lives is accepted in a great many non-western cultures. The opening lines of the classic Buddhist text, the Dhammapada, sums up this view succinctly: "All that we are is the result of what we have thought." It hardly need be added that in the Buddhist world view, earlier thoughts can most certainly belong to earlier incarnations.

In the West, however, such an idea has never been seriously entertained by orthodox science or by the orthodox versions of Christianity and Judaism (McGregor, 1978 and Langley, 1967) in recent history. On the other hand fully articulated doctrines of karma and reincarnation are to be found among certain spiritualist groups (Kardec, 1972), in the Theosophist writings of H.P. Blavatsky and Alice P. Bailey, and more recently in the readings of trance medium, Edgar Cayce (Langley, 1967). Yet although these writers give us all manner of clear descriptions of how karmic conditions, physical and psychic, arise, none of them offer what today we would call a technique of psychotherapy to help heal them. The great Swiss psychiatrist, C.G. Jung, in spite of his monumental explorations of the greater realms of the unconscious in all its spiritual diversity, unfortunately remained hostile to Theosophy and only came to a tentative acceptance of reincarnation as a psychic datum in the very end of his life, June, 1961 (Van Waveren, 1978).

It has remained, therefore, for a small number of creative psychotherapists, hypnotherapists and psychic healers to build bridges between the insights of these unorthodox spiritual teachings and recent advances in therapeutic technique. One such piece of creative synthesis is Marcia Moore's Hypersentience (1976), which describes a technique, evolved from her background of yoga, meditation, and guided fantasy. Another is Morris Netherton's (1979) introduction of the Gestalt practice of repeating emotionally-laden key phrases into past life sessions.

Neither of these authors claims his method is a form of hypnosis. In fact, both deny that hypnosis is involved. This contrasts superficially with the

· Ed. Note: this article comes from the Vol. I No. 1 Spring 1986, Journal, then published under the auspices of Association for Past Life Research and Therapies (APRT), published here with original formatting intact.

work of several noted hypnotherapists who have combined their talents for inducing trance with a variety of imaginative styles for guiding what we now popularly call past-life regressions, (Grant and Kelsey, 1969, Fiore, 1978, Sutphen, 1978, Wambach, 1978). The question of what is or is not hypnosis remains controversial, and it seems largely a matter of professional background as to whether past-life therapy is presented as such. The researchers, Bandler and Grinder (1975), have maintained that all therapists (to say nothing of politicians, preachers, lawyers and salesmen) use some form of indirect suggestion that is trance-inducing.

In this paper my purpose is to offer a brief outline of the cross-fertilization of techniques that I have personally evolved over a number of years as a Jungian analyst as I have conducted and directed large numbers of past-life regressions in the course of individual therapy and public workshops. What follows is a threefold experimental synthesis derived from Jungian “active imagination,” Gestalt, and psychodrama practices and what I will loosely term a Reichian approach to body energetics. All examples are taken from my own cases and are naturally disguised for the purposes of this discussion.

Jungian “Active Imagination”

C.G. Jung developed a highly practical technique for working with his own dreams and visions (Jung, 1960, 1961; Hannah, 1981). He taught it to his own patients and trainees and it is commonly used in Jungian analysis today. It consists primarily in sitting, as in meditation, and simply observing a fragment of a dream or hypnogogic image without any attempt to guide, control, or interfere with it. The aim is to allow the image to come to life of its own autonomous psychic energy, the ego letting go of all expectations, presuppositions, or interpretations. After a certain period of practice and initial coaching by the therapist, this inner image will start to move in some way and the observing ego learns to participate in the story very much as the dream ego participates in normal dreaming. This waking dream ego is encouraged to encounter the imaginal situation as directly as possible, to avoid retreat, and to fully allow any emotions such as fear, anger, sadness, eros, etc. to arise during the inner psychodrama.

The term “imaginal” has been deliberately coined by the French scholar of Sufism, Henry Corbin (1969), to avoid the derogatory connotations of “imaginary.” Corbin and his post-Jungian admirer, James Hillman, have attempted to resuscitate the sacred realm of the imagination in modern depth psychology (Hillman, 1983).

Jung’s technique, which resembles other “waking dream” practices (Watkins, 1976), has the invaluable effect of stimulating, focusing and training the “inner senses,” so that dreaming and waking meditation upon

images becomes enormously enriched. This practice allows the unconscious psyche to express itself fully in its own language, which is imagery, and, above all, to “dream the dream on,” as Jung put it on several occasions (Jung, 1960). If and when “past-life” images do arise (and there is no Jungian writing on this except Van Waveren, 1978) the practice would simply be to follow and participate in the imaginal story and in some instances dialogue with inner figures that emerge. The key instruction remains to “stay with the image.”

Powerful as this technique is, it proves inadequate for past-life regression for a number of reasons. It does not distinguish between embodied and disembodied images, or between “memories” and dream stories, nor does it allow for the compensatory role of disembodied fantasy in imaginal situations where the ego is in apparent peril. This can be illustrated by the following excerpt from an active imagination:

“I am walking through some dark woods. I see and hear some soldiers emerging from the trees. They are clearly planning to attack and rob me. They come closer. In terror I climb a tree. The tree turns into a stairway. I find myself in a childhood attic where I used to play with toy soldiers.”

Taken as a psychotherapeutic exercise, this story can easily be seen as fantasy. The tree transforming into a stairway is clearly a fantasy event, and since the subject has no memories of being attacked by soldiers in his lifetime, the conclusion is further reinforced. Most traditional Freudian therapists would most likely relate the story to childhood fantasies around toy soldiers, thus anchoring the origins of the story in actual events. A Jungian would concur in this but might add that the woods and the tree symbols suggest a symbolic regression to the realm of mother archetype. Both would nevertheless treat the imagery as psychological data valuable in understanding and unraveling certain personal complexes derived from this lifetime.

There is, however, another approach to this piece of active imagination suggested by past-life therapy that refines it into a much richer therapeutic drama without losing any of Jung’s essential principle of staying with the image and imaginally living out the story.

The past-life approach entails using a guide or therapist to focus the story and ask questions “as if” it were a literal lifetime and not a fantasy, thus subjecting the story to the constraints of time, space, personal identity and history, acknowledging also the limitations of the death experience and treating this, too, as a literal, bodily event when it occurs. Much as these may sound like heavily weighted assumptions to use as the basis for leading questions, the finding of many thousands of regressions is that the psyche responds with great facility to the “as if” of such suggestions and frequently

gives quite spontaneous and surprising historical data. Here is how the active imagination might typically be experienced as past-life memory.

Therapist: What are you doing?

Client: I'm walking through the woods.

T: *How are you dressed?*

C: Seems to be ragged clothes, a leather belt and pouch, a floppy hat, sort of medieval.

T: *What kind of physique?*

C: I'm thickset, coarse, muscular, a peasant, about 30.

T: *What happens in the woods?*

C: There are three soldiers coming out of the trees. Their swords are drawn.

T: *What are they doing?*

C: They're cutting my throat. Oh, I'm choking on my blood (coughs). I'm dying (convulses). I'm gone (body relaxes).

T: *What are you aware of now?*

C: I'm quite detached now. It's all over. I'm leaving.

T: *Where do you go?*

C: I'm in a peaceful place above the earth. There are these beings with me. Very warm and comforting.

T: *Are they human?*

C: No, not at all. They seem to be helpers. We communicate without talking. I don't seem to have a body now.

This dialogue, a composite, typical of many hundreds conducted in past-life sessions, differs in several important respects from the piece of unguided active imagination from which it developed. First, the story is now much more vivid; the imagery comes alive and forms a more psychologically authentic narrative. Second, the therapist's guiding assumptions of "as if" leads directly to a realistic death experience complete with choking and convulsions, which provides an emotional catharsis rather than a compensatory escape into a "safe" fantasy or memory. Third, the "as if" dialogue produces a distinction of two realities within the imaginal realm: the embodied "earthly" reality of the peasant and the disembodied "heavenly" reality of the after-death state where the subject easily distinguishes a different kind of presence from the soldiers. Whether these beings are called "spirit guides" or "archetypal figures" or "angels," they clearly are not imaged as flesh and blood creatures.

This technique, then, expands the Jungian injunction to "stay with the image" by adding to it a metapsychological framework that allows of more

than one reality in which the individual's complexes can be played out imaginally. Moreover, it includes the crucial archetypal "rite of passage" experience of the death transition from one reality to another. (The other rite of passage between the two varieties is of course, birth; an example of this appears below).

We will now look at two further refinements of this basic technique in past-life therapy.

Dramatic Focusing

The play's the thing
Wherein I'll catch the conscience of the king.
Shakespeare, *Hamlet*.

If we read the stage directions to any play we find that everything is written in the present tense, linguistically speaking (e.g., "It is night. The old barn has a small lamp shining dimly above the door. The farmer and his son enter downstage. They are arguing fiercely.") In guiding a past-life session it is extremely helpful to follow this model by keeping the subject firmly in the present, having him recount the story as it happens, event by event, very much as if he or she were in the middle of a drama. Whenever the therapist poses a series of questions in any "past" tense, this acts as an unconscious trigger which can easily distance the subject from the events of the story so that imagery quickly loses its vividness.

Often during a past-life session when a subject is being moved forward in time he or she will overshoot large sections of the story and will spontaneously begin describing the events in the past as over and finished. More often than not this indicates a strong resistance to re-living the painful core of the event. To counter this, the therapist simply needs to re-focus in the present. For example:

- T: *Go forward to the next significant event.*
 C: I'm living alone in the woods. The village it's all been destroyed. They came and killed everyone. (Sadness in voice).
 T: *Go back to when you first find the village destroyed.*
 C: I see smoldering ruins...bodies...ugh! Its awful...Oh no, no...(sobs) It's my wife! (deep sobbing).

Sometimes the opposite resistance occurs: the subject does not want to go forward in time at all because the unconscious is already anticipating painful scenes. Here it is common for an earlier scene to be dragged out moment by moment almost in slow motion so that the subject appears frozen in time. To counter this kind of blocking it is helpful to use

connectors with the present tense. Examples:

T: *What do you find when you do go up the stairs?*

T: *What happens when you do go into battle?*

An even more subtle linguistic way of dissolving this kind of block is used by Morris Netherton: this is the use of a conditional tense.

T: *What happens now?*

C: I don't know. I don't want to go to the door.

T: *What would happen if you did?*

C: There would be men there.

T: *And what would they do?*

C: (trembling) They would beat me up and drag me off for interrogation.

T: *So how do they drag you off?*

C: I'm kicking and struggling. They've hit me over the head. It's a black van. They're Gestapo. Oh, no, no!

"How?" questions are among the most valuable for bringing the zoom lens right in close to the traumatic event, so much so that I have noticed that therapists in training will sometimes avoid it themselves if a particularly gruesome scene of torture or mutilation is involved (usually the avoidance is because some past-life of their own is unresolved on these issues). Nevertheless, in order for a trauma of this nature to be fully released at a psychosomatic level, the details of exactly how they will have to be elicited by the therapist with all the precision of a surgeon removing shrapnel from the tissue of a bomb victim.

To illustrate this difficult aspect of the work, I will cite a case from my practice where a young woman did actually remember dying in a bomb explosion. The physical feature that was most prominent in her current life when she came for therapy was that she was suffering from that phase of the disease lupus that gave her arthritis-like pains in the joints of her arms and legs. In the past-life session she re-lived the life of a young anarchist in Czarist Russia at the turn of the century. The crucial scene was as follows:

T: *What are you doing now?*

C: We're carrying bombs. They're for those bastards (soldiers) who killed my father.

T: *Go forward and tell me what happens.*

C: It's all black. I'm not in my body.

T: *Go back and describe to me how you die.*

- C: I'm looking down from outside my body. Oh my God! It has no arms and legs. There's been an explosion. It's still moving.
- T: *Go back inside your body and tell me exactly how it feels.*
- C: I'm dying, lying here on the street. The pain is terrible. No arms, no legs...(cries)...Now I'm dead. No more movement. I'm leaving that body.
- T: *As you leave, be aware that you don't have to carry that pain anymore.*

Like most victims of explosions, the young anarchist had gone out of his body, even though he was not yet dead. The death agony was unfinished and was recorded in the imaginal body memory of the anarchist life which had, so it would seem, been imprinted on the young woman's body in this lifetime as part of her lupus symptoms of pain in her joints. Letting go of the physical memories also entailed for her letting go of the vengeful feelings she (he) had carried as the young anarchist, which had symbolically turned against her as "explosive" rage. What is remarkable is that after this one session all the arthritis-like symptoms disappeared. Her doctor, who was present at the session, attests that the symptoms have not returned—over two years later.

Working With the Imaginal Body

The examples we have just cited illustrate vividly the third basic principle that is essential, in my experience, for effective cathartic working through in past-life therapy: namely that the subject must fully re-experience the bodily sensations of the past-life trauma for emotional release to be complete.

If these bodily sensations and their concomitant emotions are not fully experienced, the complex seeking to express itself will remain lodged in the body, as it were. No amount of methodical understanding of the meaning, the symbolic content of the "karmic" ramifications of the experience, will help unless this bodily imagery is allowed to surface as well.

The reverse is also true: if the physical and emotional levels of the trauma are released without a full understanding of their meaning, in whatever framework the subject is open to (psychological, karmic, spiritual), then the subject will tend to remain stuck in a meaningless repetition of the emotions of the past-life scenario and the recurrence of whatever psychosomatic symptoms existed. In the case of the lupus sufferer just cited, it was just as essential for her to understand the symbolic meaning of the explosion as rage that had backfired against her in that lifetime as to re-experience the death. But both were necessary for healing to occur.

Being aware of one's previous life through the imaginal body is thus a further extension of the Jungian precept to "stay with the image." Only now it may be expressed as "stay in your body," with the dual meaning of (1) staying in the imaginal body of the other lifetime and (2) being aware of this lifetime's body sensations as you remember the other life.

In other words, therapy has to be sensitive to this overlay, since it is the cause of psychosomatic symptoms. Bringing the body image into a past-life scenario de-concretizes the unconscious imprinting of the imaginal body and frees up libido (or orgone energy, or chi, or prana) for creative and spiritual purposes. Thus in our sessions we move from the literal to the symbolic to release. Backache becomes a "broken back" becomes a discovery of new impetus for life. Migraine becomes a "head injury" becomes a freeing from burdensome and painful thoughts.

Not being in the body is another version of the schizoid defense we described earlier as the temporal distancing a subject will perform to avoid painful emotions. Just as in the examples given, the subject had to be gently brought back or forward to the crucial existential moment of the trauma, so with certain experiences the subject must be brought fully into the body, even to the extent of exaggerating the imaginal psychodrama by urging deep breathing or applying massage or some kind of physical pressure.

As an example of this, we may cite the case of a young woman who described a previous life when, as a twelve year old girl, she had been killed in a Nazi gas chamber. Her account in her first session of her deportation to a concentration camp and subsequent death, though detailed, was extremely flat, detached, without catharsis. Painful as it was, we decided to re-run the memory, this time refocusing both dramatically and physically:

T: Where are you now?

C: We're in a line outside this building. I'm no longer with my mother.

T: What exactly are you doing?

C: I'm holding the hand of this older woman.

T: How do you feel?

C: Terrible!

T: Do you cry?

C: No, I can't.

T: All right. Then breathe very deeply and let any feelings you may be holding back come to the surface (coaches breathing).

C: (Breathing deeply) I don't want to go in there (trembles, heaves).

T: Say that louder.

C: I DON'T WANT TO GO IN THERE! (sobs loudly).

From then on a flood of emotion emerged and she described in detail the gassing: how it tasted, smelled, and which parts of her body it affected.

For several minutes she went through the convulsions of choking, vomiting, and doubling up as she re-lived her death. By the end of the session she had released so much fear, grief, and despair, as well as physical pain, that her chest had opened up to a much fuller pattern of breathing, similar to the releases experienced in Reichian therapy and re-birthing. Later she reported that a deep-seated depression, seemingly with her most of her life, was gone and that her breathing was permanently changed.

In her case there were no particular indications of the bodily blocks. Her breathing had been shallow it was true, but not exceptionally so, so the clue to the block was the lack of affect. In other cases the body image advertises trauma much more loudly, so to speak and then more direct intervention may be appropriate.

This was true of a woman of thirty-four, a professional painter, who sought out therapy, reciting a confused bag of complaints about her marriage, about the bad feelings she had about her mother from whom she had moved and the notion that it was all connected to a past-life fragment she had glimpsed as a painter in Holland. As she told her story, I was struck by how rigid and tense her shoulders were. It was as though they were held two or three inches higher than necessary.

During the relaxation part of my induction procedure she had great difficulty in letting go, so I offered to massage her neck and shoulders. When she agreed I worked a little on her very tight trapezius muscle and her neck. Very soon she slipped into a male life as an impoverished Dutch painter during the 17th century. The painter had a wife and a very young baby, whom he could barely support. In his obsession with finishing a certain painting he severely neglected both wife and baby, even when the baby became sick. To his horror the baby grew worse and died and his embittered wife deserted him. The key scene in our work was as follows:

T: *Where are you now?*

C: I'm wandering along the canals. I can't find my wife. She's left me for good.

T: *Where do you go now?*

C: I think, back to the house. Oh, no! I don't want to go back there. (Her shoulders begin to tense up very noticeably.)

T: *Breath deeply and go back to the house and see what happens.*
(*At this point the young woman shot up from lying on the couch to a sitting position, grabbed her neck and began to scream.*)

T: *What has happened?*

C: Oh God! I hung myself. (Sobs deeply)

For a short while we worked on letting go of the death experience and the emotions connected with the loss of wife and child. But this was not all. When asked to move forward, she spontaneously found herself re-experiencing her birth in this life—with the cord wrapped around her neck! Full understanding came moments later when, as a baby, she looked up at her mother, having survived this second trauma.

C: I know why I'm here.

T: *Why are you here?*

C: To be close to my mother (sobs). I know who she is now.

T: *Tell me who she is.*

C: She's the baby who died. I see that I've been trying to make it up to her all these years.

What is remarkable about this exceptionally condensed session is the way in which all the guilt about the neglect and the death of the baby had been lodged, as an imaginal imprint, at the moment of the Dutch painter's remorseful suicide. All her feelings about first the baby and then her mother were reinforced in the birth trauma and carried in the young woman's body language to the present day. They had remained locked in her neck and shoulders. She had continued to punish herself unconsciously and had not been able to let go of feeling responsible for her mother. In subsequent sessions she could release this. She felt enormous pressure taken off her marriage; to say nothing of her shoulders that had by then noticeably dropped a couple of inches!

Conclusion

Not every client's body language speaks so loudly or so urgently of course, but almost any part of the body where there is chronic or recurrent pain may harbor the image of a past-life trauma that can be effectively worked with. The well-known movement therapist, Anna Halpern, says that "every part of the body has a story to tell," perfectly summarizing the principle we have been illustrating.

How the therapist reaches the story, buried as it is in the body's unconscious fantasies, will vary according to what tools and training he or she brings to a past-life session. We have seen how verbal cues can elicit the

story, as can breathing and massage. It is noticeable, too, how more and more people sensitive to the past-life dimension of the psyche are reporting fragments of past lives during Rolfing, massage, primal therapy, and other forms of bodywork.

Yet it must be stated clearly that any bodywork of this sort is only a means to eliciting a story—a story which belongs to imaginal body. Altering body tissues cannot be an end in itself from the perspective of past-life therapy and moreover is doomed to only limited success if the psyche is ignored. When a person complains of persistent back pain, the aim of a massage would be to allow a clear image of that pain to emerge as a key to an imaginal drama involving that location of the body in another lifetime, the therapist's task is to pursue the story in the understanding, confirmed by more and more reports, that it is the reliving of the story in all its physical details, psychological drama, and human pathos that really heals.

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Human and Non-Human Incarnations in Regression Therapy Sessions by Stopping the Internal Dialogue

by Pavel S. Gyngazov, MD

Abstract

The paper discusses the author's techniques of inducing an altered state of consciousness during regression therapy sessions. Analyzing the alternation of human and non-human incarnations in the sessions with the same patient, the author demonstrates its accidental character and concludes that incarnations in all physical bodies are axiomatically equal in terms of experience gained. The author also notes that all non-human incarnations are more harmonious than human ones.

A regression therapy session usually begins by inducing an altered state of consciousness in the patient. Of all techniques to facilitate this state, I prefer stopping the internal dialogue, which can be briefly described in the following way: patients focus their eyes on what they see behind their closed eyelids to concentrate on some emotionally uncolored sensation. Stopping the continuous internal dialogue opens the way to the hidden depths of the unconscious to gradually transfer its information to the level of consciousness.

Using this technique for more than twenty years, I have received some interesting results I would like to introduce. The excerpt includes approximately 1,500 sessions. Some patients have had multiple sessions, as well. The number of patients I have worked with makes over 5,000 so far.

During my practice, I paid attention to the fact that those who had multiple regression sessions could see their incarnations in different physical bodies, both human and non-human. The analysis revealed an interesting finding – the percentage of human incarnations made about 38%, with the rest 62% belonging to non-human ones. Having processed the data, I compiled a table of incarnations and published it in my book *The Roads of Lives: Essays on Regression Therapy* in 2014¹ Here is the table:

1	Human incarnations irrespective of their gender in current life	37.9%
2	Animals	26.1% 62.1%

¹ Translated by Valentina Gorenintseva including this article.

3	Extra-terrestrial creatures, humanoids and non-humanoids	14.3%	
4	Energy beings	7.7%	
5	Birds	4.3%	
6	Non-organic world	4.3%	
7	Plants	3.2%	
8	Insects	1.3%	
9	Fish	0.9%	

As the table shows, non-human incarnations can be met twice as often as human ones. I believe this result directly depends on the technique used by the therapist: the choice of incarnations is in no way limited. This freedom contributes to the solution of the main goal set for the unconscious mind—to choose the incarnation whose problems are in sync with the patient’s present life. If the patient had a task to reflect on any negative feelings coming from his present body (which is the case with many other techniques), then the choice would be limited only to the human body.

I can also add that in my sessions I often encounter incarnations not only in earthly physical bodies, but also in any body from other parts of the Universe. These “exotic” incarnations are easy and natural for the patients, as they are not perceived as something “concocted” and do not arouse rejection. As a past-life regression therapist, I see that such sessions have their logic, sense and emotional coloring. Such incarnations, no matter how unexpected they might be, enrich our knowledge of the world, making it possible to feel the harmony of the Universe which is in tune with our inner harmony.

So, I would like to reiterate how important it is to stop the internal dialogue at the first stage of the session, because it removes all elements of suggestion limiting the choice of the unconscious mind.

Another benefit of this technique is the patient’s freedom. As hypnosis and other influences of that kind are not used throughout the session, the patients maintain full control over the session and the life they are living through at the moment. They can be sure that they will not become subject to any uncontrolled influences. It is very important that patients are free to terminate the session at any time, without the facilitator’s help or consent.

After years of experience, I am absolutely convinced that the effect of regression therapy is attributed to the ability of the unconscious mind to inevitably choose the incarnation that gave start to the problems that remain unsolved in our current life. It becomes most overt when people come to the session just out of sheer curiosity; when, as they think, they have no problems, with their life running smooth and there being no reasons for concern. However, after closer analysis of their lives in the

course of the session, patients come to understanding: “The problems/events I am living through now, in the session, are very similar to my current problems.” Such discovery always leads to changes in one’s world perception, which, in its turn, contributes to one’s self-harmonizing.

There is yet another interesting observation I would like to share. When I began my practice, I was convinced that psychosomatic disorders and phobias accompanying people through lives can be in human incarnations only. Later, with more experience, I came to understand that psychosomatics and phobias can be equally often met in non-human incarnations, regardless of their physical body. It can be clearly observed in the case of phobias (fears of heights, closed spaces, water, etc.). Living through conflicts and transferring them from the unconscious to the level of consciousness eliminates pathological symptoms, whatever incarnation they might first appear in. So, I can work with patient in any incarnation and find what causes the problems to later eliminate it.

Is there any regularity in the alternation of human and non-human incarnations? I discussed it in my workshop *Human and Non-Human Reincarnations: Sequential or Random?* in 2006 in New Delhi, India.

I used a chronological vector to show the frequency of human or non-human incarnations. This analysis was possible only in the cases with multiple sessions with the same patient and only when I had the information about the calendar time of each incarnation (epoch, century, and years). It was possible only with people who lived through a number of incarnations during one session, so that I could arrange their incarnations in the chronological order.

With the ratio 68.3% to 31.7%, the analysis *did not reveal any “simple-to-complex” evolutionary pattern* (See the table below):

1	Does not correspond to evolutionary logic	68.3%
2	Corresponds to evolutionary logic	31.7%

I would like to comment on this by providing a number of examples.

Example 1:

→						→	Present body
Previous body							
Human(M)	Humanoid	Human(M)	Human(M)	Bird	Human(M)	Human(M)	

In the first incarnation the patient was *a man of the Stone Age*; in the second—*a humanoid male overseeing the development of the terrestrial civilization*; in the third—*a man, who owned large vineyards*; in the fourth—

an entomologist; in the fifth—a drake (a male duck) that lived a very bright and interesting life; in the last incarnation—a man who lived a quiet, unemotional life.

It is interesting that, according to the patient, the most emotional and harmonious was his life in the body of the bird.

