Shamanism, Healing and the Dowsing Tradition

by Anthony Scofield, B.Sc., M.Sc., Ph.D.

For many practitioners of complementary or alternative medicine dowsing provides a means of determining the most suitable form of treatment, or the selection of a remedy, or of determining the source of pain or where to lay on hands in a healing session or perhaps even which joint to manipulate. In this paper I will suggest that most, if not all, forms of alternative therapies succeed because they all operate through the same fundamental mechanisms of human consciousness and dowsing, when it is used, is probably more important in focusing the mind of the healer in harmonising the healing environment so that healing energies can be harnessed than in the material diagnosis the technique provides. In a way it is one of a number of means of expressing the intent of the practitioner to heal which itself is probably one of the first steps, along with the asking by the patient for help, in initiating the healing process. Also, I would suggest that in many cases healing rituals, of which dowsing may be a part, have a powerful placebo effect which may often be sufficient in themselves to ameliorate illness without recourse to other, more esoteric, explanations. But before we discuss these areas it is important to define health so that we can see the goal the practitioner must attain to be satisfied that he has succeeded in alleviating illness.

Health is an individual perception of one's state relative to one's past experiences and expectations. Different people will tolerate different degrees of dis-ease and still consider themselves healthy. For example, a positive mental attitude and social support can counterbalance physical disability leading to an overall state of well-being. Fritjof Capra's [1] definition is probably as good as any: "an experience of well-being resulting from a dynamic balance that involves the physical and psychological aspects of the organism, as well as its interaction with its natural and social environment". Because health is such a subjective phenomenon it is not easy to measure or convince researchers that a treatment has been successful in alleviating illness. So it is not always easy to quantify the success of alternative therapies.

We all believe that we have our successful treatments that convince us we can heal but how many failures do we have? And what actually constitutes a failure? This is rather interesting. Sabbagh [2] introduced the 'ratchet of the mind' concept. In this our belief in our efficacy as healers pops up a notch whenever someone gets better (or a coincidence happens, as he was considering parapsychological events) but the ratchet does not go down when nothing happens or when we fail. Such a concept was recognised by psychoanalysts much earlier. Psychoanalysis, being an analytical method, analyses events rather than predicts, them and so can never be tested, as can scientific hypotheses, by making predictions from the underlying theory and determining whether the predictions are confirmed. For no matter how the tests come out, analytic theory can explain the results. Freud never had any problem with
events that refuted his theories of psychoanalysis. [3] Much of complementary medicine is similar in this analytical approach and the 'ratchet of the mind' mechanism can rise at a tremendous rate under these circumstances where almost every event can be considered a 'success' for the system, although not perhaps for the patient. Let us consider as an example homoeopathy. If the patient gets better this is obviously a success. The patient may suffer an aggravation, also a success, and he may or may not improve after that. If he does not get better then the wrong remedy may have been used and one tries again. With slow improvement a deep-seated problem needing many remedies may be indicated. If he gets worse or dies his vital energy may have been too low, or there was not enough time for the remedy to act or perhaps his karma was to blame and so on. One never really needs to admit that the system may not be working. The practitioner has an absolute belief in the efficacy of the system and negative results will not shake his confidence as there is always an explanation in the system which can reinforce the validity of the system itself.

The placebo effect

It has frequently been suggested that most illness is caused by stress. It doesn't seem unreasonable that if the stress could be relieved then the patient would improve. Much of medicine, both conventional and alternative, employs techniques that will wittingly or unwittingly relieve stress. This, to a large extent, is what the placebo effect is achieving. A placebo effect is 'any effect attributable to a pill, potion or procedure but not to its pharmacodynamic or specific properties' [4] which is why doctors can consider all successes in the alternative therapies they cannot understand as placebo effects. There is almost certainly some truth in their assertion and we should be aware of this. But in their own conventional allopathic practices many of their successes are also due to the placebo effect. It has even been suggested that the history of medicine is the history of the placebo effect. [5] The placebo response is constant at 35.2 ± 2.2% of patients. [6] Its effect is so powerful that it can reverse the pharmacological effects of drugs. For example, the herbal drug Ipecac normally increases nausea but when patients with nausea were told that it would reduce their symptoms it did just that. [7] In another trial subjects were told that they were receiving a sedative yet were given amphetamines and the suggestion counteracted most of the effect of the drug. [8] The placebo response is real i.e. it has pharmacological effects. For example, analgesia can be induced by placebos and be blocked by naloxone which antagonises the action of endogenous opioids, which suggests that it is mediated by these compounds. [9,10,11] These opioids are believed to be produced by acupuncture although there are undoubtedly psychological influences involved here also. [12,13]

