

**Spiritual healing in search of an identity: analysis of
spiritual healers' own accounts of healing in Britain
from 1900 to 1965**

Teresa Smith

Supervised by: Professor Bettina Schmidt

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Abstract

Contemporary literature on spiritual healing, both academic and popular, often assumes that all spiritual healing is essentially the same and that there has been a gradual and developmental progression through time, from early religious and traditional healing, through the Holistic Health movement of the 1970s and 80s, to the ‘holistic milieu’ healing model described by Paul Heelas and Linda Woodhead (2005) as an integral part of New Age ‘spiritualities of life’. This research questions these assumptions and explores the background to contemporary presentations of spiritual healing by looking at the diverse range of spiritual healing modalities which were being practised in Britain between 1900 and 1965.

By focusing on the spiritual healers themselves and their own personal written accounts of healing, it is possible to gain an ‘insider’ view of what was considered at the time to be a non-standard activity and, in the majority of cases, a direct threat to orthodox medical and religious authorities of the period. The healers’ accounts represent examples of the major strands of spiritual healing practised between 1900 and 1965, and are analysed in terms of selected criteria, the results of which are displayed in table format in order to facilitate comparative analysis.

What emerges from this research is that there were two distinct types of spiritual healer: i) individuals recognised by their communities as having an innate ability to heal and often effecting remarkable cures; ii) those who become healers through theoretical study, embracing new worldviews, and learning techniques, with cures not being essential. Also notable was the extent to which all of the spiritual healers understood and interpreted their healing in terms of the specific social, cultural, religious and intellectual currents of their era, and how all sought to explain their healing using terms of reference compatible with the principal orthodox sources of authority of the period, namely science, psychology, medicine and Christianity. These findings would suggest the need for further research to explore how far these earlier healer types are still represented in contemporary spiritual healing in Britain or whether the holistic milieu model has, effectively, replaced all previous forms of spiritual healing.

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Chapter 1 Introduction

1.1 Introduction

Although the terms ‘disease’, ‘illness’, and ‘sickness’ have traditionally been used to signify the medical, personal, and social aspects (respectively) of human lack of health or well-being, and the concepts of ‘curing’ or ‘healing’ have been used to refer either to the eradication of measurable symptoms (curing) or to some more general betterment or return to functional well-being (healing), all of these terms, when applied to spiritual healing, can seem to take on much more fluid and interchangeable meanings depending on the specific context.

Indeed, when approaching the subject of spiritual healing in contemporary Britain, one immediately encounters what Heelas and Woodhead (2005) identify as the ‘holistic milieu’, the culmination of developments which began with the Holistic Health movement of the 1970s and 80s and the New Age, and is now most visibly identifiable as an array of approaches to personal well-being which emphasise spirituality, or subjective-life forms of the sacred, in contrast to traditional religious, or life-as forms of the sacred. The healing therapies which Heelas and Woodhead associate with the holistic milieu have in common as their focus concepts such as energy, subtle energy or inner life force (Heelas and Woodhead, 2005: 25).

Wouter Hanegraaff (1998: 43-46) similarly proposes that the healing therapies associated with the Holistic Health to New Age progression of movements should be considered as essentially a religious phenomenon, and more specifically as Western esotericism in a secularising context, concerned with religious meaning rather than curing disease. Also relating spiritual healing to a religious context, George Chryssides suggests that what distinguishes contemporary presentations of healing from older style traditional spiritual healing is that they do not ‘presuppose or seek to impose any particular belief system on their users’, but rather seek ‘to push science forward to some new paradigm which will more ably explain how healing is possible’ (Chryssides, 2000: 66).

In contrast to these religious interpretations of contemporary forms of healing, Daniel Benor begins from the assumption that ‘There is considerable evidence some individuals can heal themselves and others through spiritual healing’ (Benor, 2001: 25), and presents in his annotated bibliography of clinical research on healing a range of contemporary

healing modalities all of which have as their common element the concept of ‘energy’. Wayne Jonas and Cindy Crawford (2003) similarly draw together a broad range of ‘energy’ healing modalities in their systematic review of clinical research, *Healing, Intention and Energy Medicine*, as does *The Encyclopedia of Energy Medicine* (Thomas, 2010), which presents and describes more than sixty varieties of healing which rely solely or primarily on the use of ‘energy’ or ‘energies’ for their effects.

From such introductions to spiritual healing, holistic milieu healing or energy healing, there seems to be an underlying assumption that all such healing – past, present and, potentially, future – is essentially a progression and evolution of one and the same thing, any differences in presentation or detail being due to social, cultural, religious or medical-technological context, rather than to any substantial variation in mechanism or nature. Such an assumption is not unreasonable given that such forms of healing, which use no instruments, medications, manipulations, or even physical touch, are not easily measured, except in the end product or result - whether or not the recipient of the healing reports any benefit or change. Logic would then suggest that any healing which follows this pattern could reasonably be categorised under the umbrella term of ‘energy healing’ and be assumed to be the same thing.

However, neither the healers nor the literature surrounding healing necessarily confirm this as being the case. The literature surrounding spiritual healing appears to suggest the possibility of at least two quite distinct types of healing: i) that of the traditional spiritual healer, a special or gifted individual recognised by their community as having an innate ability to heal, and ii) the more contemporary presentations of healing which have evolved from Holistic Health and New Age healing into the holistic milieu model, something more widely practised (often in a professional capacity), and by a wider and more general section of the community. Further, from the literature surrounding each model of healing, it may be possible to extract a set of attributes or key criteria which can be used to distinguish between the two types of healing.

This dissertation proposes that in order to understand or evaluate contemporary forms of spiritual healing in Britain, it is first necessary to have at least an overview of what preceded it. 1900-1965 is the period immediately preceding the developments which began with the Holistic Health movement in the 1970s and have culminated in the holistic milieu model of healing described by Heelas and Woodhead. And although few, if any, of the healers who were practising during the period 1900-1965 would still be alive today (and if they were, their understanding of spiritual healing would also have been influenced

by the ideas which have evolved into the holistic milieu model of healing), many of these healers *did* write and publish accounts of their healing, specifically with the intention of explaining spiritual healing as they experienced and understood it. By examining a selection of these 1900-1965 spiritual healers' accounts and analysing them according to a set of criteria which, based on the literature in Chapter 2, can be used to distinguish between the two different types of healing, this dissertation proposes that it may be possible to identify a wider variety of subtly different types of healing than is generally thought to be the case, and that this in turn could facilitate a deeper appreciation of the variety of spiritual healing which exists in Britain today, either in addition to, or possibly subsumed within the holistic milieu model of healing. The aim of this dissertation, then, is to establish the identity of spiritual healing in Britain during the period 1900-1965 and prior to the appearance of contemporary forms of 'energy healing', by examining published accounts of healing written by spiritual healers who were well-known and practising during this period.

The dissertation is arranged into six chapters: Chapter 2 reviews the literature on spiritual healing. The first section (2.1 *Spiritual healing*) focuses on literature surrounding the traditional spiritual healing model of healing, and the second section (2.2 *Holistic milieu healing*) reviews the literature surrounding the contemporary forms of healing which have evolved into the holistic milieu model of healing. Chapter 3 provides an overview of the social, cultural, intellectual and religious background of the 1900-1965 period in Britain, in order to establish the wider context in which the spiritual healers in this study were healing and writing their accounts. Chapter 4 introduces each spiritual healer in turn with brief biographical details, followed by an overview of their account(s) of healing examined according to the set of key criteria which will have been established from the literature in Chapter 2. The data extracted from the healers' accounts is then displayed in a series of tables, in order to facilitate comparison and to highlight any similarities, differences, or patterns. Chapter 5 uses the data extracted from the spiritual healers' accounts to explore the degree to which the healers were both influenced by, and also themselves influenced and contributed to the socio-cultural context in which they were living. Chapter 6 reflects on the research outcomes and draws conclusions relating to the initial questions set out above.

For the purposes of this dissertation, certain terms are used interchangeably and with no difference in meaning. These terms are: illness/sickness; healing/spiritual healing; and

healer/spiritual healer. The next section (1.2 *Methodology*) outlines the approach taken and the methods used to accomplish this research.

1.2 Methodology

Having identified in section 1.1 the problem that much contemporary discussion and understanding of spiritual healing is based on a model of healing frequently referred to as ‘energy healing’, and that this model of healing originates from, and is primarily associated with, the Holistic Health - New Age - holistic milieu progression of movements which began in the 1970s, but has roots traceable to the late 1960s, this research proposes to compare the contemporary holistic milieu model of healing with traditional forms of spiritual healing which were being practised in Britain prior to 1965, with the aim of understanding whether all forms of healing have indeed always been one and the same thing, or whether there may be greater variety within healing than is generally assumed.

The time period 1900-1965 has been selected in order to focus on the twentieth century, but at the same time to exclude the influence of Holistic Health/New Age/holistic milieu developments. However, given that any healers who were practising between 1900 and 1965 were unlikely to be still living, and if they were still living, they would themselves have been subject to the influence of contemporary models of healing, it was decided to examine spiritual healers’ accounts of healing which were written before 1965. A cut off date of 1968 was chosen to allow for time delays of publication processes, and in some instances a small number of supplementary documents published later than this date have been used during the study where this has served to further clarify what is written in the healers’ accounts.

Search for healers’ accounts

The criteria for selection of the healers’ accounts were: that the healer was active and/or influential in Britain during the period 1900-1965; that their account was published prior to 1968; that the account would have been widely read, and therefore influential; that copies of the accounts were still available and accessible for the purposes of this study; and that the contents of the healers’ accounts included detailed explanations of their understanding of the nature and mechanisms of spiritual healing.

The searches for suitable healers were based on the following sources: spiritual healers referred to by name in any of the Church of England’s inquiries into healing carried out between 1900 and 1965 (Church of England, 1914; 1924; 1958); spiritual healers referred to by name and discussed in the *British Medical Journal* between these dates; contact was

made with contemporary healing organisations which were founded before 1965 to ask if any of their early healer members were known to have published accounts of healing; note was also made of healers who were referred to by name in other healers' accounts as having been influential. From these sources a list of potential spiritual healers was formed.

Selection of healers

As the resulting number of spiritual healers was too large, selection had to be made in order to reduce this to a more manageable number, given that the healers' accounts would need to be examined in some depth. It was also noted that the healers fell into five categories – Christian healers, Spiritualist healers, New Thought healers¹, Christian Science healers, and Esoteric healers, plus a further category of Independent healers who were particularly eclectic and did not easily fall into any of the other categories.

The healers were reduced in number to three healers for each category for the Christian, Spiritualist and New Thought healers, by selecting those healers who were most representative or typical of each category type. However, the Christian Science and Esoteric healer categories only have one healer in each. The reason for this is that the works of the two authors (Mary Baker Eddy and Alice Bailey, respectively) were so definitive of their category that they were not simply the *authoritative* texts referred to by healers in the style but, in practical terms, were the *only* texts referred to in that style of spiritual healing, with all healers in that category not only practising according to its text, but effectively just repeating its contents. In addition, although Mary Baker Eddy (1821-1910) was earlier than the other healers, and almost outside of the 1900-1965 period, she was included due to the very significant and enduring influence of Christian Science healing throughout 1900-1965, given that reference was made to Christian Science and/or Mary Baker Eddy by almost all of the healers who gave evidence to the Church of England inquiries into healing, and also extensively in the *British Medical Journal*. For the Independent healers, it was felt that two examples were sufficient in order to demonstrate the eclectic nature of spiritual healers of the period.

¹ The New Thought movement is a diverse and loosely affiliated collection of religious communities which originated in the United States in the last quarter of the nineteenth century, and have in common an idealistic theology, an optimistic worldview, and an emphasis on religious rituals that focus on personal well-being, health and material success (DeChant, 2005: 6582).

Key criteria for analysis

The criteria for analysis of the healers' accounts were selected by comparing the holistic milieu model of healing and the traditional spiritual healing model (discussed in Chapter 2 *Literature review*) and identifying eleven key criteria which differed significantly enough in each model to be used to distinguish between the two models of healing. These key criteria are set out in table 4.1. By analysing the healers' accounts according to these key criteria, it was possible to identify how far each healer resembled either the spiritual healing or the holistic milieu healing model.

The main difficulties encountered were issues involving the language and idiom used by the different healers. This was mainly due to a lack of a common set of terms of reference across the different categories of healers, which resulted in healers using the same or similar terms to refer to potentially different things, or using different terms when possibly referring to the same or similar things. The same was true of their differing worldviews – the healers each interpreted their healing experiences according to their own worldview, which made detailed comparison more difficult.

Chapter 2 Literature review

Having clarified in Chapter 1 the distinctions between healing and curing, and how these two terms have been used in relation to disease, illness and sickness in Western culture, this chapter will review a range of literature surrounding the practices of spiritual healing and holistic milieu healing.

Although these two practices can appear very similar on first examination, it is indeed the literature surrounding spiritual healing and holistic milieu healing, and the ways in which each has been investigated and evaluated, which most accurately reveal the distinct nature, identity and purpose of the two models. The paucity of academic literature specifically examining spiritual healing as a phenomenon in and of itself is mainly the result of spiritual healing having been regarded always as part of something else, be it a culture, a religious tradition, ritual, shamanic or similar practice, or spiritualism. This survey will, however, show that when spiritual healing *has* been approached and/or defined, it has been almost exclusively in terms of its authenticity and with the questions ‘Does it work?’, and if so, ‘How does it work?’. Holistic milieu healing, by contrast, has been examined quite extensively, but almost exclusively in theoretical, religious, socio-cultural or philosophical terms, with little or no relevance attached to any perceived efficacy.

2.1 Spiritual healing

The figure of the healer

Of the many contemporary definitions of ‘spiritual healing’ given by major healing organisations in Britain (British Alliance of Healing Associations, 2017; Confederation of Healing Organisations, 2017; National Federation of Spiritual Healers, 2017; Jewish Association of Spiritual Healers, 2017), all focus on certain common features: that spiritual healing usually involves two people, the healer and the recipient of the healing; that it can take place either by contact or at a distance; that there is some energy or power involved that is greater than either the healer or the recipient; that the healer acts as a conduit or channel for this power; and that the resulting effects are beneficial for the recipient. Among contemporary writers on spiritual healing, be they practising healers writing about healing for a general audience (e.g. Bek and Pullar, 1995; Woodward, 2004;

Mark, 2009; Bengston, 2010), or researchers focusing on specific elements of spiritual healing such as cultural presentations (Krippner and Welch, 1992), clinical potential (Benor, 2001), or legal implications (Frohock, 1992), there is a tendency to make reference both to the ancient and ubiquitous origins of spiritual healing and to the innate and natural ability of certain human beings to heal others. The implication thus made is that the process of spiritual healing, and in particular the figure of the spiritual healer, is not a recent development, but rather a constant feature of human existence.

Healing undoubtedly is, and has been, a primary preoccupation of human cultures for as long as disease, illness and sickness have been part of the human experience, and it is not uncommon for the most important figure or symbol within a given community or religious tradition to also be the source of healing (Sullivan and Sered, 2005: 3808). Stanley Krippner and Patrick Welch identify four presentations, or culturally defined models, in which spiritual healers commonly appear: shamans and shamanistic healers; priests and religious healers; mediums and spiritists; and sorcerers and witches (Krippner and Welch, 1992). However, although varieties of spiritual healing may appear superficially different, depending on the specific cultural, religious or technological context in which they occur, or on the culturally defined myths and beliefs associated with the origins of disease and what would constitute a return to health, the figure of the spiritual healer is always the individual recognised by his or her community as the 'special' or 'gifted' individual who possesses the power and/or knowledge to either effect or negotiate a cure. And regardless of the supposed causation of the disease or illness (natural, divine, spirits, sin, impurity, bad social relations, etc.), the healer is commonly understood as the person who intervenes at the stage of diagnosis and cure (Sullivan and Sered, 2005: 3809-3810).

Although details may vary according to cultural, religious, or technological situation, certain key attributes do seem to be frequently associated with the figure of the spiritual healer. The healer i) is an individual who is special or gifted in some way; ii) is recognised as such by the surrounding community; iii) has the ability to effect cures by whatever means necessary to restore a person to health; and iv) depends on continued demonstration of the healing ability for ongoing validation of the status of healer. However, beyond these observations on the nature of spiritual healing, there is a notable lack of academic literature on the subject. Two possible reasons for this may be firstly, that an almost defining characteristic of spiritual healing is its mystery and elusiveness, which makes academic analysis difficult, and secondly, when spiritual healing *is* studied, it is generally being considered as part of something else, and in the case of Britain (and

certainly during the period 1900-1965) spiritual healing was frequently associated with Christianity, and in particular with the biblical healing miracles, with the figure of Jesus as the model template for all healers.

Mystery and elusiveness

Association of the spiritual healer with the miraculous or extraordinary is found, according to Howard Clarke Kee (1986) as early as ancient Greek and Roman times when healing was sought from miracle-working gods and goddesses of the first two centuries BCE, with cults being formed around healing figures such as Asklepios, Isis, and Serapis (Kee, 1986: 67). Kee also points out that during this period miraculous healing, involving some form of intervention in the natural order, divine or otherwise, was one of three approaches for seeking cures, alongside medicine and magic (Kee, 1986: 126-127). Morton Kelsey adds that the powers called upon by the miraculous healer could be beneficent, maleficent, or neutral, but that the end result or cure brought about by the healer is what defines the healing as being miraculous (Kelsey, 2005: 6055). Kenneth Woodward (2001) further describes miraculous healings as being common to the scriptures of all major world religions, and suggests that although the implied message and religious significance may vary, the healings themselves generally serve to demonstrate evidence of power, be it divine or evil (Woodward, 2001: 24).

However, the cause and modes of action of the miraculous remaining unknown was not universally acceptable from the European Enlightenment onwards, with philosophers such as David Hume arguing against miracles being accepted by the rational person, and condemning such belief as an instrument for religious mystification and control of the people (Grosso, 1997: 187), something further reinforced by the development of modern psychology. This continued to be the case until the twentieth century, when developments such as the rise of spiritualism and the study of psi phenomena, parapsychology and human consciousness began to suggest the possibility of discovering an empirical basis for claims of healing miracles as interventions which do not necessarily violate natural law, but rather require a new model of natural law (Grosso, 1997: 188).

By contrast, and regardless of Enlightenment rationalism, miracles, healing or otherwise, have continued, throughout the modern era and into the present time, to be demanded by the Catholic Church, as an essential requirement for the formal recognition of sainthood. From the late sixteenth century onwards, no person could be declared a saint

without their having worked miracles verifiable by science, and as science has advanced, so too has the level of scientific scrutiny of such miracles (Duffin, 2009: 16-18).

The mysterious, elusive, and even miraculous, then, has been sought as a means to healing from the earliest of times, through modernity, and to the present, and an element of the mysterious and miraculous remains therefore strongly implied, or at least desirable, in the figure of the spiritual healer.

Biblical healing and the Jesus template

Kee describes the figure of the spiritual healer as already well established in pre-Christian times, as much in the context of the Graeco-Roman world and in the Hebrew Bible (Kee, 1986: 9) as in Jewish apocalyptic texts (Kee, 1986: 70), and outlines the connections of sickness itself with magic or with the demonic (Kee, 1986: 19-21). Kelsey also points to the very explicit accounts of healing by divine intervention through a chosen agent which are found in Elijah's healing of the widow's son (I Kings: 17), in Elisha's restoring to life of the Shunamite woman (II Kings: 4), and in the curing of leprosy (II Kings: 6), as well as to the connections between sickness and sin or the idea of sickness as the displeasure of, or a breach with, God or gods (Kelsey, 1995: 29, 87).

Throughout the New Testament gospel accounts of Matthew, Mark, Luke and John, the figure of Jesus is portrayed as a healer, miracle worker and exorcist, and the continuing ability of the followers of Jesus to perform similar miraculous healings is described throughout the Acts of the Apostles. However, despite the explosion of miraculous healing through Jesus and his followers, Gary Ferngren (1992: 7) maintains that writers of the second and third centuries had concluded that such healings were no longer seen in the Christian Church, and Amanda Porterfield proposes that the role of healing by Christians had shifted from the miraculous cures performed by individual Christians to a generalised caring for the sick (Porterfield, 2005: 50-51). Jacalyn Duffin (2009) also suggests that as Christianity developed and spread, healings in the style of Jesus and the apostles became only associated with saints, relics, sacred objects and pilgrimages to holy sites.

Porterfield similarly points to the differing views during the later development of Christianity on the exact nature and theological significance of the healings performed by Jesus and by those who followed him, in particular the views of Martin Luther (1483-1546), John Calvin (1509-1564) and other reformers of the sixteenth century for whom miracles were not part of a modern Christian faith, and later those of New Testament

scholars such as Albert Schweitzer (1875-1965) and Rudolph Bultmann (1884-1976), who both rejected the ‘magical’ aspects of the New Testament accounts in favour of the moral and transformational significance of Jesus’ healings (Porterfield, 2005: 23-26).

Regardless, however, of this decline in the early Christian centuries and the scepticism of the Enlightenment and Reformation, throughout the nineteenth and twentieth centuries there has been a significant movement, in particular within the Anglican Church, which has understood spiritual healing in terms of the continuation of a specifically Christian ‘healing ministry’. Although beyond the scope of this dissertation, writers such as Morris Maddocks (1995), Morton Kelsey (1995); James Robinson (2011); Ronald Kydd (1998) and Francis MacNutt (2005) describe this movement in detail, as does the Church of England’s own work *A Time to Heal* (2000). What remains significant, though, for this study is the influence on British culture between 1900 and 1965 of the biblical figure of Jesus as healer and miracle worker, something which will be seen reflected in the healers’ accounts examined in Chapter 4, all of which make reference to Jesus of the New Testament as the model healer.

Healers tested

If the figure of the spiritual healer, although mysterious and elusive and often carrying either religious or magical overtones, was well established in the Western mind by the modern period, with the validation of healers’ efficacy being judged by popular approval of those seeking cures (except in the case of potential miracles, which came under the scrutiny of religious authorities), the late eighteenth and early nineteenth centuries, by contrast, began the investigation of spiritual healing on more scientific terms, something which would continue to be the primary (and often only) approach to evaluating spiritual healing right up until the present time.

The turning point for spiritual healing, from being evaluated by religious authorities or by popular opinion to being evaluated on more scientific terms, was to a large degree the result of physician Anton Mesmer’s work *Memoir on the Discovery of Animal Magnetism* (1779), in which he expounded his theory that sick people could be cured by the application of a magnetic force which he termed ‘magnetic fluid’ and believed to be the foundation of all life, the interruption or impairment of which was the cause of disease (Crabtree, 2016: 223). Mesmer’s ideas were taken further by his student, the Marquis of Puységur, who maintained that patients could experience even greater degrees of healing if

they fell into a particular kind of ‘magnetic sleep’ or hypnotic state during their treatment (Puységur, 1784), a state which appeared to have the additional effect of enabling patients to access alternative states of consciousness and knowledge.

Adam Crabtree views Mesmer’s animal magnetism and Puységur’s magnetic sleep as pivotal in the development of modern psychology and psychotherapy (Crabtree, 2015: 190) and suggests that psychical research, including the establishment of the Society for Psychical Research in Britain in 1882, came about as a direct result of animal magnetism’s influence on the occult medico-philosophical tradition in Germany, together with ‘magnetic magic’ and spiritism in France and the development of spiritualism in the United States (Crabtree, 2015: 192). It would follow from Crabtree’s view, then, that Mesmer’s animal magnetism was the point where spiritual healing was no longer confined to the religious domain, but also became part of Western occulture and, therefore, subject to scientific investigation.