Example 2:

→ Previous body →						Present body
Human(F)	Human(F)	Human(M)	Animal	Plant	Human(F)	Human (F)

In the first incarnation the patient was *a peasant woman in Israel; in the second—a teenage girl from France in the 1st AD (a very heavy incarnation filled with hopelessness); in the third—a man in France in the 10th century (a very heavy helpless incarnation); in the fourth—a wild boar that lived in the Middle Ages in Europe (a very harmonious and joyous incarnation); in the fifth—a young growing fungus (an emotionally light and life-affirming incarnation); in the sixth—a woman from Finland of the 19th century (very harmonious).*

I would like to note that the unbearable burden of the first three incarnations is later replaced by harmonious and happy lives in non-human bodies (which, according to the patient, were given for her to rest after heavy incarnations). I have noticed this pattern many a time. In my opinion, any incarnation lived through by a patient is offered to them by their unconscious mind. After death (leaving the body) the soul (the unconscious mind) goes to a space that each patient describes differently during the session. This space can have different names: “Creator”, “Home”, “God”, “Absolute”, “Origin”, etc., but all patients emphasize the identity of the Soul and Space where it goes after leaving the body (death).

Yet another chain of incarnations is provided to demonstrate the “simple-to-complex” pattern.

Example 3:

→	Previous body			→	Present body
Preorganic substances	Plant	Animal	Human(M)		Human(F)

In the first incarnation the patient was *a stone, the long life of which was filled with harmony and tranquility, in the second—a tree that grew at the dawn of time and was chopped down by people (the life was quiet and*

stately); in the third—*an animal existing in harmony with the world*; in the latest in this series—*a man who lived in the 17th century*.

The analysis of the whole bulk of material leads to the following conclusions:

1. Human and non-human incarnations apparently alternate randomly. This alternation does not reflect the evolutionary logic of development.
2. Human/non-human or male/female incarnations are equal in terms of the experience they provide. The emotional and cognitive components of non-human incarnations are often more productive than those in human ones.
3. All non-human incarnations enjoy a high level of inner peace and harmony with the world.
4. In some cases, non-human incarnations are given to regain composure after a very heavy incarnation in a human body.

When I first began my work as a past-life regression therapist, I found such conclusions surprising, because, like most people, I considered the human being as the apex of creation. My experience made me realize that, choosing the body for the further incarnation, the soul does not care what particular class, species or habitat it belongs to. What matters is how effective this incarnation can be for the Soul to be able to solve the tasks it has set for itself basing on the previous incarnation.

I would like to illustrate all of the above with a typical example from one of my sessions. The woman, who came to the session, was trying to tackle her problems with her husband. During the session she made a number of very important discoveries. The session demonstrates the alternation of human and non-human incarnations.

Note: Before I start, I would like to explain that I try not to have any lead-in discussions with patients to not “suggest” anything. I am positive that the Unconscious Mind always chooses the very incarnation that is necessary for the patient at this given moment/period of life. The session I am go to detail reveals the interpersonal problem in the family.

N., the life of a Russian women, Martha, a female hummingbird and a Tibetan monks Sami.

Therapist: *N.*, *when we close our eyes, we usually see something behind our eyelids. Describe what you see with your eyes closed.*

Client: I see a mist over the lake, it is morning . . .

T: *Feel your body which sees the mist over the lake. Is the lake large, small, overgrown with reeds? Is it open water?*

C: It is open water, I see mountains far away . . . I'm sitting.

T: *Feel your body that is sitting. Is it young or old, sick or healthy?*

C: Up to forty. It is a strong body, a woman's body, in linen clothes.

T: *You know your body of N. perfectly well. What is the difference between these bodies?*

C: This one is bigger than my present body. I am squatting and looking at the water . . . It is a strong body, with hair back into a pony-tail. I am about forty.

T: *What do you feel - anxiety, joy, sorrow?*

C: Calmness . . .

T: *Well, let us go back to the daytime.*

C: I am at home. I have a family of my own.

T: *Judging by the utensils, what epoch is it?*

C: Wooden benches, a table, a bed. It is a strong log house. I cannot determine the century; the dress I am wearing is long, peasant-like. It may be the 19th century, Russia. I have a four-year-old son and an elder daughter. I have a husband, but he is out now.

T: *Do you have livestock or poultry?*

C: Yes, I do – a cow, sheep, chicken, a horse. We live by subsistence; my husband goes fishing from time to time. We live a good life, not on a lean streak.

T: *Tell me about your family.*

C: My son is good; I make blini² for him (laughing).

T: *Why are you laughing?*

C: I do not know how to bake blini in my present life.

T: *So do, and you learn. What is your name?*

C: Martha.

T: *Martha, do you love your children? What can you tell me about your family, your husband?*

C: My home is tidy. We have a butter churn. It is quite and good. A close-knit family. My daughter helps with churning butter. I do not get tired, we have only two cows.

T: *Tell me about your husband.*

C: He is big and strong. He takes care of us, of everything.

T: *Do you still admire him, though you have already lived a long life together?*

C: I understand my husband. He is not a source of violence. I fully trust my everyday feelings. I feel happy with my husband. When he takes me by my hand, I forget about everything. He is always my first concern.

T: *Do you, as N., have a lot to learn from Martha about how to create a warm climate in the family? What is your husband's name?*

C: Ivan. I, as N., indeed have something to think about.

² Blini – Russian thin pancakes traditionally made from buckwheat flour and served with sour cream, caviar, jam or other garnishes.

T: *Will you feel how you, Martha, love to live such a good and harmonious life, rearing your children, taking care of your house and filling everything with the warmth of your soul! Use these sensations to go back to Martha's first five years. What family do you have? Who are your parents? How did they treat you?*

C: I have two sisters, one died. The middle sister had choking fits and they took her to Georgia for treatment.

T: *Do you see and know it? Did you see her having these problems?*

C: Yes, I do.

T: *Good. Did your mother leave for Georgia with your father?*

C: Yes, they leave with my younger sister, and I stay at home with our grandmother and my elder sister. My father is handsome; my mother is beautiful. They look at me with love. Father keeps the family. My mother loves and cherishes us. They leave for a couple of weeks.

T: *Are you happy? What do you see around you?*

C: It makes me sad that they did not take me with them. Then I start looking forward to our meeting. My parents return, they bring me a present. It is a beautiful red dress. I am happy. I am dancing in it.

T: *Martha, let us go back to your birth. Who are you: a spermatozoid or an egg?*

C: An egg. I see a spermatozoid approaching. I look forward to meeting it.

T: *Is it dangerous to wait for the spermatozoid and join it?*

C: No, it is not. I even want to meet it sooner.

T: *Feel the moment of conception. Live through this moment.*

C: Everything is calm and pleasant. I was getting so big. I feel secure.

T: *What is your mother's reaction when she learns about her pregnancy?*

C: She is a bit frightened. She is young, only eighteen. And she is not married.

T: *But is your conception the result of love?*

C: Yes. She tells my father that she is pregnant, he smiles. He is not very demonstrative. Later was the wedding.

T: *Do your parents have sex during your mother's pregnancy?*

C: Yes, they do. But it does not bother me at all.

T: *Now, while you are in the womb look what is your parents' attitude towards you? Do they love you?*

C: My mother thinks about me. I am very comfortable here.

T: *And then, what causes your birth?*

C: It feels tight . . . I appear with my head first. It is a bit painful, especially when the head comes through the neck of the womb, but not scary.

T: *Is it that the woman who is giving birth, and her relatives fear more than the child?*

C: Yes, that is right. There is no fear of failure, of death. They take me in their hands, but it is very cold now! I scream at once.

T: *And what does your mother feel?*

C: Tired . . . They show me to her, and she gives me her breast. She is happy. My brightest feelings are not when the nipple is in my mouth, but when they put me on her belly. Just the feeling of warmth and security.

T: *Did your parents quarrel during your mother's pregnancy?*

C: They were building the house, and my mother fell down the stairs.

T: *Was it dangerous for you?*

C: They were scared. I was not. . . . My mother breast-feeds me. It is a great joy. It is love between my mother and me.

T: *Were there any memorable events from your birth and up to your ten years?*

C: My childhood was calm and comfortable. I have two younger brothers. I bring them up. They listen to me and obey . . . We run outside the village to sing and dance in a ring.

T: *Tell me where and how you meet your husband? Who is the first to give a tumble?*

C: I notice him and try to attract his attention. His name is Ivan.

T: *What do you do for that?*

C: I sweep my plait over my shoulder. I have a very beautiful plait. A beautiful ribbon in my hair. Blond hair, blue eyes, a beautiful sarafan dress, a white shirt underneath. Cross stitch . . . I pass by and he looks at me . . . then we jump over the fire together.

T: *What is your reaction when he first takes you by the hand?*

C: It is very pleasant . . . I get married at nineteen. We did not date for long.

Therapist - *Did they send matchmakers? Did you hide? Were you afraid of your father, or your father approved of Ivan?*

C: He did not mind, but I was afraid. The wedding was after the Maslenitsa³.

T: *Are there a lot of people? What dress are you wearing?*

C: A white shirt, a new sarafan dress. I am excited.

T: *And Ivan?*

C: He is wearing a red kosovorotka shirt. I admire him so much.

T: *Have you already had sex?*

C: No, I am afraid.

T: *Experience your wedding night. Do not comment. Just experience it . . .*

C: It was not painful. Ivan was very affectionate and attentive. I love him even more! I get pregnant after our first night. When I understand that I am pregnant, I get scared!

T: *When you tell Ivan about it, how does he react to it?*

C: He is happy. And this joy immediately eliminates all my fears.

T: *Who do you give birth to?*

C: Son. Ivan is very happy.

³ Maslenitsa is an Eastern Slavic religious and folk holiday, celebrated during the last week before Great Lent.

T: *How do you, Martha, manage to keep the love in the family? How do you as Martha solve the problem faced by N.?*

C: I am always kind to him. When he takes my hand, I feel a warm wave covering me. I wait for him and I am happy when I see him. This is not like in N.'s life. Far from it.

T: *What happens that N. is so to be so distant from your husband? Find what is different between Martha and N. What is wrong in N.'s life?*

C: I, N., have never felt relaxed with my husband. I need to keep all that happens in my family under control . . . I cannot enjoy relaxation.

T: *Martha, how many children do you have?*

C: Two, a son and a daughter. We have warm and loving relations with Ivan . . . Children have grown up.

T: *At what age do you die?*

C: Ninety.

T: *Who dies first?*

C: I do. My husband dies at his 91.

T: *Tell me about your death. What season and what time of the day do you die?*

C: Autumn . . . evening . . .

T: *Tell what you feel before death?*

C: I am not afraid of death. I am ready for it. Ivan takes me by the hand, I immediately feel warm and calm . . . I have a feeling of a well-lived life.

T: *You have lived a long and heavy life—your livestock, your own house, cattle. The life of a peasant is hard. How did you manage to live it in peace and harmony?*

C: We worked as usual. When old, I had pain in joints and arms . . . I know that I will die before Ivan and I feel sorry for him, he will remain alone. His life will be more difficult . . . I just lie on the bed and die quietly . . . Ivan is at home . . .

T: *Well, Martha, find the moment when you still feel the body, and then begin to see it as if from the outside. Describe what kind of body you have just left?*

C: The body is old, but good-looking . . . an undershirt, a skirt, an apron, and a shawl.

T: *Do you feel sorry for the body? Can you return into it?*

C: No, I do not feel sorry, and I do not want to return.

T: *Do you understand, Martha, as your body has died?*

C: I see.

T: *Where is the terrible feeling of death, loneliness and uncertainty that is usually so much anticipated by people?*

C: There is none.

T: *Now I want to draw your attention to the fact that Life is felt through the soul, for which there is no death.*

C: Yes, that is right.

T: *How long do you stay near your body? Are you waiting for Ivan?*

C: He comes. He is upset, I feel it. This is what I was afraid of when I was alive . . . Before the funeral the soul still watches the course of events. And then nothing holds me here, so I leave.

T: *How do you know, that you leave? Tell more about it.*

C: They put the cross on the grave . . . The soul looks like a whitish transparent ball. I am going up very quickly . . .

T: *Tell me, do you know anything about the fate of your children?*

C: Our children are strong and diligent. Their families will prosper.

T: *When the movement stops, let me know where you are.*

C: It stops. I am in the golden-yellow space.

T: *Well! How does it meet you? Is it dangerous?*

C: No, it is calm. Absolute harmony and confidence that this is where I belong to. This space is like “home”, the notion of which one always has in their Soul. Home where you are awaited, loved, understood, and accepted from any life.

T: *Are there any boundaries or limits in this space?*

C: No, it is infinite. It is so strange and pleasant to feel it.

T: *How do you assess your life in the body of Martha?*

C: I have lived a very long and harmonious life “in one gulp”. I understand my problems and mistakes in N.’s family life and see possible ways to turn the situation around for the better.

T: *How long have you been in it?*

C: For a while, and then I felt a strong desire for new experiences in a new incarnation. I go on . . .

T: *Where are you? What is around you?*

C: I see trees; it is a garden . . . Limited space . . .

T: *Feel your body in this limited space. What is it?*

C: It is small . . . I think I am a bird.

T: *What bird?*

C: A very small, colorful bird!

T: *What is your inner state?*

C: I am yellow-green. I am prinking my feathers with a long brown beak

. . .

T: *How do you clean your beak?*

C: I use twigs and branches. It is calm around. One problem – how to find food. I look for flowers to suck the nectar from them.

T: *Are you a hummingbird?*

C: Yes. Sometimes I see similar birds.

T: *Flowers are of different colors. Do they have the same nectar?*

C: No, it tastes different. I prefer white flowers; their nectar is sweeter.

T: *What is your sex?*

C: Female.

T: *Have you already had chicks?*

C: Yes, I have.

T: *Let us go back in your life of a hummingbird. When do you make a family? Do you usually mate for one season or for the whole life?*

C: I have a feeling that for the lifetime.

T: *Good. Tell me who is the first to notice the other? Are his feathers as bright as yours?*

C: He is brighter than me. I choose him . . . His crest is the most beautiful.

T: *Wow. Who builds the nest, and where?*

C: In the thin branches of the tree. He builds the nest; it is small.

T: *Is it difficult to fly when there is an egg inside?*

C: Rather. I hatch eggs . . . My male brings nectar to me.

T: *How do you feel the hatched eggs? Are they alive or not?*

C: I am like X-rays. I feel and see them! I roll the eggs around regularly . . . We have hatched two chicks, two boys.

T: *How do you feed the chicks?*

C: My husband and I feed them on nectar. One chick disappeared, it may have dropped out of the nest . . . We are looking for him, but he can be found nowhere . . . The other chick has grown up. We have taught him how to fly.

T: *How did you do it?*

C: I pushed him out of the nest. He began to fall, but then waved his wings. He began to eat the nectar by himself. He returns to the nest for some time, but then he flies away.

T: *Do you, hummingbirds, have a feeling of happiness and harmony?*

C: Yes. I have to fly a lot to have enough food.

T: *Is your chick beautiful?*

C: Beautiful, but my husband's crest is better.

T: *Cool. How many chicks do you have all in all?*

C: No more . . .

T: *Do you have many enemies? How do you die?*

C: Our enemies are snakes that climb trees and branches. But our nest is built on very thin branches, so they cannot crawl to it.

T: *How do you feel the moment of death? Do you feel anything?*

C: I am sitting on the branch, focused on something. I fail to notice the snake. It bites my foot, I tap it with my beak . . . I cannot fly, my wings do not obey – it is venom. I fall on the ground.

T: *What body have you left?*

C: A small colorful bird, lying on the right side, with the eyes open, the wings pressed tight against the sides . . .

T: *How old were you when you died? Did you hope to live longer?*

C: No, I was rather old . . . That is why I lost my guard down, and the snake could bite me . . .

T: *How long does your body remain on the ground? Does anybody want it?*

C: Some bugs . . .

T: *What do you look like after leaving the body of the hummingbird? Like a ball, too?*

C: It is a purple-gold cone pointed upward . . .

T: *How long do you stay near your body? Where does your soul go to?*

C: To the mountains . . .

T: *What body does your soul live in now?*

C: I feel some trouble . . .

T: *What is the body in which you feel it.*

C: Pain in the lower back . . . I am a monk in orange clothes . . . I must pray for somebody to avert misfortune . . . I am thirty . . . My name is Sami . . .

T: *Did you, Sami, have the same feeling ten years ago? Did you have to pray much to avert disaster? Tell me about yourself at the age of twenty.*

C: My body is larger than N.'s. I serve in this temple.

T: *How long have you been living in this temple?*

C: This is Tibet. My parents sent me here when I was a child. It is very honorable. Life is not difficult here . . . I know a lot of prayers that help in different situations and keep the world from destruction.

T: *Your face is very enlightened now. What are you thinking about?*

C: I am in no hurry. I can be thankful for small bodily favors, but I have a very broad soul. Now I have some pain in kidneys and loins. I caught cold in winter. All the monks prayed for me, but they failed . . . I die when I am thirty . . .

T: *Find the moment when you stop feeling your kidneys and body. Describe the body you have just left.*

C: This pain is tiresome. It lasts for long . . . I cry . . . I agonize the whole day . . .

T: *Proceed to the day when you feel no pain, when you can see your body as if from the outside. Tell about Sami's body.*

C: I am in the orange robe, my face is calm . . . There are monks around, they are quiet . . .

T: *Now, after your soul has left the body, tell why you had a problem with your kidneys.*

C: It was very cold in winter, so I caught cold . . .

T: *How long did you stay near the body? What is your shape and color?*

C: I do not feel sorry for the body. I stayed here for short . . . The soul is red . . .

T: *What is the space your soul is going to?*

C: It is light . . . I feel free and comfortable . . . I have a feeling that this space accepts me without any strings. I like it here very much, everything is harmony here. The concerns of the physical body do not matter here.

T: *Do you think the feeling of tranquility and harmony that you have in this space can be somehow experienced when in a physical body?*

C: Yes. I did not feel it before, because I lacked the experience of this session. Now I have it, and I will be able to get support here, in this light space.

T: *Without leaving the space where Sami's soul is now, do you see any glowing along the contours of N.'s body?*

C: Yes, a thin strip of light . . .

Note: It was not my task to make the patient see the light. However, it is difficult to overestimate how this unexpected discovery is important for the patient. My strategy at this stage of the session is to teach patients to trust themselves, to believe in their infinite capabilities and to teach them how to use the latter. I want patients to see the harmony of the world and Universe, to be sure of their choice and be able to take responsibility for it.

T: *Let us work with N.'s aura, shall we?*

C: I want it! Let us work . . .

T: *When you have worked with N.'s aura, what does it look like?*

C: Powerful and strong. There is a feeling of strength and security in the body. The aura has rainbow iridescence.

T: *Perfect. Can we end today's session?*

C: Of course.

T: *Then, thank the incarnations that your unconscious mind has chosen for you—Martha, the hummingbird, and Sami. Having lived through these incarnations, you could see the problems and their solutions. The problems that are very urgent for you, in N.'s body. Do you understand it?*

C: Yes, I do.

T: *Then return to your body . . . Who are you? Martha?*

C: *I am N.*

T: *Thank you for your work. How long do you think the session lasted?*

C: No more than half an hour.

T: *Two hours. Thank you for your work.*

C: Thank you.

Tomsk, Russia
December, 2016

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Development of Life Quality by Past Life Regression Therapy together with an Integrated Psychological Approach

by Tayat Sriplung and Thawatchai Krisanaprakornkit***

Abstract

The purpose of this study was to determine whether past-life regression therapy can lead to better quality of life, more profound belief about moral consciousness, and better psychological well-being. This quasi-experimental research included a control group designed to test these hypotheses. Each experimental participant underwent three past life regression sessions facilitated by two qualified regression therapists, plus seven days of life improvement practice between each session. Participants in the experimental group had better scores in quality of life than those in the control group. Within the experimental group, scores on moral consciousness as well as quality of life and psychological well-being improved and was statistically significant. The roles of past life experiences and lessons learned in past-life regression were also examined.

Past Life Regression Therapy (PLRT) along with the use of an Integrated Psychology Approach consists of guiding the participants by using PLRT and past-life lessons learned counseling to design new life improving practices (LIP). Ian Stevenson (1966) maintains that PLRT is an effective means of facilitating self-development or of resolving various psychological difficulties. Woods and Baruss, (2004) mentions that in the absence of psychological problems, PLRT can improve psychological well-being.

Three assumptions were raised by the use of this therapy:

- 1) the abreaction of past life negative emotion can improve the course of present life,
- 2) the increase of psychological well-being can improve life quality, and
- 3) PLRT together with LIP can lead to more insights and profound understanding of moral consciousness.

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Some believe that the negative residuals of unfinished business in a person's past life have energy to attract negative similar incidents to a person's present life. The residuals were buried deep in the subconscious level of mind, in which individuals are unaware of them. The abreaction of the negative residuals would therefore reduce negative incidents in the present life. In addition, Soon, Brass, Heinze, & Haynes, (2008) found that subconscious relearning is unique to the individual, and the individual who can recall their past-life memories would be able to learn life lessons from them. With proper guidance, the relearning of these past lessons allows individuals to receive suggestions from their inner consciousness on ways to improve their present life.

The researcher conducted the same regression therapy procedure and individualized LIP counseling for their daily practices to all 20 participants, in the experimental group. These 20 participants were asked to put on the biofeedback device (IOM Hardware, the Wild Divine Software Programs) to monitor the arousal state. The past life regression procedure began when participants reached the relaxed state. The biofeedback device provides information on the activity of skin conductance which reflects sweat gland activity and heart rate.

The idea was to evoke past-life experiences in all three pre-scheduled sessions (one week time interval) for each participant in the experimental group. Rivera (2012) concludes that the improvement in psychological well-being enables participants to see new opportunities for quality of life. The improved moral consciousness has direct impacts to their life improvement practices (LIP). The researchers hypothesized that the combination of improved psychological well-being and moral consciousness has direct impacts to improve participants' life quality. Life quality in this research is defined as one's perception on his or her physical health, mental health, and interpersonal relationship.

This study used one-way multivariate analysis of variance (MANOVA) as the statistical quantitative method. The rationale in using MANOVA is that regression therapy can improve both psychological well-being and quality of life. This research was designed to compare both psychological well-being and quality of life between control and experimental groups. The control group received only Positive Thinking training in the experiment.

To make sure that the subjects have substantial past-life experiences, the treatment was designed to have three weekly sessions. The researcher gave the Moral Consciousness counseling after the regression therapy ended. After the experimental subjects gained cognitive understanding and emotional insight, the LIP counseling began. This step-by-step procedure is

believed to be intense enough to install lasting changes in the cognitive-emotive-behavioral levels within a 35-day period.

It is worthwhile mentioning that regression therapy is the treatment process at the subconscious level. While moral consciousness counseling is the conscious process after the regression therapy ends, during which spirituality is the main topic of discussion. LIP consultation is the final process focusing on behavior changes.

The psychological well-being is immediately measured after the session in order to measure the positive results of regression. The moral consciousness is measured after the moral counseling finished. The quality of life is measured after the participants have completed their LIP exercise, at the end of the research project.

Research Design

The research methodology is quasi-experimental with one control group, and the experimental period is 35 days. Both quantitative and qualitative analysis are viewed as equally important and are applied in parallel.

The independent variable in this research is PLRT. The dependent variables are the Scale for Psychological Well-Being (see Thai Department of Mental Health, Psychological Well-being Questionnaire, 2008). The measurement variables of life quality (see Thai Department of Mental Health, Life Quality Questionnaire, 2008) are;

- (1) perception of the subject's physical health,
- (2) perception of the subject's mental health and
- (3) perception of the subject's relationship with others.

The measurement of moral consciousness includes Spirituality (commitment to good deeds) and Inner Growth (development of life purpose).

The questionnaire used for measuring psychological well-being was the Psychological Well-Being Questionnaire which consists of 12 questions each with a five-point Likert scale to which respondents can agree or disagree. The questionnaire items include questions such as Positive Relations with Others, Autonomy, Environmental Mastery, Personal Growth, Purpose in Life, and Self-Acceptance. [The finding reports decreases in negativity, and increases in positivity.]

The Life Quality questionnaire was modified and reselected to 20 questions, from an original 26 questions. These questions were designed to focus on participant's evaluation of his or her perception of their personal changes in

physical health, mental health and interpersonal relationship. This questionnaire uses a five-point Likert scale.

Moral Consciousness consists of a five-point Likert scale made up from three scales: nine items on Spirituality (faith in right conduct) and five items on Inner Growth. All 14 items make up a Global Scale that is an indication of a person's position along the materialism/transcendent dimension.

Participants

Forty individuals between 25 and 60 years of age working at International Company Limited (ICC), Thailand, were divided into 20 experimental subjects (E), and 20 control group subjects (C). The inclusion criterion was individuals who are willing to improve their quality of life and those not willing were excluded. Those with a history of traumatic emotional events or those experiencing problems with concentration, memory were also excluded.

Nine of the participants were men and 11 were women in the experimental group and 8 of the participants were men and 12 were women in the control group.

Procedure

The researcher used a dedicated room provided by ICC as the experimental lab. The researcher conducted the half-day opening workshop to explain regression therapy concepts and procedures to all 40 participants. The chairman of ICC gave the opening speech as this was one of their in-house development programs. The participants received the general experiment and the researchers clarified any misunderstandings about hypnotherapy.

At the end of this workshop, they were asked to complete a quality of life questionnaire. The therapy schedule for the 20 participants in the experimental group was executed over a 35 day period composed of 3 regression sessions, each lasting 2 hours and a LIP counseling designed to last half an hour.

In each PLRT session, participants came individually and were required to sign a consent form. The instructions were given so that they felt secure and relaxed. The participants were discouraged from engaging in cognitive thinking during the guided regression, which lasted two hours.

Moral consciousness counseling and LIP counseling were customized for each participant, to enable them to improve their spiritual lives and their inter-personal behaviors. Participants were asked to complete a Moral Consciousness Questionnaire after each regression session. The questions focused on the past-life experiences during regression.

At the end of the study, a half day closing workshop was performed during which the researcher asked the participants to complete the life quality questionnaire for the second time. Then researcher shared some key findings and let all participants in the experimental group share their experiences about the benefits of regression therapies, moral consciousness consultation, and life improvement counseling. Finally, they were asked to complete open-ended questions of the life quality questionnaire, such as benefits, experiences and lessons learned.