The placebo effect operates through the mind and it depends on the belief of the patient in the efficacy of the treatment. It is also considerably enhanced by the belief of the doctor. The British Holistic Medical Association reports an interesting trial with an anti-arthritic drug. [14] Patients were given either a placebo or the active drug. The doctor knew which was which but not the patients. Those given the active pill did better. But at the end of the trial it was revealed that the doctor had been
misled and where he thought he had received the active pill he had, in fact, been
given the placebo. They concluded that the doctor's belief in the pill was more
effective than the pill itself!

It is possible that this effect may be due to transmission to the patient by involuntary
signs and signals the doctor's confidence in one pill rather than another, but some
people [15] believe that the physician's thoughts can influence the patient in a
parapsychological way. Some have suggested that telepathy may be involved. [16] It
is tempting to invoke parapsychological effects (psi-effects) when placebo responses
have been observed in the treatment of animals and babies, but other possibilities
must be recognised. For example, when a placebo is used in veterinary practice
Pesut and Kowalczyk [17] believe that the owner is being treated and his changed
attitudes will be reflected in his love and care of the animal. This may also explain
the placebo effect on children where the parents' attitude may be affected. Certainly
this may partly be involved but as most pet owners and parents must love and be
concerned for their charges to call the doctor in the first place, other factors are likely
to be involved. There is some experimental work on the placebo effects in animals.
Behavioural studies using rats have shown that the placebo response of animals
given a saline injection after several amphetamine or scopolamine injections was
simply an example of a 'conditioned reflex' - like Pavlov's dogs salivating at the
sound of a bell. [18, 19, 20]

The placebo response has been investigated in great detail and various requirements
for its success have been identified:

There must be some degree of anxiety.
The disease process or symptoms must vary in intensity over time.
There is most success if the end point of therapy is a function of the central nervous
system or is hormonal or involves the autonomic nervous system.
A doctor/patient relationship either real or implied is required.
The length of time spent with the patient and the demeanour of the physician are
also pertinent factors. [6] Also, certain people are believed to respond better than
others in that they are more outgoing, more favourably disposed to hospitalisation,
more anxious, more concerned with visceral complaints such as constipation and
possibly less mature emotionally than non-responders. [21] Responders also have
the capacity to hope and to trust. [22] Explicit suggestion can powerfully enhance the
placebo effect. [23]

Shamanism

It is interesting that certain features of good placebo responders have been identified
because it is now recognised that Shamans (witchdoctors) normally select the
patients to treat [3] probably using the same criteria as for placebo responders. I
hope to demonstrate that the modern alternative medical practitioner is no more
than the old tribal witchdoctor in modern guise and the methods he uses are akin to
the ceremonial rituals the shaman uses.
The shaman operates within a rigid system; this is the view of the world that he and the tribe or culture share - the assumptive world-view. The tribal shaman's rite is part of the common faith of the whole community and frequently all take part in the healing rites. The whole weight of the tribe's religion, myth, history and community spirit enters into the treatment. The rites may involve magical ceremonies to exorcise evil spirits; these are accepted and expected within the so-called primitive's world-view. This expectation of certain procedures by the patient is crucial to success of the treatment and the expectant faith is induced by the magical ceremonies and rites, often with lengthy preparation involving the patient, his family and frequently the whole tribe.