The popularity and rapid spread of Mesmer’s healing and related practices attracted considerable reaction from religious, medical and esoteric sources, and by the beginning of the twentieth century, numerous works could be found either attempting to explain spiritual healing in technical, science-like terms, for example, *The Science of Psychic Healing* (Atkinson, 1906), or alternatively from religious sources, such as *The Science of Divine Healing in Judaism* (Moses, 1916) and *Christian Science and the Catholic Faith* (Bellwald, 1922). The first of these three works gave detailed explanations of healing as being either magnetic, mental or spiritual, whilst both of the latter two strongly rejected the new forms of healing and maintained that the only genuine healing was divine healing.

Through the twentieth century, the reaction to spiritual healing and to spiritual healers was one of scrutiny and testing, almost exclusively in terms of efficacy – if it worked, it was genuine and if it did not, it was fraudulent. Scrutiny by the medical profession is reflected in the number of articles, reports and correspondence which appeared each year in professional journals such as the *British Medical Journal* discussing spiritual healing in its many forms – mesmerism, faith healing, Christian Science healing, spiritualist healing etc. – and in terms of whether it was of therapeutic value or just ‘quackery’. Peaks of such published discussion coincided with peaks in public enthusiasm for spiritualism and spiritual healing between 1909 and 1914 and then again from the mid 1950s onwards with the rise to prominence of healers such as Harry Edwards.

Similarly, the Church of England commissioned a series of investigative inquiries into spiritual healing in response to these same peaks in popularity, gathering evidence from a wide range of sources and cases of healings, and publishing a number of reports (Church of England, 1914; 1924; 1958).

Early sociological investigation took two forms. The first, used by Leslie Weatherhead in *Psychology, Religion and Healing* (1955), was that of providing descriptive accounts of healing, from the earliest forms of healing, New Testament models, mesmerism, hypnotism, suggestion, religious laying on of hands, psychic phenomena, and intercessory prayer, to the psychology of Freud and Jung, the role of emotion in sickness and healing, and the relationship between religion and healing. The second form of sociological investigation was that used by D. Caradog Jones in *Spiritual Healing: An Objective Study* (1955), which was based on observational study of the practice of spiritual healing followed by analysis of individual case studies, together with a summary and evaluation by the author.

What is common to all of these investigations is the implied assumption that efficacy is essential to the definition of spiritual healing. The assumption is that if spiritual healing is found *not* to effect a cure or change, then it can no longer be considered to be spiritual healing but rather the healer is false or fraudulent.

Investigation over more recent decades has become almost exclusively scientifically focused, with three notable developments: i) many forms of healing – spiritual, spiritualist, faith, psychic, mental, Reiki, Therapeutic Touch, etc. – have been grouped together under an umbrella term of ‘energy healing’ and assumed to be one and the same thing; ii) investigations have been primarily in the form of clinical trials, with the aim of establishing scientific quality evidence for or against and of assessing the degree of the placebo effect; and iii) mechanisms of action are also now being investigated.

Scholarly meta analysis of clinical evidence has produced varied conclusions, from studies suggesting insufficient evidence and lack of scientific or rational basis (Ernst *et al.*, 2006) or flawed research methodology (and even in some cases scientific misconduct in manipulating research data) (Ernst, 2006), to those produced by researchers such as Daniel Benor who, although initially sceptical of the clinical validity of spiritual healing (Benor, 2001: 2), has since the early 1990s become one of spiritual healing’s most prominent promoters, collecting together an extensive volume of clinical trials and evidence and

exploring the uses and potential uses of spiritual healing, including in the treatment of mental health (Benor, 2001; 2002).

Ground-breaking investigation by James Oschman (2000) into the mechanisms of spiritual healing have provided scientific models which Oschman suggests could explain the 'circuitry' and 'energy fields' of the human body which may be being influenced during spiritual healing. Wayne Jonas and Cindy Crawford (2003) have taken this further still by collecting together existing research models of the possible (multiple) mechanisms of action of spiritual healing and suggesting new methodologies for investigating 'energy' and 'intention' when applied to healing. Similarly, Gary Schwartz (2007) has collected evidence from healing experiments and trials in order to present a model which explains human beings as existing in energetic interaction with each other and with the surrounding environment.

The definition of spiritual healing and the validity of the spiritual healer, then, has gone from being a mysterious and elusive phenomenon, scrutinised by popular opinion or by religious authorities, to most recently being scrutinised by the authority of science, with the overriding conclusion remaining always the same - to be genuine, spiritual healing must be effective.

2.2 Holistic milieu healing

Although it may appear very similar to spiritual healing, holistic milieu healing, from its very earliest presentations within the Holistic Health movement of the 1970s and 80s, to more recent descriptions such as the one offered by Paul Heelas:

...associational activities, of a group or one-to-one variety, run by mind-body-spirit practitioners, which take place within their own self-contained contexts rather than within and with reference to broader institutional contexts like schools or businesses. (Heelas, 2006: 47)

has, over the course of more than three decades, been shown to have its own distinct identity, and a more significantly developed philosophical, theological and esoteric depth than was initially attributed to the earlier Holistic Health therapies.

Holistic Health to New Age

A number of early studies of what is now referred to as holistic milieu healing have been identified by Daren Kemp (2004) in a number of published doctoral theses. These include *A Place for Healing: An Ethnography of Holistic Health Practitioners in Southern California* (English, 1985), which considers the role and status of Holistic Health healers, and *Cult and Countercult: A Study of a Spiritual Growth Group and a Witchcraft Order* (Scott, 1980), a study of countercultural groups seeking alternative meanings, together with two US theses, *Consciousness Shifts to Psychic Perception: The Strange World of New Age Services and their Providers* (Roberts, 1989) and *Legitimation Strategies of an Alternative Health Occupation: The Lay Holistic Health Practitioner in the Bay Area* (Brown-Keister, 1982), both of which examine what was at the time a growing interest in alternative approaches to, and definitions of, health.

Meredith McGuire's study of *Ritual Healing in Suburban America* (1988) explores the renewed interest in a range of folk and traditional forms of healing by a well-educated, middle-class sector of society, and the diverse ideas about health, causation of illness, diagnosis, and healing among those who were using these non-mainstream healing therapies.

Three subsequent works which draw together a network of ideas about health and healing under the term 'New Age healing' are i) William Bloom's *The New Age* (1991), which is an anthology of excerpts from key writers who significantly influenced New Age ideas on health and healing, among them Carolyn Myss on 'energies', Alice Bailey on

esoteric healing, and Alan Young's description of healers' techniques; ii) James R. Lewis and J. Gordon Melton's edited collection *Perspectives on the New Age* (1992), which identifies New Age healing as part of a wider movement and shift in modern culture and includes Catherine Albanese's chapter on healing as the continuing link between Mesmer's animal magnetism, Swedenborg's mystical journeying, twentieth-century neo-shamanism, and contemporary presentations of Reiki healing (Albanese, 1992: 84); and iii) *New Age Almanac* (Melton, Clark and Kelly, 1991), which describes an array of seemingly unrelated healing techniques which can be termed New Age based on the shared key elements: transformation; holism; an eclectic approach employing multiple techniques; insistence on individual responsibility for health and healing; the human being as a total system of mind, body and spirit; and disease occurring when balance is lost or energies blocked (Melton, Clark and Kelly, 1991: 169-170).

In all of these early studies, Holistic Health and New Age healing are presented as a popular, positive lifestyle orientation, the ideas of which were also widely disseminated at the popular level in publications aimed at increasing public awareness of the range of new healing options available. Examples of such publications include: *A Complete Guide to Therapy* (Kovel, 1978), *The Whole Truth* (Coward, 1990) and *The Way of the Shaman* (Harner, 1990), as well as more negative reviews such as Douglas Groothuis' *Unmasking the New Age* (1986) which rather rejects New Age ideas as occult distortions permeating health and healing and as a threat to Christian 'truth'.

Self-spirituality and esoteric healing

Widely accepted by the 1990s as a recognisable and significant movement, the New Age and its associated healing therapies and techniques were studied and described in a number of doctoral theses, published and unpublished (Bochinger, 1994; York, 1995; Rose, 1996; Corrywright, 2001), however the two landmark academic works of this period were Paul Heelas' *The New Age* (1996) and Wouter Hanegraaff's *New Age Religion and Western Culture* (1998).

Heelas focuses on New Age as a form of 'self-spirituality' and on its associated healing practices as a means of 'working within to find the authentic self' (Heelas, 1996: 76), as well as on the two key New Age practices of education and healing, both of which aim to correct wrong socialisation suffered in modernity (Heelas, 1996: 77) and to bring about

‘spiritual healing for a sense of vibrant well-being’ (Heelas, 1996: 75). Describing healing in the following way:

The basic idea is simple. The spiritual realm is intrinsically healing. Healing comes from within, from one’s *own* bodility-as-spirituality/energy...The crux of the matter, it then follows, lies with getting in touch with the spiritual realm. (Heelas, 1996: 82)

Heelas maintains that, in essence, the entire New Age has to do with healing, that healing is one’s own responsibility, and that healing practices can be recognised as New Age according to the relative importance they give to inner spirituality (Heelas, 1996: 81). For Heelas, external sources of authority have no place in New Age healing, although New Age healers do exist to heal those who are unable initially to do any work on themselves (Heelas, 1996: 83).

In his survey of major trends in what he views as *New Age religion*, Hanegraaff (1998) identifies ‘healing and personal growth’ as being a constellation of alternative therapies which distinguish between curing of disease (the realm of scientific medicine) and healing of illness, illness being the complex psycho-social and spiritual condition of a sick person (Hanegraaff, 1998: 43). Hanegraaff’s philosophical-literary approach to analysing New Age distinguishes between two strands: Holistic Health, which is concerned with physical health and healing, and Human Potential, which is concerned with psychology and transpersonal psychology or altered states of consciousness (Hanegraaff, 1998: 48). Holistic Health and Human Potential together constitute what Hanegraaff considers to be a form of religious healing due to the relevance assigned to the whole context (physical, psychological, spiritual and social) of illness, rather than only to the disease itself, to the extent of carrying at least implicit salvational overtones (Hanegraaff, 1998: 45). Of most significance, though, is Hanegraaff’s tracing of the key features of New Age healing (energies, correspondences, holism, transformations, etc.) to the historical development of Western esotericism, through the Renaissance, Enlightenment, Counter-Enlightenment, Romanticism, occultism, Theosophical and other esoteric movements of the twentieth century, effectively showing New Age healing to be a form of secularised esotericism (Hanegraaff, 1998: 517).

Catherine Albanese (1999; 2000) takes a broadly similar view that New Age healing is a religious-esoteric expression, and in particular that the energy equivalence of spirit is nothing new, but is found throughout both religious and metaphysical thought (Albanese, 1999: 308). Albanese further argues that although spiritual healing and subtle energies are the dominant model in New Age healing, the subtle energy body model can be traced

directly to the theosophical philosophy of nineteenth- and early twentieth-century America (Albanese, 2000: 42-45).

Two views, however, which reject the idea of New Age as a significant movement are those of M.D. Faber (1996) and Steven Sutcliffe (1997; 2003; 2008). Faber's psychoanalytical critique regards New Age thinking as

...essentially *regressive* or *infantile* in nature...absorbed...in matters of symbiotic merger, omnipotence, narcissistic inflation, and in magical thinking and wishing generally...it seeks to restore the past, specifically, the before-separation world, in an idealized, wish-fulfilling that has little or no connection to the adult estate. (Faber, 1996: 15)

and suggests that it has taken up the idea of 'transformation' in Jung and downgraded it towards magical, occult, simplistic practices (Faber, 1996: 15). Sutcliffe, on the other hand, recognises the New Age, but introduces the idea of 'seekership', maintaining that regardless of a body of diverse ideas, the New Age does not itself exist as a movement, that the New Age is an etic term applied by academics and generally rejected by practicers (Sutcliffe, 2003: 9-10), and that what is referred to as the New Age is rather a network of 'seekers' associated by a variety of common interests, healing being one of these. Sutcliffe maintains that the concept of 'seekership' is crucial to the structural dynamics of New Age phenomena (Sutcliffe, 2008).

To define what New Age healing is in practical terms, George Chryssides (2000) distinguishes between curing in older forms of spiritual healing and healing in New Age forms, and Stuart Rose explains that what defines healing as specifically New Age rests in the motivation behind the healing – if there is an effort to reach the 'Higher Self', and if this is accompanied by feelings of unconditional love, compassion and a sense of self-responsibility, then the healing can be described as New Age, but if the same techniques are used to simply fix or cure, then the healing is not New Age (Rose, 2000: 79). Matthew Wood (2000) further adds the context of the healing as being either aligned spirituality (religious healing) or that of non-aligned spirituality (New Age healing), and Marion Bowman (1999) notes the rise in new healing professions in the spiritual marketplace and the growth of credentialism and adoption of a business model in the sector of healing associated with the New Age.

As for the healing ability itself, in terms of skills and techniques, Ellie Hedges and James A. Beckford (2000) describe the importance of courses, workshops and seminars which participants may join initially for self-healing, but which may consequently lead to them becoming healers themselves. Concepts taught in such courses and workshops include the human energy field and the concept of holism, together with the practical

sensation of the body's energy fields and the techniques for influencing them (Hedges and Beckford, 2000: 177). One extreme objective of New Age healing encountered by Ruth Prince and David Riches (2000) in their study of the New Age in Glastonbury was the belief in physical immortality as the ultimate objective of healing. And although by no means a universally accepted belief in Glastonbury or within the New Age as a whole, Prince and Riches remark that 'For a doctrine to declare that a person can choose to remain indefinitely within one physical body that does not decay is very striking, for it implies...the appropriation by the human individual of an ultimate control' (Prince and Riches, 2000: 104), something which echoes Hanegraaff's suggestion that New Age healing carries implicit overtones of religious salvation.

Holistic milieu/occultural milieu

By locating New Age healing within the category 'spiritualities of life', i.e. concerned with things of this life – in particular the self, as opposed to 'religions of difference', which focus on transcendent divinity existing over and above this world, (Woodhead and Heelas, 2000), Paul Heelas and Linda Woodhead (2005) in their study of the town of Kendal, identify what they refer to as the 'holistic milieu', or the environment in which 'spirituality rather than 'religion' is pursued. Heelas and Woodhead define spirituality as invoking 'the sacred in the cultivation of unique subjective life' (2005: 5). By measuring numbers of people in the town of Kendal involved with subjective-life forms of the sacred (healing being prominent among these), compared to the numbers involved in life-as forms of the sacred (traditional religious worship), Heelas and Woodhead conclude that subjective-life spirituality is indeed overtaking life-as religion, effectively producing a 'spiritual revolution', and that holistic milieu healing is playing a significant role in this shift (Heelas and Woodhead, 2005: 7).

However, the spiritual revolution claim is challenged. David Voas and Steve Bruce reject as exaggeration the importance attributed to spirituality in activities such as holistic milieu healing (Voas and Bruce, 2007: 58). Christopher Partridge also takes a differing view, suggesting that what Heelas and Woodhead describe as the holistic milieu is neither new nor is it replacing traditional religion, but is rather a reflection of the emergence, or re-emergence, of an 'occulture', or of 'those often *hidden, rejected, and oppositional* beliefs and practices associated with esotericism, theosophy, mysticism, New Age, Paganism, and a range of other subcultural beliefs and practices' (Partridge, 2005a: 67-68). For Partridge,

rather than spiritualities of life being evidence of a resurgence of religious feeling in a secular society, holistic milieu activities are evidence of a resurgence of interest in the esoteric and of a flourishing ground of occulture in mainstream society (Partridge, 2005b). Heelas and Woodhead's holistic milieu healing equates then to Partridge's occultural milieu healing.

Christoph Bochinger (2004) and Olav Hammer (2003; 2004) both concur with Partridge. Bochinger notes that far from new, esotericism is 'a specific form of religion that has always existed as a subcategory within Christianity and other religions' (Bochinger, 2004: 22), and Hammer suggests that the profound split between official theologies and what people actually believe simply becomes more evident in a secularised and globalised environment which tends to be favourable to esoteric ideas (Hammer, 2004: 409-410), and where the same message seems to be coming from multiple different sources (Hammer, 2003: 43-44).

Summary

From this survey of the literature surrounding forms of healing and their development, from spiritual healing, through Holistic Health and New Age healing, to holistic milieu healing, it becomes clear that despite claims of being derived from, and drawing on, all previous forms of spiritual healing, there are obvious differences between spiritual healing as described in section 2.1 and holistic milieu healing described above. The principal differences can be described as follows:

Spiritual healing is practised by special or gifted individuals, recognised as such by their own surrounding communities, and embedded within their cultural context. Spiritual healers are by definition effective in their cures/healings, and their abilities often appear mysterious, elusive, or even miraculous, with the source of healing power lying outside of the healer and usually beyond the healer's control.

Holistic milieu healing, by contrast, is practised by healers who are not necessarily special or gifted individuals, but generally become healers by attending courses or workshops, learning techniques and gaining qualifications and credentials, with holistic milieu healing being a profession rather than a personal attribute or ability. Holistic milieu healers are, essentially, self-selected rather than recognised by their community as healers, they tend to subscribe to a worldview which is generally counter-cultural to the mainstream context, are not necessarily evaluated according to the results of their healings

or cures, but rather according to their philosophy, and are rarely associated with the miraculous or with exceptional cures.

However, as New Age thinking embraces as a prelude to itself all things cultural, religious or philosophical which precede it, this has created the situation where all spiritual healing, past and present, is assumed to be the same as holistic milieu healing, and holistic milieu healing the culmination of all other forms of spiritual healing. The aim of this dissertation is to examine spiritual healers' accounts of healing in Britain from 1900 to 1965 and to establish which, if any, of the forms of healing from this period are similar to, or the same as, holistic milieu healing, and which, rather, follow the spiritual healing model. However, prior to introducing the healers and examining their accounts of spiritual healing in Chapter 4, Chapter 3 will give a brief outline of the social, cultural, intellectual and religious background of the 1900-1965 period being studied.

Chapter 3 Background to period 1900-1965

Spiritual healers writing their accounts of healing during 1900-1965 clearly did not live in isolation. They were as much products of their environment as they were contributors to the period in which they were living. Whether it is the legacy of the Victorian era which directly preceded the twentieth century, or the progressing shift from a religious to a secular state, each element which contributed to the intellectual, social and cultural context in which the spiritual healers were writing their accounts necessarily played a part in how these healers perceived both themselves and their healing and how it fitted into the wider context. This chapter will consider some key elements which shaped and influenced the development and expression of spiritual healing in Britain during 1900-1965. These elements include the legacy established by the Victorian era, the primary intellectual influences of the period, some key events and material changes which occurred, and the socio-cultural influences which informed the spiritual healers' worldviews.

The Victorian legacy

If the period 1900-1965 begins from the foundations established by the Victorian era (1837-1901), Joseph Altholz argues that the key to understanding the legacy of Victorian culture is its religiousness:

The most notable thing to remember about religion in Victorian England is that there was an awful lot of it...religion occupied a place in public consciousness, a centrality in the intellectual life of the age, which it had not had a century before and did not retain in the twentieth century. (Altholz, 1988: 150)

However, this was also a religiousness which was under constant pressure from the contrary cultural forces of a modernising nineteenth century. Giles St Aubyn describes the population of Victorian Britain as being 'souls in torment', a highly religious nation struggling to integrate modernity, industrialisation, secularisation, unprecedented rapidity of social change, and new scientific and evolutionary accounts of the material world into their religious worldview (St Aubyn, 2010). For Richard Evans (2010), on the other hand, it was the changes to time and space that were most disorientating for Victorian society to absorb. Consciousness of an overseas Empire, fast transatlantic shipping routes, vast extensions of railway networks reaching into rural areas, with tram systems and suburban and underground railways in cities, and rapid communications via the new telegraph

system, all served to effectively make the world both larger and more accessible than ever before, and communications and transportation of people and ideas more rapid than could previously have been dreamed of. Time itself eventually had to become standardised, with all public clocks in Britain being set by Greenwich Mean Time by the end of the nineteenth century to ensure co-ordination across the country (Evans, 2010).

In order to cope with both the force and the pace of change, especially the destabilising challenges to religious belief and the subsequent threat of scepticism, Victorians adopted a range of different strategies. St Aubyn categorises these coping strategies as i) defending against scepticism by accepting without question the authority of the Bible or the Pope; ii) attempting to accommodate scepticism by adopting a ‘broad church’ approach; iii) ignoring theological challenges by instead stressing a ‘social gospel’; iv) adopting an agnostic approach which suspended judgement on ultimate questions; v) accepting the ‘death of God’ and turning instead to atheism; or vi) turning to alternative or substitute faiths such as humanism, spiritualism, socialism, aestheticism or hedonism (St Aubyn, 2010: 531).

From the point of view of spiritual healing, by the end of the nineteenth century the British population had already been exposed to most of the influences and ideas which would develop further through the period 1900-1965. Similarly, all the forms of spiritual healing which would flourish during this period had already had their foundations to some extent established by the end of the nineteenth century. The concept of ‘energies’ which could be transferred from healer to patient had been proposed by Franz Anton Mesmer (1734-1815) and had later been adopted by other alternative healing movements, and in the case of spiritualist healing mediums, this extended to the claim that the healing energies had their source in the ‘spirit world’ (Melton, 2008: 141). At the same time, Christian Science, New Thought and esoteric models of healing were all well established by the end of the century, and numerous religious revivals had seen the divine healing movements within nineteenth century Protestantism and Pentecostalism establish themselves as viable options for healing (Brown, 2006: 59-61; Robinson, 2013).

The foundations for the development of spiritual healing, then, were well established by the end of the nineteenth century, however the period 1900-1965 would itself continue to be subject to forces of intellectual, material, and socio-cultural change which would significantly shape the background and context of the healers’ accounts being examined in this dissertation.

Intellectual influences

From 1900 onwards a number of intellectual influences would shape the development, perceptions and expression of spiritual healing in Britain. These influences can be divided firstly into the ideas associated with modernity, which questioned the role of religious institutions and the nature of society, and secondly the new concepts which emerged to explain human existence, body, mind and health.

Secularisation and rationality

Although the intellectual arguments which influenced the period 1900-1965 were firmly established by the end of the Victorian era, the gradual re-allocation of religion's place within modern society was further reinforced by early developments in sociology such as the claim made by Max Weber (1864-1920) that rationalisation and the scientific perspective made belief in the supernatural impossible, religion being replaced by science (Weber, 1930), or the view of Émile Durkheim (1858-1917) that as society became more complex in structure, the role of religion would be taken over by secular institutions and rational scientific thinking (Durkheim, 1915).

There are, however, two opposing views as to how these influences affected society in Britain in practical terms. Steve Bruce, along with many other supporters of the secularisation thesis, argues that processes which led to the decline in religious institutional sources of authority in favour of the modern, progressive authority of scientific rationality can, in fact, be traced to the sixteenth-century Reformation. For Bruce, it was specifically the rise of individualism and rationality brought about by the Reformation which changed the place of religion in society, both by undermining the communal basis of religious belief, and by rendering many religious beliefs either implausible or unnecessary in the light of alternatives supplied by rational science (Bruce, 1996: 230).