Results

The Life Quality mean score of the experimental group before therapies was 3.560 and that of the control group was 3.505. Scores after the therapies were 4.028 and 3.643 respectively. The comparison of life quality by MANOVA showed that the regression therapy improved life quality in the experimental group significantly compared to the control group.

The psychological well-being mean score of the experimental group before therapies was 3.958 and that of the control group was 4.250 (7.37 percent higher than the experimental group). After the therapies, the mean score of the experimental and control groups changed to 4.833 and 4.875 respectively. The improved score for the experimental group was 22.10 percent whereas that of the control group was 14.76 percent. The researcher found that improved score of the control group comes from an uncontrollable factor because the control group was asked to join a Positive Thinking training during the experimental period. At least, the researcher can conclude that the impact of Positive Thinking training is less than that of the therapies on psychological well-being. And yet, Positive Thinking training had no impact on the life quality scores.

Table 1: Illustrating improvement of scores—quality of life and psychology well-being (before and after regression therapy).

Variables	Statistics						Correlation	
	Life Quality			Psychological Well being			Life Quality	Psycho Well Being
	N	Mean	SD	N	Mean	SD		
Before the Experiment								
Experiment Gr	20	3.560	0.363	20	3.958	1.286	1.000	
Control Gr	20	3.505	0.456	20	4.250	1.236	.659	1.000
Box's test of equality of covariance matrices = 3.034, F=0.954, df1=3, df2=259920, p=0.414 Life Quality: Test of Homogeneity of Variances; Levene = .412, df1 = 1, df2 = 38 μ σ p = .525 Psycho Well- being: Test of Homogeneity of Variances; Levene = .139, df1 = 1, df2 = 38 μ σ p = .711								
After the Experiment								
Experiment Gr	20	4.028	0.321	20	4.833	0.456	1.000	
Control Gr	20	3.643	0.344	20	4.875	0.274	.394	1.000
Box's test of equality of covariance matrices = 5.504, F=1.730, df1=3, df2=259920, p=0.158 Life Quality: Test of Homogeneity of Variances; Levene = 0.035, df1 = 1, df2 = 38 μ σ p = 0.853 Psycho Well- being: Test of Homogeneity of Variances; Levene = 0.887, df1 = 1, df2 = 38 μ σ p =								

0.352

Note: *p < .05

In the experimental group, changes in life quality and psychological well-being were in the predicted direction, from 3.505 to 4.028 or 14.92 percent and from 3.958 to 4.833 or 22.10 percent respectively. The improvement in the experimental group is statistically significant. In the control group, life quality score changed from 3.505 to 3.643 or 3.93 percent but it was not a statistically significant difference. Scores of Psychological Well-being changed from 4.250 to 4.875 or 14.70 percent, which is statistically significant. The improved score on Psychological well-being of the control group came from their participation in the Positive Thinking in-house training session conducted by ICC international company as their regular employee training.

Table 2: Mean scores of Moral Consciousness measured after the regression therapies.

After the Regression Therapy	Mean Score		
	1 st treatment	2 nd treatment	3 rd treatment
1. Spirituality	3.63	3.79	3.96
2. Inner Growth	3.70	3.70	4.08
Mean	3.67	3.75	4.01

Table 2 shows improvement of scores of moral consciousness after each therapy. However, by research design, participants of the control group were not measured on the moral consciousness scale.

Table 3: Relationship between Life Quality, Psychological Well-being and Moral Consciousness using the last measured scores.

Variables	Statistics			Correlation		
	N	Mean	SD	Life Quality	Psycho Well-being	Moral Consciousness
Life Quality	20	3.663	0.229	1.000		
Psycho Well-being	20	4.833	0.456	0.398	1.000	
Moral Consciousness	20	4.010	0.516	0.302	-0.447	1.000

Note: *p < .05

Table 3 shows a significant relationship between Psychological Well-being and Quality of Life at $p < 0.05$. Yet, there is no significant relationship between Moral Consciousness and Quality of Life at $p < 0.05$. However, there is a negative relationship between Moral Consciousness and Psychological well-being.

Conclusions

This is a controlled study of the effectiveness of regression therapy with an integrated psychological approach to the life quality and psychological well-

being. There was substantial correlation between the past-life regression therapy and improved quality of life, psychological benefits and changes in moral beliefs.

The research was designed for participants to form courses of actions during LIP consultation that reflect their past-life recalled memories and Moral Consciousness experiences. However there were no statistical variables designed to measure LIP actions towards quality of life. The researcher used the qualitative methods to collect information of this relationship, by means of interviews, and a workshop. It is advisable that the next research should design statistical measurement of LIP actions toward improved life quality. During the closing workshop, all participants attested that the improved moral consciousness from the regression sessions had strong impact on their perceptions. Therefore this finding re-emphasized the effectiveness of regression therapy for quality of life improvement.

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Research Study: What Does Not Work in Regression Therapy
an EARTH Research Committee Report – Paula Fenn

Abstract

This Research Report conveys a range of findings determined from a research study conducted with 15 regression therapists who were dominantly members of EARTH (80% EARTH, 20% non-EARTH). The topic of the study was, ‘What Does Not Work in Regression Therapy’ and the data was collected via questionnaires. The intention of this study was to generate data on this particular topic which would contribute to the field of knowledge within regression therapy also creating a reflective awareness about practice. The findings were analysed using simplified versions of thematic and content analysis. This methodological approach was adopted to structure the data into meaningful themes of problematic areas within which the study respondents had experienced difficulties either as practitioners of Regression Therapy and/or clients. The data communicated by the participants offered rich and meaningful content and allowed for a purposeful analysis which, indeed, allowed for reflection and a heightened awareness of practice, thus offering a contribution to the knowledge base of the field. While a number of the answers were unique in focus, there was an ability to collate the data into the dominant themes of Resistance, The Integration of Other Therapeutic Approaches, The Making of Meaning, Not Attending to the Clients Practical Needs, Not Appropriately Attending to the Clients Material and Self Reflection/Self Awareness.

Introduction

The EARTH Research Committee recently conducted a research study on the topic “What Does Not Work in Regression Therapy”. The purpose of the study was to add to the body of knowledge within the field of regression therapy, as was previously communicated to our EARTH members, and was discussed in the Introductory Statement, which invited member participation in the study. It was determined that, rather than adding to the extensive knowledge and theoretical base on ‘what works’, it would be interesting to discover if there were any prevailing themes within our membership of practitioners on the difficulties that they have experienced in their own sessions as therapists and/or in their sessions as clients. This is a topic which embraces problems, difficulties and ineffectiveness. While we all aim for the Light in our work, we must also confront the shadows and integrate the more difficult aspects of our work into our experience as professionals. Just as light and dark are opposing poles on the same continuum, success and failure connect to form a bridge of

practical awareness. Indeed, most of the research participants, without prompting in the questions, worked positively with these somewhat opposing forces and offered examples as to how they had mitigated against and purposively worked with the presenting problems in their sessions in order to seek a successful resolution. Additionally, and alternatively, if they had come to accept that the session had proved to be ineffective in some way or another, they were able to create a meaningful understanding of what had not worked and why it had not worked. Some practitioners also noted surprisingly positive results for their clients after these “failed” sessions.

As a body of professionals, EARTH must always be in the flow of developing a knowledge base which informs practice. But what comes first, the knowledge or the practice? Is it not the case that our practice is informed by knowledge, but that as we practice we learn and develop a heightened and adaptive awareness of our methods? Knowledge and practice are thus interlinked. Continuing to bring a research based, practical understanding, to what we do as practitioners is complementary with and runs alongside the theoretical. Reflecting on practice, what we do and why we do it, is crucial in our evolution as practitioners and the evolution of the field of regression therapy.

Without flow, without processing and developing a greater understanding of our practice, we leave room for stagnation. This particular research study created an opportunity for practitioners to direct attention towards their own work and experiences and in so doing opened the flow of practitioner self-reflection, a key evolutionary aspect in terms of the use of Self in the work of regression therapy alongside the informed application of practical methods.

The primary audience for the research findings was determined to be our body of EARTH members. The purpose of this research study was to seek to understand “What Does Not Work” in some instances in regression therapy in order to inform practice, to add to the body of knowledge within the field and to communicate our ability as a body of practitioners to be reflexive in our approach to what we do. Perhaps certain themes emerge from the study of respondents’ answers, which could additionally and informatively contribute to these aims.

Research Methods

The research protocol embraced a dominantly qualitative approach which aimed to achieve open-ended responses to questions. The tool for collection of the responses was a short questionnaire. The questions were geared to generate textural descriptions of personal experiences, which is a hallmark of the qualitative approach to research. We attempted to generate data which assisted our learning about the research topic from those which were intimately involved, namely regression therapists. Quantitative data could also be gathered via the use of closed (yes/no) questions which would allow for a statistical analysis.

The qualitative data was analysed using a combination of content and thematic analysis whereby the researcher attempted to find recognisable and possibly linked content within the participant's responses. Basic analysis at the quantitative level was also undertaken.

Requests for participation, information about the research study and questionnaires were sent to our body of 300 EARTH members via direct email from EARTH administrators, the EARTH Newsletter and the EARTH Facebook Page. Requests for participation were also verbally elicited at the EARTH Convention 2016 where hard copies of the questionnaires were distributed. Study respondents completed the questionnaires, emailed them, and/or handed in handwritten answers to members of the Research Committee. The aim of the dominant online distribution technique was to reach a globally dispersed body of members and to elicit as many responses from our community of members as possible.

Confidentiality and an ethical lens is of importance in all research studies and was adopted within this research protocol. Some study respondents chose to remain anonymous while others declared their names. In terms of the analysis and interpretation of the data, all responses are rendered anonymous in terms of the descriptive answers shared in this report.

A literature review pertaining to the topic under review was not undertaken due to the Research Committees' understanding that no previous research of this nature had been completed within the field. It may have been informative to collect data examples from textbooks and student manuals on the pitfalls and/or problematic areas to be aware of within the field of Regression Therapy. However, this was out—with the remit of this research protocol given that we were attempting to generate inductive (potentially novel data/information) and not make deductive conclusions (comparisons with already known data/information). [Ed. note: comparison of these results with the first extensive survey of regression professionals would be insightful. Clark, R. L. (1995). *Past life therapy: the state of the art*. Austin, TX: Rising Star Press.]

List of Questions

Question 1: "As a **practitioner** of Regression Therapy have you ever had an experience where any part of the process appeared to be ineffective, did not work, and/or where you had particular difficulties with any part of the process?"

Question 2: "If you answered YES to Question 1, can you describe that experience or experiences and share any thoughts based upon your own interpretation as to why that part of the process appeared ineffective, did not work, or presented a particular difficulty?"

Question 3: "As a **client** of Regression Therapy have you ever had an experience where any part of the process appeared to be ineffective, did not work, and/or where you had particular difficulties with any part of the process?"

Question 4: "If you answered YES to Question 3, can you describe that experience or experiences and share any thoughts based upon your own interpretation as to why that part of the process appeared ineffective, did not work, or presented a particular difficulty?"

Question 5: "Are you a member of EARTH?" Please answer YES or NO.

Question 6: "If you answered NO to Question 5, could you please indicate any Regression Therapy Organisation you are affiliated with and if None please state this?"

Results

Quantitative Analysis - Fifteen people completed the questionnaire. From a body of 300 EARTH members this represents a sample of 5% of the potential responses. Due to the small sample size, we cannot create any grand theory from the results, which essentially means that we cannot make any broad generalisations from the answers provided. In order to be able to make any

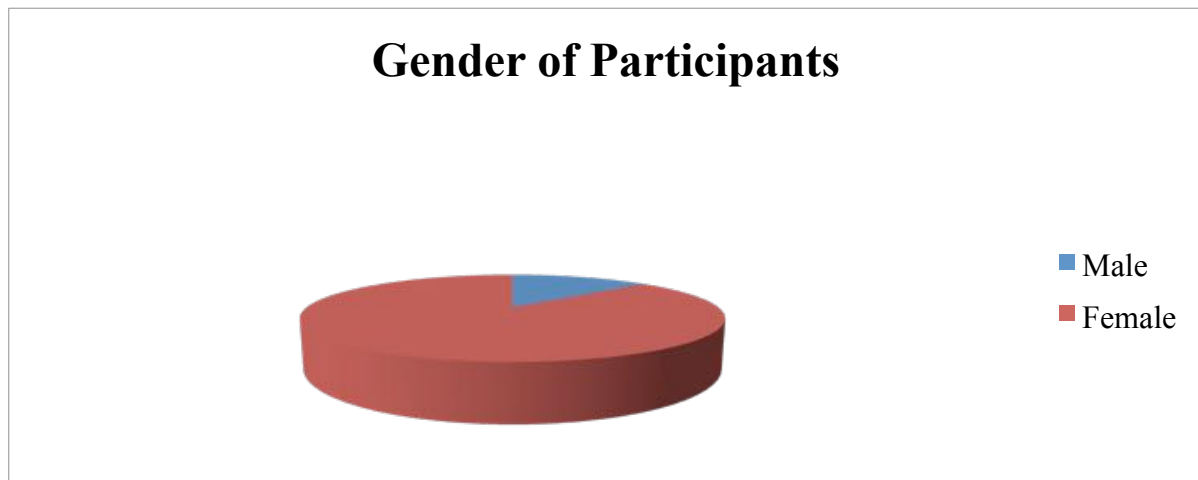


wide assumptions it would have been necessary to have a much higher response rate. However, we can bring forward some interesting findings in the qualitative analysis.

Of the 15 respondents, 12 were members of EARTH, 1 a member of another body, and 2 did not answer this question. Therefore 80% of the answers were provided from our EARTH membership. Thirteen of the study participants were

female and 2 were male. Therefore, a weighty 87% of female representation. This is not uncommon in the field of research within the therapeutic context.

One hundred percent of the participants answered YES to Question 1, indicating that as a practitioner they had experienced aspects of the process of regression therapy, which appeared to be ineffective, did not work, and/or presented particular difficulties. This, of course, is a naturally high percentage given that those who did engage in this survey were embarking on sharing problems they had experienced in regression therapy. This statistic should not be read to indicate that there are particular problems inherent within regression therapy, which, for example, do not also present themselves in other forms of therapy. Therefore, the reader must bear in mind that as we explore the data provided on the lack of success with, for example, addictions and



mental health conditions, what is not open for interpretation is that this data indicates overall failures with regression therapy itself. This is not a valid interpretation. Nor does it indicate a polarity of success via other traditional therapeutic practices such as classic psychotherapy. Many of the collected responses on difficulties and failures that are very common within all therapeutic approaches. As all therapeutic approaches continue to evolve and adapt new methods, new skills are integrated to mitigate against the most problematic of client presentations. This, of course, will also hold true in regression therapy. One can also bring consideration here to the foundational bias in the study in that it was in itself relating to ‘problems’ and hence one can perhaps determine that many of the non-respondents—95% of EARTH members—had not similarly experienced the problems explored in the body of this research report in their therapeutic practice.

Seventy three percent of the participants answered YES to Question 3, indicating that as a client engaging in regression therapy, they had experienced

aspects of the process which they determined were ineffective, did not work, and/or presented particular difficulties.

Qualitative Analysis

Analysis of Question 2 Data – There was a collection of rich data pertaining to Question 2, and in relation to problematic aspects experienced in the research respondents' practice of regression therapy with clients. The dominant theme determined from the answers was 'Resistance', and there was mild resonance on client presentations such as working with addictions. This overview of the responses begins with the answers which were unique to individual practitioners and flows towards those areas where there was a greater similarity between responses.

There were a range of singular responses to the research question which cannot be fully constellated within a theme. These include working with clients who do not really want to be there but have been persuaded by someone else. One respondent shared, "Once a man came in for therapy because his mother wanted it so much. Of course, it didn't work." Another stated that some clients are "Just not ready for the work." Whilst a further respondent said that they had experienced problems with a client who stopped communicating with her during the session and shared no words.

In the following excerpt from a practitioner an issue is shared which relates to clients who jump around in multiple past lives. The practitioner notes, "I have had difficulties keeping a client 'on track', staying in one past life without jumping around, even when I think my suggestions are clear." Another difficulty shared by a respondent related to working with clients who only see colours and no fully formed images.

More than one respondent shared difficulties in terms of clients attending sessions with no clear goals or intent for the session. This was also linked with clients being unwilling to take on their own sense of responsibility for their side of the work. This also relates to clients who need to be offered realistic expectations and require their existing expectations to be measured.

These latter points are also associated with responses about the necessity to have a strong therapeutic relationship as a foundation for the work. However, the presence of such a relationship does not always equate to a good outcome if the client is resistant, as was noted in the following statement:

We had worked together for many months in a psychotherapeutic context so the therapeutic relationship, the trust and the containment were there as resources. The resistance was voiced during the initial phase of the session and we openly discussed this with no benefit. I tried to work with the emotions as a bridge but she got off the couch

and sat in a chair, adamant that this was not a process she was willing to engage in.

Multiple respondents cited experiencing issues and a lack of success with clients who were under the influence of drugs or alcohol and/or have addictions, “It doesn’t work with people that don’t have a clear consciousness – drugged, dizzy, drunk..” Also, “In cases of addiction, especially alcohol addiction, I have had less success. After the session, the clients felt good...but the effects did not last. I think the slow progress was caused by deeper, tougher causes.” A further respondent stated the following: “Clients who have used drugs—they sort of do not pick up the transformation—as if they subconsciously want to stay where they are.” The following example combines the use of medicinal drugs and the presence of resistance, “The client took an extra dose of painkillers—so she could not feel anything. I did a bit of energy balancing with her. Only one consult, no real session.” In addition to these responses the following was shared about the need to integrate the body when working with addictions:

Hypnotherapy for stopping smoking doesn’t work (neither for alcohol addiction) until the core issue is resolved, simple hypnotherapy is ineffective. Resolution at the spirit realm and seeking or giving forgiveness does not happen until the issue is resolved in the body. The healing goes from the body to the spirit. If it is directed the other way around it does not have any profound effect. Emotions stuck with the body prevent healing of the spirit and the body. So, the body needs to be involved in every session. The hypnotic suggestion only provides a patch on the wound. The wound heals itself without being properly cleaned. For the healing to really take place the densest vibrations (physical) have to be worked with along with the more lighter (emotions, thoughts). The densest hold the key to the healing.

On another theme, one therapist stated,

From my experience Regression Therapy doesn’t work on a person that is not in contact with reality and is very fragmented—like psychotic clients, or very deep depression, or borderline, or people with paranoia, or is right after a very big trauma and in shock.

Indeed, there were multiple answers which noted a range of problems when working with clients who had significant mental health issues including a prior history of psychosis, paranoia and deep depression or were either in the midst

of a current traumatic situation or just coming out of one. A therapist shared the following story:

I worked with someone that was under medication after a psychotic event. He was in remission. We worked only on this life's past. It was very good and he was stable. At some point he says that he doesn't need therapy anymore and he succeeded for a period to be stable with no medication. I told him to call if he needs more therapy. During summer holiday he went to visit Auschwitz and he decompensates having another psychotic episode. We worked a little (classical therapy), and being in a paranoia episode, he didn't trust me, he left the therapy. I continue to work with his girlfriend (he also had couples therapy) in order to support his condition.

Regarding the area of trauma, the following was also shared, "A client could not go into a trance. She came in a traumatic situation which was related to her mother and was very disturbed about it." And in another response, it was also noted that there was a serious resistance to accessing any material as a result of the trauma being very heightened.

Co-morbidity of pre-existing issues and being in the midst of current life stressful events was also indicated as creating difficulties in the use of regression therapy, for example:

I had a client that I helped to have more self esteem, but there were dynamics in their current life that gave such amounts of stress that made this person so unbalanced that after the last couple of sessions they actually felt worse than before. I had to end the therapy, because I felt it had done more bad than good at that moment in time. This was very unsatisfactory for both of us, but it was the right decision, more regression would have made them more unbalanced at that time was my strong feeling.

In terms of depression the following comment was shared which conveys an interpretation of a resistant agenda to remain in the condition, "Certain deep depressive clients are afraid to come out of that state. Stubborn to remain in depression." Another therapist shared the following narrative:

The client was on strong anti-depressants and feared she would heal and lose her support group in the psychiatric treatment after being healed and be lonely again. So, she chose to deny the results of her session... I have done energy work to balance her body and release some family charges, and we worked on cognitively understanding her situation and possibilities. But she did not want to heal.

Resistance - The prevailing realm of resistance was shared as a very problematic and difficult area in regression therapy by more than half of the study respondents. Resistance in many forms being the dominant theme in the answers to Question 2 and dramatically outweighing all other similarities in the data.

A significant number of practitioners spoke about problems either during the induction phase of the session or in relation to accessing any material or depth. This was interpreted in their answers as being linked to a multitude of reasons including fear, anxiety, problems with letting go, being too “stuck in their heads” or blocked. Here are some of the actual responses:

The client was a psychiatrist, who was freaking out for fear—and tried to keep himself away from trance-depth. Yet he went in the experience, but refused to take it seriously. I stopped working with him after this session, in which a few strong entity attachments were freed. (He had taken them over from a patient of his).

There was client that came for regression, entered it and could not bear to see what was there. We continue with classical therapy. At some point, she said it was too much for her and we stopped... she just wasn't ready.

Client was a scientist who was extremely scared to let go of control, so he denied all he saw and did not give the information to the therapist. Therefore, we had a conversation in counseling style.

She saw beautiful colours she likes very much. Beautiful. Bright, different from earth. She liked it very much, but keeps seeing only colours, constantly changing. After the session: she says she won't go to the problem because she is afraid to hear/know the answer.

When they are more on intellectual level the lessons or insights do not have as deep/life-changing depth so it stays on the surface. Ego resistance or mind resistance as if they may try to prove this to themselves, that regression does not work. Also as a therapist we should not have fear or doubt to go into deep issues and traumas, otherwise clients feel it.

I also experienced strong resistance from a client in a current life regression session. The client had expressed a desire to return to key traumatic events from her past to bring about heightened awareness,

transformation and healing. However during the session she refused to access any material.

While another respondent indicated forms of resistance under the banner of entity attachments and in their experience as practitioners they had made the following determinations:

I have had less success in cases of clients that came to me with quite large problems in their health, finances and luck, who were already sure that bad entities were causing this. Or with people who were in their own experience possessed by entities and wanted me to get rid of those. Now I do not take these cases on anymore. I have a strong feeling that the entities are not the problem, but underlying causes that they cannot deal with yet for whatever reason. The clients usually do not want to work with that, they only want to get rid of the problem by getting rid of an outside cause.

An additional realm of resistance presented itself in terms of clients who attend for regression therapy but do not actually have any belief in it, and where it conflicts with the client's own specific belief systems. A practitioner shared the following scenarios, "Client was a firm believer in a certain spiritual theory, and dismissed any experience that was not in his framework—we switched to counselling instead of regression, for this reason. Only one session." "Client was a psychiatric nurse—not willing to believe in any of her own experiences. One session only." In the following scenario we witness this conflict, resistance and also the benefits which can ensue if the resistance is respected:

On one occasion during a regression session a client very forcefully said to me from his conscious mind "This is not working". He was experiencing a mental resistance. I could have stopped there and believed the session to be a failure. He was very alert and wanted to sit up, however I spoke to the resistance and was informed that he did not really believe in past lives and would be "making it up" should he continue. So I encouraged him to make it up, to just use his imagination. He continued to resist, "But what's the point? It wouldn't be true!" I continued, "So let's say it's not true, but let's imagine what might happen". Instantly he brought forward a meaningful and complex past life narrative! I worked with the 'story' as I normally would and no resistance was present. Conscious mind could relax and allow. After the session in our ongoing face to face therapy, without prompting, he worked through and processed the contents of the 'past life' and related them to his current life. The links he formed were very significant and transformational. He achieved his ultimate goals to be more empowered and assertive in his life and to find a new partner.

The Integration of Other Therapeutic Approaches - As evidenced in this latter scenario, many of the research participants reported not only examples of resistances, shared a range of methods they had used and approaches they recruited in to work with and respectfully attend to their clients' resistance. For example, and as has been evidenced in some of the answers above, many practitioners had used other styles of practice including, counselling, traditional/classical therapy, energy healing and readings, which often served as supportive mechanisms and/or a bridge towards undertaking regression therapy. Additionally, the respondents variously noted a range of benefits including the building of trust in the relationship, the measuring of client expectations and the alleviation of anxiety which brought benefit to the client. This integration of other approaches and honouring of the resistance was shared in the following examples:

One of my clients completely stopped communicating at one point, I couldn't get a single word from her. But when I asked her if she wants to tell me and communicate with me, she nodded her head. I calmed her down and let her open her eyes, I knew she needs and wants to get rid of the problem. I asked her if she needs some time and asked her if she can write it down for me. She nodded her head again, she agreed that she will write it up when she is ready. I waited behind the door for her. Approximately after 15 minutes she came with full paper of problems with one of her parents. After she wrote it she was capable to communicate with me.

A client comes to me with relationship problems. We work a few classical sessions and in the fourth we do a regression. She sees her mutilated body and can't bear it. We explore that life, but she can't approach her death moment anymore. She opens her eyes. We didn't close the session so that didn't work totally, but I was in contact with her and didn't push her.