The ability of the shaman to transmit effectively the suggestion that the patient will be healed is another important factor. For him to be successful he must totally believe himself. His lengthy training is effectively an indoctrination during which is induced total belief in a world-view that can ignore doubt and that can rationalise any difficulty and dismiss any failure.

Another important component of the shamanistic healing ritual is confession. The patient actively takes part, pours out his thoughts and helps himself to make sense of his condition. These important factors - expectation, suggestion, confession are all crucial parts of modern psychotherapy and there are four characteristics of the practitioner (healer) which are crucial to both shamanism and psychotherapy:

A shared world-view with the patient.
Personal qualities deemed therapeutic by his culture.
Command over the therapeutic techniques.
The ability to raise patient expectation.

It is not surprising, therefore, that witchdoctors and psychiatrists get about the same results when treating their patients in as much as they use the four components equally skilfully. In this paper I would like to go further and suggest that much of the success of alternative medicine lies in the way it too utilises the critical components of psychotherapy and shares the same practitioner characteristics.

Alternative medicine

In recent years a vast range of alternative therapies has arisen. Many of these were ephemeral, others like homoeopathy enjoy a more lasting vogue. Such fleeting existences are not unusual in medicine - the history of medicine is littered with such examples. There is a famous saying attributed to many people including Sir William Osler, Trousseau and Sydenham .... "we should use new remedies quickly, while they are still efficacious". A new treatment is a novelty - it is exciting and tends to inspire hope when all else has failed. Moreover new treatments are a great emotional investment by the physicians, particularly the founder who is generally more successful that his disciples. He must see the treatment work and this confidence, associated with his undoubted authority, will arouse patients' hopes and expectations. It may also be that new remedies have their time and place and fall out of favour when rational man discovers that there is no scientific basis for
them. Perhaps the words of Confucius are worth remembering: "A wise man does
not examine the source of his wellbeing." Our curiosity may destroy that which we
most value - at least if we try and relate them to conventional scientific paradigms.
This leads us on to the first characteristic of successful shamans: a shared world-
view with the patient. All therapies, including conventional medicine, exist within
their own coherent world-view. These views have changed throughout history and
the practice of medicine is merely a reflection of the prevailing world-view.
Conventional medicine is grounded in the Cartesian mechanistic view of the
universe. However, there is now an upsurge in New Age interests, dowsing being
one. This New Age interest is not grounded in materialism and it is in this new
milieu of intellectual liberation that alternative therapies (sometimes even called
New Age therapies) have burgeoned. The man in the street, as distinct from the
scientist, can find something within them which will allow him to espouse them,
ignoring those aspects he cannot understand. This is, of course, easier for patients
who come as a last resort for healing than for the armchair theoretician. However,
the elders or guardians of these alternative practices are still desperate to see their
techniques fit into the world-view of conventional society and spend a great deal of
time trying to find scientific explanations for their action. The literature of alternative
medicine is littered with quasi-scientific explanations and as the more main line
ideas become discredited so the explanations become more esoteric, but still grasp at
scientific respectability usually by descending into quantum physics, multi-
dimensional worlds and Heisenberg's Uncertainty Principle as if this would explain
their own uncertainty.

The second similarity between shamans and practitioners of alternative medicine is
that they both have personal qualities deemed therapeutic by the culture. The fact
that so many practitioners have large numbers of letters after their names or
impressive-looking certificates on their walls is that it raises the patients' confidence
in them; they provide evidence that the practitioner has command over the
techniques he employs (the third shared characteristic discussed above). They also
frequently, though not always, exude warmth and caring; they love the patient. They
possess the personal qualities expected by the patient of the healer and necessary to
raise the patients' expectations of a cure (the fourth shared characteristic). They will
give the patient time, 6-8 times as much time as a conventional GP. They show care
for the patient. Even the British Medical Association recognises the shortness of time
given by a GP is a failing of the conventional system making modern scientific
medicine impersonal. [27] It has even been suggested by the medical establishment
that complementary medicine may have a role to play in replacing this missing
personal element. [28] What a condemnation of modern medicine from their own
supporters!!