An alternative understanding proposed by Rodney Stark and other opponents of the secularisation thesis is that the idea that there was ever a real decline in religiosity in Britain is mistaken. Rather, Stark claims, what may be *perceived* as having been a decline in religion was in fact only a decline in institutional strength and authority and not in individual piety or in belief, both of which remained unchanged (Stark, 1999: 251), with

levels of subjective religion remaining high and belief in God remaining widespread, only expressed through a broader range of channels (Stark, 1999: 264).

The significance of this for spiritual healing during the period 1900-1965 is that modernisation, individualism, the rise of rational science and the decline in religious institutional authority created the specific conditions and environment, by the beginning of the twentieth century, which would permit and facilitate the flourishing of many alternative forms of religious organisation and religious expression, and it is primarily in movements such as Christian Science, Theosophy, Spiritualism and New Thought that spiritual healing flourished.

Body, mind and health

Just as the nature of society was being re-imaged in light of modernising and secularising forces, so too were ideas about the human body, mind and health being questioned by the intellectual currents which followed from the writings of Charles Darwin (1809-1882) and Sigmund Freud (1856-1939), and from the development of psychology as a science.

When Darwin published his *On the Origin of Species* in 1859, his theory of natural selection proposed a modern account of human existence which not only appealed to a rational scientific outlook, but also rendered theological accounts of creation largely redundant, and even cast doubt on the reliability of the Bible as a divinely-inspired work (Warner, 2010: 18), yet further weakening the authority of religious institutions regarding human existence.

This was taken a step further with Freud's view of religion as no more than an illusion, anti-rational and obsolete, which would inevitably give way to the progressive outlook of scientific humanism (Freud, 1927: 721). Like Darwin, Freud proposed an evolutionary model of human progress in which animism had given way to religion, which should inevitably in turn give way to science (Freud, 1927: 709-10, 720-21). Also like Darwin, Freud's evolutionary model presumed the superiority of the scientific over the religious worldview (Warner, 2010: 20).

If human existence, both body and mind, could now be explained in scientific terms, then progress would suggest that the best means for a modern society to achieve human health and happiness would also be via a rational scientific approach. This is clearly witnessed in the rise to dominance of modern medicine through the period 1900-1965, and

even more so in the manner in which explanations of spiritual healing found in accounts written by spiritual healers gradually transitioned during this period from being primarily religious in nature to gradually becoming scientifically framed and using scientific-sounding terms. Such a shift would indicate that the intellectual influences which shaped the context of the period 1900-1965 also significantly influenced how spiritual healers understood and expressed themselves and their healing.

Events and material changes

In addition to intellectual influences, a number of events and material changes during the period 1900-1965 would also influence the course and social acceptability of spiritual healing in the various forms in which it presented itself. These were: the experience of war; the widening of state health care provision; and the popularisation of occult and magical practices following the repeal, in 1951, of the 1736 Witchcraft Act.

Experience of war

The First World War had initially seemed to offer great opportunity for Christianity in Britain, with Christian faith being viewed as central to national and military leadership and the Christian churches associating themselves with what was considered as patriotism in a moral war. However, as the war progressed, the churches' confidence, together with national morale, declined as the population experienced the horrors of men dying in their thousands in the trenches and the increasing pressure caused by the problems which resulted at home (Brown, 2006: 88-89).

The brutal nature of the First World War and the experience (and expectation) of mass loss of life resulted in what many clergymen viewed as a kind of 'emergency religion', something closer to superstition than to any concept of Christian teaching (Brown, 2006: 93-94). The experience of this 'trench religion', together with a continuous fear of death, had brought with it a faith in the use of amulets and charms (including the Bible) for protection, and reports circulated amongst men during combat of spiritual experiences such as visions or apparitions, either of ghosts of the dead or of angels (Brown, 2006: 94-95).

This leaning to the supernatural in place of religion, together with the 'remembrance culture' which developed in the 1920s, and the desires of people, primarily women who had lost sons or husbands, to contact the dead, gave increased acceptability to the already

popular practice of spiritualism. Indeed, although spiritualism had been a topic of discussion since the beginning of the century, both in scientific as well as in popular circles, the experience of the First World War greatly increased this interest (Brown, 2006: 104), eventually bringing spiritualist ideas to a degree of normalisation within British culture and forcing churches to develop what may even have amounted to an attitude of compromise (Brown, 2006: 141; Byrne, 2010: 189-90).

Although most of the churches condemned the popular and widespread enthusiasm for spiritualism (Brown, 2006: 104; Byrne, 2010: 144), the Church of England's only formal response during the period was a warning, following brief discussion at the 1920 Lambeth Conference, against the dangers of the tendency to make a religion of spiritualism. However, it wasn't until 1936 that a committee was finally called to formally examine spiritualism for the Church. This culminated in the report *Spiritualism: the 1939 Report to the Archbishop of Canterbury*, which although initially suppressed, was generally favourable towards spiritualism and recommended that the Church maintain contact with 'intelligent' spiritualists (Perry, 1999: 53; Byrne, 2010: 144). Georgina Byrne even goes so far as to suggest that as spiritualism was widely practiced by both clergy and lay people during this period (Byrne, 2010: 177), and with such formal acknowledgement from the Church, together with a degree of scientific appeal and the 'spirit communications' themselves, which presented the afterlife as

a place where spiritual progress was not only possible but expected; where individuals were assisted in their progress by helpful higher spirits; and where there was no hell or eternal torment (Byrne, 2010: 221)

spiritualist practices (including healing) came to be an integral, and to many very attractive, part of mid twentieth-century culture. Indeed, such was this appeal that the imagery and ideas of spiritualism significantly influenced the teaching of some clergy (Byrne, 2010: 226), making spiritualist healing, and by consequence, all other forms of spiritual healing, increasingly attractive and more readily acceptable to popular culture.

Widening of state health care provision

Throughout the nineteenth century many forms of healing, including magical, folkloric and religious healing, had existed side-by-side with the new rational medicine which was based on Enlightenment ideology, science and progress (Lawrence, 1994: 8). It was, however, this modern medicine model, which relied on 'the efficacy of the scientific investigation of

illness' and on 'the alleviation and elimination of the symptoms of known and classifiable medical conditions... assumed to pertain to all people in all times and in all places' (Hutch, 2013: 956) that came to dominance from 1900 onwards, not least due to the gradual institution of a system of increasingly universal state health and welfare provision.

By the beginning of the twentieth century, sickness was viewed as a major cause of poverty, and modern medicine was considered an essential element in any modern industrialised society, health itself beginning to be regarded as a citizen's right as well as a way to deal with poverty (Lawrence, 1994: 76).

The National Health Insurance Act, which was initially formulated in 1911 to protect the wages of sick workers and to ensure access to medical care, was followed in 1919 by the creation of the Ministry of Health, which further extended provision of modern medical care, with the long term aim of eventually delivering clinical medical services to the population as a whole (Lawrence, 1994: 80-82), something finally achieved in 1948 with the establishment of the National Health Service.

The significance of these developments for spiritual healing was that, where previously spiritual healers' dialogues had been with religious sources of authority and spiritual healing itself had tended to be expressed in spiritual-religious terms, as modern scientific medicine came to dominance (and with increasingly universal access), healers' dialogues could be found as much, if not more so, in scientific terms and on scientific grounds rather than religious. This is notably reflected in the volume of correspondence and the number of articles on spiritual healing which can be found during this period in journals such as the *British Medical Journal*, and in the choices of titles for books written by spiritual healers.²

As the modern scientific model of medicine came to dominate British health culture, spiritual healers who could express their practices in the same scientific language and concepts appear to have been able to benefit from increased cultural validation and, as a consequence, to obtain significant advantage over those who could not or who chose not to.

² E.g. *The Science of Being and Christian Healing* (Charles Fillmore, 1912); *The Science of Mind* (Ernest Holmes, 1926); *The Science of Spiritual Healing* (Harry Edwards, 1945).

Popularisation of magic and repeal of the 1736 Witchcraft Act

The 1900-1965 period saw not only the impact of war, mass loss of life and increased enthusiasm for spiritualism, but also an increasing openness to magical and occult ideas and their associated practices.

Throughout the first half of the twentieth century, the 1736 Witchcraft Act had made the practice of witchcraft (the claim to possess magical, supernatural or occult powers, or to contact spirits, predict the future, cast spells, etc.) punishable by fines or imprisonment. This punishment was not for the practice of magical or occult powers in themselves (as these were assumed not to exist in a rational modern society), but rather for the practice of deception and for making fraudulent claims (Davies, 1999: 73).

The repeal of the 1736 Witchcraft Act and its replacement with the Fraudulent Mediums Act in 1951 gave individuals the freedom to practice witchcraft so long as no harm was done to persons or to their property (Pearson, 2006: 830). The significance of this freedom for the spread of non-standard religious ideas can be seen in the works of two occult practitioners of the period: Dion Fortune (1890-1946) and Gerald Brosseau Gardner (1884-1964).

Dion Fortune, author and founder of the Fraternity of the Inner Light, initially came to occult ideas through an interest in psychology. As author of both textbooks on magic and occult novels, Fortune was able to popularise occult concepts (learned primarily through her initiation into the Hermetic Order of the Golden Dawn) by blending mystical and esoteric language and terms with those of psychology and modern science with which her audience was already familiar (Fanger, 2006: 378). Writing before 1951, Fortune's psychological works were published under a pen name of Violet Firth and her later, openly occultist writings were mostly presented in the form of fiction as occult novels (Fanger, 2006: 378).

Gardner, by contrast, whilst not able to publish open accounts of witchcraft in the early part of his career, did finally come to public attention after the 1951 repeal of the Witchcraft Act with *Witchcraft Today* (1954), followed by *The Meaning of Witchcraft* (1959). These two works brought immense publicity to what Gardner considered to be a dying religion, and by the 1960s their popularity had succeeded in establishing what would later come to be known as the tradition of Gardnerian Wicca (Pearson, 2006: 830).

The significance of this change for spiritual healers and how free they were to practice, publish and speak about their work, especially those healers whose healing involved

contact with, and/or participation of, spirit entities, was that not only had the concepts of occult and magic become relatively commonplace and acceptable to popular culture, but from 1951 onwards, spiritual healers were able to publish books and form members' organisations without the potential threat of persecution or prosecution – this can be noted in the number of spiritual healing organisations which were formed in the years immediately following the repeal of the 1736 Witchcraft Act, many of which are still in existence today.³ Also, concepts of spiritual healing no longer had to be expressed in 'Christian' language as the public were now more open to the language of occultist concepts.

Socio-cultural influences

Whilst intellectual influences and these significant events and material changes greatly shaped the course of spiritual healing during the period 1900-1965, it was the socio-cultural environment and influences which most influenced the day-to-day life and choices people made regarding religion and healing. These included the impact of modernity itself, religious change, and the availability of metaphysical alternatives to religion.

Modernity

The socio-cultural influences during the period 1900-1965 were essentially those of a modernising, secularising society: the industrialisation of work; movement of people from villages to towns and cities; small communities being replaced by societies; the rise of egalitarianism; and the rationalisation both of thought and of social organisation, together with the subsequent changes in the place of religion and the decline in social standing and authority of religious institutions within such a society (Bruce, 2002: 2-3).

Adrian Hastings describes the twentieth century as a period of 'steadily growing separation between Church and society' (Hastings, 2001: xv), from a situation at the beginning of the century where the majority of the nation had a deep social connection with one or other of the churches (Church of England, Free Churches or Roman Catholicism), which would influence aspects of life such as schooling, recreation, moral attitudes, behaviour, and even political affiliations, to the end of the century when church

³ E.g. Bristol District Association of Healers (1952); The National Federation of Spiritual healers (1954); Yorkshire Healers Association (early 1950s); Lancashire and District Healing Association (early 1950s); Sussex Healers Association (1959).

attendance had not only become optional, but where those who did attend were thought to display a higher level of commitment than was the norm, and where the areas of people's lives which were not specifically 'religious' had been taken over by society (Hastings, 2001: xv).

The secularisation of the public sphere and the displacing of power from close-knit, integrated communities to modern states and cities co-ordinated through large-scale impersonal bureaucracies, together with the social differentiation which necessarily accompanies modernisation, reduced the possibility of any single religious organisation being able or equipped to provide for all of the needs of all individuals in an increasingly fragmented and diverse society (Bruce, 2003: 252). This process, though, opened the way for competing religious ideas to present themselves, making religiosity a matter of personal preferences, much less connected to community or to other aspects of living.

Whilst the improved communications of the nineteenth century and the movement of people via new transportation networks had been needed for the population shift from rural communities to towns and cities and for increased travel between countries in order to facilitate Empire, missionary and war efforts, these changes also brought with them rapid communication of the ideas and influences of modernity, as well as the increased social and cultural diversity which were central to the development of a secular state. This increasing social and cultural diversity, including the early stages of Britain's development into a multi-faith society following World War II, may have posed immense challenges and changes for churches in Britain, but at the same time it created an almost ideal environment for the development of spiritual healing, as churches became ever more open to new initiatives and to the alternative metaphysical options that were presenting themselves, in order to gain a competitive advantage over rival organisations.

Religious change

Whilst there may be debate amongst scholars as to whether religion itself declined in Britain during the twentieth century as a result of modernising forces, Robin Gill (1993), for example, arguing that the statistical measures used to evaluate and point to religious decline in Britain through the twentieth century were never adequate to measure religiousness or religious belonging in the diverse range of religious organisations and denominations that were present at that time, and for each of whom the concept of 'membership' had a very different meaning, not adequately measured by the criteria which

had been used for the collection of survey data (Gill, 1993: 18), there is general agreement that religion did undergo significant change. With the gradual disestablishment of the Church of England as the 'National Church', a significant proportion of the population being Baptists, Roman Catholics, Jews or atheists, the relative growth and confidence of the Free Churches and the beginnings of the ecumenical movement in the earlier part of the twentieth century, religion in Britain was most certainly changing (Hastings, 2001: 49, 106, 303).

The responses of the churches to changes associated with the process of secularisation took several forms. On the one hand, revival or reform movements frequently developed in settings of industrialisation and urbanisation, as lapsed or unchurched citizens became suitable targets for conversion (Bruce, 2003: 259), whilst at the same time a number of specifically Christian organisations emerged to fulfil the demand for Christian forms of healing in a climate where increasing forms of spiritual healing were being offered by secular alternatives. Among these Christian organisations were the Guild of Health (1904), the Divine Healing Mission (1905) and the Anglican Guild of St Raphael (1915), as well as a number of homes of healing where the medical profession and the churches worked together (Maddocks, 1995: 189).

What would become known as the Christian Healing Ministry existed throughout 1900-1965, side-by-side with healing offered by spiritualist and other metaphysically-orientated organisations. The widespread public interest in healing during this period eventually led to a formal response from the Church of England in 1953 in the form of a commission on the ministry of healing, which resulted in the publication, in 1958, of *The Church's Ministry of Healing: Report of the Archbishop's Commission on Divine Healing*. The report provided definitions, advice and guidelines for healing within the Church of England, and included appendices on other forms of spiritual healing (such as those offered by Christian Science practitioners and spiritualists) which were declared not compatible with Christian teaching (Church of England, 1958: 81-83).

Metaphysical alternatives

In addition to these reactions of the churches to modernity, secularising cultural trends encouraged a more transcendental view of social life and a revival of mystical and spiritual movements (Robinson, 2013: 155). The widespread popularity of spiritualism at the beginning of the twentieth century flourished alongside a number of alternative esoteric

movements such as the Theosophical Society (1875) and the Hermetic Order of the Golden Dawn (1888), each boasting among their memberships well-known members of respectable society (Robinson, 2013: 155).

The majority of alternative spiritual movements had some connection with, or endorsed, some form of spiritual healing, leading to spiritual healing becoming a practice which seemed to cross between Christian orthodoxy and other esoteric movements with remarkable facility. Some, however, viewed this as the ‘intrusion of the occult into an otherwise conventional ministry of healing’ (Robinson, 2013: 157). The degree to which the popularity of such alternatives was perceived as a threat to Christian orthodoxy can be understood from the number and the content of reports commissioned by the Church of England, both on spiritualism and on healing.⁴

Conclusion

From this brief overview, it is clear that the period 1900-1965 began from a foundation created by Victorian Britain, where the population was in a state of relative disorientation as a result of the rapidity and scale of change brought about by modernity, where religiousness was no longer the absolute certainty it had once been and scepticism was a possible alternative, where the speed of communications and travel facilitated the rapid dissemination of alternative ideas to those of traditional religion, and where the key concepts and practices of spiritual healing had already been made familiar to the population by groups such as spiritualists, theosophists and Christian Science practitioners.

The intellectual currents associated with the transition from being a religious nation to being a secular nation, and the re-allocation of authority from religious institutions to modern science and to new and developing sciences such as sociology, psychology, evolutionary sciences and modern medicine, had led to a re-imagining of the human body, mind and health, and to a consequent re-imagining of how spiritual healers might best understand and express their healing, whether in religious or in scientific terms.

The experience of war and the rise of spiritualism had created new needs in the population which the churches struggled to satisfy. In addition, the widening of state

⁴In addition to those mentioned above, of particular note are: *Spiritual Healing: Report of a Clerical and Medical Committee of Inquiry into Spiritual, Faith and Mental Healing* (London: Macmillan, 1914); *The Ministry of Healing: Report of the Committee Appointed in Accordance with Resolution 63 of the Lambeth Conference, 1920* (London: SPCK, 1924).

health care provision and the medicalisation of human health, together with new freedoms created by the repeal of the 1736 Witchcraft Act, the ideal environment for the development of spiritual healing created by socio-cultural changes of modernity, and the increased acceptability of metaphysically-orientated practices, provided the British population of 1900-1965 with an increasing range of alternatives to traditional religion, and presented spiritual healers with increasing freedom and choice as to how to express and practise their healing. The next chapter will introduce a selection of these spiritual healers and will examine their accounts of spiritual healing in Britain from 1900 to 1965.

Chapter 4 Healers' accounts

Having established the background of the period 1900-1965 in Chapter 3, this chapter introduces a selection of spiritual healers who were active during this period and who published written accounts of what they understood spiritual healing to be. The chapter is divided into two sections. The first section (4.1) introduces each healer in turn with brief biographical details, followed by an overview of their published account(s) according to the key criteria, discussed in Chapter 2 *Literature review*, which can be used to distinguish between the spiritual healing and the holistic milieu models of healing. (These key criteria are set out in table 4.1.) The second section (4.2) then presents the same information but displayed in table format in order to facilitate comparison of the healers with each other and also across their different categories.

4.1 Overview of healers' accounts

As already outlined in section 1.2 *Methodology*, the selection of the healers being discussed in this chapter was made according to a number of factors: their popularity and influence during 1900-1965; having published an account of spiritual healing; the availability of their account(s); having been mentioned in, or called to give evidence to, the Church of England inquiries into healing; having been referred to in the *British Medical Journal*; or having been referred to in accounts written by other spiritual healers.

The healers' accounts are also organised according to the primary affiliation of each of the healers. The six resulting categories are: Christian healers; Spiritualist healers; New Thought healers; Christian Science healers; Esoteric healers; and Independent healers. The reasons for the difference in numbers across the healer categories are explained in more detail in the methodology section (1.2), however essentially, the Christian, Spiritualist, and New Thought healers were numerous and so a representative sample of three healers for each category was made by selecting those healers most typical of their type. The Christian Science and the Esoteric categories only have one healer each. The reason for this is that the works of the two authors (Mary Baker Eddy and Alice Bailey, respectively) were so definitive of their category that they were not simply the authoritative texts referred to by healers in the style, but in practical terms were the *only* text referred to in that style of spiritual healing. In addition, although Mary Baker Eddy (1821-1910) was

earlier than the other healers, and almost outside of the 1900-1965 period, she has been included due to the very significant and enduring influence of Christian Science healing throughout 1900-1965, given that reference was made to Christian Science healing and/or Mary Baker Eddy by almost all of the healers examined by the Church of England inquiries into healing and in the *British Medical Journal*. The two Independent healers were selected to represent the eclectic nature of many healers of this period.

Christian healers

James Moore Hickson (1876-1933)

James Moore Hickson's first experience of healing was aged fourteen, when he felt a voice telling him to place his hands on the face of a cousin who was suffering from neuralgia, after which the cousin's pain disappeared (Hickson, 1924: 6). After a series of similar healings, Hickson's mother recognised that her son had a special gift of healing and told him to pray that he might be guided in the right way to use it (Hickson, 1924: 7).

Hickson describes healing by the laying on of hands as a distinct and special gift given to chosen individuals, but which he believed was lacking in the Church of the time because many who possessed this gift had failed to use or develop it (Hickson, 1919: 10-11). He describes healers as 'channels through which Christ's power flows' (Hickson, 1919: 47).

Although he does not mention specific visions or other mystic experiences, Hickson does describe being aware of a distinct voice, which he believed to be divine, guiding him: 'I knew it was a call from God and that I must obey' (Hickson, 1924: 13), and of being aware 'also of the Lord's Personal Presence' (Hickson, 1924: 4).

Hickson identifies himself as a Christian in the Anglican tradition and his healing practices as part of the Church's healing ministry. Further, in 1908 his writings were given full approval of the then Archbishop of Canterbury and of the Bishop of Winchester, with copies of his published works being distributed to bishops at the Lambeth Conference in the same year. Hickson also founded the Society of Emmanuel, an organisation which aimed to revive the gift of healing in the Church, and began publication of the monthly journal *The Healer* (Hickson, 1924: 9).

Hickson understood illness as being caused by sin in the world (Hickson, 1919: 34) and 'physical diseases as manifestations of evil, and contrary to the natural laws of God' (Hickson, 1924: 242). He believed that disease was fundamentally evil, and that the aim of

the Church should be never to accept illness, but to strive to overcome all evil by turning back to the divine source of life (Hickson, 1924: 243). For Hickson, the purpose of healing was to demonstrate the divine power (of Christ) in the Church's healing ministry, to 'deliver humanity from the bondage of sickness, disease and sin' (Hickson, 1919: 40), and 'to tell the sick of Christ, to preach the Gospel message of healing and to bring them to Christ who is present with us now' (Hickson, 1919: 26), and the effects of that healing were to overcome and liberate from evil, heal disease and restore health, strength and a right relationship with God's will (Hickson, 1924: 243).

It is clear from his written accounts that Hickson was aware of, and recognised, the many healing methods of his era, including Christian Science healing, magnetic healing, physical healing and mental healing, as being useful (Hickson, 1919: 12, 48), but he maintained that true healing must be spiritual in nature because 'it is a spiritual force alone which can touch the *cause* of any trouble or derangement of body or mind, when that cause lies in the spiritual nature' (Hickson, 1926: 29).