The Making of Meaning - As has been noted above, most aspects of practice which the practitioners deemed to be difficult or even failures were strongly linked with client resistances. A large number of research participants attributed a range of personal meanings to these scenarios and used them as catalysts to bring greater understanding to their practice of regression therapy, and an awareness about their use of Self and their own intentions. Often sharing how experiencing problematic areas in their practice had not only taught them how to flow better with their client's needs but had also brought about the development of new methods within the field of regression therapy:

In the early days of doing this work 25 years ago, I was so impressed with past-life regression therapy and had the determination to make this method work. I had a client who was a well-known television commentator, very handsome by the way, so his fame made me even

more determined to make this method work. He was resisting so I persisted in asking the same question in a number of different ways. Finally, knowing that I was trying to force and manipulate him, he opened his eyes and said, “X’, you are a brat aren’t you!” The lesson, respect resistance. If the client is resisting there is a reason for it so go to the resistance, usually fear and/or control issues. Work with the issues and once the client understands that you are not going to force them, they then know they can trust you enough to enter the unknown.

More than 25 years ago I had an agenda. I believed that if the client regressed to and resolved the traumatic past lives then they would blossom into the true self, making conscious choice in ‘now time’ instead of reacting to traumas from past lives. I also believed that present life would be resolved entirely by doing past life work. I had a client who easily went into intense, emotional, passionate past lives. I worked with her for 6 months and we did ‘blood and guts’ work every session, almost every week. I could see positive progress in her life, confirming my agenda. One day she walked into my office, collapsed in her chair and looked at me hopelessly and said, “All these horrible past lives! Didn’t I ever do anything good?” That taught me to work with the client, stay with the client not my agenda, and more important, help the client build an inner foundation while taking down the coping structures by using regression therapy. This also led me to pioneering Inner Child Integration therapy. I understood that regression is regression and we have to go to the causal incidents regardless of past, present or alternative lives. With Inner Child work, I also found that we were able to build the client’s foundation as well as work more effectively with the present life body.

Interestingly, there were a number of examples of a very important reason why the resistance existed and/or ways in which honouring the resistance had proven to be very meaningful, fruitful and supportive for the client. For example, one male therapist shared the following story about a ‘failure’ with a client which was linked with him being over identified with a perpetrator:

A young woman came for help in her relationships with her family. She said she ‘hated’ them and then told me her history which included childhood sexual and physical abuse. Progress was very slow and appeared to be blocked. We discussed this and arranged for another session where we could explore this a bit more. She sent me a message saying that she did not ‘trust’ me and terminated the therapy. She did not respond to my reply either and it seemed to me that we simply did not get through to the core issue. She chose a man to work with yet the

experience seemed to reinforce her lack of trust in men. My age and physical appearance may also have contributed to that.

And in the following narratives we can see evidence that what was believed to have ‘not worked’ was, again, actually very meaningful for the clients involved. The first example shows a therapeutic experience of abandonment, whilst the second conveys a very clear opening of the energy of trauma to be healed despite the regression therapy session itself being ‘unsuccessful’:

There was woman that came to one of my introductory workshops. She really wanted a regression. I sensed that was not right, but I made the appointment—we worked the interview for one hour and there was nothing that opened, only that I felt a very big pressure on my head. I told her—“I’m sorry but I can’t help you with this. We can’t do a regression, but we can do classical therapy if you want.” She went flat like a balloon with no air and I felt no pressure on my head. She had great expectations. I told her about realistic expectations and what we can do. After eight regular sessions, we finally met (in the 9th) and we did a regression. She was abandoned at birth by her mother—we worked that—that was very transforming.

The client had expressed a desire to return to key traumatic events from her past to bring about heightened awareness, transformation and healing... Resistance was voiced during the initial phase of the session and we openly discussed this with no benefit.... This was not a process she was willing to engage in. I honoured that. I did feel a sense of failure and thought of what I could have done differently, done better. In our ongoing face to face work she never made any mention of the failed regression session. However, what was fascinating was that she began to attract a whole host of clients (she was a counsellor) who had experienced similar traumas to her and she also decided to write her Master’s Thesis on trauma! How I understand this is in effect the Universe finding a way to assist her to heal. That the energy of the trauma had been activated and in a curious and synchronistic way had brought forth the tools she needed to work through her difficult past. At times we must not have intention but attention. Not a fixing but a bearing witness to. With this lens of perception we cannot judge the work or ourselves to have failed or been ineffective as energy will always find its own way to flow.

To conclude this section of the report, and to embrace this concept of failure as being purposeful and containing a wealth of meaning, here is a rich interpretative comment shared by one of the research participants. “Trying to

do something and not succeeding means something and sometimes is useful, so from my point of view there is no such thing as ineffective therapy....”

Analysis of Question 4 Data - Question 4 related to the study participants experiences as a client of regression therapy which were felt to be ineffective, did not work and/or had problematic aspects.

Not Attending to the Clients Practical Needs - The first theme constellates a range of experiences, in the answers to Question 4, which can be considered as ineffectiveness or failures in relation to the clients ‘Practical Needs’.

These included problems in the sessions such as their therapist talking too quietly, not attending to the client being cold, creating gaps in the session due to the writing of notes, and the presence of external intrusions. For example:

In one session, the therapist spoke very quietly and it was difficult to hear her. This created an experience for me where I felt that my witnessing mind was being attentive to the volume of her voice which was to the detriment of the depth of my hypnotic state.

I was aware of feeling freezing cold and starting to shake because of it—likely due to the depth of the regression experience. It would have been helpful for the therapist to place another blanket over me to support my needs.

In another session, I was aware of long gaps between my answers to questions and the next question. This was because the therapist was taking time to write up her notes. I felt as if she was not fully attending to my needs and the time delays and the lack of attentiveness of the therapist meant that certain past life memories were not fully explored. Later I understood that there were other persons that wanted to enter the room and thus there was pressure to finish the session quickly.

Interestingly in these above cases, the clients had felt unable to inform the therapists that they needed to attend to their needs more appropriately, talk louder, provide them with another blanket and so on, which very much indicates the strength of the power dynamics at play within the therapeutic dyad of client and therapist. Hence a realm of practice which practitioners can reflectively bring into awareness in terms of the transference dynamics inherent within the therapeutic relationship. Additionally, perhaps it is the actual forging of a positive therapeutic alliance which would allow the client to express their needs and voice their concerns.

Not Appropriately Attending to the Clients Material - In this section of the research report a range of answers were provided which can be constellated

under the theme of 'Not Appropriately Attending to the Clients Material'. This differs from the practical deficits highlighted above and are more related to the therapists' style of relating to their clients and how they worked with the material their clients shared during regression sessions, which may also be termed 'relational deficits'. For example, a number of the study respondents experienced scenarios in which their therapists lacked an appropriate degree of attention to their needs due to the application of fixed approaches, the misinterpretation of what was being conveyed to them from their clients, just not listening, or not appropriately working with the energy or appropriately closing down the session:

I worked with a therapist on an issue where I felt as though he was just not listening to me. I needed to repeat a significant moment yet he still ignored it! It seemed as if he had a fixed approach, and my responses did not fit in with that.

I think the most difficult and/or problematic experience I ever had in a regression session was when, rather than the therapist listening to what I was saying and following the experiences I was verbally conveying to him, he constantly interpreted back to me his own understandings of what was going on and conveyed a complete lack of understanding about what I was sharing with him.

Not every therapist is able to ask the right questions. And some forget the energy work.

While I was a student and we practiced among ourselves there was a student that did a session with me. Because she couldn't close it she opened two more lives and left me during holiday with three opened lives. It was terrible, a lot of pains and fatigue—it was the worst holiday ever.

The deficits in some of the sessions which the study respondents experienced as clients were so difficult that they expressed either being glad when the session was finished, "I gave her the answers she'd like to hear to get out of that session ASAP," empowering themselves by taking control of the session, "I pretty much direct my session the way I needed, so I was able to pick up on what was missing for me and tell the therapist," or even ending the session:

I was then in a position where I had to correct him as due to his lack of understanding and misinterpretation he continually guided me in very strange ways to areas which lacked any energy and importance in terms of my needs, the character or the story. The experience was so exasperating that I sat up and brought myself out of the session.

This realm of empowering discernment was also embraced by one research respondent who stated that “No” she has never experienced any difficulties as a client in a regression therapy context because “I choose good therapists!”.

Self Reflection/Self Awareness - Just as a number of the study respondents in their addressing of Question 2 conveyed a degree of awareness about themselves and how they practice, this was similarly found in the answers to Question 4. Whereby, many of the ‘practitioners as clients’ had reflected upon aspects of themselves, and had brought in an interpretative understanding of this likely contributing to their problematic ‘client’ experiences. For example, two respondents shared the following: “I tend to feel much more than I see, and that can sometimes be a challenge to my therapist colleagues,” and, “To go in and trust the experiences, feelings—imagination and pictures can be the first blockage.”

This realm of self-understanding and reflective awareness is a key aspect in the purposefulness of qualitative research and can bring to mind areas which require development in order to learn and to evolve. So, as we see here, the study respondents bringing awareness to their need to feel more and trust their experiences.

This process of evolutionary learning was also indicated by one respondent who noted that as a client they were very accommodating to their therapist, wanted to be a “good client” and stated that the benefit of this experience was that “These experiences helped me to be attentive that my own clients do not do the same.” This trajectory towards change is also witnessed in the following statement:

My problem as client was that I just didn’t know what the problem is and I couldn’t figure out what the real problem was. Regression therapy didn’t seem to work with that deep “I don’t know what the problem is” feeling. It was behind a veil and I just didn’t recall it. Long term sessions helped a lot and it took few years for me to get rid of this problem.

Concluding Reflections on The Research Material - The intention of the “What Doesn’t Work in Regression Therapy” Research was to determine if there were any prevailing themes in the answers to questions about experiences, as either therapists or clients, which would encourage self-reflection, inform practice and contribute to the body of knowledge of regression therapy. As has been shared above, the data communicated by the participants offered rich and meaningful content and allowed for a purposeful analysis which has indeed allowed for reflection, a heightened awareness of practice and offered a contribution to the knowledge base of the field. While a number of the answers were unique in focus, there was an ability to collate the data into the dominant themes of Resistance, The Integration of Other Therapeutic Approaches, The

Making of Meaning, Not Attending to the Clients Practical Needs, Not Appropriately Attending to the Clients Material and Self Reflection/Self Awareness.

The Research Committee offers thanks to all of the practitioners who participated in this study and offered their time and effort. We are also hopeful that readers of this report will benefit from its content and reflect upon their own therapeutic journeys through regression therapy as both therapists and clients. The prevailing aim being: to embrace and continue the successes in practical and process driven ways within the practice and experiences of regression therapy, while also acknowledging the meaning-making potential of the failure-success pole.

To try and not succeed allows for progress. But how are we to determine whether or not our failures had a deeper meaning, which was at that point outside our realm of awareness, but was inherently purposeful to our clients and/or ourselves as practitioners? Perhaps this realm of unconscious to unconscious transference dynamics within the client therapist relational pairing is an area worthy of further consideration in terms of the purpose and attribution of 'failure' and its multi-layered projections of blame.

Concluding Reflections on The Research Protocol - Undertaking qualitative research involves reflexivity: a reflection upon the process itself, areas under question, or realms which could have been improved. The benefits are often not about knowing the answers but more about being able to formulate the right questions and bringing them into reflective awareness. Regarding this particular research protocol, one major area under consideration is the low number of respondents (only 5% of the EARTH membership). Was this due to most practitioners dominantly experiencing success in their practice of regression therapy? Was it due to language barriers? Was there no energy for this particular topic? Did the open request to participate lack a motivational charge to encourage participation? Was the structure of the research collection method (questionnaires) too impersonal and was the open-endedness of the questions too fluid? Could this qualitative study have been improved by an alternative method of data gathering such as face-to-face semi-structured interviews or focus group participation? The Research Committee will direct attention to these questions as we progress towards future research studies.

Paula Fenn: On behalf of the EARTH Research Committee.

Toward a Research Agenda for Regression Therapy*by Hans TenDam***Abstract**

In this article the author discusses the requirements and issues involved with research in the regression field.

Why would we do research—if at all? I can think of five general aims:

1. To satisfy our curiosity.
2. To improve our practice.
3. To improve our training programs.
4. To convince outsiders this is working, as good or better than many other modalities.
5. To convince outsiders that our clients have real experiences that give real solutions to real problems. This may imply—just by the way—that discarnate spirits do exist, that obsessive entities do exist, that reincarnation does exist, that extraterrestrial civilizations do exist, that superhuman presences do exist.

Aim number 5 is a tall order. More than we can handle. Probably more than we should handle. Number 4 is much more down-to-earth, but will lead irrevocably to number 5. We could research regressions that are limited to the present life. But that is cheating, because we have to weed out all sessions where clients go to those other outlandish areas anyway, even if we try to hold them on the straight and narrow path.

The doubt that many psychotherapists have about regression is exactly that it seems to lead easily and frequently into impossible fantasies that have to be treated of course as projections. Some people resolve this by taking the Jungian way and treat those experiences as archetypes and the collective unconscious, nebulous concepts at best, but with the immeasurable advantage that they don't puncture the dominant scientific world view.

As we know, all that reluctance and avoidance amputates the effectiveness of our work, as we have to avoid asking for somatics, death experiences and the like. Every open suggestion like: "Now you get an impression of the main cause of this problem/event/condition ..." may lead us into forbidden territory.

I don't like to discourage those colleagues who want to carry out research to make our therapy scientifically acceptable, but actually, I do discourage them. Let us remain working under the lee, if not in the shadows.

If we discount both aims 4 and 5, does that mean that we shouldn't try to research the effectiveness of our work? Of course we should. Only, we shouldn't do that to convince outsiders, we should do it to improve our practice. Yes, aim number 2. Aim number 3 will follow from that naturally. And aim number 1 as well.

So I conclude that our efforts should be concentrated on research that helps us to improve the effectiveness and efficiency of regression therapy. I am pretty sure that our efficiency is rather good compared to other therapies, so broaden the effectiveness of our therapy is the prime aim to strive for.

What methods seem to work best with what clients with what problems under which conditions?

As we all know, much of our work depends on intangibles: the state of mind of the client, the state of mind of the therapist, the rapport between them, the intuition of both. Still, it would be useful to know what the first choice of method usually is with a certain client, with a certain problem. At least that will give us a fall-back position when we have an off-day and our wonderful intuition is dulled for whatever reason.

Also, much intuition is condensed experience. There is no reason not to systematize that experience, superficially by surveys among therapists, more deeply by real research.

Real research means noting probably relevant aspects of clients and their problems, and of the methods we applied, and estimating difference before and after. The best we can do is copying already developed tools and procedures in mainstream psychotherapy. And we can analyze the numbers statistically.

I know that many hold that this can't be done, because our samples are too small. That, however, is based on a mistaken view of statistics. Even with very small numbers like 10 subjects, we can do statistical analysis and find statistical significant relationships. The only limitation is that we cannot generalize. We may find out that there was a significant improvement on a certain score, but our sample never will be representative of all clients seeking regression therapy. And that population will probably not be representative for people seeking therapy in general.

But what we can find out are practical indicators that will give pointers to improvement, like (I am making these up):

- Men need on the average more sessions than women on problem A.
- With inferiority problems present-life regression is essential, even if past-life experiences seem part of the problem history.
- If the first session with an alcoholic is not successful, next sessions don't help either.
- People suffering from migraine have to go back to a traumatic death experience including a head injury, if the migraines started after being 25 years of age.
- Exploring and healing soul fragmentation is the essential ingredient in people with identity problems.
- With clients that suspect they are evil inside, always start with personification.
- Etcetera, etcetera.

Topics that are more difficult to research, but possibly more meaningful, are controversies within our field:

- Using hypnotic induction or not. Or when and when not.
- Using initial relaxation or not. Or when and when not.
- Evoking higher influences (higher self, guides, angels) or not. Or when and when not.
- Using touch or not. Or when and when not.

In any research we will undertake we need to standardize our methods and be compatible with other research.

What are the main challenges?

- Identifying the most useful research questions.
- Making a research design that may produce valid and reliable results (especially reliability might be a problem).
- Low motivation and low discipline of therapists for research (the main bottleneck, I guess).

Money is hardly an issue for this type of research, but it will ease motivation for the people leading the research, making the research design, collecting and processing the data, doing the statistical analysis and publishing the results. It also will grease the wheels of co-operation when participating therapists receive some remuneration for their efforts.

It will not convince complete outsiders, but therapists and psychologists with some interest in our field will notice that we try to remain down-to-earth and are as professional as we can be. It will increase somewhat the number of

friends and well-wishers we have and decrease somewhat the number of enemies and ill-wishers we have.

The first priority is to identify research questions that practitioners most want to be answered.

The second priority is to identify relevant research designs including variables usually collected and instruments widely used.

A third priority is to collect whatever empirical data have been collected so far.

I would like to receive names and mail-addresses of colleagues who might be willing to collaborate. Those with a background in psychological research are especially welcome.

Future of Regression Therapy - Some Personal Views

by Andy Tomlinson

Abstract

Andy has been a Regression Therapist for over twenty years and is an international trainer for the Past Life Regression Academy and author of three books on regression therapy. He shares his thoughts and experiences about changes in regression therapy and the opportunities that are becoming available in the future including working with the new vibrational energies coming into the planet.

Introduction

I remember when I was doing my four-year psychotherapy training in the 90s being told there was no need to go to the source of a client's problem to resolve it, and a past life was dismissed as simply a metaphor. I was told hypnotherapy and neuro-linguistic programming (NLP) were the future of healing and any mention of a spiritual aspect in therapy was met by blank looks. I was introduced to regression therapy by the pioneer Roger Woolger who taught the opposite of what I had been told before—that there was no need for hypnosis, achieving a catharsis was the holy grail of our work—body movement with clients acting out old scenes from the past was the norm, and I was introduced to a spiritual dimension in what Roger called the *Bardo* and working with spirit guides giving spiritual guidance. For me it felt right. I knew this was the therapy I wanted to make my life focus.

Current Status

I was delighted to be a founding member of the *Earth Association of Regression Therapy (EARTh)* and, inspired by Hans Ten Dam, worked with colleagues to define the standards of regression therapy and the recognized school program (which today is the international standard for regression therapy). One of its strengths is that it defines the therapeutic areas where skills are needed, and allows freedom in the techniques used. For example, if the therapy is to go to the source of an emotional problem, the therapist can use a verbal bridge, emotional bridge, somatic bridge, an affect bridge with hypnosis or simply ask the client what was happening in their life when they first experienced the problem. It also leaves it open for others to bring in new techniques in the future.

Achieving a single standard for a therapy is in itself a significant achievement for our profession. In contrast, the UK has seen different hypnotherapy groups struggling to reach a unified standard for several years. But is having a common approach enough? On one hand, some see regression therapy as a

therapeutic intervention that dramatically eliminates a client symptom, often in just a few sessions. For others, it can be seen as spiritual growth for the client.

It reminds me of a trip I took to the Amazon rainforest a few years ago. Whilst doing a ceremony with a shaman, through an interpreter he said to me, “You heal people’s souls.” So did this simple intuitive native have a powerful message for everyone who uses regression therapy, that as well as transforming symptoms there is a deeper significance of the work? This is something everyone offering regression therapy needs to decide for themselves. Personally, I don’t think a therapist heals a soul, it is the client who heals it themselves. And when the soul lesson is learnt through guidance from the therapist the symptoms disappear and the issue is completely resolved. One of the ways of assessing the widespread acceptance of a therapy is to include it in the online encyclopaedia *Wikipedia*. Athanasios Komianos (the most recent president of EARTH) and others attempted to create a Wiki entry some time ago without success, so with trepidation Peter Mack and I set about trying a different approach. We used the chapters Mack (2011, 2012, 2014) wrote about regression therapy as a basis and ensured that contentious wording in the submission to *Wikipedia* were changed. So, for example, ‘past life regression’ became ‘past life stories’ and ‘spirit guide’ became ‘transpersonal experiences’. With 57 references to support the article, we both felt excited that it would be accepted but this was not to be due to a lack of secondary sources (books or articles outside the immediate discipline, often peer reviewed, that refer to the subject). So I asked the universe to help. Well, we all know what happens when you manifest something important, as within a few months I was asked to write a chapter on past-life regression and regression therapy for the third edition of *Clinical Hypnosis Textbook* by Professor Ursula James (2015). This is used as a reference book to train medical doctors in ten UK medical schools, and is now required reading for the MSc (Masters in Science) in clinical hypnosis at Robert Gordon University, Aberdeen, Scotland. So we have another secondary source, and I’m sure more will follow in good time from others’ efforts.

One of the delights of the spiritual nature of regression therapy is the understanding that through the interconnectedness of everyone, healing can reach out further than just the client we are working with. I first came across this when working with a student in Norway. She had had a big emotional break up with her mother, left home and had not spoken to her mother for several years. As part of the therapy transformation she had a Gestalt-like dialogue with the soul of her mother and found forgiveness. Within 24 hours her mother, unprompted, had phoned her saying she felt different about her—and after an emotional chat they agreed to spend the weekend together. Another student had lost her father from a possible suicide four years previously. Because of the nature of the death, the police had kept the case

· Peter Mack, MD, is a surgeon and regression therapist.

open and her sisters and mother still carried the emotional wound from the unresolved death. In therapy, the Gestalt dialogue with the father revealed what had happened, and further dialogue with the police and family members brought closure. Within a week the police had phoned saying they felt the case could now be closed and all her family members had contacted her saying they felt differently towards their father's suicide.

Using a *proxy* opens the door to working with clients that would otherwise be unsuitable for any sort of therapy—provided permission comes from the higher mind or spirit guide. When conscious mind permission is not possible, and the intent is made for the proxy person to take the place of the client, the process (remote regression) works. One of the early uses of this involved a student in one of my workshops whose child had selective mutism (she would not speak to any adult other than the mother and father). Working through the mother as proxy, a past life of the child was transformed. This was a man who had his tongue ripped out and then lived in solitude. After the therapy the young child just could not stop talking at school to everyone. This sort of work opens the door to working with a wide range of problems from the elderly dying with dementia, to clients with mental health problems and other contra indicators to normal therapy.

Integration with Modern Medicine

At this point I'm reminded of a story a fellow regression therapist told me. She wanted to spend some time in a spiritual retreat centre in Italy and did not have much money for the stay, so she asked if she could give past-life regression therapy to people in the centre in exchange for food and accommodation. She was taken to the spiritual guru of the centre to seek his approval. The guru was not familiar with this work, and went into a short meditation. Upon awakening he said, "past-life regression...that's the psychiatry of the future."

It's worth recapping the difference between the medical and the regression therapy models. Based on classical science and the influence of Rene Descartes, the 17th century French philosopher and scientist, the conventional medical model sees illness as a random event, and the cause of disease and its cure as coming from *outside* the human body. A physical problem is treated with a physical cure—a pharmaceutical medicine or surgery. In contrast, regression therapy sees illness and healing as coming from *within* the individual. It is based on the principle that the patient's body reflects the deeper struggles of their entire life. Hence, illness is deemed not to occur randomly, but when emotional, psychological or spiritual stresses have overwhelmed or weakened the body defences. The therapeutic objective is to assist the person to regain a healthy balance. So can regression therapy ever be seen as a complementary therapy in the medical model?

Inspired by an idea from a regression therapy trainer, Reena Kumarasingham, 14 medical doctors and 5 psychologists trained in regression therapy gathered for a two-day workshop in April 2013 in Porto, Portugal. It was decided at the meeting to create an association called the Society for Medical Advance and Research with Regression Therapy (SMARRT) (2013). Its mission: to bring about the integration of regression therapy and modern medicine, and to accomplish this through the development of medical research using regression therapy and promoting the research to the medical fraternity and the general public. In 2015 SMARRT published its first book, *Inner Healing Journey – A Medical Perspective*, about medical and emotional problems resolved with regression therapy. The book is available in English and Portuguese. SMARRT's research activities can be seen on the SMARRT website (<http://www.smar-rt.com>).

But does any of this matter to a non-medical regression therapist? In my view it does because medical doctors are seen by the general public as the custodians of health, and in many countries they direct patients to specialists for treatment. Also, any country or insurance funding for therapy normally requires some level of research establishing the effectiveness of an approach for a particular problem. Of course it takes great courage to bring non-physical treatments into the medical world. In some ways the medical authorities act like the medieval inquisitors of the past. Instead of burning non-conformers at the stake, they use psychological threats of medical practice licences being revoked or medical health practitioners being fired from jobs. But we have seen great change in the medical world over the last few years. Transcendental meditation has been accepted for reducing stress and anxiety (MacLean, et al, 1997) and therapeutic touch (spiritual healing) to reduce stress and lowering blood pressure (Wilkinson, Knox, Chatman, et al, 2002). And, of course, hypnotherapy was accepted in the 1950's in the UK and USA medical associations based on extensive evidenced research. Hypnosis is now taught in a third of accredited medical schools (Barabasz, et al, 2010).

Use on Energy in Regression Therapy

Of course everything is energy, as the world of physics reminds us, so regression therapy can be seen as energy healing. But it is mainly through the use of energy directed from our voice to our ears, or physical touch if body therapy is used. Some regression therapists may ask for energy healing from spirit guides or from the client's higher mind, or even channel energy with techniques called Reiki or spiritual healing. Another use of energy is working with crystals. A close personal friend and regression therapist, Christine McBride, wrote a chapter of how regression therapists can use crystals in one of my books (Tomlinson, 2011). This covers raising the therapy room and therapist vibrations before therapy, using crystals to assist in clearing and smoothing energies, and clearing the room energetically after a session.

But I'm interested in talking about how this can be taken further. Over the years I've noticed more and more clients needing spirit attachments released before or during therapy. Also spirit attachments have become more difficult to clear. What seems to be happening is that the increasing vibration of the Earth is amplifying the dense energy of unresolved issues in the spirit attachments. Other forms of dense energy are being agitated—left over energies from war, torture, various earth energies, and residual energy from previous civilizations' energy experiments. I refer to all this as *dark energy*—simply a collective name for spirit attachments that are difficult to remove, including a range of intrusive energies or fragments that have a very strong energy source.