All the characteristics of the shaman and psychotherapist are quite obvious in many
practitioners of alternative medicine and there can be no doubt that these
characteristics are used by them to obtain success in their treatments. Consideration
should also be given to the fact that for many patients the alternative therapist is the
last port of call in a desperate search for help. This situation may well accentuate the
important conditions necessary to induce a placebo response. We will now discuss these in more detail.

**Suggestion and expectation**

Earlier on I emphasised the power of suggestion in healing. All healers of course will explicitly or implicitly suggest that their patient will improve. The power of suggestion is enormous. It can produce a number of physical changes in the body, e.g. you can block the dermatitis caused by poison ivy plants, affect the TB vaccination reaction, [29] cure warts, [30] ameliorate the 'fish skin disease' (congenital ichthyosiform erythrodermia), [31] stimulate enlargement of women's breasts, heal rheumatoid arthritis. [32] Barber [31] in his excellent review suggests that many of these effects may be due to localised alterations in blood flow.

Suggestion, and of course its powerful counterpart hypnosis, is usually believed to be effective only to the extent that they become 'self-suggestions', i.e. the person accepts the suggestions as part of his own cognitive process. [31] However, the real situation may be more complex. Some hypnotists, e.g. Liebeaulf, could hypnotise patients without them being aware of it, [33] and at a distance and Russell [34] reports an interesting experiment where coherence of brain activity was induced in a group of meditators when another group 1,000 miles way was meditating. Knowles [15] even believes that some parapsychological process may be involved.

Like suggestion, expectation, combined of course with hope, is powerful and can also influence the doctor. I have already mentioned the fact that a doctor achieved with patients the results he expected from a drug only to find later that the active drug was in fact a placebo. In a similar vein Koestler in the 'Art of Creation' cites work by Rosenthal on maze solving in rats where the experimenter was told that certain rats were specially bred for maze-learning ability and he expected these to do better than normal rats. Indeed they did so but after the experiment he was told that in fact all rats came from the same source! Solvinn [35] in his excellent paper on the psi effects in psychic healing reports his interesting experiment on the healing of malarial mice. Mice were infected with Plasmodium, which causes malaria, and were divided into two groups by random techniques. The handlers were not told which mice were assigned to each group but were told that half their mice were receiving absent spiritual healing. Until the end of the experiment no one knew which mice were assigned to the spiritual healing or control groups. Those in the spiritual healing group were found to be significantly less ill than the controls. The sting in the tail of this experiment is that neither group actually received any healing at all so the results were obtained by the handlers' expectations yet the actual assignment of the animals was unknown to anyone! Here the power of expectation must involve some parapsychological component. However, like most psi work it needs to be repeated.

Experiments such as these do, of course, suggest that something is being transmitted from an individual to affect another body. There has been a great deal of work which attempts to demonstrate that humans can influence the activity of other organisms by the transfer of some form of energy rather than by direct physical manipulation.
They include inhibition of fungal growth, [36] reduction of tumour growth in mice, [37] increased growth of stressed barley seeds, [38, 39] stimulation of wound healing in mice, [40, 41] activity of woodlice, [42] decreasing resuscitation time of anaesthetized mice, [43, 44] and altered bacterial growth. [45] In reviewing this work Clark and Clark [46] conclude that the overall research base is weak and that those trials which are well-designed and double-blind have only shown transient results, no significant results or are in need of replication. Basically much more work needs to be done. As in homoeopathy, [47] little of the work has been repeated to see if significant results are really meaningful or whether, as is so often the case, statistics have been used as a substitute for reason and commonsense. Where experiments of a parapsychological nature have been repeated the results have frequently been non-repeatable [46, 47] or the experiments conducted slightly differently so that they are no longer comparable. [48] There is also evidence that different experimenters under the same conditions can produce dramatically different results. [49] Matthew Manning [50] believed that success or failure in his experiments depended on the person with whom he was conducting the work. Also in ESP tests it has been found that believers scored higher than chance while sceptics scored lower, indicating that sceptics can influence tests involving ESP components. [33]

**Radiesthesia, healing and psi phenomena**

The discussion so far has supported the suggestion that practitioners of alternative medicine are essentially shamans and use all the tools of classical psychotherapy to invoke a placebo response. There is, however, also evidence that humans can influence the activity of other organisms in a way beyond the current understanding of science (parapsychological). In the second part of this paper I will suggest that practitioners of alternative medicine, and frequently of conventional medicine, are also to varying degrees healers utilising a healing force the precise nature of which is still uncertain.