Hickson describes the 'ordinary' healing methods of the Church as being prayer, united intercession and Holy Communion, and then the 'special means' of healing as being those in which 'Those whom God has called to be channels of His healing power are conscious of a force within them, which may be transmitted to others with curative effect' (Hickson, 1919: 9). Both the ordinary and the special means (practised through the laying on of hands) are the healing methods which Hickson advocated and practised, and he describes his own experience thus:

I am conscious of this Power flowing through me when healing, as I am also of the Lord's Personal Presence. And it is this Power which the sufferer often feels when hands are laid upon him in Our Lord's Name, and which causes him to say that he felt a warm glow pass over or through him, or something like an electric current, bringing relief, comfort, peace, and rest. (Hickson, 1924: 4)

Dorothy Kerin (1889-1963)

Dorothy Kerin discovered her ability to heal following several years of declining ill health, five of which were spent completely bedridden, with the final two weeks in an unconscious state and with no realistic hope of recovery (Kerin, 1914: 7).

Kerin describes two mystic experiences which, together, determined her conviction regarding spiritual healing. The first, immediately preceding her own instantaneous recovery, was of a celestial scene in which 'a great light came all around me, and an Angel

took my hands in his and said, “Dorothy, your sufferings are over. Get up and walk.” ’ (Kerin, 1914: 10-11), and the second experience, three days later, was of ‘a beautiful woman holding a lily’, who came near to her and said ‘Dorothy, you are quite well now. God has brought you back to use you for a great and privileged work. In your prayers and faith many sick shall you heal: comfort the sorrowing and give faith to the faithless’ (Kerin, 1914: 17-18). From this point onwards, Kerin dedicated the rest of her life to the Christian ministry of healing, and in 1929 she opened St Raphael’s, her first residential home for healing. Kerin describes frequent further episodes of hearing a distinct voice giving her instructions (Kerin, 1963: 24), reassuring her (Kerin, 1963: 32) or answering her questions (Kerin, 1963: 38), as well as of her being ‘conscious of Our Lord’s presence’ and of information being communicated to her in dreams (Kerin, 1963: 56-60).

Kerin identified herself as a Christian in the Anglican tradition and her healing practices as part of the Church’s healing ministry. Although aware of other forms of healing such as ‘Healing by hypnotism, the help of friendly spirits, Christian Science, suggestive therapeutics, etc’, Kerin maintains that her own healing ‘came direct from God, and God alone... There was no earthly intermediary’ (Kerin, 1963: 10). Her method of healing was either by prayer alone, or by prayer and the laying on of hands. However, she also describes occasions when she would give an object such as a small crucifix to be taken to a sick person (Kerin, 1963: 44), or when water from the water pool in the garden at Burrswood House (her final healing sanctuary) was given to patients who were subsequently healed (Kerin, 1963: 85).

The cause of illness, in Kerin’s understanding, was the separation between people’s lives and spiritual realities, brought about by unbelief and by worldliness (Kerin, 1963: 10), and the purpose and effects of healing were to demonstrate that God’s power to heal continues to the present day, and to restore true spiritual joy which ‘comes to us through communion with God, and bodily health and peace of mind follow’ (Kerin, 1963: 17).

Dorothy Kerin was recognised as a significant healer of the twentieth century by the Archbishops’ Commission on Divine Healing and was one of the last healers to be interviewed prior to the publication of the Commission’s report in 1958. Kerin was also one of the early members of the National Federation of Spiritual Healers.

*John Maillard (c.1890-c.1972)*⁵

John Maillard was ordained as a minister in the Anglican Church in 1911 and spent his curacy in the dockland area of Poplar, East London, where he met the healer James Moore Hickson and was introduced to the role of healing in the ministry of the Church (Maillard, 1936: 19-20). Maillard aligned himself exclusively with the teachings of the Anglican Church regarding healing, specifically denying any knowledge of ‘occult practices’ or psychic abilities, and strongly rejecting both modern spiritualism and the ‘spiritual shallowness’ of the era (Maillard, 1936: 18).

Maillard’s specific commitment to the healing ministry followed a mystic vision in which he saw the sick people of his parish together with the figure of Jesus Christ, who was unable to touch the sick people because his hands were tied behind his back due to the unbelief in the Church (Maillard, 1936: 22). As a result of this vision, Maillard understood that his mission was within the healing ministry, and he believed that this mission would lead to a great spiritual awakening. He did not, however, speak to anyone of the vision until six years later in a meeting of friends, which included the healer James Moore Hickson (Maillard, 1936: 22-23).

Although Maillard taught that ‘no person has a special gift of healing which may not be the possession of others’, and denied any special gift of his own, believing rather that ‘all Christians can be channels or instruments of divine healing, since all can pray and become transmitters of the love of God’ (Maillard, 1936: 15), others recognised Maillard’s special ability and came to him for healing.

The methods of Maillard’s healing were strictly those of the Church – prayer, anointing, sacraments such as Holy Communion, and the laying of hands on a person’s head (Maillard, 1936: 21; 1925: 33-35). Similarly, Maillard recognised both the source and control of the power to heal as being divine (Maillard, 1925: 54-55).

Maillard believed that illness was caused by the consequences of sin in the world directly affecting individual bodily health (Maillard, 1925: 35). This could be from a person’s own wrong-doing (Maillard, 1925: 36), but more often was attributable to the ‘existence and the potency of sin’ which exists in the world (Maillard, 1925: 38), there

⁵ These dates are estimated. John Maillard was probably born in 1890 or earlier and died in 1972 or later, based on dates of attending theological college (1907), ordination as deacon (1911) and as priest (1912), and last recorded permission to officiate (1961-1972), listed in the 1973-74 issue of *Crockford’s Clerical Directory* (an annual directory which provides biographical details about clerics in the Church of England). This is the last issue in which he is listed.

being, in Maillard's view, an 'intimate connection between evil, and sickness, and suffering' (Maillard, 1936: 38).

As a Christian minister, Maillard's experience of exorcism brought him to conclude that 'the origin of disease is never physical, but that disease springs from the malignancy of the powers of spiritual darkness, manifesting their power on the physical plane of man's being' (1925: 56), and that 'In cases such as these, the presence of evil is clearly manifested; but something of the same character is present in all sickness – it is only a question of degree' (Maillard, 1925: 38-39).

The effects of healing for Maillard were always spiritual benefits (1936: 33) and the purpose was to heal a sick and sinful world (Maillard, 1925: 2), to restore harmony between the laws of the body and the will of God (Maillard, 1925: 12), to awaken faith in Christ and his presence (Maillard, 1936: 26) and to demonstrate the reality of the spiritual realm (Maillard, 1925: 57).

Spiritualist healers

Eileen Garrett (1893-1970)

Best known as a trance medium, Eileen Garrett experienced a variety of psychic and other paranormal phenomena throughout her life, as well as hypnotic trance states in which alternative personalities spoke and acted through her, including to perform healings.

Garrett understood her abilities to be special gifts and suggests that her early childhood in Ireland, where she had been taught about fairies as beings who were neither divine nor human, and where 'the country people were truly clairvoyant and gifted', had prepared her for her later experiences of mediumship (Garrett, 1968: 21-22).

The first trance state which Garrett experienced happened suddenly and unexpectedly whilst she was sitting with a group of ladies in a séance trying to contact deceased relatives. Although having no direct memory herself, Garrett explains the episode in the following way:

I was told afterward that an astonishing thing had happened during the session. It seems I went to sleep and began to speak of seeing the dead relatives of those at the table. Never before having witnessed such a phenomenon, and being frightened, they shook me awake. I remember feeling rather uncomfortable. There were lights in front of my eyes, and I had a distinct feeling of nausea. (Garrett, 1968: 47)

On the advice of those who had witnessed this episode, Garrett sought explanations as to what had happened and was referred to a teacher of Theosophy:

He suggested that I should close my eyes, and he would help me to find my unconscious self by a process of passes for light hypnotic suggestion...on my awakening, the teacher informed me that he had spoken to one 'Uvani', an entity or 'control' personality of oriental origin, who foretold that I would become the vehicle for this type of work and that for a number of years I would serve in the capacity of a trance medium. (Garrett, 1968: 47)

The specific control personality who took over during Garrett's trances for the purpose of healings was known as 'Abdul Latif' and claimed to have been an astronomer and physician at the court of Saladin in the twelfth century. These healings were very much in demand and a book on healing was later dictated by Abdul Latif through Garrett whilst in trance (Garrett, 1968: 92).

The cause of illness, in Garrett's view, was a person being less than whole (Garrett, 1957: 24) due to the pace and arrangement of life in modern societies, which she believed was not suited to human life: 'The physical conditions of modern urban life are not conducive to that tranquillity and un-hurriedness in which the individual roots and grows best' (Garrett, 1957:29), and also to the failure of individuals to recognise the spiritual realm. Garrett maintained that 'Health of the body and mind is given us with a condition. That condition is loyalty to the divine man within' (Garrett, 1957: 35). Healing via mediumship, in Garrett's view, not only brought awareness of wholeness through other realities, such as potential survival after death, but also enabled healing and guidance from other minds.

Garrett's method of healing was to enter into a trance state and allow a control personality to take over and use her as a channel either for communication or for healing. The control associated with healing was Abdul Latif as mentioned above (Garrett, 1968: 92). Control of the process remained with the personalities who were using Garrett as their medium, and although Garrett never fully understood the ultimate nature or source of her mediumship experiences, she does describe that she was 'aware of being in the presence of a greater power than I can comprehend' and that 'In the center of the self, there is an abiding core of knowledge that at once directs and gives an eternal source of being' (Garrett, 1968: 186).

In addition to experiences of trance, Garrett describes having many visions and auditory experiences (Garrett, 1968: 157) as well as the ability, by psychic means, to 'travel and observe over long distances' (Garrett, 1968: 187). However, she was never able to offer any explanation as to the true nature of any of the phenomena she experienced, even to the

point of considering that her control personalities might simply be different parts of her own subconscious self (Garrett, 1968: 92). Garrett comments that ‘The controls are well aware that I have maintained an impartial, but respectful, attitude toward my own work and theirs, and so the search continues’ (Garrett, 1968: 92).

Although not affiliated with any specific group, Garrett allowed herself to be the subject of investigation by the American Society for Psychical Research in 1931, and then in 1951 became the founding director of the Parapsychological Foundation, an organisation dedicated to continuing investigation of the paranormal (Klimo, 1998: 140-141).

Harry Edwards (1893-1976)

Harry Edwards recognised his first experiences of spiritual healing as having occurred whilst he was serving as an officer in the British Army posted in Tekrit, northwest of Baghdad. People would come to him for help and, although he had no medical supplies other than castor oil to offer them, they still seemed to recover. The first occasion when Edwards remembers specifically being guided to use his hands to heal was during this same period when a woman was brought to him in great distress after having been stung by a scorpion. As he placed his hands on the inflamed area, she became calm (Edwards, 1968: 18). On his return to Britain, Edwards visited a spiritualist church in Balham, London, where a medium approached him and told him he had been ‘born to heal’. Similarly, on visiting other spiritualist churches, Edwards was repeatedly told that he was a healer and that the next time he knew of someone who was sick, he should concentrate his thoughts on their recovery (Edwards, 1968: 23). From this point onwards Edwards began to devote his time to healing.

Edwards maintains that spiritual healing is a distinct and special gift given only to some individuals, its purpose being to ‘open man’s mind to his kinship with spirit and with God’ (Edwards, 1965: 16), and that although it ‘cannot be learned by a course of study’ (Edwards, 1963: 75), when possessed it should be developed in order to give a greater service to humanity (Edwards, 1950: 7).

The cause of illness, in Edwards’ view, was ‘within mind disharmonies’ and also in ‘sickness of the soul as expressed in frustrations, fear and intuitions’ (Edwards, 1963: 70). Edwards refers to ‘the evil of disease’ which must be overcome in order to enjoy good health (Edwards, 1965: 140), but also suggests that ‘No healing can take place until the cause is first removed’ (Edwards, 1960: 50).

If the purpose of spiritual healing, according to Edwards, was to awaken the patient's spiritual consciousness as well as to heal the sick (Edwards, 1965: 143), he also notes that 'British medical authorities have agreed that under spiritual healing recoveries take place which cannot be accounted for by medical science' (Edwards, 1965: 11). Edwards maintained that there was no such thing as a miracle, and that as science came to understand spiritual realities, the processes of spiritual healing would also be understood (Edwards, 1960: 75). However for the present, Edwards suggests that we are 'faced with the situation that substances that have been proved to exist disappear with healing, contrary to all medical knowledge and expectation' (Edwards, 1960: 76) and that the effects of spiritual healing demonstrate that 'the guides are masters in the art of controlling energies' (Edwards, 1960: 77).

Edwards describes spiritual healing as being a set of 'law-governed processes which originate in the spirit realm', but suggests that 'the greater part of the laws governing the spirit plane are unknown and scientists, generally, have refused to recognise or investigate them' (Edwards, 1965: 12). The source of healing, according to Edwards, is ultimately divine, but must first pass through an intermediary spirit realm, and more specifically through entities he refers to as 'spirit guides' (Edwards, 1963: 57). It is these intermediaries who are the actual healing agents and with whom the spiritual healer must establish a link in order to heal (Edwards, 1963: 58).

Whilst Edwards recognised other forms of healing such as magnetic healing, where energy is transferred from the healer's own reservoirs of energy to the patient, he suggests that such healing has no spiritual significance and that it cannot directly overcome disease (Edwards, 1950: 63). Spiritual healing, by contrast, involves co-operation with spirit guides and Edwards describes the two forms in which it can be practised as being 'trance healing', in which the spirit guide takes possession of the mind of the healer and works through him, and 'non-trance healing', in which the healer retains control of his mind, but works in collaboration with the spirit guide (Edwards, 1950: 10). Edwards began his own spiritual healing in spontaneous states of trance, but could later heal without being in trance, however this was 'only after a period of time and the acceptance of the knowledge that the guides are able to work just as well without the need for trance' (Edwards, 1960: 42). Edwards even suggests that 'Co-operation with the spirit workers can become as familiar as the relationship between members of a happy family' (Edwards, 1950: 10).

Edwards describes the practical steps of healing as beginning with the formation of a link or close mental attunement between the healer and the spirit guides (Edwards, 1960:

44), something which can be achieved by ‘gentle meditation, with the directive of seeking contact with Spirit...so the guide will begin to be able to influence the thought impressions’ (Edwards, 1960: 44). Beyond this, Edwards explains that the healing act ‘as far as the healer is concerned, is one of simplicity’ and should be left entirely under the control of the spirit guides to direct details such as if and where the healer’s hands should be placed, as ‘healing is an intelligent act from Spirit. Therefore it is not possible for any technique we adopt to assist this. The healing forces come *through us*, they are not *of us*’ (Edwards, 1960: 43).

Edwards spent the greater part of his life promoting spiritual healing and became one of the most influential voices in healing during the twentieth century. He published a number of books on healing, gave public demonstrations, established a healing sanctuary at Shere, near Guildford, gave evidence to the Archbishops’ Commission on Divine Healing in 1953, and became the first president of the National Federation of Spiritual Healers in 1954.

Ursula Roberts (d. 1996)

Ursula Roberts was known as a medium through whom different control personalities or guides were claimed to communicate, including for the purposes of healing. Roberts became familiar with the subject of spiritualism as a child through listening to discussions her mother had with friends, and in her autobiography describes her first experience of spirits trying to communicate with her when she was fourteen years old (Roberts, 1984: 16).

The healer, in Roberts’ view, is a special type of personality who senses other people’s ‘sorrows and ailments; his sympathy makes him long to help them’ (Roberts, 1949: 4) and ‘whose radiations are of a slightly different nature to that of the ordinary person, and disease, on coming into the area of their magnetism, becomes transmuted into health’ (Roberts, 1950: 29). In Roberts’ case, it was both of these characteristics, together with the development of her mediumistic abilities which allowed her spirit guides to carry out healing through her.

In addition to her mediumship experiences, Roberts describes one specific mystic experience which she distinguishes as being of a different nature to anything she had previously known: ‘I know the region of Spirit has given much to me, but the wise spirits still teach in terms of a Great Power, a Great White Spirit, a Higher Force. I am convinced

that this spontaneous blessing came to me from that high and pure source known as God' (Roberts, 1984: 26).

Roberts explains the causes of illness as being many, including loneliness and negative thought processes, incorrect food choices, and poor air and water quality. However, she also suggests that the healer does not need to understand the specific causes of a condition as this can be left to the guides who will communicate it if necessary (Roberts, 1949: 12). Roberts maintains that disease will show in the aura, the magnetic field around the body, long before it manifests itself in the physical body, and healers who are able to perceive changes at this level will identify disease before it even manifests (Roberts, 1950: 27). Regardless, though, of the specific cause of each individual illness, the purpose of healing treatments is 'to reharmonize and cleanse the body cells in a particular place' (Roberts, 1949: 14), and the manner in which this is done should remain 'a matter between God, yourself, the patient and the guides' (Roberts, 1949: 14).

Roberts explains two methods of healing: if the healer is in a trance, the healing is done according to the methods of the guide, but if the healer is conscious, the healing is done in collaboration with the guide (Roberts, 1949: 15-16).

In describing the role of the healing guides, Roberts refers to: 'unselfish souls' who 'come to blend their healing magnetism with ours' in order to 'reinforce our healing magnetism and make it very much stronger' (Roberts, 1949: 7), thus preventing the healing medium from using his or her own vital energies and allowing him or her to work without tiring, instead drawing energies from 'a more spiritually advanced realm' (Roberts, 1949: 7). Roberts further explains that as mediums develop their abilities, they 'emit a light which shines in the psychic realms. This light attracts many spirit entities who wish to work with a medium' (Roberts, 1949: 15).

The actual practical methods used by spiritual healers, according to Roberts, include first establishing a link between the patient, the healer and the healing guides. This can be done in a number of ways, such as by holding the hands of the patient, placing hands on the patient's head, or by placing the hands either side of the solar plexus of the patient (Roberts, 1949: 11-13). Equally, the guide might direct the hands of the healer to other parts of the body where disease is located (Roberts, 1949: 13). The same process can be carried out at a distance in a manner similar to that used in visualisation or concentration of thought (Roberts, 1950: 31).

Through these healing collaborations, spiritualists, in Roberts' view, 'have performed, and still are performing, amazing cures, merely by holding their hands in the area of the aura and transmitting this curative power' (Roberts, 1950: 30), and she describes a mediumistic vision of what can be seen during a healing as

the guide...stands at a distance from the medium and projects what appears as rays from his own person. These rays strike the aura of the medium, causing it to acquire a new brilliancy of colouring and to increase in size. When the healer places his hands in the aura of the patient, these same rays become focused into his hands and for a few minutes the patient, the healer, and the guide are linked into a unity by the waves of dazzling light which pass from one to another with incredible rapidity' (Roberts, 1950: 31).

However, despite such potency, Roberts points out that 'these discarnate souls, in spite of their tremendous compassion for suffering humanity, appear unable to transmit their healing without the aid of a medium (Roberts, 1950: 31).

New Thought healers

Charles Fillmore (1854-1948)

Charles Fillmore first became interested in mental healing techniques in 1886 during the illness of his wife Myrtle Fillmore, when she used affirmations and other mental healing techniques together with prayer, and recovered, as did others for whom Myrtle prayed. The Fillmores subsequently studied New Thought philosophy with Emma Hopkins and were both ordained as ministers in the New Thought movement, having already founded their own branch called Unity in 1889 (Dechant and Harley, 2005: 3095-3097).

The healing techniques described by Fillmore were based on creative law which 'is universal and could be taught to any man who would discipline his thoughts and words and center them on God-Mind' (Fillmore, 1940: 5). Indeed, the same techniques could, in Fillmore's view, explain the healing methods used by Jesus in the New Testament healing miracles (Fillmore, 1940: 3).

Fillmore understood perfect health to be the natural condition both of man and of the rest of creation (Fillmore, 1940: 24), and believed that 'the more enlightened man becomes the greater is his desire for perfect health' (Fillmore, 1940: 9). Illness was, in Fillmore's view, unnatural and was directly the result of man's separation from the 'creative power of a Supreme Being – name it what you will' (Fillmore, 1912: 257), due to wrong thought processes and a failure to conform to the laws of that creative power (Fillmore, 1912: 257). In essence, 'Our ills are the result of our sins or our failure to adjust our mind to Divine

Mind' and are the consequence of the 'lost contact with its life-giving currents' (Fillmore, 1940: 4-5). Such separation and wrong thought, according to Fillmore, resulted in the lack of vital force displayed by sick people (Fillmore, 1912: 258). And although it may not be possible to identify the specific thought responsible for causing a certain disease, because of the complexity of 'thought causes', the remedy was always the same: 'all healing methods, whether applied to self or others, consist in making a unity between the individual and the Universal Consciousness' (Fillmore, 1912: 257-258), as with 'the right state of mind established, man is restored to his primal and natural wholeness' (Fillmore, 1940: 5). Fillmore summarises the purpose of all spiritual healing treatments as being 'to raise the mind to the Christ Consciousness, through which all true healing is accomplished' (Fillmore, 1912: 258).

Fillmore presents his healing method as being 'Science...founded upon Spirit' and 'the Science of Spirit' (Fillmore, 1912: 5-6), with the source of healing power being in the Divine Mind and needing to be accessed by means of alignment in the human mind. Ideas, in Fillmore's view, are the key to healing, and using the mind according to revealed mental laws could bring about restoration of health (Fillmore, 1912: 11). Referring to 'the law of Mind' and even to God, himself, as being 'under the law of his mind action' (Fillmore, 1912: 17), Fillmore maintains that 'all manifestation in our world is the result of the ideas we are holding in mind and expressing' (Fillmore, 1912: 15). Essentially, man must bring his own mind into harmony with the Mind of God or with God's will (Fillmore, 1912: 18).

Fillmore describes the practical steps involved in a healing treatment as:

- 'Be convinced that man and the universe are under the direct creative power of a Supreme Being.'
- Understand 'that man needs but to conform to its laws to be healthy, happy and wise.'
- 'All healing methods...consist in making a unity between the individual and the Universal Consciousness.'
- 'The best way to make this unity with the Father Mind is by prayer.'
- 'Talk to the Father as if he were a present identity...until you will realize his Presence as clearly as you do visible things.'
- 'When you have stilled the outer senses, and are quiet, you are in the realm where thoughts are obedient to the Word.'
- 'Error thoughts must be told to go, and true thoughts to come in their place.'

At this point, a series of positive affirmation statements are used, according to the kind of change or healing which is desired (Fillmore, 1912: 257-258).

Emmet Fox (1886-1951)

Emmet Fox, aware of his own natural ability to connect with a healing power, studied New Thought philosophy and was eventually ordained in its Divine Science branch, publishing a number of texts himself on spiritual healing as practised within the New Thought movement.

Fox maintained that the New Thought method of healing was the ‘scientific way to Alter Your Life’ (Fox, 1931: 13), and was a kind of ‘Scientific Prayer’ (Fox, 1935: 149) based on universal and natural laws which could enable the practitioner to access divine power in order to obtain health, success, prosperity and joy in his or her life (Fox, 1931: 1).

Being universal and scientific meant, in Fox’s view, that spiritual healing was not a special gift reserved only for mystics or saints, but rather it was available to anyone (Fox, 1931: 147). Indeed, Fox maintains that ‘it is possible, and not even very difficult, for the ordinary person, once he has become aware of the possibility, to begin to contact that power consciously’ (Fox, 1931: 144-145). However, he does acknowledge that certain people are naturally gifted with healing ability and that ‘what we have usually been accustomed to call a genius is a man or woman who *happens* to have this faculty of contacting the “Great Universal Power”’ (Fox, 1931: 144).