In the *Journal of Regression Therapy* (2012, pp 12-17) and the book *Transforming the Eternal Soul* (Tomlinson, 2011). I discussed new energy techniques to remove dark energy. The process of removal is actually quite simple. First, an *energy portal* needs to be created from the client to Source through intent. Second, an *energetic link* needs to be established from Source to the therapist's crown chakra and out the therapist's heart chakra to the client. This allows the higher energy vibrations of Source to be transformed through the therapist and adjusted to a level needed to flush out the dark energy from the client to Source via the portal. The flushing energy level can be adjusted intuitively by the therapist or with spiritual help. After healing energy is given to the client, the therapist needs to check they are clear of dark energy fragments themselves. Normally, if they follow the recommended protocol. This will not happen, but if any is detected it needs to be removed from the therapist immediately. This technique also clears spirit attachments and all their energy in a few minutes as an alternative to talking to them.

I've now used this technique with hundreds of clients since 2011, and have been teaching it to regression therapy graduates in the Academy since 2013. Feedback from clients and various independent checks have confirmed it works consistently. Indeed, it has been so successful that I've personally used it clearing dark energy from areas of land, in particular ancient religious sites and energy portals, during trips to Peru, Singapore, India, Greece, South Pacific, Hawaii, Mexico, Russia and New Zealand. The only constraint to using high vibrational energy is that permission from Source is needed to connect with this energy. Normally, a therapist needs to have cleared their personal issues first. In 2014, this work was extended to clear energy from other parts of the cosmos with a variation to the techniques discussed above. With the 'thinning of the veil' all sorts of energies seem to be entering our planetary system, so this work is becoming more important.

I've found energy management needs to be included in all Academy training workshops. This involves creating a safe energy space for the training, clearing any of the energies previously discussed that may have come in with students, and teaching students basic energy management. I remember a student who came to one of my workshops complaining of headaches, and was energetically

affecting the other students but did not know what was happening. Following a short talk with the student, it appeared she liked to astral travel at night and allowed herself to remain energetically open all of the time. It's not surprising she was riddled with what I call *inter-dimensional energy* from another part of the cosmos. After clearing the energy and teaching the student how to open and close her personal energy field, the problem was resolved and she was able to fully integrate with fellow students.

Further techniques of working with high vibrational energy became available in 2014 through my work with regression therapist Reena Kumarasingham. These techniques include how to use different types of high vibrational energy, including resolving emotional problems, and healing disease in organs. It differs from the work of other energy healing in that it uses high vibrational energy, so it is more potent at raising the energy vibration of the client's disease part and speeds up the client's own healing. Also, rather than acting as a passive channel for the energy, the therapist consciously and intuitively directs the energy. My initial finding is that these techniques are very quick and can also be used as an alternative to catharsis and body therapy to clear a client's blocked energy. They can also be used on clients who would otherwise be a contra indicator for regression therapy. While the techniques are still being fully evaluated, they are being passed on to a selected group of therapists to ensure the results are transferable and to speed up the evaluation.

Summary

Regression therapy has come a long way from the days when I was trained. The medical world may be slow embracing it and may seem to be acting like King Canute of England who tried to command a rising tide to go back. For some, the future is to embrace the spiritual nature of our work and include more proxy work. For me it is embracing the use of high vibration energy in regression therapy to make our work even quicker, to be taken to a wider client base, and be more effective with the therapy process.

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Pre- and Perinatal Regression*by Albert J. Marotta MA, CHT***Abstract**

Hypnotic transpersonal regression is a valid expansion of successful therapeutic procedures in a multi dimensional reality. This article suggests that any trauma experienced in pre- and perinatal periods (Physical, mental, emotional, and spiritual) can have life-long negative effects as reflected in research, case studies and personal experiences.

For in the past, nothing is irretrievably lost,
but everything is irrevocably stored.

Victor Frankl

The goal of this article is to introduce just one of several different levels or dimensions found in hypnotic regression work and perhaps provoke some new thought.

Throughout history, in any field, the desire of a few to manipulate and control others is legendary. They have effectively employed guilt, shame, fear, intimidation, religion and budget manipulation for suppressing any new perspectives, thoughts or concepts while ignoring or denying new information in order to maintain the status quo. It took the medical profession 50 years to accept the concept of germs. Washing of hands was not a standard medical practice in the early 19th century. Doctors were considered gentleman, and a gentleman's hands were always clean. (Mitford, 1992, p.35)

Traditional thinking and training has become increasingly limited in relation to a non-physical or a spiritual sense. Any growth or progress is both scientifically limited or outwardly rejected. Fact: we are multi-dimensional beings in a multi-dimensional reality. In a March 2002 radio program, theoretical physicist Michio Kaku stated, "Theoretical physicists at Princeton are presently working in the 11th dimension to prove the 10th dimension exists." It is the quantum sciences that are moving us away from the old outdated ways and into the dynamics of expanded thinking, discovery and advancement in multi-dimensional realities.

Amid much controversy, pre- and perinatal psychology was officially introduced in the early 1970's as a legitimate scientific therapy in Oslo, Norway. "Pre- and Perinatal memories are transpersonal, transcending all expected

boundaries of consciousness during intra-uterine time and birth...” (Chamberlain, 1999, p.86).

The unborn are feeling, recording and aware beings from conception. Everything experienced in-utero through both the mother and her environment, molds and shapes the personality. Fears, frustrations, ambition, limitations, future relationships and even career choices are frequently in place at or before birth. Fetal recall is memory or energy stored at the cellular DNA level. The body contains all memories and traumas of everything ever experienced in this phase of development. Traumatic uterine and birth experiences remain imprinted as adopted survival patterns that resist change. If at any time in-utero, one’s life was literally in jeopardy, those survival patterns were adapted and locked in as the only way to respond to life’s situation. Physical, mental, emotional, and spiritual transformation happen when negative repressed energies and memories are transformed and released. The fact we may not recall an experience doesn’t mean it never happened or was never recorded in the subconscious mind. Inability to form relationships, fear of sexual intimacy, sexual deviation, autism, depression, suicide, drug, food and alcohol abuse plus numerous other related life problems have been found directly related to pre- and perinatal experiences (*Journey to be Born*, video).

Intra- and interpersonal relationships, physical and mental health even spiritual evolution are all effected by our own pre- and perinatal experiences. Pre- and perinatal therapy is very powerful in the grand scheme of assembling the therapeutic puzzle of reality. Remember a puzzle has many interrelated interlocking pieces.

In 1971, amid great skepticism, the International Society for the Study of Prenatal Psychology was established to promote the study and understanding of the unborn...and effects of the womb experience (Gabriel, 1992, p.38). This therapy stands today on over half a century of established research and documented results. It is an established scientific fact, the unborn are feeling, aware beings from conception.

Many subjects in regression report vivid ... experiences
on the cellular level of consciousness
that seem to reflect their existence
in the form of sperm and ovum at the time of conception

Stanislav Grof

During the gestation period, the mother’s emotions are influential in the developing prenatal subconscious, influencing core personality traits and survival coping patterns. Definite fears, attitudes, self-imposed limitations, inter- and intrapersonal communication styles, are often in place at or before birth. Emotion is the key to opening the subconscious mind, that brings

everything into the conscious mind. Both the healing and destructive powers of the mind are startling (Modi, 2014, p.42).

The dynamics of internal and external stress and stressors experienced during pregnancy are historically well documented. 'Stored' negative energies or imprints at the cellular, DNA and spiritual levels, have far reaching ramifications. All trauma: physical, mental, emotional, spiritual, and/or psychic, is stored in specific physical areas of the human body. The determining factor of how or why is still a mystery to me.

In regression therapy, negative imprinting can be altered, by transforming or removing those original negative emotional traumas. Subconscious memories rooted in the three-dimensional materialistic world of the five senses are changed, e.g. traumatic uterine life and birth experiences are imprinted as survival patterns and initially resistant to conscious change. While lacking the powers of speech in the womb, the fetus is emphatically absorbing the mother's emotions, and the emotions of others that have influence on the mother. The pre-nate has no barriers to emotional energies. All emotions are generally accepted as their own. Infant interconnectedness with the mother often reflect her negative feelings of guilt, blame, anger, shame, resentment, and failure, as well as any positive emotions. So, any unconscious, undealt with material on the part of the mother has the potential to get into the psyche of the child (Gay Hendricks, *Journey to be Born*, video).

All truth passes through three stages. First it is ridiculed
second it is violently opposed.

Third it is accepted as being self evident.

Arthur Schopenhauer

Jane, a psychiatric nurse, after experiencing her own prenatal regression, reported experiencing her mothers' despair and exhaustion during fetal development. Jane also recalled accepting the guilt for her in-uterine presence.

At the conclusion of the session, Jane stated, "It's all very real. You think at first, 'Oh I just made that up.' You'd like to say it's just play acting but the actuality of it is so terribly real and frightening... You'd like to pretend it's not a part of you. You'd like to use that kind of denial and you just can't" (*Star Foundation*, 1986).

There is no separation between the mind and the body. Many regressions reveal the original problem is usually based in the mother's poor self-image and/or the parents disharmonious dynamic. "It hurts in my solar plexus. My father doesn't receive my mother's love, so he pulls away and blames himself. It doesn't make sense. He hurts emotionally but she sees him as weak... in her anger, she uses me against him" (Gabriel, 1992, p.65).

Many problems have been directly related to pre- and perinatal experiences including, the inability to form relationships, fear of sexual intimacy, sexual perversion, autism, phobias, eating disorders, depression, suicide, substance abuse, chronic physical pain, compulsive behavior, physical abuse, learning difficulties, suicide, and many other problems. Unless these patterns of thoughts are broken or replaced, “We are all prisoners of our history, controlled by a forgotten past” (Gabriel, 1992, p. 11). Every emotion has a physical response.

My mother is feeding me fear, and I am trapped by it...
I have no way to escape. I am stuck in her body and her fear.

Michael Gabriel

My Introduction to Pre- and Perinatal Regression

I attended a Past-Life Conference in 1984 or '85. Ed, a middle-aged psychologist, encouraged a group of us to share a very “dynamic video” he had brought with him. Thinking it might be good for a laugh, I reluctantly attended.

Ed’s client, a young man in his early 20’s, presented as desirous of understanding why he felt rejected by his aloof father. Ed had worked with him for several sessions having no real success. This session, Ed felt, would be his last attempt at resolving the issue.

“Midway through the session,” Ed stated, “I felt like I’d hit a brick wall and just sort of sat there. I had exhausted all known approaches to his problem. Suddenly, I heard myself say, ‘Go back to your conception and look into your father’s face.’ I don’t know where that suggestion came from, but no one could have been more shocked than I to have heard it come out of my mouth!!”

Watching the video, I noticed the young man physically respond to Ed’s suggestion with a slight movement. In an amazed voice the client blurted out, “Oh my God! My father is my uncle! Now I understand why we are so close. Dad knew this all along!”

There it was on tape... unbelievable? Impossible? Why couldn’t it be possible? Suddenly my mind opened up to the possibility. Old beliefs quickly faded. The video left a profound impression. I could not dismiss what I had just seen and heard. The lesson for me was powerful!—don’t believe everything you think.

The fact a person doesn’t recall an experience,
doesn’t mean it didn’t happen or wasn’t recorded.

Thomas Verney

Case Studies

In 1588, a French invention called Iron Hands was introduced into the medical field. Today they are referred to as forceps. One third of all American births

(1980's) were completed with the use of forceps. While many doctors may consider forceps a great aid, a greater percentage of forceps deliveries might disagree.

The following eight case studies are a small sample of pre- and perinatal regressions I've conducted since 1986.

Case study 1: A few weeks after my initial introduction to Ed's pre- and perinatal regression, Mary, a woman in her mid-fifties presented as never having passed a written examination in her entire life. Mary explained that when handed an exam, she would immediately experience a 'blinding headache' recalling nothing until after the exam was handed in.

When asked to describe her headache, Mary reported, "My head feels like it's in a vice." It was discovered that she had been a high forceps delivery. She experienced her left eye and the area behind her right ear as being crushed during the delivery process. Somehow any written exam would subconsciously trigger that painful, traumatic birth memory. Intellectually Mary would black out with no recall during the exam.

The most perplexing aspect in this regression, was Mary's repeated references to, "The X's are coming to get me." She described the "bright X's and the brown X's and the painful grabbing onto my face and head."

I finally realized she was referring to the forceps. The clean bright ones and the blood colored ones. After this revelation, the session flowed quickly to an effective conclusion.

The stored birth trauma in Mary's head and face from the delivery was released. I received word that she passed her very first exam ever. This case was so memorable because Mary's exam was the final in the last course required to complete her Bachelor's degree.

Even before the brain is able to interpret experiences. Our body records and holds on to all emotional responses experiences, real or imagined. Many hypnotized clients describe living through physical and emotional changes experienced while transitioning from a fertilized egg to a fully formed pre-nate ready for birth.

Fetal recall (imprint) is a body memory.
The body remembers in its own way and that
stored knowledge is no less valid than intellectual recall.
Arthur Janov

Case study 2: Donna, a forty-year old woman, presented with panic attacks every time she attempted to climb her attic stairs. “It feels like the walls are closing in. I panic and cannot breathe by the time I reach the third step.”

In regression it was discovered, Donna had been a forceps delivery. During the birthing process, her nose was smashed into her face. She experienced a heavy pressure on her sinuses and on the back of her skull. She reported the attic walls were, “The exact same color green as in the delivery room.”

Subconsciously the color of the attic walls reactivated the traumatic birth memory of suffocation, pain and panic.

Immediately after the session, she excitedly ran several times to the top of the attic steps and back down with ease, laughing the whole time. No further problem was ever experienced.

Case study 3: Charles, in his late twenties, presented as seeking a long-term relationship. The longest he had ever experienced was only two weeks. A third date was a rarity. In regression this is the story that emerged:

Charles’ mother, while in college, was studying to become a concert pianist. She had a one night stand with a ‘blue collar’ pickup. She realized almost immediately, she was pregnant and had to marry the man, sacrificing her life dream. Full of resentment and anger, she focused it all on both her husband and the developing little one.

When Charles was asked where in his physical body he stored all his mother’s negative hostility, anger, rage, and resentment directed at him, he responded, “In my right leg and right hip.” This was the constant theme from conception, throughout his entire intrauterine life and beyond. Charles reported deliberately delaying his birth for over three weeks knowing what he was coming into. His deliberate birth delay only intensified the mother’s anger and resentment towards him.

Charles’ childhood was a continuation of emotional, physical and mental abuse. As a child, he continued storing his mother’s negative emotions and angry outbursts in his right leg and hip. At age 12, he was diagnosed with polio located in his right leg and hip.

At the session’s conclusion, Charles gained insight into his relationship situation. If you are not accepted by your own mother, how can you really trust any woman?

Charles lived on the East coast. I never heard from him again for any follow up.

In retrospect, I would further inquire into the planning stages, asking (1) What was your purpose for choosing this specific family dynamic? (2) Were there any Karmic ramifications or past life carryover in relation to your mother? General information can easily be obtained from the “in-between” life stage and/or the Akashic records.

Case study 4: A recent pre- and perinatal regression started out simply enough:

“Could we find out what my attraction to sugar is?” When asked where that attraction was centered, April responded, “Perhaps in my circulatory system...centered in my intestines.” When asked if there were any words or phrases attached to those feelings, April responded, “Healing from birth... when we eat sugar, we feel better.” To clarify, I asked if these were pre- and perinatal issues.

April responded, “Yes. The walls of my mother’s womb are squeezing in, forcing everything out of my colon and stomach...when I eat sugar, it makes them (intestines and stomach) relax from that tightness.”

Checking the mother’s attitude towards pregnancy, April responded, “OH GOD!! She’s upset and blaming my father. I’m two or three months in-utero. It’s like that sourness... her sourness came through that tube connecting us. My belly button... that sourness (bitterness) is from her.”

April reported all of her mother’s sourness, unhappiness, and blame were focused towards both her and her father. All of these negative emotions and feelings were stored in April’s abdominal area.

The fourth and fifth months were reported as even worse.

Her mother’s attitude in months seven to nine were reported as “I don’t want to have this baby. This baby is going to be bad for me. I wish it never existed.”

April emotionally responded,

I’m not an it!!... It (feels) like a line that just went up from the pelvic area, where all my intestines are stored... all the way up through my head and into my throat, back into the back of the neck. It’s like I’m holding on for dear life through my neck and occipital region. My shoulders and intestines... I can’t breathe. Right now, that whole pelvic area is like acid being poured down there.

As the fears and emotions from in-utero were compounded by similar experiences over time, the responses became a physical habit, in April’s case, her attraction to sugar. Once those feeling are understood and the emotions

released, recall of the memories become neutral leaving no emotional impact or negative carryover. This is accomplished with simple inner child reprogramming and reintegration procedures.

It isn't just what happens to the body,
it's what the mind does with the experience.

Barbara Reid Findeisen

Case study 5: While conducting a transpersonal training class, Jane volunteered for a demonstration. When asked what I could do to make the quality of her life better, she stated, "I think I was born angry, I can never remember a time when I wasn't angry. Help put an end to my anger." This was her presenting issue.

In her interview, Jane went on to mention, that her entire family lineage as far back as she could remember, were all angry, resentful, abusive, and hate filled. She felt it was time for a change. She had had enough of it. Interestingly, Jane was currently working professionally with the homeless—street people, alcoholics, and addicts.

In regression, seeking the origins of that intense anger and hatred, she spontaneously found herself in the planning stages of this current life. Jane discovered that she had already preselected her parents, her ethnicity, and other aspects of her chosen life. She was now ready to claim that life.

Suddenly it was like they [unclear who they were] grabbed me by the neck and told me 'No, you need to be here' and they threw me into this family. I was so angry!... Wow, I really was born angry!

In working through and transforming those negative energies at and before birth, it was suggested to Jane, she ask the guides why there was a last-minute override of her choice (free will)? What was her purpose in this current lifetime? Why was she directed into such an angry family?

The answer received was surprising. Apparently she had been 'selected' to assist in transforming this family's current negative attitude, putting an end to a long standing, self-perpetuating anger and resentment. Interestingly, almost immediately, her whole physical and mental composure shifted. She became calmer, less tense and accepting of her role.

Until this client, my understanding was that individuals chose their own family. This was done of their own free will. Apparently, there are exceptions made for the highest good that overrides personal choice. Over the years, I have only experienced two similar situations where an individual's free choice was overridden. I heard back from Jane several years later and experienced a much softer individual.

The two most important days in a man's life
are the day when he was born,
and the day he knows why.
Mark Twain

Insights into the Abortion Issue

A person has a right to start in the present to acquire some maturity,
so that the future may be better than the past.
Dr. John A. Schindler

Abortions are an emotional minefield. In dealing with abortions over the years, there are four absolutes I have found (to date), that stand out. I present no official stand, but am merely reporting the findings and results of my work as reported to me by my clients.

1. The mother and the little one are frequently affected both physically and emotionally; experiences are all recorded at the subconscious level.
2. The spirits of the aborted are frequently present and angry. They want an explanation for being rejected, or not being permitted to live.
3. The spirit of the aborted often attaches to a specific part of the mother's body that was key in their own physical death during the procedure.
4. The spirit, or soul is a continuous and eternal. It cannot be destroyed, and can be communicated with at any time.

Case study 6: While conducting a public demonstration, I experienced an unexpected case of prenatal recall, which proved both interesting and fascinating. Carol was a young dental assistant in her early twenties. The presenting issue was, "I'm afraid and frightened all the time. I would also like to know why I can't seem to form a relationship with my father."

In order to regress her back to the origin of that fear, a great reluctance was encountered. Shifting tactics, it was suggested she regress to the happiest time she ever experienced. With a great sense of euphoria, Carol responded, "I was just conceived a few moments ago." I was shocked. The element of surprise, curiosity, and doubt caught me by surprise. I asked, "What are your parents doing right now?" she responded, "Oh, they're still making love." I quickly suggested that she move forward to just before the incident we needed to view in order to understand the origin of her presenting issue. She quickly moved to the end of her first uterine trimester.

There was a physical shutter as Carol reported her parents were arguing. "How," I asked, but before I could rephrase the question, she answered, "In German!" When asked if she understood what was being said, she responded,

“Yes. My father wants my mother to get an abortion and mother adamantly refuses!” I asked what she was experiencing at that exact moment, Carol replied, “Very frightened and all alone.” I asked if this feeling was similar to her presenting issue. She responded, “No, it’s exactly the same. Now I realize why I’m so close to my mother and why dad is indifferent.”

With some inner child work, i.e., reframing and reintegration, the problem was quickly resolved. Experiencing the abortion argument, was the underlying subconscious event and the core of her issue. A one-month follow up validated a complete life transformation free of fear. Interestingly, Carol declared, she really didn’t believe any of her experiences, yet was at a loss for her sudden life transformation, no fear. Total session time, including interview to completion, was less than 45 minutes.

Case study 7: Jan presented with severe headaches that prevented her from studying and completing required class work. She described the headache, “As if my head is being crushed in from the sides. The doctors are not able to help me get any relief.”

Regressing to the origin of that first headache, found Jan having an abortion in her early teens.

The spirit of the aborted was discovered. It admitted to attaching itself to the mother’s head and was intentionally causing the headaches, “In order to get my mother’s attention.” When asked for what reason, it was stated a full explanation as to, “Why it was abandoned and not permitted to live.”

Realizing what was happening, Jan was directed to immediately give a full explanation to the little one, as to why it had been aborted. After listening, the little one’s response was a nonchalant, “Oh, I see.” It was then quickly ready to transition into the light, harboring no ill will, anger or resentment.

Realizing for the first time there was life and conscious intelligence in the developing little one, Jan became very depressed, sad and guilty over her actions.

I had the little one explain to the mother there was no resentment or ill will on its part, and it harbored no judgment. All was fine and Jan should forgive herself because her actions were based in ignorance as opposed to malicious intent.

With the aid of the little one, Jan released all negative feelings and emotions from her actions. She described a great sense of peace, release and relief. They hugged each other good bye. It was pointed out that the little one was never more than a thought away, which the spirit (or consciousness) confirmed as it transitioned into the light.

Jan reemerged from the session feeling clear and light, with a great sense of relief, guilt free and at peace.

Six weeks later Jan returned commenting on her greatly improved study ability, class achievement, and free from her headaches. However, she now complained of severe backache in the small of her spine.

Following the same basic regression format. It was discovered that she had had a second abortion, in her early 20's. This spirit was attached to Jan's spine, also seeking an explanation as to why.

Techniques Used: working through the process of explanation, understanding, spirit releasement, releasing negative emotions of anger, abandonment, and dialoguing. I suspected the headaches and the lower back pain experienced by the mother had something to do with the procedures and techniques used in the abortion procedure by the medical doctors. All was satisfactorily completed with the second little ones transitioning; the mother released all negative feelings of emotional guilt, shame and mental anxiety.

Consciousness predates time.

P.M.H. Atwater

Case study 8: I received a phone call from Pat, a young woman in her late 20's. She had attended a lecture I gave on hypnosis and regression therapy. She mentioned her life was a depressed mess and falling apart. Pat was ordered to see the company psychologist or lose her job. Recalling my presentation, Pat mentioned she preferred to work with me because, "You made so much sense." We did one extended session of three hours with excellent results.

Story: I regressed her to just before the incident we needed to look at that set her problems in motion. It all started with her first abortion. Pat had been promiscuous in her younger years. She had six abortions by the age of 21. We worked through the six individual attached spirits, plus, a seventh aborted spirit that had attached to Pat one day while walking past an abortion clinic.

Once the session was completed she sat up and reported feeling wonderful, relieved, physically lighter, and having a sense of being in control of her life.

I saw Pat about five years later. I almost failed to recognize her. She appeared younger, happy and there was an inner tranquil glow about her. She reported after our session she did see the company psychologist, which she found more amusing than helpful. She later quit her job and went on to more satisfying employment. She now had a fiancé and was truly happy for the first time in her young life.

Techniques: Regression, grief resolution, spirit releasement, and remote therapy.

Note: Interestingly with the seventh little one who sought the same explanation of, "Why wasn't I permitted to live? Why was I rejected?" Pat became the medium for successful resolution between the mother and little one.

Abortion: A Third Perspective

It is obvious abortions can and do have major emotional effects on both the mother and the aborted entity as well. Guilt and shame for most of the mothers is already there; and feelings of anger, rage and abandonment for the little one.

Pre-abortion counseling with a spiritual foundation and understanding eliminates much potential emotional and mental pain. I consider direct fetal communication as an overlooked third perspective to a difficult issue.

Note: It has often been reported that spirits of the little ones may frequently stick around after the fact to help placate a mothers guilt, shame grief, and depression.

In the 1980's, Gladys McGarey, M.D. in a taped lecture stated spontaneous miscarriages can be induced through a simple spiritual process. She designed a six-step process for her patients.

1. Meditate and pray on the situation
2. List all the pros and cons of pregnancy
3. Have a direct dialogue with the little one
4. Explain fully to the little one the situation, all pros and cons
5. Use dream state and prayer for receiving messages
6. Arrive at the final decision

In lecture, Dr. McGarey mentioned that some patients had a change of mind. Dr. McGarey reported approximately an 85% spontaneous miscarriage rate. If the mother still insisted, then Dr. McGarey used medical intervention. Interestingly the women reported feeling free of any guilt, grief or shame using this process. It is interesting to note that a fetal dialogue can be conducted at any time because the spirit or soul is a continuing, eternal consciousness that is indestructible.

When working with prenatal consciousness,
psychology and spirituality become impossible to separate.
Steven Raymod R.N.

For What It's Worth

Inter- and intrapersonal relationships, physical health, and spiritual evolution are all affected by our pre- and perinatal experiences. Regression therapy is one area that helps put it together so that we may understand, focus and transform negative experiences and memories to gain greater insight and control in our own life.