The famous homoeopath W. E. Boyd of Glasgow conducted a series of experiments from 1923 onwards using a device he called an emanometer. This was a modification of the old Abrams' (radionic) box which used variable resistance to maximise the abdominal reflex response. Boyd modified the box by replacing the resistor tuning box with a conventional tuned radio circuit (this underwent many modifications over the years) and he also introduced a great deal of screening. Important in all these circuits was a subject who was wired up to the box. The subject's abdomen was percussed while the variable inductor was adjusted. This system could be used to identify specimens such as homoeopathic remedies. He believed that every specimen gave a fingerprint of energy waves and this energy could be estimated when the object was in the circuit by using his radio tuning device and percussing the subject.

The apparatus was tested by a Government committee (the Horder Committee). The subject had to distinguish between a substance known to give a reflex response and a neutral substance. These were placed randomly by a committee member into the circuit. The results were very impressive and the committee concluded that they
could not have occurred by chance alone and were convinced of the efficacy of the apparatus. [51, 52, 53] However, they concluded that the position of the practising electronist, as such they were called, to be 'scientifically unsound and as ethically unjustified as it was before'. [53] Such attitudes are current in the latest BMA report on alternative medicine.

However, apparently the Horder team sent a physicist from London to examine the phenomenon further but Boyd refused to demonstrate the machine. Apparently he was experiencing difficulty reproducing the results with new subjects and it is probable that the person and not the circuitry was the important crucial factor in the system. Indeed H. W. Boyd [54] believed that WE's ability to select medicines and detect certain phenomena was genuine but probably depended on his sensitivity and skill rather than on the instrument itself.

It is interesting to note that Watson [52] believes the reflex observed by Boyd and Abrams to be 'a controlled version of the much more ancient dowsing phenomenon' and he quotes Maby (some private research papers as well as books) who claims that the 'dowsing field' can affect the radioactive decay of a small sample of radium bromide or activity of a critically biased neon tube relaxation oscillator excited by a weak radioactive source or light source.

The case of the emanometer is only one of many examples in alternative medicine where the person and not the machine has proved to be the crucial factor. Ruth Drown's workers sometimes found that they obtained an analysis of blood on a Drown machine when on subsequent examination they found the sample had not been placed in the machine. [33] This phenomenon has been known for many years. Before the war the medical group of the Theosophical Research Centre recognised that all the various machines used to diagnose by radiations (or emanations) required the human factor as they worked when disconnected or were otherwise faulty provided the diagnostician did not recognise the fault, i.e. provided his mental orientation was unaffected. [55] David Tansley faced up to this dilemma and published his belief that radionic treatment, which uses diagnostic and treatment boxes, works through the mental aspects of consciousness by a form of radiatory healing. [56]

The many esoteric methods of diagnosing and /or treating disease today all involve skilled practitioners using techniques which are very reminiscent of dowsing techniques. Badgley [57,58] measures the radial artery pulse tension of a subject as he introduces homeopathic remedies close to the body; he interprets a change in this 'vascular autonomic signal' as a response to subtle energy differences within the 'near body field'. Also he probes the near body field with magnets or crystals in order to map distortion in the body field over regions of internal disorder. [59]