The causation of all illness, for Fox, was with the mind: ‘Thought is the real causative force in life, and there is no other’ (Fox, 1935: 9), and ‘the present condition of every phase of your life in fact - is entirely conditioned by the thoughts and feelings which you have entertained in the past’ (Fox, 1935: 8). Equally, ‘the condition of your life tomorrow, and next week, and next year, will be entirely conditioned by the thoughts and feelings which you choose to entertain from now onwards’ (Fox, 1935: 8-9). Fox understood this as the ‘Great Cosmic Law’ (Fox, 1935: 10) and went further, claiming that ‘Our belief in the reality of evil and limitation is the cause of all our troubles. It is the cause of sickness’ (Fox, 1931: 68) and ‘Sickness cannot affect you if your mentality contains a strong belief in health’ (Fox, 1931: 76). The purpose, therefore, of healing should be to change one’s life by using the mind correctly in order to restore the health, happiness and success which are ‘the natural condition of mankind’ (Fox, 1931:1) and to realise a state of joy, which is ‘one of the highest expressions of God as Life’ (Fox, 1931: 118).

In Fox's method of spiritual healing it was necessary to first become acquainted with the 'Laws of Life', to take control, and to apply these laws and reject all negative thoughts. Fox states that 'Man has dominion over all things when he knows the Law of Being, and obeys it' (Fox, 1931: 3) and that 'What happens is that you apply the Law, and then conditions change spontaneously' (Fox, 1935: 13), but also that 'The Law will give you authority over the past as well as the future. The Law will make you master of Karma instead of its slave' (Fox, 1931: 4). Fox outlines the essential healing method thus:

All you have to do is this: Stop thinking about the difficulty, whatever it is, and think about God instead. This is the complete rule, and if you will do this, the trouble, whatever it is, will presently disappear. It makes no difference what kind of trouble it is...it may concern health, finance, a lawsuit, a quarrel, an accident, or anything else conceivable; but whatever it is, just stop thinking about it, and think of God instead – that is all you have to do. (Fox, 1931, *The Golden Key to Prayer*)

Ernest Holmes (1887-1960)

Ernest Holmes studied and became an ordained minister in the Divine Science branch of New Thought prior to founding his own branch of New Thought called Religious Science in 1927. From the outset, Religious Science defined itself by its rejection of any identification with Christianity (De Chant, 2005) and proposed spiritual mind treatment as a means to achieving health, harmony, peace and happiness.

Spiritual healing, as understood by Holmes, was not a special gift but could be practised by anyone who would understand the Religious Science principles. Indeed, Holmes maintains that healers do not do anything that their patients could not do for themselves (Jennings, 2002: 144), and also refers to himself as being extremely normal and never having experienced visions or any other unusual or mystic phenomena (Holmes, 1996: 25-40).

Holmes maintains that causation of illness is in the mind, that 'disease is largely a state of mind' (Holmes, 1938: 216) and that 'Conditions are the reflections of our meditations and nothing else' (Holmes, 1938: 291). In particular Holmes proposes that worry, fear, anger, jealousy and other similar emotions, being conditions of the mind, are hidden causes of much illness (Holmes, 1938: 144). Holmes suggests that resolution of any condition, or at least improvement, could be achieved by restoring an appropriate state of mind which would then be reflected by harmony or health in the body, given that the mind controls the body and that the body is only a reflection of the mind (Holmes, 1938: 99).

The method of spiritual healing used by Holmes employed a series of affirmations, declarations or prayers and relied on the power of a ‘Universal Principle’ or ‘Universal Mind’. Holmes describes the method as follows:

suppose we have received a request for help for a physical condition. Immediately we take the name of the person in consciousness – as every man maintains his identity in Universal Mind, just as he maintains it in the physical world – and we declare the truth about the *spiritual man*, and we know that the truth about Spiritual Man is the truth about that man’s condition right now. First, recognition; second, unification. We continue to do this until something comes into our consciousness which says, ‘yes’. We know the work has been accomplished. This is the third step: realization. This is what a treatment is. (Holmes, 1938: 318)

and also

A practitioner should think of his patient as a perfect entity, living in a perfect Universe, surrounded by perfect situations and governed by perfect Law’ (Holmes, 1938: 217).

For Holmes, in this mind treatment, ‘we should feel as though the whole power of the universe were running through the words we speak’, as those same words must ‘overshadow the thoughts and actions that have brought about a discordant condition’ (Holmes, 1938: 413). However, Holmes also clarifies that healing is not an arbitrary process of creation, but rather it is a revelation of the true condition of man, or ‘a revelation, through the thought of the practitioner to the thought of the patient’ (Holmes, 1938: 212).

Christian Science healers

Mary Baker Eddy (1821-1910)

Following a long quest for health, and already familiar with the healing techniques of the period, as well as the teachings of Phineas Quimby regarding the mental causes of illness, Mary Baker Eddy developed her own theological-metaphysical approach to healing after experiencing what she claimed was an ‘instantaneous’ recovery in 1866, from severe injuries suffered in an accident (Gottschalk, 2005). According to Eddy, this recovery occurred whilst reading the account of one of the New Testament healings of Jesus, and it became the foundation for her Christian Science teaching which she later set out in her 1875 text *Science and Health with Key to the Scriptures* (Gottschalk, 2005: 1745).

Spiritual healing, in Eddy’s view, far from being a special gift, could be learned and applied by anyone who would study Christian Science, and consisted only in the correct understanding of a divine Principle and in the abandonment of material laws which were binding mortal man to sickness, sin and death (Eddy, 1906: 229).

Eddy maintained that the cause of all illness lay in an incorrect understanding of reality and that material reality – including all disease, sin and sickness – was an illusion created by the limitation of the human mind (Eddy, 1906: 229). Indeed, Eddy suggests that ‘Christian Science explains all cause and effect as mental, not physical’ and that even death constituted ‘An illusion, the lie of life in matter; the unreal and untrue’ (Eddy, 1906: 584).

If it is accepted that illness is ‘an experience of the so-called mortal mind’ and ‘fear made manifest on the body’ (Eddy, 1906: 493), Eddy claims that Christian Science ‘takes away this physical sense of discord, just as it removes any other sense of mortal or mental inharmony’ (Eddy, 1906: 493). By removing human illusion, and instead relying on what Eddy terms ‘divine Principle’, each person is enabled to experience the presence of God directly, such that ‘God is no longer a mystery to the Christian Scientist, but a divine Principle, understood in part, because the grand realities of Life and Truth are found destroying sin, sickness, and death’ (Eddy, 1908a). The purpose, then, of Christian Science healing was to dispel the material illusion created by the limited human mind and to replace it with the truth of spiritual reality. The accompanying physical healing that takes place, Eddy maintains, is secondary and ‘only the outward and visible evidence of an inward and spiritual grace’, whereas ‘it is within individual consciousness that all Christian Science healing takes place’ (Christian Science Publishing Society, 1966: 237-238). Indeed, Eddy maintains that Christian Science ‘explains to anyone’s perfect satisfaction the so-called miracles recorded in the Bible’ (Eddy, 1908b: 15), and that such signs and wonders are only given to demonstrate the truth of divine spiritual reality (Eddy, 1906: 150).

The actual method of spiritual healing proposed by Eddy consisted of a form of spiritual re-education and counselling, using Eddy’s own texts together with selected passages from Christian scripture.

Eddy founded the Church of Christ, Scientist in 1879, and among its activities were the publication of *Christian Science Monitor*, an international newspaper which expressed the political, social and practical ideals of Eddy’s teaching, and *Christian Science Journal*, a monthly publication which listed Christian Science healing practitioners together with testimonies of those who claimed to have been healed as a result of Eddy’s teachings (Gottschalk, 2005: 1747).

Esoteric healers

Alice Bailey (1880-1949)

Despite Alice Bailey's Christian upbringing in the Anglican tradition, it was her acquaintance with theosophical and spiritualist ideas of the period, together with two personal mystic experiences, which would shape the spiritual course of her life and work.

The first such experience Bailey describes was an encounter, at the age of fifteen, with a mysterious stranger whom she retrospectively identified as having been a 'Master of Wisdom' in the theosophical tradition (Bailey, 1951: 34-36), and the second experience was her encounter with Djwhal Khul (referred to in Bailey's published works as 'the Tibetan'), the master who Bailey claims appeared to her in 1919 and from whom she would go on to record, by clairaudient dictation, her series of published texts (Bailey, 1951: 245). Of these texts, it is *Esoteric Healing* (1953) which has influenced theories of spiritual healing during the twentieth century and in which, although never claiming to possess any healing abilities herself, or even to having been a follower of her own teachings, Bailey sets out the principles of spiritual healing as would be required and appropriate within the detailed planetary cosmology described in her series of other works.

Bailey's teachings on esoteric healing are broadly theosophical and involve a complex and highly detailed cosmology which includes the spiritual evolution of mankind, karma, reincarnation, the subtle energy bodies of the human being, and the existence of a hierarchy of spiritual masters (Hammer, 2015: 349). Within such a framework, Bailey describes all disease as ultimately caused by a lack of harmony between the spiritual and material natures of humanity (Bailey, 1953: 12). The specific causes of this lack of harmony can be basic causes, such as accidents, infections, diseases, or inherited conditions (Bailey, 1953: 18); they can be psychological causes (Bailey, 1953: 24); causes emanating from group life (Bailey, 1953: 221-226); or they can be due to karmic liabilities (Bailey, 1953: 259-263).

Bailey describes what she refers to as elementary forms of healing such as mental healing and magnetic healing, and suggests that the level on which a healer can heal will depend on the point of spiritual evolution which the healer himself or herself may have reached (Bailey, 1953: 26). As far as esoteric healing is concerned, Bailey notes that the elementary stages at which this form of healing can be carried out at present are limited due to humanity's lack of spiritual development (Bailey, 1953: 693-694). However, the broad outline of her proposed healing method is that the healer must endeavour to make a

link both with the patient to be healed and also with the spiritual master with whom the healer will have previously achieved contact through esoteric forms of meditation (Bailey, 1953: 27). The spiritual healing proposed by Bailey is, in essence, more theoretical than demonstrated, and remains dependent on the existence of different qualities of energy (referred to as 'rays') which would be transmitted from the master, via the healer, to the patient (Bailey, 1953: 27).

The conditions necessary, according to Bailey, for esoteric healing to take place require the healer first of all to achieve magnetic purity through purity of life (Bailey, 1953: 30). Bailey then goes on to list the very demanding qualities required in an esoteric healer as being: i) the power to make contact and work as a soul; ii) the power to command the spiritual will; iii) the power to establish telepathic rapport; iv) having exact knowledge of spiritual science; v) the power to reverse, reorient and exalt the consciousness of the patient; vi) the power to direct soul energy to the necessary area; vii) the power of magnetic purity and the needed radiance; viii) the power to control the energy centres of the head; ix) power over his own energy centres; x) the power to use both ordinary and esoteric methods of healing; xi) the power to work magnetically; xii) the power to work with radiation; xiii) the power to practice complete harmlessness at all times; xiv) the power to control the will and work through love; and xv) the power eventually to wield the Law of Life – a very rare ability (Bailey, 1953: 524-528).

Alice Bailey, together with her husband Foster Bailey, founded the Lucis Trust, an organisation dedicated to the dissemination of the teachings of Djwhal Khul as set out in Bailey's published works.

Independent healers

Christopher Woodard (1913-2001)

Having completed a degree in psychology prior to training in medicine and then serving in the Navy, Christopher Woodard eventually opened a private clinic for the treatment of athletic injuries (Woodard, 1953: 16). Woodard attributes his appreciation of the spiritual and psychological aspects in the treatment of disease to his experience with athletes preparing for competition (Woodard, 1953: 17), and describes witnessing incidents of healing which he 'would have been very blind had I failed to recognise as of spiritual origin' (Woodard, 1953: 25). This recognition, together with the unexpected recovery from meningitis of his own son following interventions of prayer and spiritual healing,

secured Woodard's convictions regarding spiritual healing and his acceptance of his own abilities to heal (Woodard, 1953: 29-34).

Although Woodard expresses the belief that 'all Christian people should be able to heal in the Name of Jesus Christ' (Woodard, 1955: 87), he recognises that 'it is a power that has largely been lost in the last few hundred years' (Woodard, 1955: 70) and that 'there are, however, some people who have...a special charismatic gift of healing' (Woodard, 1955: 87). Referring to his own ability to heal, Woodard notes 'I must make it perfectly clear that I do not believe it is the very ordinary Christopher Woodard who is responsible...I always ask Christ to use me again as a channel of His divine power to heal' (Woodard, 1955: 13). In particular, he notes that this gift does not depend on personal merit or ability, and that 'I find God uses the most unexpected people – people that I would have thought most unlikely channels' (Woodard, 1957: 124).

Woodard describes a specific mystic experience which occurred in 1955 whilst he was meditating in the Garden of Gethsemane during a pilgrimage to Jerusalem:

I clearly heard a Voice speak to me. I was told that in future all patients who were sent to me in my work were meant to get completely better. If they did not, the reasons would be made clear to me. They might be due to my fault, the patient's fault, or those around us, but we should be given to know where the fault was. (Woodard, 1957: 44-45)

In addition to this experience, Woodard describes experiencing clairvoyance, clairaudience and intuitions. He also acknowledges his belief in the significance of dreams and admits to having participated in spiritualist meetings (Woodard, 1955: 132-134). Indeed, he states that 'few people have had such a variety of psychic experience as I; in fact I never know what new paranormal phenomenon is going to reveal itself to me next' (Woodard, 1957: 72). And whilst warning of the dangers that can accompany such practices, Woodard maintains that 'I can find no argument at all against seeking guidance through clairvoyant, clairaudience, prophecy, mediumship or other means, so long as I do it under the overruling guidance of prayer through Jesus Christ' (Woodard, 1957: 73), and concludes that 'For myself, I have reached a stage where I am so secure in my communion with Jesus that I do not need any other medium to help me live fully. That does not mean that I never went to mediums or séances in order to reach this happy state' (Woodard, 1957: 81).

The causes of illness, in Woodard's view, are many, including psychological factors (Woodard, 1953: 100), spiritual factors (Woodard, 1953: 109) and also the presence of evil in the world (Woodard, 1955: 21-22). Indeed for Woodard, 'all disease denotes a disharmony with creation, a lack of "oneness" with the universe that God has Made'

(Woodard, 1955: 69). However, he goes on to suggest that ultimately ‘all disease originates in the spirit and can be cured by a right attitude to these things’ (Woodard, 1953: 56), also claiming that ‘possession by an evil or negative spirit is a far more common phenomenon than most people realise’ and ‘I should say that ninety per cent of people suffer from some sort of possession’ (Woodard, 1955: 140). Similarly, he warns that many people ‘feel, and tend to ignore, the kind of mental tension that is brought on by worry, distress or annoyance’, but that ‘it is very important indeed to try and train oneself to dispel such a tension just as soon as it develops’ (Woodard, 1953: 124).

The purpose of healing, in Woodard’s view, was simply to cure disease, restore wholeness and make well (Woodard, 1955: 71, 153), with harmony and peace being signs of healing having taken place (Woodard, 1953: 111).

Although he maintained that all healing methods were useful (Woodard, 1957: 125-126), Woodard was clear about his own method of healing, stating ‘I am not interested in following any other...I believe Christ gave us the whole answer’ (Woodard, 1957: 9). Prayer, laying on of hands, and then to trust the supernatural healing power to heal, were the methods Woodard used, expressing also a preference for healing to be performed in an atmosphere of peace or quietness, such as that of a consecrated building and, if possible, in the company of a priest (Woodard, 1953: 114).

Woodard appeared before the Archbishops’ Commission on Divine healing in 1953 to give evidence on healing.

Gordon Turner (1929-1975)

Gordon Turner’s interest in the paranormal began when as children he and his brother would see forms of people moving around their bedroom, including one figure in particular who was later identified from photographs as being someone known to the family, but who was no longer alive (Turner, 1963: 156). Years later, following the death of his brother, Turner visited a spiritualist church and eventually joined a ‘developing circle’ for mediumship in the hope of receiving communication from his brother (Turner, 1963: 164). On his second visit to the developing circle, Turner spontaneously went into a trance state and experienced leaving his body and communicating with discarnate spirits (Turner, 1963: 164). This is how his mediumship and then healing began.

In Turner's view, all disease and sickness is ultimately the expression of imbalance, whether caused by a person's history, environment, emotions, or by the influence of other people, be they living or otherwise (Turner, 1963: 38-39). Turner divides illness into three categories: psychosomatic (e.g. depression, hysteria), organic (e.g. infection, injury), and complex (a combination of both, creating disharmony). He also suggests that more than eighty per cent of illness may be psychosomatic and that the mind exercises immense control over the conscious personality (Turner, 1963: 27-28). However, Turner also maintains that 'A person will not be ill unless he is mentally and physically in a state which admits disorder' and that 'An unhealthy mind can destroy a healthy body far more quickly than an unhealthy body can destroy a healthy mind' (Turner, 1963: 82). Finally, Turner warns that our lives are constantly affected by the actions of those around us and that 'where unhealthy relationships exist they undoubtedly become a causative factor in disease' (Turner, 1963: 73-74), and that this harmful influence can even come from spirits of those who have died but do not want to relinquish physical experience and expression, and he warns that 'Bad company and wrong thinking on a physical level attracts spirit beings of a like nature, who gather like vultures to feed on the aberrations of weak and misguided people' (Turner, 1963: 78).

The purpose of spiritual healing, for Turner, was simply to restore harmony on whichever level it has been disturbed, in order to eradicate sickness and pain and to allow the normal function of body and mind to be restored (Turner, 1963: 14), and he proposes that the spiritual healer achieves this by stimulating 'the natural processes of healing that, however dormant, lie somewhere within the patient himself' (Turner, 1963: 14).

Regarding the method he used for spiritual healing, Turner stresses that because of the lack of adequate language to describe spiritual things, the actual methods used in healing can only be described in crude physical terms (Turner, 1963: 15), although he notes that all healers appear to agree that their power is ultimately derived from God (Turner, 1963: 88). In addition to recognising the practices of magnetic healing, divine healing and spirit operations⁶, Turner describes the practice of spiritual healing as: i) involving power from outside of the self; ii) being directed or controlled by other intelligences; iii) healers and patients often being aware of the presence of other personalities during the healing; iv) effects being either instantaneous or gradual; and v) most healers working in a conscious

⁶ Spirit operations are healings where the healer appears to perform mime of a surgical procedure. Theories put forward by those who perform such operations (which remain controversial and have been subject to accusations of fraud or 'sleight of hand') suggest that the healings are in fact being carried out in the 'etheric body' level of the patient (Singer, 1990; Melton, 2008: 259).

state, but a small number working whilst in trance, with the controlling spirit usually being a doctor or surgeon (Turner, 1963: 18).

Turner maintains that whilst many healers use elaborate gestures and movements, these are completely unnecessary and healing can be carried out just as well at a distance (Turner, 1963: 90). And although there is little agreement amongst healers as to the precise nature or source of this power (Turner, 1963: 88), Turner identifies three elements which are essential in spiritual healing: i) a healing force must exist; ii) there must be transmission of this force through the healer; and iii) the healing force must undergo conversion in order to operate within the patient (Turner, 1963: 89). Beyond this, Turner states that 'I firmly believe that it does not matter what God it is that the healer believes in or what ritual his work assumes' (Turner, 1963: 93). Turner himself was a practising spiritualist, but embraced all forms and expressions of spiritual healing as being valid and useful (Turner, 1963: 84-85).

4.2 Summary of healers' accounts

This section will present the information discussed in section 4.1 *Overview of healers' accounts* summarised in the form of a series of tables, with the aim of highlighting similarities and/or differences between the individual healers being examined in this dissertation, as well as between the six healer categories (Christian, Spiritualist, New Thought, Christian Science, Esoteric and Independent healers).

Table 4.1 compares the spiritual healing and the holistic milieu healing models side by side in terms of key criteria common to both types of healing, but which can serve to distinguish holistic milieu healing from what has traditionally been understood as spiritual healing. These criteria have been selected based on the literature discussed in Chapter 2 *Literature review*.

Tables 4.2 to 4.14 present the healers according to the same list of criteria, but this time in an individual format specific to each of the thirteen healers whose accounts were examined in the previous section.

Table 4.15 compares all of the healers examined in this dissertation, both side by side as well as across their six categories. This final table serves to highlight how far each of the healers can be seen to conform best either to the spiritual healing model or to the holistic milieu healing model, and also highlights the extent to which patterns can be identified both within and between the six healer categories.

Table 4.1 Spiritual healing and holistic milieu healing compared

	Spiritual healer	Holistic milieu healer
Special gift or anyone	Special, gifted individual.	Anyone/everyone can be a healer.
How became healer	Experiential. Ability often recognised by others.	Theoretical/philosophical ideas.
Innate or learned	Innate (not chosen).	Learned/studied (choice).
Method of healing	Various.	Various.
Control of healing	Healer is not in control or has limited control. Not usually able to explain.	Healing can be learned, controlled, manipulated, understood and explained.
Source of power	Power lies beyond human self. Intervention of God/spirit(s).	Self/higher self. Universal energy. Under human control.
Causation of illness	Illness is caused by sin in the world. Illness is part of nature.	Illness is caused by wrong understanding of reality. Unnatural for human to be ill.
Purpose of healing	To cure/heal. Sign or evidence of power.	To educate into new/correct way of thinking.
Effects of healing	Works/cures. Effective.	Not necessary to work/cure or be effective.
Mystic experience	Generally yes.	Not necessary.
Affiliated or independent	Not necessary, but can be and often is.	Adherent of holistic milieu philosophy or worldview.

Notes: Criteria selected from sources discussed in Chapter 2 Literature review.

Table 4.2 James Moore Hickson (*Christian healer*)

Special gift or anyone	Special gift given to chosen individuals, but needs to be developed and used or it will remain dormant.
How became healer	Felt inner voice guide him to lay his hands on people who were ill or suffering. Hickson's mother recognised this as a gift of healing.
Innate or learned	Innate (not chosen). But can remain dormant if not used.
Method of healing	'Ordinary' methods of Church (prayer, united intercession and Holy Communion). 'Special means' (laying on of hands in order to transmit divine healing power to person).
Control of healing	God/divine. Healer is not in control.
Source of power	God/divine. Power lies beyond the human self.
Causation of illness	Sin in the world. Physical diseases are manifestations of evil and contrary to the laws of God.
Purpose of healing	To demonstrate divine power to heal and to disseminate the Gospel message of healing.
Effects of healing	To heal disease. To overcome and liberate from evil. To restore health, strength and a right relationship with God's will.
Mystic experience	Does not mention specific mystic experience, but was aware of an inner voice, which he believed to be divine, guiding him in his healing. Also aware of 'the Lord's Personal Presence'.
Affiliated or independent	Christian in Anglican tradition. Recognised, and his writings endorsed by the Archbishop of Canterbury and the Bishop of Winchester.