Because all science expands one type of knowledge,
it need not denigrate another. All great scientists have understood this.
Margaret Mead

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Psychotherapeutic Services for Persons who Claim UFO Experiences*

by R. Leo Sprinkle

Introduction

Psychotherapeutic services can be helpful to persons who are experiencing post traumatic stress disorder. Physiological and psychological stress reactions can occur from the effects of abandonment, abuse (corporal, emotional, and/or sexual), loss of relationship, rape, robbery, etc. If abused persons are given competent and compassionate assistance, then often they can learn to cope with their feelings of anger, anxiety, doubt, grief, guilt, pain, shame, etc.

However, in our contemporary society, those persons who describe paranormal/psychic/spiritual crises, or emotional trauma from memories of possible past lives, often are faced with scoffing or skeptical reactions—not only from their friends and relatives, but sometimes from professional persons, including psychotherapists.

And, if a person describes a UFO experience (including abduction by alien beings, out of body experience, near death experience, bodily marks from a medical examination, genital examination, past life memories, planetary visions, automatic writing or telepathic communication, and a message or mission for Humankind, etc.), then the psychological resistance of the psychotherapist, as well as the emotional trauma of the person, can be an important factor—not only in the processes of psychotherapy, but in the questions of whether services are provided to that person!

The complex and controversial claims of UFO abductees/contactees are a background for the general question: based on the processes of psychotherapy, what do we know about UFO experiences?

This paper offers a personal view about psychotherapeutic services for UFO Experiencers, a brief review of UFO literature, and a biased viewpoint of the social significance of UFO activity. The major hypothesis, or speculation, is that UFO activity is an educational program: A gradual, but persistent, conditioning of human awareness for a new age of science and spirituality (advanced technology and advanced morality).

An excellent “Introduction to issues of UFO research” can be obtained from William L. Moore Publications (4219 West Olive Ave., Suite 247, Burbank CA 91505); the booklet is written by the Los Angeles UFO Research Group (LAUFORG, 1966) and it provides a brief but comprehensive review of the available evidence and scientific implications of UFO reports. Also, further

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information can be obtained from various UFO organizations, including APRO (1987), CUFOS (1987), FSR (1987), and MUFON (1987) (see references).

Experiences of the writer

I am trained as a counseling psychologist: BA (1952), MPS (1956), University of Colorado—Boulder; PhD (1961), University of Missouri-Columbia (APA approved program). I now serve as Psychologist II and Professor of Counseling Services, University of Wyoming - Laramie.

In 1949, on the campus of the University of Colorado, a buddy and I observed a “flying saucer” (Daylight Disc). In 1956, my wife, Marilyn and I observed a silent UFO which hovered, moved, hovered, moved, etc., over Boulder, Colorado. After the second sighting, I began to investigate the literature on UFO reports. In 1962, I joined APRO and NICAP (Aerial Phenomena Research Organization; National Investigations Committee on Aerial Phenomena). I began to consider ways that psychologists could contribute to UFO research (Sprinkle, 1967) as well as to study the personal characteristics of persons interested in UFO reports (Sprinkle, 1969).

In 1964, at the University of Wyoming, I began a study of the UFO abductees/contactees, including their claims of ESP and UFO experiences as well as their responses to psychological inventories (Sprinkle, 1976). In 1967, I began to provide hypnotic sessions for persons who claimed UFO abduction encounter experiences (Sprinkle, 1977). I have assisted more the 175 persons who have explored their UFO memories in hypnosis sessions (Sprinkle, 1979a, 1982).

I have read thousands of reports, and I have corresponded with hundreds and hundreds of persons who have described their strange and bizarre experiences. I have cussed and discussed, with many persons, the implications of UFO activity (Sprinkle, 1976b).

In 1980, after our first Rocky Mountain Conference on UFO Investigation, I sought hypnotic procedures with a fellow psychologist in order to explore my own memories (dreams? fantasies?) of some childhood experiences. My current interpretation of those memories is that I experienced childhood encounters with a Space Being (SB) on board a space craft. (See Montgomery, 1985.)

After 31 years of UFO investigation, including 25 years of UFO research and 20 years of therapeutic services to persons who claim UFO encounters, I have come to several tentative viewpoints:

1. I believe that “flying saucers” (UFOs) exist.
2. I believe that I cannot prove to anyone that UFOs exist.
3. I believe that UFO research is always frustrating, often fearful, sometimes fun.

4. I believe that psychotherapeutic services and social support for UFO Experiencers are helpful to them in accepting the reality of these experiences and in their understanding of the silliness and the significance of these experiences.
5. I believe that there are many skills that can be useful to the psychotherapist who works with UFO Experiencers, but the main attributes are courage, curiosity, and compassion.
6. I appreciate the willingness of UFO Experiencers to share their information, and the willingness of professional colleagues to assist UFO Experiencers.

Perhaps, someday, UFO research can lead to results which could test the hypothesis that UFO activity is an educational program (Cosmic Consciousness Conditioning, Sprinkle, 1976b).

UFO Experiences as an education program

Many writers have discussed the implications of UFO activity, including Vallee (1975) who suggested that a conditioning program is influencing the human race, and Deardorff (1986), who presented a model of extraterrestrial strategy for Earth.

There are four minor hypotheses which can be associated with the major hypothesis about UFO experiences as an educational program:

Thesis I. There is sufficient evidence to accept the hypothesis that many UFO witnesses have experienced encounters with space craft that are piloted or controlled by intelligent alien beings (e.g., Hyneck, 1972; Jacobs, 1975; Randles, 1982; Rutledge, 1981; Smith, 1987).

Thesis II. There is sufficient evidence to accept the hypothesis that many UFO witnesses have experienced abductions and examination by UFO occupants, including bodily, psychological, and/or sexual examinations (e.g., Fowler, 1979, 1982; Fuller, 1966; Hopkins, 1981, 1987; Lorenzen & Lorenzen, 1967, 1976, 1977; Sprinkle, 1979, 1981; Strieber, 1987).

Thesis III. There is sufficient evidence to accept the hypothesis that most UFO witnesses are normal in their psychological functioning (e.g., Bloecher, Clamar, & Hopkins, 1985; Keul & Phillips, 1986; Parnell 1987; Schwartz, 1983; Sprinkle, 1976b, 1979a).

Thesis IV. There is sufficient evidence to accept the hypothesis that psychic phenomena, including “channeled” communications, are associated with UFO encounters; further, there is emerging evidence that UFO contactees view themselves as changing from “planetary persons” to “cosmic citizens” (e.g., Davis 1985; Kannenberg, 1982, 1986; Kinder, 1987; Montgomery, 1985;

Puharich, 1974; Sprinkle, 1981; Steiger & Steiger, 1981). See Figure 1 for a tentative model on the social significance of UFO experiences.

P	<u>Preparation</u> Family & cultural experiences.	Family and/or cultural tradition of ESP and/or spiritual contacts. Childhood visitation by Spiritual Beings (SBs). Lucid dreams or precognitive dreams of future events. Psychic experiences (e.g., telepathy, clairvoyance, seeing auras, etc.).
A	<u>Abduction</u> Induced or initiated, involuntary, by SBs.	UFO sightings and/or UFO abduction experiences. Loss of time experiences or partial amnesic events. Taken aboard spacecraft by SBs or UFO entities. Unexplained body marks, scars, emotional reactions (Why me?). Feeling of being “drafted” for some unexplained purpose.
C	<u>Contact</u> Induced or initiated, involuntary, by SBs.	Adult visitations (by SBs or spiritual guides). Psychic experiences (telepathy, clairvoyance, PK, healing etc.). Lucid dreams and/or precognitive dreams of possible future. Emotional reactions (Why me? Purpose of visitations?). Feelings of “volunteering” for a spiritual mission or task.
T	<u>Training</u> Instruction for a mission or task.	Obsessive /compulsive behaviors (reading, traveling, visions, etc.). Reading various materials, including “uninteresting” materials. Change in personality: feeling of being monitored; “implanted” knowledge/ review of possible past lives.
S	<u>Service</u> Cooperation with SBs.	Channeling verbal and/or written information from SBs. Serving as a “messenger” by conducting research, talking, and/or assistance to others. Working to minimize planetary difficulties; giving assistance to Humankind. Feeling that one “knows” his/her task or purpose in life.

Figure 1. The PACTS Model of abductee/contact experience.

Conclusions

Psychotherapeutic services can be helpful to persons who are confounded by their UFO encounters. Appropriate techniques are similar to those which are used to assist persons to deal with paranormal experiences (e.g., Hastings, 1983, 1987; Miatz, 1983); hypnotic techniques for recalling repressed

memories or “loss of time” (amnesic) experiences (e.g., Hopkins, 1981, 1986; Sprinkle, 1977); and mutual support in self-help groups who provide a sense of community for UFO Experiencers (e.g., Edwards, 1987; IFUFOCS, 1987; Tessman, 1987).

An increasing number of UFO witnesses, including UFO investigators, are sharing information about their UFO experiences and seeking assistance in order to deal with their anxieties about those experiences. Perhaps we are entering a new phase of UFO research; perhaps a network of psychologists can be established in order to provide psychotherapeutic services to persons who claim UFO experiences.

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Blogs

Elemental!

by Shirley Johnson, MA

Introduction

I was initially reluctant to share these findings, despite the fact that past life regression therapists are, of necessity, practised in suspending disbelief. A life as an elemental seemed perhaps a step too far. I had thought that fairies were delightful creations of the imagination and although I wished as I child that they might be real, it never seemed to me, as an adult, that this might actually be so. But the boundaries are constantly being pushed outwards and now I have found that, not only is belief widespread, but that sightings are numerous and quite well attested. The three lives as elementals I have encountered (one of them my own) is a small number, but I intend to pursue the possibility that our continued existence might spread far deeper and wider than we can yet imagine.

In the course of the working life of any past-life regression therapist, unusual experiences will surface. It is our job to accept unconditionally the experience the client is describing, regardless of the way our eyebrows may be rising up into our hair.

I have regressed my share of Atlantans, extraterrestrials and animals, but recently, without warning, two of my clients described past lives as what I can only surmise are Elementals.

In Dublin, in 2015, I attended a workshop at a regression therapists' conference, on the subject of the four elements, Earth, Air, Fire and Water. At one stage we were divided into pairs, to work together. I was paired with an English girl, a stranger to me, whom I shall call Elizabeth. Both of us were amazed and delighted when, during a short regression, she experienced herself as a tiny human-like creature, scurrying through an underground tunnel in the company of small creatures such as hedgehogs and weasels.

All were moving swiftly towards a subterranean chamber among the roots of a giant tree. Here it was communicated—apparently telepathically—that the earth was in danger and all would have to do what they could to help. She was being asked to be born as a human being and she did not want to do this, but she also understood that it was necessary. We moved on to her next lifetime and Elizabeth was very pleased to find that her first human life was the one she is now living. Today, in her everyday life, she is deeply concerned with environmental issues and animal welfare.

Incidentally, Elizabeth even looks rather like an elf (or as we think they look) as she is small and slim, with a little pointed face and bright eyes.

Not long after this experience, I regressed a friend, a past-life therapist, who wanted to further investigate her difficult relationship. We had already, in previous sessions, discovered various links between these two in past lives, but seemed little nearer to a solution for their issues. In this particular session, I asked my subject (I'll call her Naomi) to go back to the beginning of their association.

As we all know, this is always a breathless moment. Where would she go? The answer was both unexpected and fascinating.

Naomi described herself as having a humanlike shape and being perhaps twelve inches in height. She had the appearance of legs and feet, although she had no need to walk, but rather floated just above the earth. She said her body was of a very high vibration and therefore transparent, with a gauzy appearance shot through with rainbow colours, somewhat like the wing of a dragonfly. She said it was possible she could be seen by human beings, although this particular life occurred in a time before there were people on earth.

This little creature had no wings, but since she hovered above the ground, it might have looked as though she were flying, had there been humans to see. She was able to move instantly, powered by thought. "You think, I'll go there and then you're there. That's how it works. So there must be some kind of a brain. I think it's more a connection to Source." However, she could not go far in any direction, as she belonged to a specific area of marshland.

And the beloved? Why, he was a pile of mud and rock, about three feet high.

"He wasn't moving. I was the one moving."

In this lifetime, aeons ago, the two were literally inseparable. This light and gauzy being of Air could not stray far from this lumpen creature of Earth.

I feel very flexible and like a chameleon. I can adjust. I am able to sit on the rock there and he would caress me, embrace me. So there are elements of him that can move, because I can literally go into him, to sleep or to rest, or whatever—I don't really sleep. And then I go off again.

Initially, during this regression, Naomi kept exclaiming that this was all impossible, but she gradually became absorbed in observing the details and her disbelief turned to wonder. She explained that she and this pile of mud and

rock were one and the same, that she had in some way been born out of him and that both had been created out of the DNA of the Earth, although;

...others come straight from the stars, or from the star dust, or whatever, incarnating straight from there, or maybe even from other galaxies.... But we come out of the DNA of the Earth. I can't explain it differently.

As a human soul, you incarnate, you choose to incarnate. As an Elemental you are born out of the earth. It's just different.

The strongest feeling is that I was coming out of the earth's DNA, but that DNA is somehow imprinted from the outside into the earth. It was a collision with a meteor or—but that's going far, far, far back. But Elementals feel like they are closest to nature of course, because they come directly out of nature, out of the earth.

It is not fair to say evolutionary humans are better, or more, it's a different evolution. It's a different stage. Elementals are very, very important, hanging around at that lower—it's not a lower vibration, exactly—but near the earth. Because it felt like we Elementals couldn't go far, we couldn't even go up to that ceiling, we stay very, very near and close, in touch with where we are. So it may be a rose, or a bush, or an oak tree, or whatever it is. Very near. Because you can't go further away. You're just in that energy. It's like the energy around a plant is mixing with the energy of the Elemental. It's all one.

After this experience, I began to wonder if I had ever had a life as an Elemental, something I had never previously considered. I therefore, had a regression with that question in mind.

Almost instantly, part way through the relaxation process, I found myself high on a mountain top, among the tussock, the tough golden mountain grass of New Zealand, my homeland. I was not hugely surprised by this, as I love grasses and especially tussock, just as Naomi loves marshland today and lives in a low-lying area. She was my regression facilitator on this occasion, as we both wished to discover more about Elementals and she was able to ask all the questions to which we required answers.

I am a little wispy creature, among the grass. I am hovering in and among the grass, not quite touching the ground. I have little thin legs with long feet, like bent grass stalks and I am the same colour as the grass. I feel very light and free, dancing in the wind. It is wonderful! There is a deep valley below me, with a river. I don't know if I am invisible, or just indistinguishable from the grasses.

There are others like me and we can communicate telepathically, but there is no need. Each has their own place. We are a kind of group soul, but somehow not really separate from other group souls. I feel I belong to a tiny spot on the Earth's surface, rather than to a plant, but those grasses had to be there, on that spot. I belong to them, I am of them, I am them. I do not need food or drink. I am ageless.

Naomi asks how I began.

I see volcanoes, earthquakes and the upheaval of the earth. At that time, I was a tiny spark. I danced and flew, as a spark, full of joy. The earth cooled, I cooled; somehow I became the Elemental. I changed.

Naomi asked what would happen to me when the grass died.

More grass springs up. I belong to that spot on the Earth's surface. I am that place. I belong to it. And if the place itself disappears, then I fade, I become gradually invisible, then I drift away from my place and join the air, the ether, the Earth's energy. I may manifest again as an Elemental, but not the same one. We do not evolve, or at least, not for aeons.

What happens if a plant is uprooted and thrown away? asked Naomi. "I became frightened and agitated, even terror-stricken, at the thought. The Elemental would stay with it, then fade as the plant fades. But only if the entire plant is taken."

Naomi had also reported these feelings, during her regression. I had asked her what would happen if she belonged to a tree and that tree was cut down, or otherwise destroyed.

There's a huge loss ... I don't think you can go to another tree. I came out of that rock, that piece of mud or rock (I can't explain) so if it had been destroyed that would have been horrific. Because that's my comfort place, that's where I came out from, that's where I belong. I would have nowhere to rest. I could still hang around—I would have to hang around—because I have no choice, because you can't die.

So that's a lost Elemental. I don't know what happens with that, but that's an awful feeling. The thought of it makes me totally sick. That is just a nightmare. ... any suggestion of the earth being threatened or destroyed makes me very agitated, terrified!

What about in a garden, I asked, where trees are trimmed and grass is mown? "That is okay. It is being tended and cared for. We like that. We can cope with that. It is caring."

I corroborated this in my own regression, when Naomi asked if Elementals could co-operate with humans.

Yes, we do. I replied.

If a human comes into our territory and treats it with respect, we welcome him. If he is sensitive, he will feel it. If he is destructive, we will want him to leave. However we cannot operate from a distance. We are tied to our own places. We can create an influence only if the human comes to where we are. We can create an atmosphere, but it is not really deliberate, it is just our reaction to either nurture or destruction.

So what exactly are Elementals? Definitions vary. This is the answer, according to *Wiktionary*, the online dictionary:

Noun - elemental (plural elementals) (fantasy) A creature (usually a spirit) that is attuned with, or composed of, one of the classical elements: air, earth, fire and water. They sometimes have unique proper names and sometimes are referred to as Air, Earth, Fire, or Water.

Note that, to *Wikionary*, they are pure fantasy.

And in *Chamber's Dictionary*, among other definitions: "Elemental spirits (medieval hist.) beings believed to preside over the four elements, living in and ruling them."

Over the past eighteen months, I have done considerable research on the subject, with some difficulty, as studies were hard to discover. At first, it was all very confusing. What were Elementals? Spirits? Living beings? Invisible beings? Is there a difference between a Brownie, as in Elizabeth's memory, and the Elementals recalled by Naomi and myself? If Brownies exist, do Fairies exist? If so, are they the Little People of myths and fairy tales?

Paracelsus, (1493-1541) the Swiss/German physician, botanist, alchemist, astrologer and occultist, was one of the first to mention Elementals (though he didn't call them that) in an academic exposition, under the catchy title of *Liber de Nymphis, sylphis, pygmaeis et salamandris et de caeteris spiritibus*. Like many learned men of his time, he thought of the natural world as being neatly divided into four elements—fire, earth, air and water. Elementals were semi-spirit beings, each belonging to one of these elements. Earth elementals were gnomes, water Elementals were undines, Air Elementals were sylphs and fire Elementals were salamanders (Paracelsus, 1960).

Other writers have also defined Elementals. For example, Heinrich Cornelius Agrippa, (1486-1535) the German theologian, astrologer, magician, alchemist and writer on the occult, although he too did not use the term Elemental (Agrippa, 1993).

We should also note that, in the Chinese Five Elements Theory, the elements are wood, fire, earth, metal and water. The Ancient Greeks also included a fifth element—ether. Hinduism agrees with this and equates the five elements with the five senses. The Ancient Tibetan pre-Buddhist Bon Religion added a fifth element of space, while Japanese tradition identifies this fifth element as void, or sky/heaven.

But are Elementals so easily categorised into four (or five) groups? If they exist at all, they appear to be enormously varied and numerous. Human beings, it seems, have been aware of them since the very earliest days, when we had—and needed—far more developed senses, to enable us to survive. The so-called sixth sense would have been present in everyone, to warn of enemies and danger, to help us find food and track animals and at the same time, would have enabled us to see and hear much more in the natural world than we perceive today.

Before Paracelsus and Agrippa came the belief systems of many indigenous peoples around the world, such as the native Americans, the Inuit, the Australian Aboriginals, the ancient Chinese, adherents to the Shinto Religion in Japan, the ancient Greeks and Romans, the New Zealand Maori and many more, all of which had a tradition of nature spirits, or Elementals.

Why would people the world over invent such beings? Is it not possible they could actually see them and took them for granted? If most of us no longer see them, is it not possible that this is because we no longer live so close to nature and we have let our sensitivities decay?

While differing in detail, these traditional philosophies may be considered to come broadly under the heading of Animism, the belief that the material and spiritual worlds are not separate, but instead are an integral part of each other. Animism states that, while human beings have a spiritual dimension in the form of the soul or spirit, so also do animals, plants, rocks, the ocean, rivers, waterfalls, mountains, valleys, weather phenomena such as rain, clouds, thunder, wind, the sun and moon, and even a tribe, or a country.

Animism was and is dismissed by scientists and anthropologists as an extremely primitive belief, predating man's realisation that he was smarter than a rock and that therefore, if he had a soul, other natural phenomena, whether animal, vegetable or mineral, most definitely had not. In fact, Animism is not outdated or primitive at all, but is alive and well today and probably growing in its number of adherents. This belief system is currently officially

embraced by many groups, such as Wiccans, Jainists, Theosophists and also the Society of Rosicrucians, who were at one time required to be able to see Elementals as a prerequisite of membership. Animism is also accepted by an indeterminate number of spiritually aware individuals worldwide, who may not even give their philosophy a name.

Today, there seems to be a widespread acceptance that the world is all one entity, perhaps even with its own vast soul. Not surprisingly, environmentalists often embrace this theory. The Gaia Hypothesis (Lovelock, 1979), formulated by chemist James Lovelock and microbiologist Lynn Margulis in the 1970s, has helped bring many to this idea.

As above, so below? If we can accept that the world and also a human being has—or is—a soul, then why would we deny some form of this to other physical beings and phenomena?

In my work as a past-life regression therapist, spanning twenty-five years, I have encountered many people who have had past lives as animals. I have met horses, eagles, wolves, monkeys, dolphins, gorillas, bullocks and more. I have followed some of these through the death as an animal and on into the subsequent first life as a human being.

I also, early in my practice, regressed a young man who remembered having been a tree (or the spirit of a tree?) long before there were human beings on Earth. He had no difficulty in embracing this idea. And I have certainly heard of a case in which a client recalled being (or inhabiting) a rock. Further investigation seems to indicate that we have this kind of life for aeons and then move on through animal lives and into lives as human beings.

However, Theosophist and clairvoyant, Charles Webster Leadbeater, (1854 – 1934) says not. In his book, *The Hidden Side of Things*, Leadbeater states that nature spirits are following their own line of evolution, which will never cross over into our own. He claims that Elementals (whose bodies are etheric rather than material) first develop as gnomes, inhabiting the earth and solid rock and moving through it as easily as we move through air. The second stage is that of fairies, who live upon the surface of the Earth (Leadbeater, 1999, chap. 6). These seem to include the undines and salamanders, as well as the various sub-groups of manikins (chubby faced and cheerful), possibly the model for Tolkien's Hobbits (Tolkien, (1937), assorted nature spirits and more. Fairies then evolve into sylphs and after that into the lower angels, gradually developing thereafter into the higher angelic forms.

It should be noted that Leadbeater distinguishes between Elementals and Nature Spirits (Leadbeater, 1999, chap 6, para. 9). He says that Elementals are the thought forms of higher beings who are in charge of the evolution of the vegetable kingdom and that these Elementals simply dissolve when their

usefulness is past. Nature Spirits, on the other hand, are more independent life forms. However, I have chosen to use the general term Elementals for all of these groups.

Earth Elementals

These are Elementals having to do with the Earth itself, with plants of all kinds, stones, rocks, bogs, mountains and various places in nature. An example would be the pile of rock and mud remembered by Naomi in her regression. Although the traditional name for such Elementals is gnomes, there seems to be a wide variety within this category. These include brownies, tree spirits and elves, although the whole subject is so fraught with conjecture and disbelief that those clairvoyants who can actually see such creatures may be forced to give them names of their own. Having said that, there is a surprising amount of agreement among those who have been able to see Elementals, regarding appearance and activity.

The details of Elizabeth's memory of her life as a brownie are borne out by American writer and clairvoyant Ted Andrews (1952-2009) who says in his book, *Enchantment of the Faerie Realm: Communicate With Nature Spirits and Elementals* (1993), that every tree is home to a wide variety of elves and fairies, which may live in groups. He says that many of these are connected to the tree for life and one of their roles is to protect it. (Hence the need to ask for permission before cutting down a tree, which was practised in many cultures.)

Andrews notes that what he calls tree elves frequently live beneath the surface of the tree, but may also be seen running along its branches.

English writer Geoffrey Hodson (1886-1983) corroborates this. He was an occultist, writer, lecturer, Catholic priest, World War I tank commander and a leading light in the Theosophical Society. He was able to see fairies and nature spirits and made detailed notes on all that he saw.

In his book *Fairies at Work and at Play* (Hodson, 1987), Hodson says that what he calls Brownies vary in size from four inches to a foot in height and usually look like little old men, with moustaches and beards. They are friendly and communicative, live in tribes and may be found on, or just under, the earth and amongst the roots of trees and plants.

He mentions that gnomes are more solitary and grumpy than brownies. He describes a rock gnome, not very intelligent, ten to fifteen feet high (smaller than the rock itself) with ugly head and face in shadowy outline and the rest of the body even less evolved, all deep within the rock and with rudimentary feet buried deep in the earth. He says that the presence of this creature gives the rock itself a noticeable magnetic vibration.

Leadbeater says that Rock gnomes are sometimes glimpsed in caves or mines (1999).

Hodson even observed a brownie within his home, who seemed to have adopted them and took a great interest in everything they did. Some Elementals imitate our clothing, our activities (without understanding what we are doing) and even our houses. He gives a delightful example of a brownie who examined Hodson's boots with great interest and then manifested a copy of them upon his own feet. They can dissolve—clothing and all—instantly and at will and sometimes create a shimmering mist (which I have found described several times by various people) when they do not wish to be seen.

He saw gnomes stepping in and out of the particular trees to which they belonged and said that they lost their gnome-like form once within the tree. All can shape-shift on the instant and find our physical world no obstruction to their movements, easily moving through trees, doors, rocks and the earth itself (Hodson, 1987, pp. 25-26).