Omura [60] has developed a 'Bi-Digital O-ring test' to locate the position of organs, to detect cancer, to select remedies, etc. It is rather like kinesiology [61] except using the thumb and a finger of a patient to form an O which the practitioner then attempts to force open. As one might expect in this scientific age, splendid gadgetry...
has been developed to perform the tests for which dowsers use a pendulum. The Germans seem to lead the way with machines like those used in the electroacupuncture according to Voll. The resistance of an acupuncture point is measured in relation to the surrounding skin. This resistance changes in illness but by inserting the correct homoeopathic remedy into the circuit of the machine the resistance returns to normal. [62] The Vegatest device is a development from this technique which has several variants. [63] Julian Kenyon, the director of the Centre for the Study of Alternative Therapies in Southampton, has been responsible for developing a number of these techniques in Britain and is actively engaged in trying to find a scientific explanation for their success, for indeed they do seem to have some success. [64,65] Kenyon [66] believes that the substances placed in the Vegatest machine emit radiation, possibly in the millimetre range of the electromagnetic spectrum. This energy then interacts in some 'as yet poorly understood manner' with the Wheatstone bridge circuit to produce a lower reading. He goes on to say that all these techniques which have been 'developed on the interface of acupuncture and homoeopathy' and which he calls 'bioenergetic regulatory techniques' lack objectivity and are sufficiently dependent upon operator skill as to make them difficult to investigate in an adequately controlled and scientific manner.

It would, therefore, appear that although there is a desperate need to conform to the scientific establishment, he and others are recognising, perhaps unwillingly, that the true explanation for the success of their techniques lies beyond their machines and with the operator.

Some authors, recognising that you cannot separate an individual from his social context and recognising that healing rituals are set in a definite sociological context, have developed sociological explanations for the success of unconventional healing. [67, 68] Easthope [67] emphasises two sociological concepts of healing. One is transformation where the patient no longer passively accepts his condition but actively accepts a responsibility for his own cure - a rite of passage - a psychotherapeutic transformation. Much healing is probably achieved through alternative healers in this manner. It is a 'coaching' of the individual. However, beyond this there are 'miracle' cures. These Easthope tries to explain by a process of transcendence by which an individual enters an enlightened state. In this state the ego has reached such a state of depletion that the individual gives up his will and totally loses his identity. His life and being effectively become a clean sheet and it is upon this sheet that a new identity can be built - frequently suddenly. This individual effectively becomes a new person and can lose all his illness and other negative aspects.

Such sociological explanations fail to face up to the fact that animals and babies may be cured and also fail to deal with the underlying physiological phenomena which may be almost 'magical'. Others recognise the difficulties of explaining alternative therapy in conventional terms and explain it by transfer of some kind of energy from healer to patient (and vice versa if you are not careful). [69, 70] Such explanations depend on the existence of energy fields coexisting with the physical body and
controlling its state. Such ideas have their origin in Eastern civilisations. Indeed it has been suggested that Western medicine is the only system to ignore the energy factor in healing. The recent BMA report [27] reinforces this view by its critical attitude towards reliance on descriptions of energy flow to account for the effects of alternative therapies as there is no precise definition or an explicit theoretical framework for them. A vast amount has been written on this subject, mainly in the esoteric literature, and many descriptions and names have been given to the field(s). The Theosophical Research Centre [55] in their splendid book ‘Some Unrecognised Factors in Medicine’ produced probably as good a discussion of vital bodies as any. It has the advantage of being straightforward and intelligible. There is little virtue in producing complex descriptions of bodies you cannot measure and few can see. They proposed the existence of a ‘vital body’ which acts as a subtle matrix for all physiological changes, as the organiser wherein directive energies are variously distributed throughout the material body and it also acts as a bridge mechanism linking the non-physical aspects of man with the actual physical structure.

A good modern summary which also develops the idea that there is a universal field permeating all matter and through which energies involved in human interactions are modulated and presumably passed throughout this field to have distant effects, conveniently forming a vehicle for distant healing, is given by Bradley. [71]

Into these energy field(s) the healer is believed to channel healing energy, perhaps from the universal field. Many people are now coming to accept that a form of healing energy must exist as conventional wisdom fails to explain all the observed facts. Some authors even claim to be able to measure the healing energy with suitable instruments and a unit of paraelectricity, a ‘Worrall’, named after the healer, has been proposed and defined as 'the energy required to reduce surface tension of 100 ml of distilled water from its normal state (72.75 dynes/cm at 20°C) by 10 dynes/cm as a result of a 3 minute exposure'. [72] Such concepts are of course parapsychological in nature.