Table 4.3 Dorothy Kerin (*Christian healer*)

Special gift or anyone	Special gift.
How became healer	Became a healer following her own dramatic recovery from severe illness, together with a series of mystic experiences.
Innate or learned	Innate (not chosen).
Method of healing	Prayer alone, or prayer and laying on of hands. Also by sending an object to the sick person. Reports of patients being healed after drinking water from the water pool in the garden of her healing sanctuary.
Control of healing	God/divine. Healer is not in control.
Source of power	God/divine. Power lies beyond human self.
Causation of illness	Separation from spiritual realities caused by unbelief and worldliness.
Purpose of healing	To demonstrate the power of God working in the Church.
Effects of healing	To restore communion with God and subsequent health and peace of mind.
Mystic experience	Describes two mystic experiences (the first prior to being healed, and the second a vision in which she was told she would heal the sick). Also aware of a distinct voice speaking to her and of 'Our Lord's presence'.
Affiliated or independent	Christian in Anglican tradition. Identified her healing as part of the Church's healing ministry.

Table 4.4 John Maillard (*Christian healer*)

Special gift or anyone	Denied possessing special gift, however others recognised his special ability to heal. Believed all Christians could be channels of divine healing.
How became healer	Ordained as a minister in the Anglican Church. Met the healer James Moore Hickson and was introduced to the role of healing in the ministry of the Church.
Innate or learned	Innate (not chosen).
Method of healing	Methods of Church – prayer, anointing, sacraments such as Holy Communion, and the laying on of hands.
Control of healing	God/divine. Healer is not in control.
Source of power	God/divine. Power lies beyond the human self.
Causation of illness	Consequences of sin in the world (both personal and collective). Causes of illness always spiritual not physical. Connection between evil, sickness and suffering.
Purpose of healing	To heal a sick and sinful world. To restore harmony between the laws of the body and the will of God. To demonstrate the reality of the spiritual realm.
Effects of healing	Effects of healing are spiritual benefits.
Mystic experience	Maillard gives a detailed account of a mystic vision in which he saw the sick of the parish and the figure of Jesus Christ who was unable to touch them because his hands were tied behind his back due to the lack of faith in the Church.
Affiliated or independent	Ordained minister in the Anglican Church.

Table 4.5 Eileen Garrett (*Spiritualist healer*)

Special gift or anyone	Special gift.
How became healer	Experienced trance states and control personalities taking over and using her as their medium of communication and/or healing.
Innate or learned	Innate (not chosen).
Method of healing	Whilst in trance state, Garrett was taken over by control personalities. Her healing control was known as ‘Abdul Latif’ and claimed to be a twelfth-century physician and astronomer from the court of Saladin.
Control of healing	The control personalities. Healer is not in control.
Source of power	Garrett does not know, but describes being aware of ‘a greater power than I can comprehend’. Power lies beyond the human self.
Causation of illness	Being less than whole. Failure to recognise spiritual aspect of self due to the pace and nature of life in modern society.
Purpose of healing	To cure/heal. To restore spiritual awareness. To give evidence of other realities.
Effects of healing	Effective.
Mystic experience	Trance states, visions, auditory experiences, psychic travel and observation over long distances.
Affiliated or independent	Independent, but associated with paranormal research.

Table 4.6 Harry Edwards (*Spiritualist healer*)

Special gift or anyone	Special gift, but should be developed.
How became healer	Early experiences of healing just happened. Contact with spiritualists and mediums identified Edwards as a healer. Trance states happened spontaneously.
Innate or learned	Innate (not chosen). Cannot be learned.
Method of healing	Two methods: trance healing/non-trance healing. Link must be established with spirit guides, then the guides control all aspects of the healing.
Control of healing	Spirit guides. Healer is not in control.
Source of power	God/divine, but via intermediary spirits known as spirit guides. Power lies beyond the human self.
Causation of illness	Disharmonies of the mind. Sickness of the soul expressed in frustrations and inhibitions.
Purpose of healing	To heal illness and disease. To awaken spiritual consciousness in people. To demonstrate spiritual realities.
Effects of healing	Effective, including recoveries which cannot be accounted for by medical science.
Mystic experience	Trance states. Worked in collaboration/dialogue with spirit guides.
Affiliated or independent	Spiritualist. Expressed that a person's affiliation was not relevant to their healing ability.

Table 4.7 Ursula Roberts (*Spiritualist healer*)

Special gift or anyone	Special gift. Healers often have different magnetic field to ordinary people.
How became healer	Spirits contacted Roberts aged fourteen. Later she developed her mediumistic abilities.
Innate or learned	Innate (not chosen).
Method of healing	Either in trance or conscious. Link is formed between patient, healer and healing guide by placing hands on the patient. Healing guide takes over and performs the healing.
Control of healing	Healing guides. Healer is not in control.
Source of power	Healing guides/God/ultimate power. Power lies beyond the human self.
Causation of illness	Negative thought processes. Poor food choices, air and water quality. Many causes, but they can be left to the healing guides to deal with.
Purpose of healing	To reharmonise and cleanse body cells. To provide evidence of other levels of existence.
Effects of healing	Effective. Cures/heals.
Mystic experience	Mediumship experiences. Describes one specific experience of feeling the presence of something greater than the healing guides.
Affiliated or independent	Spiritualist.

Table 4.8 Charles Fillmore (*New Thought healer*)

Special gift or anyone	Anyone. Healing is based on universal mental and spiritual laws.
How became healer	Contact with mental healing techniques during illness of wife, Myrtle Fillmore. Subsequently studied New Thought philosophy.
Innate or learned	Learned (choice). Can be learned by anyone once they know universal laws.
Method of healing	Knowing and accepting a series of laws of mind. Aligning human mind with Divine Mind. Using a series of positive affirmation statements.
Control of healing	Human control. Healer is in control.
Source of power	Divine Mind/Supreme Mind/Universal Consciousness.
Causation of illness	Wrong thought processes. Failure to adjust human mind to Divine Mind. Separation from the creative power of the Divine Mind.
Purpose of healing	To align the human mind with the Divine Mind. To raise the mind to the Christ Consciousness through which all healing is accomplished.
Effects of healing	Does not discuss results, rather method and theory.
Mystic experience	No. Does not mention.
Affiliated or independent	Founder of Unity branch of New Thought.

Table 4.9 Emmet Fox (*New Thought healer*)

Special gift or anyone	Anyone.
How became healer	Discovered his own ability and studied New Thought philosophy. Was ordained in Divine Science branch of New Thought.
Innate or learned	Learned/studied (choice). Some people are naturally able to practise these healing techniques.
Method of healing	Mental discipline. Thought selection/control. Rejecting all negative thought. Using mind according to scientific laws of life in order to access Divine power.
Control of healing	Human mind.
Source of power	Divine power, but under human control by the application of scientific prayer/thought control.
Causation of illness	Mind. Bad habits of negative thinking. Belief in evil/limitation/illness. Thought is the real causative force in life. Unnatural to be ill.
Purpose of healing	To know and apply 'Laws of Life' to access divine power. To be in control of all aspects of life. To restore man's natural condition of health, happiness and success.
Effects of healing	Brings about a new way of life. Realisation of joy, health, success and happiness.
Mystic experience	No. Does not mention.
Affiliated or independent	Ordained minister in Divine Science branch of New Thought.

Table 4.10 Ernest Holmes (*New Thought healer*)

Special gift or anyone	Anyone. Practitioners/healers are not doing anything that the patient cannot do himself.
How became healer	Studied Divine Science and was ordained as a minister.
Innate or learned	Learned/studied (choice).
Method of healing	A form of meditation/prayer in which a series of mental affirmations or statements of truth are made until it is 'felt' that the healing has occurred.
Control of healing	Human mind completely controls thought processes and (in accordance with spiritual laws) consequently controls the body.
Source of power	The Universal Spirit, operating through a Universal Mind.
Causation of illness	Illness is mainly a state of mind. Emotions are a hidden cause of illness.
Purpose of healing	To restore the patient to the 'truth' of his human condition, which is good health, by the power of mind.
Effects of healing	Improvement or healing of condition anticipated.
Mystic experience	No. Does not mention.
Affiliated or independent	Studied Divine Science and was ordained minister. Founded Religious Science branch of New Thought.

Table 4.11 Mary Baker Eddy (*Christian Science healer*)

Special gift or anyone	Anyone.
How became healer	Experienced instantaneous healing whilst reading one of the New Testament accounts of healings performed by Jesus. Developed own metaphysical theology.
Innate or learned	Learned/studied (choice).
Method of healing	Re-education of patient regarding spiritual realities through spiritual counselling using Eddy's texts and Christian scripture.
Control of healing	Practitioner or patient controls process of correcting error of thought and accepting new reality.
Source of power	God/divine.
Causation of illness	An incorrect understanding of reality. All illness is an illusion of reality, brought about by the limitations of the human mind.
Purpose of healing	To replace material illusion of illness, sin, evil and death with truth of spiritual reality.
Effects of healing	Physical healings are only the outward sign or manifestation of inner healing of the consciousness.
Mystic experience	No. Does not mention. But claimed to have received miraculous instantaneous healing.
Affiliated or independent	Founded Christian Science.

Table 4.12 Alice Bailey (*Esoteric healer*)

Special gift or anyone	Anyone. Learned through personal spiritual development/evolution and studying esoteric knowledge.
How became healer	Bailey never claimed to be a healer or to practise any of the techniques she describes.
Innate or learned	Learned/studied (choice).
Method of healing	By transmission of different qualities of energies (known as 'rays') from the spiritual master, via the healer, to the patient.
Control of healing	The healer, through knowledge of esoteric energies and the laws governing them. Ultimately the spiritual hierarchy has control.
Source of power	The spiritual hierarchy. Access to esoteric energies and spiritual hierarchy is through knowledge of spiritual laws governing human evolution.
Causation of illness	Lack of harmony between the spiritual and material natures of humanity.
Purpose of healing	To restore harmony and progress spiritual evolution.
Effects of healing	Resolution of illness. Spiritual progression.
Mystic experience	Encounter with a spiritual master at age of fifteen. Contact with spiritual master Djwhal Khul (the Tibetan). Clairaudience, telepathy, clairvoyant vision.
Affiliated or independent	Founded Lucis Trust and Arcane School to disseminate teachings of Djwhal Khul.

Table 4.13 Christopher Woodard (*Independent healer*)

Special gift or anyone	Special gift, although Woodard believed that all Christians <i>should</i> be able to heal in the Name of Jesus, as promised in the New Testament.
How became healer	Woodard was a medical doctor working with athletes. He began to experience patients being healed. His son recovered from meningitis following intervention of prayers and spiritual healing.
Innate or learned	Innate (not chosen).
Method of healing	Prayer and laying on of hands. Preferably in an atmosphere of peace and quietness such as in a consecrated building and, if possible, in the company of a priest.
Control of healing	God/divine. Healer is not in control.
Source of power	God/divine. Power lies beyond the human self.
Causation of illness	Psychological and spiritual factors. Evil in the world. Demonic possession.
Purpose of healing	To cure disease, restore wholeness and make well.
Effects of healing	Harmony and peace are signs that healing has taken place.
Mystic experience	Describes one specific mystic vision and a variety of psychic experiences including clairvoyance, clairaudience and intuitions.
Affiliated or independent	Independent.

Table 4.14 Gordon Turner (*Independent healer*)

Special gift or anyone	Special gift, but needs to be developed to be fully useful.
How became healer	Visited Spiritualist church and joined ‘developing circle’ for mediumship following death of brother. On second visit to developing circle, spontaneously went into trance and experienced leaving his body and communicating with discarnate spirits.
Innate or learned	Innate (not chosen).
Method of healing	Laying on of hands. Healer can be either conscious or in trance. Healing can also be performed at a distance.
Control of healing	Healing power is directed by other intelligences. Healer is not in control.
Source of power	God/divine. Power lies beyond the self
Causation of illness	Expression of imbalance caused by patient’s history, environment, emotions, or by the influence of other people, living or otherwise. Unhealthy relationships, including with the spirits of those who have died.
Purpose of healing	To restore harmony on whichever level it has been lost. To eradicate sickness and pain.
Effects of healing	Effective. Restoration of normal function of body and mind.
Mystic experience	Trance, psychic experiences and communication with discarnate spirits.
Affiliated or independent	Independent.

Table 4.15 Analysis of healing attributes by healer/healer type

Healer	Special gift or anyone	How became healer	Innate or learned
James Moore Hickson	Special gift	Felt voice guide him Mother recognised gift	Innate
Dorothy Kerin	Special gift	Own healing and mystic visions	Innate
John Maillard	Others recognised special gift	Others recognised his healing ability	Innate
Eileen Garrett	Special gift	Spontaneous trance and mediumship	Innate
Harry Edwards	Special gift	Spontaneous trance and mediumship	Innate
Ursula Roberts	Special gift	Through mediumship	Innate
Charles Fillmore	Anyone	Studied New Thought philosophy	Learned
Emmet Fox	Anyone	Studied New Thought philosophy	Learned
Ernest Holmes	Anyone	Studied Divine Science philosophy	Learned
Mary Baker Eddy	Anyone	Experienced own healing	Learned
Alice Bailey	Anyone	Never claimed to be a healer herself	Learned
Christopher Woodard	Special gift	Healing of son and mystic vision	Innate
Gordon Turner	Special gift	Spontaneous trance and mediumship	Innate

Key:

	Christian Healer
	Spiritualist Healer
	New Thought Healer
	Christian Science Healer
	Esoteric Healer
	Independent Healer

Table 4.15 Analysis of healing attributes by healer/healer type continued

Healer	Method of healing	Control of healing	Source of power
James Moore Hickson	Prayer and laying on of hands	God/Divine	God/Divine
Dorothy Kerin	Prayer and laying on of hands	God/Divine	God/Divine
John Maillard	Prayer and laying on of hands	God/Divine	God/Divine
Eileen Garrett	In trance; control personality heals	Control personalities	Does not know Intermediary spirits
Harry Edwards	Trance or conscious Spirit guide heals	Spirit guides	God/Divine via intermediary spirits
Ursula Roberts	Healing guide heals via healer	Healing guides	God/Divine Healing guides
Charles Fillmore	Thought control Affirmations	Human control	Supreme Mind/ Universal Consciousness
Emmet Fox	Thought control	Human control	Divine power under human control by scientific prayer
Ernest Holmes	Thought control Affirmations	Human mind	Universal Spirit through a Universal Mind
Mary Baker Eddy	Spiritual counselling and re-education	Healing practitioner	God/Divine
Alice Bailey	Transmission of energies from master	Healer through esoteric knowledge of energies and laws	Access to esoteric energies
Christopher Woodard	Prayer and laying on of hands	God/Divine	God/Divine
Gordon Turner	Trance or conscious Laying on of hands	Other intelligences	God/Divine

Table 4.15 Analysis of healing attributes by healer/healer type continued

Healer	Causation of illness	Purpose of healing	Effects of healing
James Moore Hickson	Sin in world	Demonstrate divine power to heal	Overcome evil/heal disease/restore right relationship with God
Dorothy Kerin	Separation from spiritual realities	Demonstrate power of God in the Church	To restore health and communion with God
John Maillard	Sin in world	To heal/restore harmony/demonstrate spiritual realm	Spiritual benefits
Eileen Garrett	Not recognising spiritual aspect of self	To heal/restore spiritual awareness	Effective
Harry Edwards	Disharmonies of mind and sickness of the soul	To heal/awaken people's spiritual consciousness	Effective
Ursula Roberts	Negative thought, loneliness, poor food and water	To re-harmonise and cleanse body cells/give evidence of other realities	Effective
Charles Fillmore	Wrong thought processes	To raise mind to Christ consciousness	Does not discuss results, only method and theory
Emmet Fox	Negative thinking Belief in evil/illness	To access divine power/be in control of all aspects of life	Brings about new way of life
Ernest Holmes	Mainly a state of mind/ emotions are hidden cause	To restore truth which is good health by power of mind	Improvement or healing anticipated
Mary Baker Eddy	Illusion of material reality	To replace material illusion with truth of spiritual reality	Outer physical healing Inner healing of consciousness
Alice Bailey	Lack of harmony between spiritual and material	Restore harmony Progress Spiritual evolution	Resolution of illness Spiritual progression
Christopher Woodard	Psychological Spiritual Demonic possession	To cure disease and restore wholeness	Effective: harmony is sign of healing
Gordon Turner	Emotion imbalance Environment Other people	Eradicate sickness Restore harmony where lost	Effective: restoration of normal function of body and mind

Table 4.15 Analysis of healing attributes by healer/healer type continued

Healer	Mystic experience	Affiliated or independent
James Moore Hickson	Inner voice guiding him	Affiliated: Anglican
Dorothy Kerin	Yes	Affiliated: Anglican
John Maillard	Yes	Affiliated: Anglican
Eileen Garrett	Yes	Independent
Harry Edwards	Yes	Affiliated: Spiritualist
Ursula Roberts	Yes	Affiliated: Spiritualist
Charles Fillmore	No	Affiliated: Unity (New Thought)
Emmet Fox	No	Affiliated: Divine Science (New Thought)
Ernest Holmes	No	Affiliated: Religious Science (New Thought)
Mary Baker Eddy	No	Affiliated: Christian Science founder
Alice Bailey	Yes	Affiliated: Arcane School founder
Christopher Woodard	Yes	Independent
Gordon Turner	Yes	Independent

Chapter 5 Spiritual healers and society

Having explored the background to 1900-1965 in Chapter 3, and having introduced the healers and presented summaries of their accounts of spiritual healing in Chapter 4, this chapter will consider the extent to which the healers interacted with, and were influenced by, the intellectual, social, cultural and religious environments in which they were living.

The chapter is divided into two sections. The first section (5.1) considers the influence of society on the healers, and the second section (5.2) looks at the impact and influence of the healers and their healing on the society of the period.

5.1 Influence of society on the spiritual healers

The principal influences of the period 1900-1965 were described in Chapter 3 as being those associated with modernity, secularisation and rationalisation. That is, the rising influence of science, psychology and medicine, together with a relative decline in the previously dominant authority of religious organisations (which none the less, in the case of Britain during 1900-1965, remained a still significant, if relatively weakened authority throughout the period). This section will highlight the extent to which the healers' accounts demonstrate these wider socio-cultural influences of science, psychology, medicine and religion, both in their use of language and in their references to, and appeals to, the authority of each.

Appeal to science

With the exception of the Christian healers (James Moore Hickson, John Maillard, and Dorothy Kerin), who all locate their healing firmly within the healing ministry of the Anglican Church, all of the other healers' accounts in this study make extensive reference and appeal to the authority of science in explaining their healing.

This appeal to the authority of science is most obviously apparent in Christian Science healer Mary Baker Eddy's remodelling of Christianity in terms resembling a scientific proposition in which physical healing should be an expected outcome. Eddy's proposal is that God should be understood no longer as a mystery, but rather as a 'divine Principle',

the knowledge of which ‘explains all cause and effect as mental not physical’ (Eddy, 1906: 114) and which exposes illness as the illusion of an ignorant mind, replacing it instead with ‘the truth of being that casts out error and thus heals the sick’ (Eddy, 1908b: 13). Eddy uses science-compatible terms such as ‘discovery’, ‘the solution of this problem’, ‘a positive rule’ (Eddy, 1906: 109), ‘the law of Truth’ (Eddy, 1906: 482), and goes so far as to claim that ‘Even if reversed, these propositions will be found to agree in statement and proof, showing mathematically their exact relation to Truth’ (Eddy, 1906: 113). And to underline the role and significance of healing as the proof or evidence for this new ‘scientific’ rendering of Christianity, Eddy states that ‘This great fact is not, however, seen to be supported by sensible evidence, until its divine Principle is demonstrated by healing the sick and thus proved absolute and divine’ (Eddy, 1906: 109).

The New Thought healers go even further than Eddy when they describe their healing methods in terms of scientific processes which are open to scrutiny and testing by the modern rational mind. Charles Fillmore refers to the ‘universal law’ which ‘would annul the miracle theory’ and the ‘universal mental and spiritual laws that any one can utilize’ (Fillmore, 1940: 3), and then goes on to describe how ‘These mental impulses start currents of energy that form and also stimulate molecules and cells already formed, producing life, strength, and animation where inertia and impotence was the dominant appearance’ (Fillmore, 1940: 5). Fillmore also describes the ‘facts of spirit’ which underlie the ‘law of Mind action’, stating that even ‘God is under the law of his mind action’ (Fillmore, 1912: 17). Both Emmet Fox and Ernest Holmes similarly make reference to ‘Laws of Life’, ‘Law of Being’ (Fox, 1931: 3), ‘Scientific Prayer’ (Fox, 1931: 149), and a ‘Universal Principle’ or ‘Law’ which ‘knows nothing about disease; it only acts’ (Holmes, 1938: 215-216).

Esoteric healer Alice Bailey also uses primarily scientific-sounding terms to describe the healing processes. Bailey refers to ‘the electrical nature of man’ (Bailey, 1953: 368) and the theory that the healer’s radiation has effect by ‘ionising the atmosphere surrounding the patient’ (Bailey, 1953: 369). Bailey maintains that healing is ‘not a vague mystical process’, but rather ‘presupposes the mastering of the science of soul contact’ (Bailey, 1953: 557), and that ‘As occult knowledge increases a whole science of energy distribution will be built up’ (Bailey, 1953: 572). Bailey further suggests that ‘As men, however, begin to recognise God as energy and themselves as aspects of that energy...the fact of life will be recognised in a new and almost formidable manner’ (Bailey, 1953: 586),

and concludes that 'A great science of the centres will some day emerge, and this will clarify the entire complex problem' (Bailey, 1953: 595).

Of the Spiritualist healers, although all make reference to the healings themselves as providing evidence of some concrete physical process involving spiritual laws, energies and radiations which science has yet to understand, it is Harry Edwards who most fully upholds that 'spiritual healing is a spirit science...an individually planned act needing intelligent administration by minds that are much further advanced in knowledge than are human ones' (Edwards, 1960: 103), and that 'There is no such thing as a miracle. Many healings seem to be miraculous because we have not been able to comprehend the manner of their performance' (Edwards, 1960: 75). Edwards laments that 'the greater part of the laws governing the spirit plane are unknown' (Edwards, 1965: 12), but insists that 'The healing of organic troubles implies that a chemical change takes place' and that 'through the healing effort the guides have been able to direct a dispersing form of energy that has broken up the atomic formation of the substance' (Edwards, 1960: 76), and therefore 'the theory is strengthened that the guides are masters in the art of controlling energies' (Edwards, 1960: 77). For Edwards, the fact that 'Spiritual healing can, and does, demonstrate the spiritual truth' (Edwards, 1963: 37), meant that the Church would have to 're-orientate its theology in the light of the proven modern spirit science' (Edwards, 1965: 140).

Both of the Independent healers, Christopher Woodard and Gordon Turner, follow the pattern of the Spiritualist healers in calling on science to 'catch up' with the reality and experience of spiritual healers and their patients. Whilst Woodard acknowledges that spiritual healing cures might appear 'flatly contrary to scientific and medical laws' (Woodard, 1953: 54), he maintains that this is not in reality the case, and that such cures are 'not unscientific, but super-scientific', with science needing still to progress sufficiently to understand these higher levels of truth (Woodard, 1957: 134), the science that had been adequate to satisfy previous generations' needs no longer being adequate in the light of man's increasing knowledge and experience of spiritual realities (Woodard, 1957: 76). Indeed, Woodard insists that science itself is a gift from God (Woodard, 1955: 120) and, specifically, that the next great discovery of science would be the ability to measure the 'waves in the atmosphere' which Woodard perceived and which he believed were instrumental in the mechanisms of spiritual healing (Woodard, 1953: 117).