In Ireland today, many people totally accept the presence of the fairy folk—although claiming it is inadvisable to call them this, in case you invite their attention. You must refer to them as the Good People, or the Gentle Folk. It is said they live in dolmens or raths and if you visit *Uisneach*, the ancient sacred centre of Ireland, you will be shown the huge capstone and be told that traditionally, it is a portal to a land beneath the earth, where the fairies live. This rather suggests that Elementals have been seen disappearing into the earth beneath this rock, in times past.

Hawthorn trees are well-known in Ireland as fairy trees and you will generally find one beside a sacred site or a holy well. As recently as 1999, a threat to a fairy hawthorn held up the building of a motorway, until the National Roads Authority agreed to save it from harm and built a fence around it. Apparently the fairy folk, (the *Sidhe* in the Irish language) want to rest beneath it when journeying.

Fairies

Hodson and Leadbeater both include certain fairies with the earth Elementals, despite the fact that some can fly. Hodson describes them just as we have been taught to imagine them, from myths and fairy tales.

He says they are very beautiful and mostly feminine in appearance, with long hair and filmy garments. Many have oval shaped wings. Some are just a few inches in height, others as tall as four feet. One he saw even had a star on her forehead, another a wand (Hodson, 1987, pp. 25-26).

All had most beautiful auras, which would expand or contract according to the work being done (Hodson, 1987, pp. 25-26). It is interesting that Tinkerbell, the

fairy in J. M. Barrie's, *Peter Pan* (2014), flies about in a bright aura, which she retained even after she was taken over by Walt Disney. Tinkerbell is unable to speak, a phenomenon noted by Hodson, who says all Elementals communicate telepathically (as noted by both Naomi and myself). At times he has seen one open and close its mouth as though speaking to him, but has heard no sound. Sometimes there is faint music, or the sound of tiny bells (again, like Tinkerbell).

Like most of the Elementals, the fairies seemed to Hodson to be enhancing and activating particular aspects of nature and they exuded a wonderful air of exultation and delight as they did so. He tried moving into the consciousness of one particularly friendly nature Fairy and it was such a profound and joyful experience that he found some difficulty in disengaging (Hodson, 1987).

One wonders if such contact might have given rise to the stories of humans who have "gone away with the fairies" and been caught in their glamour, unable to leave. Some tales say those humans fell asleep and could not be wakened, but it is also possible they were unconscious, or in something akin to a deep hypnotic trance, judging by Hodson's experience.

Some Fairies, says Leadbeater, have a line of evolution through physical bodies, beginning as fungoid growths, then bacteria, insects, reptiles, through many lives as birds, until finally evolving into fairies (Leadbeater, 1999, chap. 6, Lines of Evolution).

If this is the case and Elementals can move from physical to etheric bodies at particular stages in their development, there seems to be no compelling reason why they might not move from etheric to physical and take part in the human chain of reincarnation.

Veteran past-life regression therapist, Dolores Cannon (1931-2014), certainly agreed. In her book, *The Convuluted Universe, Book IV*, she claims that we first experience life as a very simple form, such as air, gas, water, dirt, rocks, or even a single cell. Then we must experience existence in the plant and animal kingdoms. She goes on to say:

There are also the Nature Spirits: fairies, gnomes, leprechauns, dryads, etc. These have the job (or assignment) of taking care of nature. These beings are all very real, and we have all had lifetimes in these forms of existence. (Cannon, 2012, p. 20, para. 4)

Later, says Cannon, we move on into our human lives.

Leadbeater claims there is a line of evolution among the Earth Spirits which comes up through the grasses and cereals—as in my past-life memory. Hodson mentions tiny green elf-like forms, one or two inches high. They have wings,

but cannot rise very high and their toes point downward as they fly, which sounds like my recollection of my feet as a Grass Sprite. They make a chattering sound, he says, and the grass vibrates as they move to and fro.

From Grass Elementals, says Leadbeater, this particular evolutionary ladder moves into the animal kingdom in the form of ants or bees, later transforming into the tiny spirits, like microscopic points of light, which hover around plants and flowers, assisting them in their growth and diversification. From there, he says, they will develop into more complex Fairies, dwelling on the Earth's surface. Later they will become Salamanders, then Sylphs, then begin to evolve through the Kingdom of the Angels (Leadbeater, 1999, chap. 6, Lines of Evolution).

Leadbeater also notes that fairies come in many colours, with different varieties inhabiting different areas, or even a particular country. For example, he says there are emerald green Fairies in England, also in Brittany, in the forests of France and Belgium, in Massachusetts, and on the banks of the Niagara River. A black and white variety inhabits the Dakotas and there is a white and gold species in California. Fairies with the appearance of burnished bronze appear in volcanic regions, including Mount Etna, Mount Vesuvius, Hawaii and Yellowstone Park. He details many more (Leadbeater, 1999).

Fairies are not born, but spring to life fully formed. They don't need food or rest and they don't reproduce. They may live long or short lives, but when their energy is spent they simply fade away (much as I described during my regression) until they rejoin their group soul. Later, each moves into the next stage of their reincarnation cycle, whatever that may be (Leadbeater, 1999, chap. 6, Fairy Life and Dearth).

Doreen Virtue, Ph.D., writer, clairvoyant and metaphysical psychologist, in her small book, *Earth Angels: A Pocket Guide for Incarnated Angels, Elementals, Starpeople, Walk-Ins, and Wizards*, has no difficulty in claiming that many of us have had past lives in the Elemental Kingdom, although she names Elementals as a part of the whole group she calls Earth Angels. She has seen this clairvoyantly while talking to clients and says that these people have agreed to be born as human beings in order to help and heal the earth (Virtue, 2002, p. 59) as stated by my fellow regression therapist, Elizabeth.

Fire Elementals

The traditional name for fire Elementals is Salamanders. In the natural world, Salamanders are lizard-like amphibians and in their etheric form, they seem to look much the same.

Years ago, I spoke with a well-known Wiccan and writer I shall call Joan, who told me that, as a child in England, she liked to observe these little creatures in

the blaze in the fireplace and watch them crawling up the poker. However, not all fire Elementals look like lizards.

During my regression, I said, "There are Salamanders, but there are also fire beings, that flicker and dance."

Ted Andrews says, in *Enchantment of the Faerie Realm*, they appear wherever there is fire, or flames, or even warmth (Andrews, 1993). Who has not thought he saw a face within the flames of a fire? Geoffrey Hodson does not mention Fire Elementals, although there may be information I haven't yet encountered, in another of his fifty or so books.

To Leadbeater, Salamanders appear to occupy a position in the evolution of Elementals between gnomes and sylphs (Leadbeater, 1999, chap. 6, Their Pleasures). He describes fire spirits who are drawn to any fire and love to leap upwards in the flames, over and over again, in great delight, much as I recalled.

Water Elementals

Water Elementals are traditionally called undines. Although they belong to the element of water, there are many forms of water and therefore many types of undine. There are lakes, streams, rivers, pools, wells and of course, the sea, which may vary from little wavelets to giant breakers, from shallows to the vast depths of the ocean and each has its accompanying spirits.

When, during my regression, Naomi asked me about them, I said:

In still water there are dark, mysterious beings that may seem frightening, but they're peaceful. They (Water Elementals) can move around more than any of the other Elementals. They are tied to the element, rather than to a place. They may dance on top of the water, or swim within it.

In the sea, there are Elementals that like to play in the spray and the waves.

Ted Andrews says that tiny water fairies may be seen in the spray of waterfalls, or water sprites riding the crest of ocean waves, or on the backs of sea creatures, or dancing on offshore waters. He adds that mermaids may sometimes be observed on the surface of the sea (Andrews, 1993).

When Naomi asked me whether the Sea Sprites were like mermaids, I replied:

Some of them. But they don't have fish tails. They don't have legs, either. Their bodies trail away, they might look like fish tails to a human. Their faces and arms look human. But they're much smaller.

Hodson (1987). says that undines are always female in form, always naked and very beautiful. Some have wings and all can fly high above the water, the larger ones sometimes briefly disappearing out of sight. They may be small (four to eight inches high) or up to human size. They play joyfully in waterfalls, shrieking as they do so, or retire to quiet pools. They move very fast, can change shape rapidly and are able to move through rocks as though they do not exist.

All are very playful, whether in tumbling streams, splashing waterfalls, or in waves crashing on the sea shore. Hodson says they seem to become charged with magnetic energy through their interaction with water and their auras grow to enormous size. This energy is then ecstatically discharged and the process begins all over again. He has also seen huge Elementals further out in the ocean and others, smaller, resembling birds or fish, but with human heads.

He failed to contact them mentally (which he was able to do with the earth Elementals) finding them cold and remote, even although strongly emotional (Hodson, 1987).

Leadbeater says that another branch of the family leaves the mineral level (Rock Elementals and the like) to evolve through seaweeds, then corals, sponges, cephalopods (e.g., squid), on into fishes and only then develop into Water Spirits (Leadbeater, 1999, chap. 6, Lines of Evolution).

Air Elementals

These are traditionally known as sylphs, and belong to the element of air in the sense of flying with the wind, or within storms, or in the clouds.

In *Fairies At Work and at Play*, Geoffrey Hodson describes some air Elementals he saw in England. They were below human size and asexual, although their faces seemed fiercely female. They had the semblance of large wings and flew wildly across the sky, shrieking, with a sound rather like the whistling of the wind. They were pastel-hued, with brighter colours pulsating around their heads and at times, bands of colour flashing from one to the other in a way that seemed like communication. He also describes dark storm spirits, almost birdlike, but with frightening human faces, uttering piercing cries and swooping and diving through the air, seeming to create and intensify the energy of the storm.

During an electrical storm he saw bat-like creatures, with demonic human faces and flame-like auras, but above them and keeping them in check, a vast calm, strong deva of humanlike appearance (Leadbeater, 1999, chap. 6, Lines of Evolution).

Storm Sprites

Incidentally, there exists a particular type of weather phenomenon in the group known as Transient Luminous Events (TLEs) that scientists have named the storm sprite. These are large electrical discharges, usually occurring high above a storm cloud and they are triggered by discharges of positive lightning between the thunder cloud and the ground, although Storm Sprites have also been seen in cloudless skies and in daylight.

Electrons collide with charged particles in the atmosphere, creating a pathway on which the electrons travel. Storm sprites are usually orange-red or blue-green and generally occur in groups, about thirty to fifty miles above the surface of the earth. They shoot rapidly up into the air like a rocket and sprays of light may then spread out above and below, in varying patterns. One YouTube, the commentator is heard to say, "Just like its name, this sprite evokes a fairy, with wings." And later, "... and what about this sprite, shaped like angels wings!" (To be fair, other storm sprites are compared to mangroves and jellyfish!) (YouTube, 2014, at 09:05 & 13:05)

Geoffrey Hodson also describes Cloud Fairies moulding the clouds into different shapes, sometimes under the direction of a larger, higher Elemental form (Hodson, 1987). Leadbeater says that sylphs are the highest form of nature spirits and after they have reached this stage, they move on in their own line of development to become Angels (Leadbeater, 1999, chap. 6, Lines of Evolution, para. 11). Could this be true? It is certainly true that belief in angels has grown enormously over the past twenty years, having first been driven out by the development of scientific thought and now quietly edging back into universal acceptance. This is mainly due to the fact that many people say they have seen angels and they are now less afraid to acknowledge this. Angel workshops, books and readings abound. Among those people who say they can see and hear angels all the time is Irish clairvoyant, Lorna Byrne, as detailed in her book, *Angels In My Hair* (Byrne, 2008).

A quick trawl through the Internet also produced R & B musician Marcus Stanley, who saw a transparent seven foot angel standing between himself and the men who shot him. Stanley survived this attempt on his life, against all odds (Aaron, 2015).

On the website near-death.com (Powell, 2016), Sarah Powell relates how, on November 16th, 1993, when she was a child, burglars tied her up and tried to kill her. During her near death experience, she met her guardian angel, (she called him George) a tall man in a white suit and white top hat, who remained with her for some years afterwards, until she had completely recovered.

On the website theblaze.com Ex-FBI officer, Lillie Leonardi, is quoted as saying in her book, *In the Shadow of a Badge: A Spiritual Memoir*, that she saw a field of angels at the Flight 93 Crash Site on 9/11. She says she saw hundreds of

angels standing in columns beside the crash site, with their wings arched up to the sky (Leonardi, 2013).

If angels are coming in from the cold, why not Elementals? And why not, also, fairies, pixies, elves, selkies, sirens, manikins, salamanders, kobolds, gnomes, bogles, brownies, leprechauns, trolls, water babies and all the other creatures which have peopled fairy tales and folklore for so long? Are they really more unlikely than angels? Again, the Internet quickly provided any number of people worldwide reporting that they have seen what appeared to be Elementals.

Denise LeFay, author and clairvoyant, talks in her blog (LeFay, 2010) about her childhood memories of having once lived under the water, in the very early days of Earth, in Lemuria. She longed to be able to do that in her present life, but eventually realised she had at that time been a non-physical being, who worked creating and building the waterways in Lemuria, which was still in etheric form.

From <http://paranormal.about.com/> comes a number of tales:

Stephen Wagner, in Pennsylvania, sitting despondently at home in 2008, suddenly saw:

A small feminine face looking at me with total empathy....Her face was not human, but very "otherworldly" and beautiful. She had soft, light brown, cocoa-colored skin and wide-set eyes that tilted up ... her eyes were totally all dark chocolate brown with no irises ... they were full of love. She had high brow bones, high cheekbones, a high forehead and delicate nose and lips. She looked very delicate and regal. And there was a sense of innocence and humility about her as well as royalty.

They stared at each other, until she seemed to realise he could see her and disappeared.

On a hiking trip, American teenager Jacob Dedman, then aged sixteen, became separated from his group. Searching for them, he came to the edge of a cliff overlooking a small lagoon, but the edge beneath his feet gave way and Jacob began to fall, to certain death. But then: "... the form of a black-haired woman appeared from the shadow dressed in what appeared to be animal hides."

Her eyes were startling. "One a silvery blue, the other a glowing green." She grabbed Jacob with her "small but strong arms" and their fall appeared to slow. They "landed softly, almost like a feather, next to the small lagoon." Jacob asked her if she was an angel. "She smiled ... and said no. All she told

me was that this place belonged to her, then turned and walked into the shadows of the forest and disappeared.”

When Jacob found his friends, they laughed at his story and added that no such lagoon existed. He later retraced his steps looking for his rescuer and found that this was true

Marlene was outdoors in the moonlight, in June, 1999, when, just above the roof of her house, she saw two glowing lights, moving up and down. She held out her hand and the balls of light, “hovered down. Then I could see quite clearly that they were faeries. The female one landed right on my left hand, and I could see there was a male faerie hovering just back from her about eight inches away!” When Marlene’s daughter came running out of the house, the creatures disappeared.

“Krystal” says that while visiting San Antonio, Texas, she saw by a mail box “*a few fairies*”. At first she thought they were dragonflies, but then realised they were little people. She says, “I saw their narrow little bodies and their long legs.” She told nobody, fearing she would not be believed. She says, “I saw one of the little fairies look at me and then they all flew down into the grass.”

An anonymous contributor was walking with her mother in the woods in Massachusetts, when they saw,

...something with white wings, spanning about a foot across, fluttering up the path in front of us. Every time we got closer to it, its wings would flutter and further up the path it would go, seemingly to keep a certain distance between us.

The two women discussed what it might be and tried to catch up with it, but it kept fluttering ahead. They ran faster and it turned, to run into the forest. Now, they saw :

...a creature about a feet [sic] tall, light gray in color, and running on two legs, just like a human. We saw it holding its two arms bent at the elbows as it ran (also human-like). Most astounding was its face, which was very human looking from the side, except for its ears, which were rather long and pointed.

Both saw it, but were not believed afterwards. They have searched for it again many times, without success.

K. T. says that, in Pennsylvania in 2003, she went for a walk in the woods at dusk. Light snow was falling. She says she was,

... somewhat perplexed by how different everything looked. Hard to describe; again "shimmery" is the first word that comes to mind. As I rounded a bend in the path, I came face-to-face, about three or four feet away, with a little elf-looking man peering right at me from behind a tree. It was almost a stereotypical elf: long, pointy ears, long funny-shaped nose, very long fingers and pointy cap. It was wearing red clothes and hat, and its skin appeared to be a very light lavender color. I let out a startled "Ooh!" and it jerked back and just disappeared into thin air.

Other people on the same website also reported seeing Elementals with lavender skin. Many sightings of Elementals mention them wearing the colour red.

Apart from such random experiences, it appears that certain people, such as Andrews, Hodson and Leadbeater, can see Elementals, just as there are mediums who can see and hear people who have died and left their physical bodies. In an earlier time, before science became the answer to everything, people simply believed what they saw. Indigenous peoples in close touch with nature might have been able to see nature spirits and in the present day, people living simple lives close to nature, or children who have not yet been told that fairies do not exist, might happily observe them.

In the 2014 DVD, *Voices from the Forest: Gary Cook's Close Encounters with the Faery Folk of New Zealand*, an elderly Maori describes how, as a young boy, he would slip out of his house every night and go into the forest, to play with the *Turehu*, the fairies.

In Maori folklore, the *Turehu*, or *Patupaiarehe*, were small beings, about three or four feet tall. They had pale skin, fair or red hair, and green or blue eyes, whereas the Maori have brown skin, black hair and brown eyes.

The Cottingley Fairies

Perhaps mention should be made of the so-called Cottingley fairies, which caused a sensation in the early 1920s. Two cousins, Elsie Wright and Frances Griffiths, who frequently went down to a nearby brook to watch the fairies (although nobody believed them) borrowed a camera and took what appeared to be actual photographs of fairies.

Many influential people were intrigued, including Sir Arthur Conan Doyle, author of the Sherlock Holmes novels, who wrote extensively on the case (Doyle, (2006). The photographs were carefully examined and pronounced to be genuine. One of the girls, towards the end of her life, recanted and said the fairies were cutouts (a hypothesis already considered and rejected by photographic experts) but the other insisted this was not true and until the day

she died, maintained that the fairies and the photographs were real. The same Geoffrey Hodson, already mentioned, was dispatched at the height of the controversy to check the story. He spent the day with the girls, asking them what they could see and comparing it with his own clairvoyant observations. Although his sensitivity was somewhat stronger and he could see more, he returned from the outing announcing that their ability to see fairies could not be questioned. Whether the photos were genuine or not remains open.

In the Introduction by E. L. Gardner, (1869-1969) writer and theosophist, to Hodson's book, *Fairies At Work and At Play*, he says that none of the Elementals have any sort of physical body as we would understand it, but can manifest in any shape and are happy to inhabit a thought form which we may provide. The natural "body" is a pulsing globe of light, which may change shape at any moment (Hodson, 1987, pp. 20-21).

Many of us can see these and they frequently appear in photographs. We usually call them orbs, often thought to be our spirit guides, or the soul of a deceased person and this may be true, but they may also be Elementals. It seems, also, that we may deliberately provide a thought form for an Elemental to inhabit, according to Leadbeater. I have heard of this through people who had first hand experience.

Joan, the Wiccan mentioned earlier, in company with her husband Stephen, also a Wiccan, told me years ago that they had created, through earth magic, a guardian for a threatened seal colony, off the coast of Ireland. They called into being a thought form in the guise of a water spirit, a woman in a long shining robe who would watch over the seals.

Some time later, they were delighted to be told by someone who had no idea what they had done, that she had seen, to her amazement, a woman out on the rocks beside the seals, in stormy weather, where it was impossible for someone to be standing. This observer said the woman was wearing what seemed to be a long shiny raincoat.

Hodson has also encountered several less pleasant Elemental thought forms, deliberately created. For instance, in Whitendale, England, he saw a huge black demonic form, complete with tail and cloven hoofs, which he said had been created by a group of priest magicians, thousands of years ago, through various bloody rites. This entity is currently buried in the earth up to its shoulders, he says, is completely helpless and is gradually disintegrating (Hodson, 1987).

I am quite ready to accept the possible existence of Elementals. Regression therapists already know that there is a much wider world beyond our limited five senses. There are certainly sounds we cannot hear, so why not colours we

cannot see, and beings of finer vibrations than we can pick up? Our minds need to remain wide open to phenomena not currently provable by science. At one time, we did not know of the existence of microbes, or quarks, or the more than sixty-two moons of Saturn, or the coelacanth, which was thought to be extinct for 65 million years.

Clearly, we don't know everything.

Elementals, my dear Watson? Perhaps!

Dublin, Ireland.
October 2016.

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A Wonderful Healing Story

by Ann Merivale

Abstract

Since most of most people's previous lives tend to have been rather boring, it is fairly unusual either to regress someone to, or to find oneself in, the life of somebody famous. Roger Woolger once did a session with a client who was filled with guilt as he was convinced that he had been the captain of the Titanic. The author of this article, who is a writer as well as a Deep Memory Process therapist, was initially surprised to find that she had once been well known as the ex-fiancée of a great English composer. She was later astounded when a reader of her book on this topic contacted her to say that he believed himself to be a reincarnation of this same composer. A moving story.

I should like to recount a fascinating story that occurred only last month (July 2016) as a follow-up to one of my books, and from which I am still reeling.

When in life one gets a strong prompt to do something, the reasons for it are not always immediately apparent. If, while I was starting to write *Life Without Elgar – A Tale of a Journeying Soul*, anyone had told me that the book's main purpose would be to give some healing to the great composer himself, I would certainly not have believed it! While I was enjoying writing that book, the most interesting thing for me about it was how the middle section—consisting of imaginary correspondence between Sir Edward Elgar and his first love, Helen Weaver—wrote itself. The letters had started coming into my head, completely unexpectedly, immediately upon my return from a meeting held in the room that had been Elgar's own study when he lived at Plas Gwyn, Hereford, between 1904 and 1911. I then continued 'channelling' them over the next week or so and, since I was travelling at the time and do not own a laptop, that entailed scribbling in longhand on both trains and aeroplanes. Only after feeling the correspondence to be complete did I write the introduction to the book and then complete the sandwich with an autobiographical first section and a third section discussing the healing that a particular regression had brought me. For, when I had been regressed to the life of Helen Weaver, it had given me an explanation for my life-long love of Elgar himself as well as of his music, and shown why, at the age of sixteen in my present life, I believed that I would never get over the fact that he had died six years before I was born.

For the benefit of those who are not familiar with the details of this composer's life, Sir Edward Elgar was born into a fairly humble, Catholic background, his

father being a piano tuner who also ran a music shop in Worcester, and—like his predecessor the great Johann Sebastian Bach—he was musically entirely self-taught. He fell in love at a fairly early age with the daughter of a neighbour who ran a shoe shop. Helen was also musical and, like Edward himself, had the violin as her main instrument. Her parents were slightly better off than his and she was consequently able to go to Leipzig to study at the Conservatoire, while he was left behind in England struggling to support himself by teaching music. He did, however, manage one holiday in Leipzig while Helen was there, and they got engaged while enjoying concerts together in the Gewandhaus. She, however, having already lost her mother at an early age, returned to England when her stepmother became seriously ill and nursed her until her death. Helen was by this time probably suffering from consumption (TB), and she broke off the engagement before emigrating to New Zealand (where she later married and had two children).

There has been much speculation as to the identity firstly of the character who is the subject of Variation No. 13 of the Enigma Variations (Elgar's best known work apart from the Pomp and Circumstance Marches), and secondly of the "soul who is enshrined" in his violin concerto. But many musicologists have over the years expressed the opinion that both were Helen Weaver, whom they believed Sir Edward never really got over losing.

He later married his piano pupil Alice Roberts, nine years his senior, who came from a wealthy Gloucestershire family, and they strongly disapproved of the match. The couple had one daughter, whom they called Carice, a name derived (typically of Elgar!) from her mother's names of Caroline Alice. Most of the rest of this great man's life was a constant struggle financially and to gain recognition as a composer. Alice's massive role in the latter is indisputably acknowledged and, when she died of cancer in 1920, he severely curtailed composing. His grief was compounded partly by feelings of guilt about certain other romantic attachments that he had had—notably a Platonic relationship with Alice Stuart Wortley, the wife of a Conservative MP and the muse whom he nicknamed Windflower.

Towards the very end of his life, however, Elgar had another Platonic relationship with a young divorcee named Vera Hockman, a violinist whom he met while conducting his great oratorio *The Dream of Gerontius*. She is believed to have inspired the new burst of creativity of his final two years and, when I read Kevin Allen's book, *Elgar in Love*, I was convinced that Vera was his twin soul. Despite the prevailing prejudice against both Roman Catholics and the lower classes—not to mention his lack of any formal post-secondary school education—Edward Elgar achieved every possible honour, including knighthood. He was given a Chair at Birmingham University and the title of Master of the King's Music. He is now known worldwide as one of Britain's very finest composers.

Thirty-four years after Elgar's death in 1934, a boy was born in Portugal whose parents named Manuel Eduardo. His family still call him Manuel, but—for some reason he never quite fathomed—he was always known as Eduardo at school. From early childhood he had a great love of music and, though he never took music lessons, he found that he was able to teach himself to play any instrument that he laid his hands on. Yet, feeling sure that he was not destined for a musical career, he completed a degree in mechanical engineering and then became a university teacher in that subject. Manuel Eduardo first met his wife Rosa Maria while he was still at school, and from the very beginning had a constant fear of losing her. They had two sons, but after twenty happy years of marriage, she sadly died of cancer in 2013, at the age of only forty-eight.

Without being aware of who had composed it, Eduardo had always loved the tune of *Land of Hope and Glory*, and he made a recording of the last night of the Promenade concerts that take place every summer in the Royal Albert Hall, London, in 2004. A random event in July 2015 caused him suddenly to discover that the composer of this work was Elgar—a name he had always felt attracted to, even before knowing who he was. He then started to explore Elgar's music seriously, falling instantly in love with, for instance, the Enigma Variations and *The Dream of Gerontius*, and his internet searches soon led him to the great music critic and biographer Michael Kennedy's *Portrait of Elgar* and, also, to my little book.