Unfortunately we can know little about these energy fields using scientific techniques and this has led to many people producing their own descriptions of these fields on the basis of intuition, dowsing and so on. Whether the universal field, the individual body fields, healing energy, etc. are all separate or are all part of one universal field is a matter of pure speculation. For the sake of argument let us assume that they are part and parcel of one universal continuum. This means that everything is dependent upon and can be affected by everything else, hardly an original idea. John Donne expressed this in his writings 'No man is an Island, entire of itself; every man is a piece of the Continent, a part of the main....never send to know for whom the bell tolls; it tolls for thee.'

Health is a dynamic, a changing, state. Illness is a change too far in the wrong direction. It is, however, part of the normal state of man, but sometimes stress and perhaps other events (e.g. genetic) can push the dynamic balance too far in the wrong direction and the individual requires help of some kind, be it spiritual or pharmacological, to aid the body to return towards equilibrium. Ultimately healing
is accomplished by the vix medicatrix naturae, the body's natural healing ability, and most healing intervention is now believed by most alternative medical practitioners as well as many conventional ones to merely aid or stimulate this innate function. It is quite possible, if we accept the existence of these energy fields, that a healer may aid the body to swing back in this process by transferring some energy perhaps from himself, in which case he becomes depleted, or better through himself from the universal field to supplement, and perhaps balance, the field(s) of the patient. This is pure speculation but what else do we have if we accept that alternative medicine is effective? I think possibly the reason why the establishment is so keen to show that alternative medicine does not work or where therapies are shown to be effective in some cases, e.g. acupuncture, to explain them by conventional means is that they realise there is no conventional explanation for much of what occurs.

Finally, I should like to suggest that dowsing plays a more subtle role in healing than simply selecting a form of treatment. Although some dowsing activity may involve detecting physical changes, for example electromagnetic anomalies, the ability of many to map dowse or distant dowse suggests that we are frequently operating on a spiritual or non-material plane. A dowser, by tapping the ‘universal field’ with which all fields interact and are part of, can determine what a sick person requires in the form of healing. The significance of all the odd remedies and techniques that are dowsed and are used is that they are an essential component for the transfer of energy through the healer to the patient. Their presence is more symbolic than having any intrinsic value. They form part of the ritual, as dowsing may, in the preparation of the healer and possibly the patient. The techniques, the technology, the pills, potions, crystals, symbols and all the much derided props of alternative medicine are essential in preparing the mind of the healer and, where appropriate, of the patient so that they may become channels or receivers of the healing energy. In the same way the often long training given in all these different techniques is a form of indoctrination; they make the practitioner believe in them so he shows no doubt and can with a clear, undoubting mind, prepare the situation for healing. I can imagine that if the healer doubted himself he would not be very effective. Dowsing, by focusing the mind into the universal field, also allows us to pick those techniques or symbols that are necessary to prepare ourselves for each healing situation. Each person, each situation, is unique and it is perhaps not surprising that our mental balance must be different for each situation. The devices, the rituals, are, however, only symbols, having no inherent power in themselves in the absence of the human mind. This applies to homoeopathic pills, crystals, gemstones, radionic boxes, earth energy blocks, or whatever. Indeed, many healers and dowsers as they progress find they no longer need these props and simplify their technique until some need nothing at all except to be in the healing situation. Jesus often used no more than his presence to induce a cure. He also said that we could do all he could and more. When we are ready and have the confidence we can cast aside our crutches and do the same.

References


The shaman represents an identifiable pattern of religious entrepreneurs with shared practices and beliefs based on alternate states of consciousness. The purpose of this article is to introduce biblical interpreters to shamanism and the study of the shamanic complex. The shaman represents an identifiable pattern of religious entrepreneurs with shared practices and beliefs.