Gordon Turner similarly laments the inadequacies of science in understanding the mechanisms involved in spiritual healing, which he describes using broadly science-

compatible terms such as ‘spiritual law’ (Turner, 1963: 166), which ‘utilises a natural power arising from a natural source’ (Turner, 1963: 15), with the healer ‘acting as does a catalyst in a chemical process’ (Turner, 1963: 114), providing the healing power ‘the means by which it is transformed from a general spirit force to a specific physical power’ (Turner, 1963: 114). Describing his own understanding and conviction regarding spiritual healing as the result of ‘an accumulation of evidence over a period of time’ (Turner, 1963: 165-166), Turner calls on the authority of science to ‘dispel belief in supernatural happenings and provide logical explanations for the otherwise mysterious’ (Turner, 1963: 33). Turner further predicts that as science progresses, it will uncover and explain the sources of energy used in spiritual healing, a kind of healing which he believes is only at the beginning of its potential (Turner, 1963: 89-90).

Appeal to psychology

A clear appeal to the authority of the science of psychology can be identified in all of the healers’ accounts, both in the psychology-compatible language they use in their explanations and also in identifying the role of the mind in the causation of illness. However, it is primarily the New Thought, Christian Science, and Esoteric healers, whose techniques rely on the human mind, on thought control, and on processes of re-education, who appeal most strongly to the authority of psychology in order to validate their healing models. Indeed, the human mind, for these healers, is given primacy, even to the extent of being the sole vehicle of healing.

The New Thought healers all understand the causation of illness as being either psychological, emotional, or due to faulty thought processes (Fillmore, 1912: 258; Fox, 1931: 69; Holmes, 1938: 144), especially at the level of the subconscious mind (Fox, 1931: 70), and as a consequence, locate the ability to control physical health firmly with the human mind. Charles Fillmore maintains that ‘Mind is the key to the whole situation’ and that ‘God creates and moves creation through the power of mind’ (Fillmore, 1912: 11), whilst Ernest Holmes and Emmet Fox concur that ‘the mind *completely* controls the body’ (Holmes, 1938: 99) and that ‘Sickness cannot affect you if your mentality contains a strong belief in health’ (Fox, 1931: 76). All consider the mechanisms of healing to be ‘wholly a mental process’ (Fillmore, 1940: 5), given that ‘if you change your mind your conditions must change too’ (Fox, 1935: 9), and that ‘When we clear the consciousness, that is, the

whole mental life, both conscious and subjective, of discord, we are automatically healed' (Holmes, 1979: 71-72).

Whilst both Christian Science healer Mary Baker Eddy and Esoteric healer Alice Bailey present their healing models using language compatible with modern psychology, they differ in the role and status they ascribe to its authority. In presenting her metaphysical theology, Eddy gives prominence to the rising science of psychology and maintains that just as an illness is the result of the error of thought in which 'disease is an experience of so-called mortal mind' (Eddy, 1906: 493), so too 'By rightly understanding the power of mind over matter, it enables mind to govern matter' (Eddy, 1908b: 15), thus producing a 'higher Christianity' which incorporates the fact that 'metaphysics...the mind of the individual only can produce a result upon his body' (Eddy, 1908b: 6), and that 'correcting error in thought, it produces the harmonious effect on the body' (Eddy, 1908b: 7).

Alice Bailey, by contrast, presents her esoteric healing model not only as being fully compatible with modern psychology, with the human mind being significant in the causation of disease (Bailey, 1953: 118), but also highlights and laments the inadequacies of twentieth-century psychology due to its lack of higher esoteric knowledge, with the exception of the 'small beginning...already made along this line by spiritually minded psychologists and educators' (Bailey, 1953: 118). Bailey maintains that the human being must be understood as 'a combination of various types of force' and that understanding and working with the esoteric forces involved in health and illness will constitute 'the next great step in the field of true psychology and of healing' (Bailey, 1953: 331). Bailey also predicts a future in which 'When the psychological basis of disease can be realised and its factual nature is admitted by the orthodox physician, the surgeon, the psychologist and the priest, then all will work together in this developing area of understanding' (Bailey, 1953: 480).

For the Christian, Spiritualist, and Independent healers, whose understanding of spiritual healing was experiential rather than theoretical, and for whom healing was a gift and the source of healing power beyond the human self and control, there is still an appeal to the authority of psychology in understanding the causes of illness, but not so when it comes to the processes and mechanisms of their healing models.

Whilst all of the Christian healers acknowledge psychology's advances in identifying *some* of the causes of illness (Maillard, 1925: 20-21, 43; Hickson, 1926: 20; Kerin, 1963: 10), this modern science, in their view, need play no part in the Christian healing model.

James Moore Hickson is clear about the inadequacy of psychology and that ‘To understand the full significance of Christian Healing we must think *spiritually*, we must approach the subject on the spiritual plane’ (Hickson, 1924: 2). Similarly, Dorothy Kerin dismisses modern psychology: ‘There was not one God for the first century and another for the twentieth. Miracles of Healing and the re-creation of new life are happening today’ (Kerin, 1963: 10). However, it is John Maillard who most emphatically rejects psychology as inadequate for understanding spiritual healing:

Since this science has to do solely with mental processes, it is out of its depth in the kingdom of spiritual realities. More than half of the New Testament is a closed book to the understanding of the psychologist, and he comes perilously near to believing that the realm of the supernatural represents a kingdom of the imagination. (Maillard, 1925: 6)

All of the Spiritualist healers readily turn to the authority of psychology to explain some, but not all, of the causes of illness (Roberts, 1949: 4; Garrett, 1957: 19; Edwards, 1963: 77), but make no appeal to psychology when it comes to explaining the experiential phenomena associated with spiritualist models of healing, in particular by what means ‘the spirit entities are able to paralyse the functions of the worldly intellect and superimpose over it their own ideas, mannerisms and personalities in such a way that we see: not the medium, but another personality speaking with the medium’s voice and moving the medium’s limbs’ (Roberts, 1950: 37), or how ‘the human healer appears to radiate a power which is different from any other power’ (Roberts, 1950: 30), or how ‘With those who work in trance, the spirit guide takes possession of the mind of the healer’ (Edwards, 1950: 10). Harry Edwards simply states that ‘If it is not human minds that heal the “incurable” then it must come from another source – and there is no other alternative than that of spirit’ (Edwards, 1965: 138). Indeed, it is only Eileen Garrett who looked to psychology (although without success) for an explanation of her healing abilities, believing that answers would eventually be found in the ‘large field of unexplored mental phenomena to be tackled by science’ (Garrett, 1968: 93), but accepting for her own experiences that ‘I prefer to think of the controls as principals of the subconscious...I respect them, but cannot explain them’ (Garrett, 1968: 92), and that ‘If I were to sum up my present views on the nature of mediumship, I would be inclined to interpret these powers as a manifestation of individual supersensitivity’ (Garrett, 1968: 231).

Both of the Independent healers, Christopher Woodard and Gordon Turner, give considerable attention to the role of psychology in identifying the causation of much illness. Having completed a degree in psychology prior to training in medicine (Woodard, 1957: 11), Woodard is particularly careful to show how spiritual healing is aligned with,

and should make full use of the discoveries made by psychology (Woodard, 1953: 17; 1955: 138). Similarly, Turner maintains that more than eighty percent of disease may be psychosomatic in nature, given that it was now understood that the mind exercises immense control over the conscious personality (Turner, 1963: 27-28). However, both Woodard and Turner place their experiential understanding of healing far beyond the realms of psychology in statements such as: ‘The psychological interpretation...is all part of the whole truth, but on a much lower level of spirituality’ (Woodard, 1955: 142); ‘I believe all disease has a spiritual origin’ (Woodard, 1953: 109); ‘Supernatural and paranormal are words that man has invented to excuse his lack of knowledge’ (Turner, 1963: 51); and ‘Psychology has only brushed the surface of this aspect of illness’ (Turner, 1963: 56). And whilst Woodard includes possession by evil spirits and exorcism in his healing experience: ‘I have often seen it, and I now believe I can distinguish between this very unpleasant and evil state, and something which is far less evil – schizophrenia and other forms of mental disease’ (Woodard, 1957: 13), Turner concludes that there are only two possibilities of how any given healer is healing – either through mental suggestion (the realm of psychology) or by the power of an actual force transmitted through the healer to the patient, something that is beyond the realm of psychology (Turner, 1963: 86).

Appeal to medicine

It is not difficult to find examples of the appeal to the authority of orthodox medicine across all of the healers in this study, both for the verification of original disease conditions and subsequent cures, as well as in the appeal for medical practitioners to recognise and work with spiritual healers.

Of the Christian healers, James Moore Hickson’s healing ability was recognised following the spontaneous recovery of those around him from medically diagnosed conditions (Hickson, 1924: 6), and both of Dorothy Kerin’s accounts of spiritual healing include lengthy and detailed testimonials from people who had experienced the healing of significant and medically verified conditions (Kerin, 1914; 1963). John Maillard’s accounts similarly contain numerous examples of what might be considered remarkable cures from conditions which orthodox medicine had effectively abandoned as being hopeless (Maillard, 1925: 33; 1936: 20-21). In each of these cases, the intention is to validate spiritual healing by its equivalence to, or even at times, superiority to, orthodox medicine.

Of the Spiritualist healers, Ursula Roberts refers to having herself witnessed how ‘The spiritualist healers have performed, and are still performing, amazing cures’ (Roberts, 1950: 30), and in particular to the ‘many marvellous cases of healing’ she witnessed performed by Harry Edwards (Roberts, 1984: 75). Many of Harry Edwards’ own accounts of spiritual healing can, at times, resemble little more than catalogues of successful healings of medically diagnosed cases (Edwards, 1950; 1960; 1968). Edwards was also instrumental in increasing the dialogue between spiritual healers and the medical profession, and he maintained that ‘Substances that have been proved to exist disappear with healing, contrary to all medical knowledge and expectation’ (Edwards, 1960: 76). However, Edwards also laments the frequent lack of acceptance he encountered: ‘It became very clear that both the Church and medicine were determined to ignore, at all costs, the evidence of healings attained through spiritual healers’ (Edwards, 1968: 148).

The New Thought, Esoteric, and Independent healers also appeal to the authority of medicine, but in a slightly different way, by calling for greater collaboration between orthodox medicine and spiritual healers. This is especially true of Independent healer Christopher Woodard who, as both a medical doctor *and* a spiritual healer, observes that ‘some unorthodox healers quite definitely seem to be used to heal where all else has failed, particularly orthodox medicine and surgery’ (Woodard, 1957: 125), and suggests that

At the moment we see the supernatural cures as flatly contrary to scientific and medical laws, but I believe, in time, although the laws of science will not necessarily alter, man will come to appreciate that his Creator is quite capable of changing those laws when the power of prayer and faith allows it. (Woodard, 1953: 54)

In a similar way, Christian Science healer Mary Baker Eddy instigated publication of the *Christian Science Monitor* and the *Christian Science Journal* specifically to disseminate testimonial evidence of Christian Science healings, in order to demonstrate Christian Science’s effectiveness and equivalence with medicine.

Esoteric healer Alice Bailey, by contrast, focuses on a future collaboration between orthodox medicine and esoteric healers, as occult knowledge increases and becomes more widely disseminated, suggesting that

A great deal of occult research remains to be done by the medical profession along these lines, but this will only be possible when the Science of the Rays is better understood and when the evidence substantiating the presence of the five basic energies in every human being...can be ascertained. (Bailey, 1953: 383)

Until then, Bailey calls on modern medicine to ‘become far more open-minded, more ready to endorse (after due professional proof) that which is new, which is in the nature of innovation and which is unusual’ (Bailey, 1953: 482).

Appeal to religion

Of the sources of authority dominant during the 1900-1965 period, it is the appeal to religion, through the use of Christianity-compatible terminology, which is the most uniformly relied upon through all of the healers’ accounts. And although specific terms may be used in different ways, it is clear that all of the healers felt it necessary to identify and explain their healing in relation to Christian culture.

It is not unreasonable to expect that the healers who identified their healing as being specifically Christian and within the healing ministry of the Church would use Christian concepts and terminology in their accounts, and that Christian Science healer Mary Baker Eddy would also rely heavily on Christianity-compatible terms, although somewhat reinterpreted according to her new Christian Science metaphysical theology. However, the New Thought healers also rely very heavily on similar terminology. For example, ‘God creates and moves creation through the power of mind, whose vehicles are thoughts’ (Fillmore, 1912: 11); ‘Remember the object of all treatments is to raise the mind to the Christ Consciousness through which all true healing is accomplished’ (Fillmore, 1912: 258); ‘You should never be willing to accept less than Health, Harmony, and Happiness. These things are your Divine Right as the sons and daughters of God’ (Fox, 1931: 2); ‘The law of harmony prevents the holder of a false belief from getting into Paradise, no matter from what direction he may try’ (Fox, 1931: 69); and ‘The Bible, which is of course the great fountain of Truth, has the Zodiac running through it from beginning to end’ (Fox, 1931: 96).

Esoteric healer Alice Bailey also uses Christianity-compatible terminology, but reinterpreted according to her esoteric model. For example, ‘Only a Christ can heal by the use of the will, and He seldom in reality healed at all’ (Bailey, 1953: 676); ‘The Master Jesus on the Cross could not respond to any saving process...because the soul body – as is always the case at the fourth initiation – was destroyed’ (Bailey, 1953: 654); ‘The Gospel story (with its resume of the five initiations) concerns the progress and triumph of the Master Jesus’ (Bailey, 1953: 671); and ‘The Christ, being the truest exponent of the second ray ever known on earth, was greatest of all the healing sons of God’ (Bailey, 1953: 696).

By contrast, what can be seen in the Spiritualist healers' accounts is, rather, a sincere search to understand the very real experience of spiritualist healing and how it can relate to Christian culture. For Eileen Garrett, 'The existence of a greater force than I could comprehend was something I never doubted, but there were still certain biblical views that I had never been able to accept' (Garrett, 1968: 179), and 'I had no understanding of the nebulous person of the Trinity; when I heard repeated references to it...my mind refused to encompass its dogmatic meanings' (Garrett, 1968: 180). For Ursula Roberts, 'Jesus the Christ was the greatest exponent in history of the power by which human electricity, reacting upon the aura, can produce results in the physical body' (Roberts, 1950: 30). For Harry Edwards, 'by whatever name spirit healing is called it is the same thing...It is obvious that there is not one set of healing processes specially created for the Church in divine healing and another set for the Spiritualist in spiritual healing' (Edwards, 1960: 102); 'Spiritualists, likewise, acknowledge that all spiritual healing is divine and pray to God, too, but at the same time believe there are intermediaries in spirit who are the actual healing agents' (Edwards, 1963: 57); and 'is it that by means of prayer there comes a link-up with God's healing ministers in spirit who are carrying out the divine purpose of spiritual healing as a means of awakening man's spiritual awareness?' (Edwards, 1963: 44).

The Independent healers Gordon Turner and Christopher Woodard similarly demonstrate an attempt to understand Christian thought in the light of their own experiences of spiritual healing. For Turner, 'Spiritual healing is not the direct intervention of God to break his own laws. It is a state of harmony, brought about by adjustments in the relationship between physical and spiritual being' (Turner, 1963: 51); 'All healers appear to agree that their power is derived from God; but from this point opinions differ, even according to the nature of the God concerned' (Turner, 1963: 88); and 'Priests of all sects have so perverted the doctrines it was their duty to preserve and teach that they have contributed to, rather than lessened the disorders of mankind' (Turner, 1963: 53). Woodard, by contrast, although eclectic, keeps his interpretation within a Christian framework: 'Your guide as to whether the Healer is genuine or not is that he or she specifically Heals in the Name of Jesus Christ' (Woodard, 1953: 119); 'I seek only to Heal in His Name. No other. To me no other is remotely safe' (Woodard, 1957: 70); 'I am so secure in my communion with Jesus that I do not need any other medium to help me live fully. That does not mean that I never went to mediums or séances in order to reach this happy state' (Woodard, 1957: 81); and 'If you estimate the power of healing of a certain

spiritualist as coming up to a point an inch above the ground, then measured in the same way Christ's power would rise above the clouds' (Woodard, 1955: 103-104).

Summary

From this brief survey, it becomes clear that all of the spiritual healers' accounts in this study demonstrate their appeal for validation to the authorities of science, psychology, medicine, and religion, the four dominant sources of authority during the period 1900-1965. This suggests that the healers' understanding of their own healing was influenced by the cultural environment and period in which they were living. The next section (5.2) will consider how the spiritual healers themselves interacted with, contributed to, and influenced that same cultural period and environment.

5.2 Influence of spiritual healers on society

In the same way that the changing influences brought about by modernity and secularisation can be seen reflected in the healers' accounts, both in their use of language and in the sources of authority to which they appeal, so too did the healers themselves contribute to, and significantly impact, the social and cultural environment of the period in which they were living. This influence can be seen firstly, by examining the broadly shared set of beliefs, practices and ideas - or the cultic milieu (Campbell, 1972) - of these 'unorthodox' healing practitioners, who functioned at the edges of science, medicine and religion, considered by each of these authorities as being outside of the established orthodoxy, and secondly, in the constant reappraisal by the medical and religious authorities of the period as to the exact nature and role of spiritual healing, and in the consequent changes which these authorities themselves had to make to their own established knowledge bases and doctrines. Section 5.2 will examine the healers' influence, first in terms of Colin Campbell's cultic milieu theory (Campbell, 1972), and then in terms of Georgina Byrne's discussion of the 'negotiation of belief' which occurred within the Church of England (Byrne, 2010) during 1900-1965 as a result of its exposure to spiritualist ideas concerning human life, death and the afterlife.

Cultic milieu

Colin Campbell (1972) introduced the term 'cultic milieu' to describe the environment, present in all societies, from which cults emerge and in which a broad range of unorthodox ideas, that is ideas and beliefs contrary to the dominant sources of authority, can be transmitted and exchanged between 'seekers' who comprise the members, and potential members, of cults as they appear, disappear and evolve – something Colin Campbell refers to as 'the cultural underground of society' (Campbell, 1972: 122). Campbell explains the cultic milieu as being a constant feature of society, in contrast to the transitory nature of any cults which emerge from it (Campbell, 1972: 122), and suggests that the cultic milieu includes 'all deviant belief-systems and their associated practices', in particular unorthodox or deviant forms of science, medicine and religion (Campbell, 1972: 122).

Although Campbell describes the cultic milieu as containing what appears to be a diverse range of ideas and practices, such as magic, witchcraft, spiritualism, psychic phenomena, new thought, mysticism, lost civilizations, alien intelligences, and faith

healing, or deviant scientific concepts such as astral planes, emanations, energies, and divination (Campbell, 1972: 122-126), it also contains strong unifying elements. The most salient of these unifying elements, in Campbell's model, is the communal upholding of deviant forms of the dominant cultural orthodoxies by members of the milieu, who as a consequence experience a shared identity as being unorthodox in relation to the wider society, something which then leads to a perceived need to justify the 'deviant' views held, as well as to the creation of an environment of mutual sympathy and support among members (Campbell, 1972: 122). Other unifying factors of the cultic milieu include the shared ideology of 'seekership', in which 'individuals who "enter" the cultic milieu at any one point frequently travel rapidly through a wide variety of movements and beliefs and by doing so constitute yet another unifying force within the milieu' (Campbell, 1972: 123), together with mysticism, which Campbell notes is 'the most prominent part of the deviant religious component of the cultic world' (Campbell, 1972: 124).

When Campbell's cultic milieu model is applied to the healers' accounts which were examined in Chapter 4, it becomes clear that all of the accounts, although in varying degrees and with differing emphasis, display strong elements of deviant science, deviant medicine, and deviant religion, together with the healers' perceived need to interpret, explain and justify their healing practices as being unorthodox, in opposition to, or in some instances superior to, the dominant cultural orthodoxies. And whilst the healers themselves initially appear to represent a wide diversity of healing methods and practices, they do at the same time, and on deeper examination, display all of the unifying elements described in Campbell's cultic milieu model.

Deviant science

Although with variations in their terms of expression, all of the healers make reference to spiritual healing being part of an alternative form of science, the key elements of which are: i) the existence of as yet unmeasurable 'energies'; ii) the existence of a spirit world unknown to science; iii) the spirit world being superior to science which lacks the ability to investigate it; and iv) paranormal or psychic phenomena (including spiritual healing) serving as evidence to validate this alternative science.

All of the healers speak of 'energies', whether in terms of spiritual forces (Hickson, 1926: 20), of energies originating in the mind (Fillmore, 1912: 11; Fox, 1935: 9), of magnetic energies (Edwards, 1950: 62-63; Turner, 1963: 21; Roberts, 1949: 5-6), of auras

or auric fields (Roberts, 1950: 28; Bailey, 1953: 657; Turner, 1963: 57), of cosmic energies (Edwards, 1965: 52), of natural energies specific to special or gifted individuals (Turner, 1963: 15; Roberts, 1950: 29; Edwards, 1960: 42) or of waves which exist in the atmosphere and which science has yet to detect, but which healers are already utilising for healing (Woodard, 1953: 117). Regardless of the language used to describe these energies, the individual spiritual healer is believed to act as a catalyst to mobilise them (Turner, 1963: 114).

In the same way, all of the healers make reference to the existence of some kind of spirit world, as yet unknown to and undocumented by orthodox science. This is variously referred to in terms of spiritualism, mediumship, or with Christian terminology, and individual healers use terms such as spirit guides (Edwards), spirit friends (Roberts), spirit entities (Roberts), spirit beings (Turner), or spirit controls (Garrett). The healers generally consider this spirit world and its inhabitants to be superior to the material world known by orthodox science, which lacks the tools to investigate the spiritual (Maillard, 1936: 27; Edwards, 1960: 103). Paranormal phenomena, in particular absent healing or healing at a distance, are considered by the healers to provide evidence which validates the existence of other spiritual realms, with many of the healers calling for orthodox science to extend its investigations to include such areas (Roberts, 1950: 3; Garrett, 1968: 226; Turner, 1963: 174).

Deviant medicine

There is broad recognition among the healers studied that spiritual healing operates outside of the boundaries of orthodox medicine, with most of the healers also making reference to their familiarity with a range of other similarly unorthodox healing modalities such as magnetism (Turner, 1963: 21; Edwards, 1965: 51), homeopathy (Eddy, 1908: 11; Woodard, 1957: 121), suggestive therapeutics (Kerin, 1963: 10), osteopathy and chiropractic (Bailey, 1953: 48), or crystals, sunlight and radaesthesia (Woodard, 1953: 135-136).

However, there is also broad agreement that, as spiritual healing can often be effective where medicine fails, especially when the causation of illness is spiritual in nature, spiritual healing should be considered a higher form of medicine and, unless it incorporates spiritual healing into its methods, orthodox medicine will always remain inadequate (Bailey, 1953: 68, 77; Turner, 1963: 167; Edwards, 1965: 11).