Eduardo then got in touch with me, and we corresponded for about a year—until he came last month firstly to Ludlow to meet me, and secondly to the Three Choirs Festival, which this year was held in Gloucester. By this time the lovely Carla, about whom he had already written to me, saying he was certain that she was his twin soul, had just become his partner, and the couple flew to England accompanied by Eduardo's two sons and by Carla's son, a slightly older teenager. From Ludlow they travelled to Gloucester for the first night of the festival and a performance of Elgar's oratorio, *The Kingdom*, and the next day they went to Worcester in order to explore some of the main Elgar haunts. Visiting the Birthplace Museum (at Lower Broadheath just a couple of miles from Worcester city) and walking on the Malvern Hills (which inspired so much of Elgar's music) moved Eduardo beyond words. Carla was totally overcome by emotion when at the birthplace she saw a portrait of Elgar for the first time and gazed into his eyes. They returned to Gloucester three days after our arrival there—in time for the performance of the *Enigma Variations*.

Even before meeting this delightful new family, our correspondence had left me pretty convinced of Eduardo's claim that he was a reincarnation of Edward Elgar, and staying in Gloucester at the same time gave us the opportunity to do a regression to that lifetime. Before we did the regression, Eduardo had told me that when reading about Elgar's life and personality he had found great resonance with his own, and various other congruencies. For instance, when he read the letters in my book, he knew in the depths of his being that

everything recounted therein had really happened; that as Elgar he had never got over Helen's departure and her not telling him herself that she was going to New Zealand had caused him immense pain. Also that he had coped so badly with Alice's death that he realised he had had to come back and have the same thing happen again. For he had already identified his wife Rosa Maria as the same soul as Alice Elgar, and clairvoyants in Portugal have also confirmed his sense that his beloved Rosa/Alice is now his main spirit guide.

Performing this regression left me one hundred percent convinced that the former Edward Elgar had now, at last, met his beloved Helen Weaver again. The experience was for me both unprecedented and fascinating, since I had to be the therapist, but also a major participant in the subject's story. Carla's presence, however, proved invaluable as she was able to give him some physical consolation while I sat back uttering with conviction the words that he was still needing to hear. For so often do we carry pain through from one lifetime to another, that Edward Elgar, now Eduardo, badly wanted Helen's assurance that she had always loved him, in spite of not feeling herself to be the right wife for him in that lifetime.

Almost as soon as we met, Carla and I were joking about the curious fact that the former Elgar was now in the same room as both his first and his last love, commenting that we ought to be jealous of one another! However, firstly, I am at present old enough to be Eduardo's mother and anyway have someone else in my life, and secondly—just as I had felt an immediate soul connection with Eduardo himself—so too did I with Carla. This could not be from the same lifetime, since Vera was not even born before Helen went off to New Zealand, but an inner voice told me that we had previously been sisters, and I now feel that that was in an earlier, South American lifetime.

Elgar was renowned for his fascination with gadgets and so—since we tend to do different things in each of our many lifetimes, albeit with certain recurring themes and characteristics—becoming a mechanical engineer on another occasion would make perfect sense. Besides having recognised his new partner Carla as a reincarnation of Vera Hockman, Eduardo has also identified a young friend of whom he is very fond as his previous daughter Carice, and his own younger son as Elgar's brother who was considered to be the most musically gifted member of the family but who tragically died young. And many of Eduardo's realisations have been corroborated by clairvoyants in Portugal.

One might wonder whether, believing myself to be Helen Weaver reincarnated, I should not now feel guilty about the pain that she caused her beloved by breaking off the engagement and then disappearing. The simple answer is that I believe in life plans, and I know that, without the suffering that Elgar underwent, some of the world's most beautiful music could never have flowed from his pen. (The wonderful fifth movement of Brahms' great *German Requiem* was written just after his mother had died.)

So, for me, this is a very touching story and, were Eduardo the only person ever to read my book (which is of course not the case—I have received numerous very favourable comments about it), writing it would now be proved to have been incredibly worthwhile. Nor is the story by any means over; for one thing Eduardo plans to return to England next year for the Three Choirs Festival in Worcester (where I intend for us to sit together in the cathedral for the performance of *The Dream of Gerontius*—a thing that Helen would so dearly have loved to have been able to do!); for another he and Carla have kindly invited David and me to visit them in Portugal (where he says that his house, which he designed himself, bears a remarkable resemblance to the photo in my book of Plas Gwyn, the Elgar family’s Hereford residence!). Since returning home, Eduardo has emailed me saying “You should be happy because you and your book have helped me to overcome the great pain that I was carrying inside me. And I feel that I am becoming prepared for something great in my life—something for the world!”



Here are a couple of the photographs that were taken in the grounds of Gloucester cathedral, following the Elgar Society's annual lunch, which Eduardo and his family attended with my husband and me. EE, who so greatly loved walking in nature, used to say "The trees are singing my music. Or have I sung theirs?"

Ann Merivale's book, *Life Without Elgar—A Tale of a Journeying Soul*, is published by 6th Books, John Hunt Publishing, at £9.99, and can easily be purchased either direct from the publisher or from Amazon.



New Media



Hello Me!

by Sheela Jaganathan



Hello Me! is a non-fiction book, find out how Kalina, a wife and mother-of-three, skeptical of alternative therapies, transforms her current life with lessons from her past lives.

Reconnecting with Sheela after moving to Singapore, Kalina hears about regression therapy—a self-inquiry method done through moderate trance. Her curiosity piqued, Kalina decides to try it out to find answers to her recurring life challenges.

The true-to-life stories in *Hello Me!* chronicles Kalina's outer and inner journeys as it does Sheela's own subtle transformations over a period of three years. The learning curve for both the therapist and the client was steep but the end result was extraordinarily fascinating and deeply life-changing. Kalina provides her own comments to Sheela's narrative and this greatly helps the readers understand the therapy process from both sides.

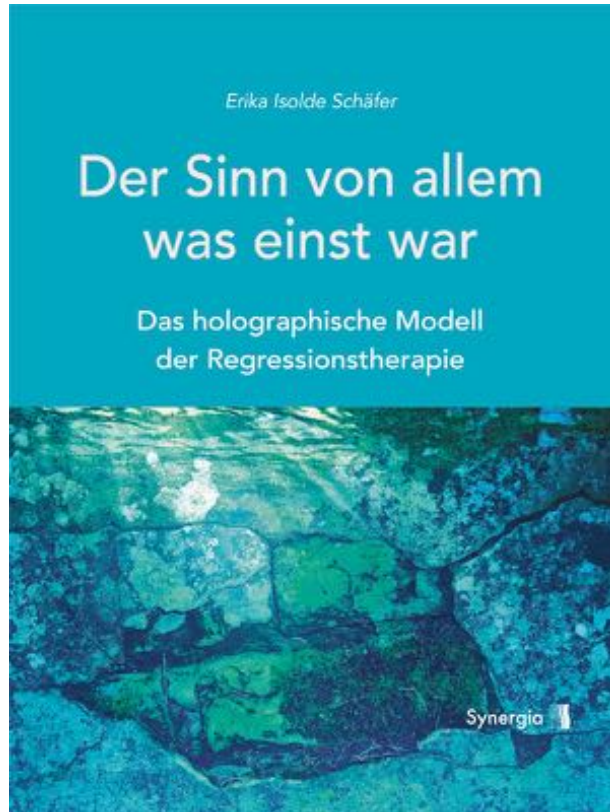
Asked about her motivation to write the book, Sheela replied, "I wanted to create more public awareness about the awesome effects of regression therapy, or any method that brings us closer to our own Truth and our own self-healing abilities. What we need nowadays is ample time, opportunity and the skills to go within to find solutions, instead of relying on quick external distractions to temporarily pacify our persistent problems. And in some strange way, compiling this book and getting it published was also a way to tie-up some loose ends from a previous life of mine, in which I was hung and decapitated for beliefs that went against the norm back then. I never grew up thinking I would become an author but I had to finish this project because the impetus came from deep within and it didn't stop until I completed writing the last word. Maybe, I was doing all this to prove to myself regression therapy does work, or that the spirit realm was a real possibility. Regardless, my journey with Kalina shows it is possible. Kalina's transformation not only impacted her, it also positively impacted those around her, including me. We wanted to show there was a way to connect with our heart intelligence to bring about real peace, to others and ourselves. This we did, despite our own initial skepticism.

Orders for *Hello Me!* can be sent to sheela.zedler@gmail.com or via www.omni-coaching.com.

Der Sinn von allem was einst war - Das holographische Modell der Regressionstherapie

The sense of all that has been - The holographic model of Regressiontherapy

by Erika I. Schäfer



In her third book "The sense of all that has been", Erika provides insights into her work and lays down her roughly 40 years of experience in Regressiontherapy.

She encompasses case reports, explains the therapeutic process and provides us thus with an easy-to-read textbook on Regressiontherapy.



256 pages, hardcover, 35.-Euro; published by Synergia in the German language.

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Upcoming Conferences



‘Unlocking Creativity’: Meet, Share and Learn at the Sixth World Congress for Regression Therapy

The World Congress for Regression Therapy WCRT6 is coming to Goa, India beginning on September 11th 2017. There are thousands of regression therapists working in India where the religious and cultural belief in reincarnation is strong, so this will be a major opportunity for regression therapists from all parts of the world to meet, share and learn from each other. This has been a major feature of previous congresses where the rare chance to encounter therapists from different cultures and different training has become achievable and has been highly valued. It is not just the quality of the workshops that has been so highly valued it has also been the social interaction that has been so memorable and rewarding, where new and lasting friendships with like-minded therapists have been formed.

The theme for this congress will be ‘Unlocking Creativity’, so appropriate as energetic changes continue presenting new challenges for the planet and humanity. It is no coincidence that it follows EARTH’s annual convention of 2016 which was based on ‘Inspiration’. ‘Unlocking Creativity’ is a wonderful theme providing workshops that suits these increased vibrational changes and designed to enable people to locate their own personal power and apply it in their lives. It is the right theme, in the right place, with the right people and at the right time. I hope that you will join us.

EARTH have been working together with our partners at Clover Leaf Learning Academy of Mumbai, to bring a high quality program at a high quality venue in Goa. The program of workshops have been developed by some very experienced trainers and therapists, which you can view here:

<http://www.regressioncongress.org/scientific/information/wcrt6-workshops-analytical-wcrt6.html>

As we approach the summer of 2017, there are still a few places available for regression therapists to join us at their venue, a five star hotel at one of the most attractive holiday destinations in the world, Goa. Beyond Goa, international travellers to the world congress may make more of the opportunity to visit other historic and holy places within the vast lands of India. I visited India last year as part of the preparations for this event and my most striking memory is of the hospitality of the local people and their smiling eyes. So smile India, smile. The world congress for regression therapy is coming to your shores.

You can find more information about the congress and can book your place here; <http://www.regressioncongress.org/>

I hope to meet you there

David Graham
President
EARTH

Authors

David Graham – has been a regression therapist since 2008 and a passionate advocate of the discipline since then. He is ever engaged in expanding his professional knowledge by learning new techniques and regression approaches. His goal is to help grow the public awareness of regression therapy and support the development of the discipline. He has been intimately engaged with the various projects of EARTH and, since June of last year, assumed the position of president of that organization.

Roger J. Woolger, Ph.D. - is a British-born Jungian analyst, past-life therapist and creator of Integral Regression Therapy. He holds degrees from Oxford and London Universities and the C.G. Jung Institute in Zurich. His book on past-life therapy, *Other Lives, Other Selves*, is considered a definitive work in the field. Dr. Woolger lives near Washington, DC and teaches throughout North America, Europe and South America. [Ed. note: bio is as reflected in the 1999 issue of the *Journal* which was the last article by Woolger in the *Journal*.]

Pavel S. Gyngazov, MD, - was born in Tomsk, (Siberia) Russia in 1947. In 1966, he graduated from medical college with follow-on post-graduate training from the Tomsk Medical Institute (now the Siberian Medical University). In 1976, he achieved the qualification of a general medical practitioner. He worked as an obstetrician from 1976 until 1983. Since 1983, after accreditation in sexology, infertility treatment and psychotherapy, Dr. Gyngazov conducted marriage counseling. He began working in the field of regression therapy in 1993. He developed an original technique of regression therapy (RT), which he called “The Guide and the Wanderer.” By March 2004, he conducted about 2000 session hours in this original RT and subsequently published a book detailing some of the results of this ground-breaking technique, *Roads of Lives: Essays on Regression Therapy*.

Tayat Striplung., Ph.D. in Psychology - has devoted his career in human resource development for over 25 years. He helped organizations and individuals develop their full potentials using psychology techniques in cognitive counseling and regression therapy, besides human resource development knowledge. In the past years, he conducted researches in regression therapy to find out impacts of the therapy to life quality improvement. He is a visiting lecturer at leading universities in Thailand. In addition to the research and academic field, he is a business owner and donates to help under-privileged persons.

Thawatchai Krisanaprakornkit, MD - is an associate professor of psychiatry and director at the Anam Cara Center for Wisdom-Compassion-Peace. As a psychiatrist who is interested in meditation and spirituality, he wrote systematic reviews about the results of meditation therapies in the Cochrane

Library and a *Textbook of Meditation Therapy in Psychiatry and Mental Health*. He was trained in past-life therapy by Dr. Brian L. Weiss in 2010 and provides regression therapy with biofeedback. He trains past-life regression therapy and Vajrayana Buddhism practice to Thais. www.anamcarathai.com

Paula Fenn - M.Couns, B.A (Hons), Grad.Dip Psychoanalytic Psychotherapy, Dip.Reggression Therapy, Dip.Past Life Regression, Cert.Hyp, Dip.Healing, Grad. Dip. Crystal Therapy, CGMA - is an accredited psychotherapist (BACP) in private practice in the UK and a graduate of the University of Notre Dame where she completed a Masters in Counseling. She obtained her diploma in regression therapy from the PLRA and is a member of the SRTA and a certified member of EARTH. Paula is the current chair of the EARTH Research Committee. She published a book based upon her phenomenological research in the realms of symbolism within the therapeutic relationship entitled *The Therapeutic Encounter with Spiritual Symbols*, (2012) and published a number of articles on grief, sexual intimacy and envy. After practicing in London as a management consultant and a Chartered Accountant she retrained as a Psychoanalytic Psychotherapist. When Paula's traditional psychotherapy clients began entering spontaneous past lives, she trained as a regression therapist. Paula is a faculty member of Earthworks Institute where she lectures on the fusion of mind, body and spirit, and shares with students her particular interest in the energetic intersect between client and therapist; more commonly referred to as the realms of transference and countertransference. She dominantly works with adult individuals presenting with complex traumas and personality disorders and integrates a synthesis of analytical, regression and energy based treatment protocols.

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Hans TenDam, MA, CRT, (1943) studied psychology and pedagogy at the University of Amsterdam. For 40 years of his professional life, he was an international management consultant in a.o. conflict resolution and strategic management. He discovered regression therapy by accident and has been teaching and training other people in it since 1983, originally in the Netherlands, later in European countries from Finland to Portugal, and further in Brazil, the USA, Turkey, India and Japan. Hans was a member of APRT, later IARRT, in the United States. He founded the World Congresses in 2003 and EARTH in 2006. His books are translated in several languages.

<http://www.tassointernational.com/books-of-hans-tendam>

Andy Tomlinson - is the founding director of the international Past Life Regression Academy (PLRT), which he established in 2000 to teach others to heal the soul by accessing the true source of emotional challenge and integrating healing through the whole person—physical, emotional, mental, and spiritual. The Academy has trained more than 300 therapists who now work and teach throughout the world. Andy, who is a psychologist,

psychotherapist, and certified regression therapist, is as passionate about healing as he is about establishing and maintaining the highest professional standards for regression therapy. He is a founding member of the *Spiritual Regression Therapy Association*, the *Earth Association of Regression Therapy*, and the *Society of Medical Advance and Research with Regression Therapy*. As the author of *Healing the Eternal Soul* and *Exploring the Eternal Soul*, and the editor of *Transforming the Eternal Soul*, Andy has shared his groundbreaking work and research in regression therapy, between life spiritual regression and energy techniques, further continuing the advancement and global understanding of these therapies.

For more information, visit www.regressionacademy.com.

Albert J. Marotta, MA, CHT - has maintained a successful private hypnotherapy practice in the Los Angeles area since 1982. Specialized areas include alternative hypnosis regression techniques including past lives, pre- & perinatal, releasement therapies (spirit, dark energy/demonic and E.T. influences) and several other transpersonal modalities. Marotta conducts, lectures, demonstrations, workshops and training sessions in basic hypnosis and advanced regression techniques. He has written professional articles and recently retired (2013) as a college professor of 42 years.

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R. Leo Sprinkle, Ph.D. - is professor emeritus, counseling services, University of Wyoming. He authored the book, *Soul Samples; Personal Exploration In Reincarnation and UFO Experiences*. (Granit Publishing) and published several encyclopedia entries; a half dozen book chapters; and approximately 50 articles on various topics, including; UFO research, ESP, reincarnation, spiritual emergence and counseling theory and practice. His ground-breaking pioneering research investigating the UFO "abduction" field began in the mid-1960s and set the standard for research in this controversial field of study. He was the subject of interviews on several national television programs and in 1980, founded the Rocky Mountain Conference on UFO Investigation (now in its 23d year). [Ed. note: Dr. Sprinkle has regressed/hypnotized thousands of clients with unusual memories, UFO sightings and abduction experiences. He participated in the research for one of the most sensational and well documented cases. For that set of very interesting regression/hypnosis sessions conducted by Sprinkle on this case, see the book by Stan Romanek: Romanek, S. (2011). *The Orion Regressions*. Colorado: Ethereal (LLC).]

Shirley Johnson - was trained as a past life regression therapist in 1991 and as a hypnotherapist in 1992. Her work encompasses private consultations, groups and workshops and has worked in many countries. She is an astrologer (since 1980), and a journalist for most of her life, with several long-running magazine columns and radio and television programs. Shirley is a past president of the Astrological Federation of Ireland, founded a Dublin healing centre, Astraea

Psychic Services, in 1995 and in 1997, co-founded (with colleague Ingrid Flanagan) IART, the Irish Association of Regression Therapists. She studied many holistic therapies, using aspects of these in her work where appropriate. She is a tarot reader and an artist, with an MA in Film Scriptwriting. Shirley was born in New Zealand, later moved to Ireland and now divides her time between these two countries.

Ann Merivale - started writing in 1993, after being told by the American clairvoyant Aron Abrahamsen (who had worked with the well-known prophet Edgar Cayce) that she had come “partly as a writer—to disseminate information on the spiritual life”. Her children were then aged eighteen, sixteen and thirteen and, since the youngest is adopted and half African, she was deeply engaged in anti-racist activities and other issues of justice and peace. Previously a romance linguist and strong Catholic, she became increasingly interested in healing and in 1998 obtained a diploma from the London College of Past Life Regression Studies. This was followed in 2001 by a diploma in Deep Memory Process therapy from Dr. Roger Woolger. She and her husband now live in Ludlow, Shropshire, but her main therapy practice is at the Ripon Natural Health Centre, N. Yorks. Her first book, *Karmic Release*, was published in 2006, *Enchanted Islands—Tales from the Galápagos* is her seventh, and (9 being the divine number!). The final two books are in the pipeline. The couple are blessed three grandchildren. A keen traveller, she finds nowadays that, whenever she feels an urge to visit a certain place, there is a reason for it connected in some way to her writing.

Sheela Jaganathan - Malaysia born-and-educated, Sheela is a regression therapist based in Singapore. She helps her client manage life challenges through past-life regression therapy and various other alternative therapy methods. Sheela previously worked as a litigation lawyer before going into the alternative therapy field. She graduated from Past Life Regression Academy, UK, with certifications in hypnosis, regression therapy and between lives spiritual regression and has been in practice since 2012. She is a professional member of the Spiritual Regression Therapy Association (SRTA) and the Earth Association for Regression Therapy (EARTH)—international institutions that educate and promote the benefits of regression therapy to the public. Sheela also does life coaching and akashic record readings.

Erika Schäfer - is a psychologist and one of the most well-known regression therapists in the German-speaking region. After receiving her diploma in psychology, Erika worked six years as a scientific assistant and lecturer at the University of Saarbrücken. She worked as an independent practitioner since 1965. In 1985, she started to research alternative therapeutic methods and began traveling the world to learn about the methods of healing in other cultures. She studied Shamanic healing with the Cherokee and the Hopi American Indians and learned Tibetan healing in India. She also employs

Astrology and the Human Design System in her therapy. In 1998, Erika founded The Therapeutic Center of Eisenbuch, which conducts treatment, teaching and research in regression therapy as well as Familyconstellation-Work and a combination of both. In addition to the present book, Erika wrote two more books: *Mama, glaub mir, ich habe schon einmal gelebt; Kinder malen ihre früheren Leben*. A book where children talk and paint drawings of previous lives; and *Nachtmeerfahrt der Seele; Regressionsaufstellungen mit Kindern und Erwachsenen*. The second book is a Regression-Familyconstellation-Work with children and adults. All of her books are published in the German language and soon will be available in Spanish.

Guidelines for Submission

The *Journal* welcomes submissions. Submissions may be made by e-mail to the editors at IntlJRT@gmail.com. Send a note if you have questions. Our guidelines are fairly standard and generally follow those practices observed by many other journals. Our preference is for manuscripts that do not exceed about 6,000 words (approximately 5–20 pages). Articles can include case studies, professional approaches or techniques, research, or editorial positions on topics of interest to the community. Smaller articles and those that are less formal should come in as a blog. The editors will help you decide which it should be.

Journal contributors are expected to observe accepted professional procedures in correctly citing sources of facts and ideas, when appropriate. Append a reference list to the articles that includes all citations made within the paper. The *Journal* staff has decided to use the APA (American Psychological Association) format, a general standard for articles in the social sciences fields. See the last article by Rich Stammer in the 2015 issue for an example of APA reference formatting. Use the in-article citations and place references at the end of the article. For other in-document annotations, parenthetical comments and the like, use page end notations, where appropriate, sequentially numbered starting with the number 1.

Submissions should include:

Title

Name and address of author(s), including e-mail address(s)

Indicate the software program used to create the document (example: “Produced with MS Word 97”)

A short current biography of the author(s) (75–150 words each)

A short abstract of the submission (75–150 words)

Media reviews should be about one page or less in length (single spaced). Include a thumbnail graphic of the media cover, which can normally be copied off of www.Amazon.com

Blog entries are one to two pages but may be more depending on topic (single spaced).

New Media should be approximately one page in length and indicate where the media can be purchased. Include a graphic of the author and a graphic of the new media (book, DVD, or other digital creations).

Formatting

Format wise, we have adopted the American Psychological Association (APA) format and referencing in the *Journal*. Not all the current articles are good

examples of that, but some are. We don't intend to get anal about this but will try to stay true to their rules, especially for the articles. I will make some comments as to format and standards at the back of this issue. The blogs, of course, are meant to be less formal and can also be a place for editorializing. If you do not know the format, do not let that dissuade you from submitting your articles, our consulting editors will help you with formatting. Additionally, if you are a author from the United Kingdom, (or where British English is used) then British English will do just fine.

Don't be concerned with formatting, the entries will be reformatted as necessary. The rule on formatting for a submitted article—the less the better.

You can do the following, otherwise, please don't add any spaces, indents, points after para., etc. I spend a lot of time taking out all these format items.

Preferred:

- 1) Single or double space with the font, Bookman Old Style, 12 points.
- 2) Do not add returns or point spacing between, before or after paragraphs. If you must add spacing, the Journal uses six points after paragraphs.
- 3) For other spacings it is easier for Journal editors to add the required amount.
- 4) Graphics are particularly problematic:
 - Don't lock the graphic to a particular place in the text. It may have to be shifted in the final Journal position.
 - In most Word editions, a graphic that is pasted in the document defaults to (in the layout selection) "in line with text." Change this to another option. In the same formatting window (layout) select "advanced tab" on the lower right and in the next window deselect "Move object with text" button at the bottom. This will allow the graphic to be moved freely within the document. If you have not changed the "in line with text" option this selection will not be available.
 - Text below the graphic or a title for the graphic should be placed in a text box (under the insert tab). When finished entering information in the text box, select both the text box and the graphic (by shift clicking) and group them together (on the Mac this is the "command - g" selection or right clicking to bring up the group command). This will save a lot of formatting headaches.
 - If all of this is too confusing, just send the graphics with the document with any title to the graphic or table and place an [insert graphic, title of graphic, here] placed in the correct location in the text.

- 5) References:

- Other than spacing and graphics, references require the most time reformatting. Use the example of the APA formatting in the Stammler article in the 2015 issue. Close counts.
- Avoid copying embedded hyperlinks in the reference citations if copying the reference citation from on-line or other digital sources. In that instance, use the “past special” command in Word. Formatting with an embedded hyperlink in a reference can be very difficult.
- Avoid adding spaces between entries.

6) Case studies/examples—therapist/client interactions:

- Since many of our case discussions and therapeutic techniques include client/therapist interactions, the Journal has a standard way of describing these interactions.
- When the therapist is speaking, begin the sentence with the word, “Therapist” for the first instance and then with a “T” thereafter. Place the questions and instructions by the therapist in italics.
- When the client/patient is speaking, begin the sentence with the word “Client” the first time and then with a “C” thereafter. Place the clients responses in normal font.
- For the therapist/client dialogue do not use quotes but format as indicated.
- If the therapist or author offers explanatory or parenthetical additions in the middle of the client/therapist dialogue, revert back to standard formatting.

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