Deviant religion

Apart from the Christian healers, who limit themselves to lamenting the Church's failure to support and encourage the gift of healing as it is depicted in the New Testament, amongst the other healers there is a generally critical attitude towards the orthodox religious institutions of the time. The principal criticisms are that religions do not understand their own divine healing (Turner, 1963: 25) and that because of this they fail to provide people with the spiritual evidence they need (Edwards, 1965: 138), instead offering only belief and a faulty interpretation of spiritual realities (Edwards, 1965: 138). For many of the healers, orthodox religion is no longer adequate for man's stage in spiritual evolution (Turner, 1963: 46, 53) and can no longer explain people's experiences, such as spiritualism, mediumship, spiritual healing, or widely held beliefs such as the progression of souls (Bailey, 1953: 400-402; Edwards, 1963: 37; Garrett, 1968: 158). This criticism even extends to the call for the orthodox churches to re-orientate their theology to include spirit science (Edwards, 1965: 140) or at least to recognise in spiritual healing a higher form of Christianity (Eddy, 1908b: 8).

There is also a tendency across all of the healers to reinterpret Christianity, and in particular the New Testament healing miracles, according to their own healing experiences. This ranges from the dismissal of Christianity as a faulty interpretation of historical and spiritual events (Bailey, 1953: 401-402), the inclusion of mediumship and spiritual evolution in interpretations of Christian practice (Edwards, 1960: 164), or the reinterpretation of Jesus' healing methods as being the result of his making a connection with the Divine Mind (Fillmore, 1940: 3), to claims that the purpose of prayer is to re-educate the subconscious (Fox, 1931: 70), that all healing energy is from God (Turner, 1963: 15), that God uses discarnate 'ministers in spirit' to channel his healing power to people (Edwards, 1965: 138), or that everything in the Bible can be explained by referring to the astrological zodiac (Fox, 1931: 96).

In addition to these clear elements of deviant forms of science, medicine and religion which are consistent with Campbell's cultic milieu model, what is also evident from the healers' accounts is the degree to which the healers identified themselves as being part of a 'healing milieu' within society. That they were recognised as such by others is reflected in the Church of England's calling of several prominent spiritual healers (among them Dorothy Kerin, Harry Edwards and Christopher Woodard) to give evidence to the

Archbishops' Commission of Inquiry into the Church's Ministry of Healing in 1953 (Church of England, 1958). Almost all of the healers' accounts make reference to other spiritual healers (both by name and by affiliation) and to the range of healing modalities available during the period (e.g. Maillard, 1936: 23; Roberts, 1950: 30; Woodard, 1953: 138; 1957: 126; Edwards, 1963: 29-32, 42-44). Many of the healers from the later part of the 1900-1965 time period also make reference to the Church of England inquiries into spiritual healing and to the setting up of the National Federation of Spiritual Healers (1954) as a body to represent spiritual healers in Britain as a distinct and cohesive, although diverse, group within society, whose impact and influence were proving to be significant in the fields of both medicine and religion (Woodard, 1957: 113; Edwards, 1968: 147-152, 160; Roberts, 1984: 74, 93). Healers in this study who were members of the National Federation of Spiritual Healers include Harry Edwards, Gordon Turner, Dorothy Kerin and Ursula Roberts. In addition, Christopher Woodard gave talks at healing events held by the organisation.

Negotiation of belief

Just as it can be demonstrated that the spiritual healers were aware of and both contributed to and benefitted from the alternative or deviant forms of science, religion and medicine which constituted the cultic milieu of the period, the influence of spiritual healing (mainly due to its widespread popular appeal) can also be traced quite clearly in the responses of the orthodox medical and religious authorities of the period, with both the British Medical Association and the Church of England responding to the public interest in, and demand for, spiritual healing by setting up a series of investigative inquiries in an attempt to define and better understand the nature and role of spiritual healing. Both organisations issued a number of reports as public statements of their own positions regarding spiritual healing and, in some instances, even reviewed their own previously established knowledge bases, doctrines or dogmas. This section will provide a brief overview of this process of 'negotiation of belief', the form it took, and the conclusions which were drawn, first by the British Medical Association and then by the Church of England.

British Medical Association

In the case of the British Medical Association, it was the wave of increased and widespread interest in spiritual healing, not only among the general population, but also among clergy and medical practitioners, which prompted the opening of inquiries into the nature and possible efficacy of spiritual healing. According to Sheryl Root (2005: 231), prior to this period spiritual healing had not been considered by the medical profession to be of any significance, other than as an off-shoot of spiritualism or as an activity which belonged in the realm of religious practice. However, with the increasing influence of the modern science of psychology, together with the interest of the Church of England in the widening range of healing modalities which were being practised by the beginning of the twentieth century, the British Medical Association perceived a threat to its orthodox position (Root, 2005: 231-232) and reacted by setting up inquiries and issuing reports representing its own conclusions on spiritual healing.

There were two main waves of interest in spiritual healing which are clearly reflected in the increased number of articles and amounts of correspondence published in the *British Medical Journal* specifically on the subject of spiritual healing. The first wave occurred around 1909-1910 and the second wave from the early 1950s. And whilst the first wave of interest was mainly concerned with spiritual healing as a religious (and specifically Christian) practice, the second wave focused more on the forms of spiritual healing which were being promoted by Harry Edwards and other healers as a treatment which they claimed should rightfully be practised alongside orthodox medicine in hospitals – permission for which was eventually granted, and then bitterly contested, in 1960 (BMJ, 1960: 1417-1418).

The response of the British Medical Association to the first wave of interest took the form of an investigation into the subject of spiritual healing and a subsequent report published in 1911 (BMA, 1911: 125-131). This investigation was carried out by a sub-committee which included ‘general practitioners, physicians, neurologists and alienists⁷’ and was tasked to ‘obtain a clear idea of what was understood by the term “spiritual healing” by those who used it’ (BMA, 1911: 125). Those contacted by the sub-committee were asked ‘to assist the Association in clearing up the confusion...which existed in connection with the use of the following terms, namely, “Spiritual Healing,” “Faith Healing,” and “Psychic Healing.”’ (BMA, 1911: 125). The conclusions of this

⁷ **Alienist** *noun*. An expert in mental illness, especially from a legal standpoint. Now chiefly U.S. term. (definition from *Shorter Oxford English Dictionary*)

investigation were, broadly, that there was no difference between spiritual healing and other forms of ‘mental’, ‘psychic’ or ‘faith healing’, and that any efficacy of such healing was brought about by mental suggestion and could be fully explained by modern psychology. For the protection of the general public and in order to ensure correct diagnosis and avoid dangerous misunderstandings it was, therefore, best practised by, and restricted to, medical professionals (BMA, 1911: 126).

The response of the British Medical Association to the second wave of interest in spiritual healing took the form of the Association’s evidence submitted to the Archbishops’ Commission on Divine Healing. A summary of this evidence was published in the *British Medical Journal* in 1956 and, in contrast to the earlier 1911 report, took a much broader view of spiritual healing which included not only religious healing, but also cures associated with magic, witchcraft, religious healing services, and with public or private prayer, as well as with spiritual healing such as that of Harry Edwards (BMA, 1956: 271-273). The Association’s conclusions, also in contrast to the 1911 report, were, broadly, that any practitioners who ‘profess to make a diagnosis and to provide certain forms of physical and mental therapy in accordance with their views and convictions’ were acting as unregistered medical practitioners, and any co-operation with such should be condemned by the General Medical Council (BMA, 1956: 272), but at the same time, that if clergy or other healers were to restrict their activities to the sphere of the spiritual life of the patient, then the medical practitioner should have no objection (BMA, 1956: 272). The report also recognised the importance of the ‘spiritual factor’ in rehabilitation from illness and that informal co-operation and teamwork between medical and other spiritually-orientated practitioners (primarily clergy) could ‘help to meet the total needs of the patient’ (BMA, 1956: 272). This constituted a significant shift from the earlier position.

Church of England

Like the British Medical Association, the Church of England responded to the widespread and increasing public interest in spiritual healing with a number of inquiries and a series of published reports clarifying the Church’s position on the subject. Of these inquiries, the most significant for the purposes of this study were the *Clerical and Medical Committee of Inquiry into Spiritual, Faith, and Mental Healing* held in 1910-1911, with a report published in 1914 (Church of England, 1914); *The Ministry of Healing: Report of the Committee Appointed in Accordance with Resolution 63 of the Lambeth Conference, 1920*

(Church of England, 1924); *Spiritualism: The 1939 Report to the Archbishop of Canterbury*, which was initially suppressed by the Church, but then published some forty years later in the June 1979 issue of the *Christian Parapsychologist* (Perry, 1999); and *The Church's Ministry of Healing: Report of the Archbishops' Commission*, the commission being appointed in 1953 and the report published five years later in 1958 (Church of England, 1958). Although the conclusions expressed in these reports focused on different aspects of spiritual healing and how the Church should best understand and explain them, ranging from the 1914 report's conclusion that there was no difference between 'faith', 'spiritual', 'mental' or any other healing, and that all had their effects by 'suggestion', with so-called gifted healers simply possessing highly developed powers of suggestion (Church of England, 1914: 15-16), to the 1958 report's conclusions that both Christian Science and spiritualist forms of healing (which were the most influential of the period) were deeply incompatible with Christianity and therefore presented a danger to the general public (Church of England, 1958: 81-83). The perceived need to hold these inquiries and to issue such position statements clearly indicates the influence that the evidential force of spiritual healers' activities was having across British society of the period.

Such, according to Georgina Byrne (2010), was the influence of modern spiritualism (of which healing was a relatively minor, but extremely powerful, evidential force), both among clergy as well as amongst their congregations, that a kind of syncretism was occurring in which spiritualist ideas regarding human existence and the afterlife had become part of a wider Christian experience (Byrne, 2010: 178). The acknowledgement of the 1939 report, that some clergy were finding increasing numbers of their congregations turning to spiritualism, led to the conclusion that this was, in part, due to the Church's failure to teach about the afterlife (Byrne, 2010: 180). This, in Byrne's view, was the primary impetus, alongside the impact of the loss of life brought about by the two World Wars, for the Church of England's 're-imagining the afterlife in the twentieth century' (Byrne, 2010: 182). Although the Roman Catholic Church was deeply opposed to, and had condemned, spiritualist practices in 1898, the Church of England instead took the approach of subtly but significantly altering parts of the liturgy to accommodate certain aspects of spiritualist theology (Byrne, 2010: 224-225). In Byrne's view, what the Church of England did with this new liturgy was to 'retain traditional belief that after death there was a period of waiting before the final Resurrection, but it now suggested that spiritual progress, and even forgiveness, was possible in the intervening time' (Byrne, 2010: 215). The liturgy, according to Byrne, now drew on twentieth-century Christian theology, but also on the beliefs circulating in the common culture that 'the living could be in prayerful

communion with the departed, and that, after death, each soul would progress towards God' (Byrne, 2010: 215). That such a profound shift in Church doctrine could take place under the influence of public belief (a belief supported by experiences of spiritual healing) further indicates the significance of spiritual healers' evidential influence on the surrounding cultural environment.

Summary

By considering the healers' accounts from the perspective of the cultic milieu theory, as a broadly shared set of beliefs, practices and ideas that were common during 1900-1965 among the community of spiritual healers in Britain, and then from the perspective of the negotiation of belief which both the British Medical Association and the Church of England felt subject to, it is not unreasonable to suggest that the evidential force of the healings themselves and of the descriptions and explanations provided by the spiritual healers in their accounts, had a measurable influence on the society of the time.

The final chapter of this dissertation, Chapter 6 *Conclusion*, will reflect on the principal findings of this research and on the implications these may have when looking at contemporary forms of spiritual healing and for future research in this area.

Chapter 6 Conclusion

Having identified from the literature in Chapter 2 that there appear to be two quite contrasting models of spiritual healing – traditional spiritual healing and holistic milieu healing, and having explored the ways in which spiritual healers in Britain during the period 1900-1965 understood and explained spiritual healing from written accounts they published on healing, this chapter will consider the conclusions that can be drawn from the data which was extracted from the healers accounts in Chapter 4 and discussed in Chapter 5.

In addition to the conclusion reached in Chapter 5, that the healers were influenced by, and also influenced, the socio-cultural environment in which they were living, there are two further outcomes which resulted from inquiring in this way of the spiritual healers who were practising during 1900-1965 and then arranging the information extracted from their accounts into a series of tables to facilitate comparison. The first outcome was that the healers, in their six categories (Christian healers, Spiritualist healers, New Thought healers, Christian Science healers, Esoteric healers and Independent healers), divided quite clearly into two distinct types of healer – those of a primarily experiential type and those of a more theoretical-philosophical type, and that these two distinct types appeared to correspond to the two contrasting healing models of spiritual healing and holistic milieu healing, which were discussed in Chapter 2 *Literature review* and then compared according to key criteria in table 4.1. The second outcome was that, despite their lack of common terms of reference or shared worldview, the experiential type of healers not only knew and interacted with each other, sharing it seems some kind of bond or mutual respect brought about through their common experience of healing, but they also revealed throughout their detailed explanations of spiritual healing how eclectic and open they had been in their attempts to uncover the ‘truth’ behind their own and others’ abilities to heal. This chapter will briefly discuss each of these two outcomes in turn.

Experiential versus theoretical-philosophical type healers

By examining the healers’ accounts in terms of the key criteria which were used to differentiate between spiritual healing and holistic milieu healing (table 4.1), it becomes clear that, when the information from the accounts is arranged in a comparative format so that the healers can be compared side by side (table 4.15), two quite distinct types of healer

emerge: the experiential healer and the more theoretical-philosophical healer. Further, these two healer types correspond very closely to the two models of spiritual healing and holistic milieu healing which were discussed in Chapter 2 *Literature review*. Among the experiential healer types were the Christian healers, the Spiritualist healers, and the Independent healers. Those who were of the more theoretical-philosophical healer type were the New Thought, the Christian Science, and the Esoteric healers. Of the key criteria examined, the criteria where the distinctions between the two types of healer were the clearest were: i) whether healing was a special gift; ii) how the healer had become a healer; iii) whether healing was innate or learned; iv) the method used for healing; v) the effects of healing; and vi) whether the healer reported any mystic experience. The criteria which were not so clear were: i) the source of the healing power; ii) the causation of illness; and iii) the purpose of healing.

All of the experiential type healers believed that healing was a special gift, whereas the theoretical-philosophical type healers maintained that anyone could become a healer. Even John Maillard, who denied possessing a special gift, had to concede that others recognised in him a special gift and for this reason came to him for healing (Maillard, 1936: 15). Similarly, the experiential type healers had become healers as the result of some unusual experience (a voice, a vision, a trance or mediumship experience), whereas the theoretical-philosophical type healers had either studied a philosophical theory or, as in the case of Mary Baker Eddy, had developed their own. (Alice Bailey never claimed to be a healer herself, but instead published her healing theories for other esoteric healers to study.) The experiential type healers, therefore, maintained that healing was an innate attribute, whereas the theoretical-philosophical type healers maintained that healing could be learned.

Regarding the methods used for healing, these roughly corresponded to the affiliation of the healer, in that the Christian healers used prayer and laying on of hands, the Spiritualist healers used mediumship and/or trance states, and the Independent healers used prayer and laying on of hands (Christopher Woodard) or mediumship/trance (Gordon Turner) according to their primary affiliation. However, the New Thought, Christian Science, and Esoteric healers (theoretical-philosophical type) used thought-based methods. In the same way, the control of the healing also corresponded to the affiliation of the healer. For the Christian healers the control was God-divine; for the Spiritualist healers the control was their spirit guide or control; and for the Independent healers either God-divine (Christopher Woodard) or other intelligences (Gordon Turner), according to their primary affiliation.

For the New Thought, Christian Science, and Esoteric healers, however, the control remained with the healers themselves.

For all of the experiential type healers, healing, by definition, had to be effective, i.e. it brought about a measurable effect or cure. For the theoretical-philosophical type healers, in contrast, this was much less emphatic and was expressed more in terms of a new way of life or of improvement. All of the experiential type healers referred to a mystic experience of some kind, whereas the theoretical-philosophical type healers did not, with the exception of Alice Bailey who describes two visions she experienced as a child and an ongoing communication with a discarnate being who she claimed dictated her published works to her.

The criteria where distinctions between the two healer types are not so clear – the source of power, the causation of illness, and the purpose of healing – appear instead to be more dependent on, and in accord with, the specific worldview and interpretation of the individual healer, rather than on whether the healer is of the experiential or the theoretical-philosophical healer type.

What this emerging pattern suggests is that there may be some common thread or common elements which link the healers whose healing was based on their experience (experiential type healers), and possibly a different thread or set of common elements which link those healers whose healing was based on a theoretical model (theoretical-philosophical type healers). If this were indeed shown to be the case, and if these distinctions were also found to be reflected in contemporary spiritual healing and holistic milieu healing as clearly as they appear to be in the 1900-1965 healers, this may need to be taken into consideration in any future research which looks at contemporary forms of spiritual healing.

Eclectic and open nature of experiential type healers

Two things which are immediately apparent when reading the experiential type (Christian, Spiritualist and Independent) healers' accounts of spiritual healing are firstly, the extent to which they refer to other healers who were practicing during the same time period in terms of a community and as though speaking of 'colleagues', and secondly, how open and eclectic they were prepared to be in their attempts to understand and explain their own healing abilities and experiences.

Of the Christian healers, John Maillard met and worked with fellow Christian healer James Moore Hickson early in his healing career, and Hickson (who was a well-known healer at the time) wrote the Foreword to Maillard's first book, which was published in 1925. Dorothy Kerin knew and interacted with many of the spiritual healers of the period, regardless of their Christian or non-Christian affiliations, and she later became a member of the National Federation of Spiritual Healers (alongside predominantly spiritualist healers), giving talks on various aspects of healing at the Federation's summer schools.

Of the Spiritualist healers, Eileen Garrett refers mainly to other healers who were active in the Spiritualist movement of the period, whereas Ursula Roberts and Harry Edwards both make reference to a variety of other experiential type healers. Roberts makes reference to healers such as W.T. Parrish, Harry Edwards (Roberts, 1949) and John Steabben (Roberts, 1950), but also includes personal letters from three healers – Sidney Richardson, Lilian Davies, and Harry Edwards – in her book, *Letters Between Healers* (1976), and later in her autobiography (1984) talks of her meetings with and professional esteem for healers such as Gordon Turner, Ronald Beasley, Matthew Manning, Marie Peacock and John Britnall. But most notable of all is her account of her encounter with Christian healer Dorothy Kerin, an encounter which deeply impacted her and her understanding of healing (Roberts, 1984: 184-186). Harry Edwards similarly refers to many well-known healers of the period such as Agnes Sandford, Elsie Salmon, Rebecca Beard, Cameron Peddie and Dorothy Kerin (Edwards, 1963: 29-44), and discusses and compares their styles of healing and their significance to spiritual healing of the period. Edwards also makes reference to his many healing collaborations, such as the one with Gordon Turner in 1965 to produce a study course on spiritual healing (Edwards, 1968: 160), as well as his interactions with organisations, including the British Medical association and the Church of England, to promote and defend the healing activities of the wider community of spiritual healers in Britain.

Of the Independent healers, Gordon Turner is widely referred to by other healers, and Christopher Woodard speaks of the healers Godfrey Mowatt, Godfrey Winn and Elsie Salmon, and of his collaboration with the Christian Healer John Maillard whilst he was the resident medical officer at the healing home run by Maillard at Milton Abbey (Woodard, 1953: 138). But even more notable is the reference Woodard makes to numerous unnamed spiritual healers who had discussed with him their healing-related difficulties, such as the experience of exhaustion following healing treatments (Woodard, 1955: 94).

The National Federation of Spiritual Healers (NFSH), established in 1954 by John Britnall, with Harry Edwards as its first president, became an important focal point for this spiritual healing community and promoted spiritual healing both through public demonstrations and through ventures such as Harry Edwards' obtaining permission in 1960 for its registered healer members to visit and treat patients in British hospitals (BMJ, 1960: 1417-1418). Healers in this study who were among the early members of the NFSH were Dorothy Kerin, Ursula Roberts, Harry Edwards and Gordon Turner. In addition, Christopher Woodard (along with other well-known healers) taught at NFSH events such as the 'Spiritual healing Teach-In' held in Norwich in 1968, lecturing on 'the Mid-Twentieth Century Approach to Healing' (*The Spiritual Healer*, vol 16, no 3, March 1968).

In addition to this common bond which seemed to exist between healers of the experiential type, most of these healers in their written accounts also make reference to their openness in their search for possible explanations of the truth regarding their healing abilities and experiences, an openness which led to remarkably different conclusions for different healers. For example, where John Maillard strongly rejects psychic practices and spiritualism (as well as the shallowness of a materialist approach to life) (Maillard, 1936: 17), and Christopher Woodard confesses to having attended séances, consulted mediums and psychics, and to having had many psychic experiences prior to settling for the simple Christian model (Woodard, 1957), Harry Edwards and Gordon Turner both conclude, after much research and reflection on their own experiences, that all spiritual healing is essentially the same thing and from the same source, regardless of the cultural packaging in which it may be presented (Edwards, 1960: 102; Turner, 1963: 93). Eileen Garrett takes a different approach in her search to understand her experiences, by allowing herself to be the subject of investigation by scientists in the field of the paranormal, but eventually remains resigned to simply not knowing anything with any certainty (Garrett, 1968: 92). However, it is Ursula Robert's account of her meeting with Christian healer Dorothy Kerin whilst they were both speakers at an NFSH summer school which is the most remarkable in its sincerity. The meeting left Roberts deeply affected, but also reconsidering everything she had previously been certain of regarding her own healing experiences and spiritualism, something she reported a number of years later in her autobiography in the following way:

The meeting with Dorothy Kerin was gentle and she touched me gently with her hands, her words and eyes, but the spiritual unrest which followed after was such that it seemed she stirred with a violent touch the very inward depths of my being. I reread *The Living Touch* in which she described her experience of being healed...and suddenly I began to doubt my own mediumship, and to question the veracity of the Spiritualist movement. (Roberts, 1984: 1986)

Further research needed

Although this research of spiritual healers' own accounts of healing in Britain during 1900-1965 was based only on a small number of healers' accounts and was restricted to eleven key criteria which to some extent can serve to distinguish between the spiritual healing and the contemporary holistic milieu models of healing, there were three predominant findings of the research: i) that healers were influenced by, and also influenced, the socio-cultural environment in which they lived (discussed in Chapter 5); ii) that there appear to have been two distinct types of healer - experiential healers and theoretical-philosophical healers, which roughly correspond to the spiritual healing and holistic milieu healing models respectively; and iii) that experiential type healers tended to know and interact with each other and were very open and eclectic in how they sought to understand and express their experiences of spiritual healing. These three findings may have significant implications for future research into the nature of contemporary forms of spiritual healing (now often referred to under the umbrella term of 'energy healing') in Britain. In particular this research raises a number of questions, among them, i) Should all forms of spiritual healing be considered as one and the same thing, as tends to be the case with the term 'energy healing'?; ii) Does the innate, gifted experiential type of spiritual healer still exist and, if so, how can he or she be identified?; iii) How far has the holistic milieu healer replaced the spiritual healer in Britain?; and iv) Regarding experiential type spiritual healers, what is the precise nature of the common and shared experience which seems to create a bond between the healers, and could this shared experience be explored in terms of religious experience? The findings of this research, then, suggest that the forms of spiritual healing currently being practised in contemporary Britain may represent a much richer and more differentiated practice than is often assumed to be the case, and that further research, possibly of a multidisciplinary nature and focusing on the healers themselves, rather than the healing (given that healing, in itself, is difficult to analyse except in terms of efficacy or of putative mechanisms), may uncover some of this richness.

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