

## Nonlocal Healing

Deveron Long

May 2010

In December 2003, Dr. Edgar Mitchell, former Apollo 14 astronaut and founder of the nonprofit Institute of Noetic Sciences (IONS), received word that his MRI showed signs of renal irregularities consistent with renal carcinoma. Mitchell refused a biopsy for cancer, instead hiring a young Vancouver man known as Adam Dreamhealer to provide remote healings from 3,000 miles away. Once a week for a month, using only a photograph, Adam was able to perceive Mitchell's body field in the form of a holographic image from which he could detect areas where Mitchell's energy was blocked. Adam worked at releasing this "irregularity," and at Mitchell's next MRI appointment a month later, the irregularity had reduced in size. Mitchell and Adam continued with their distant healing sessions on a weekly basis, and within six months, the renal irregularity was completely gone (Becker & Becker, 2009).

Many miracles of remote healing such as this have been the focus of attention under the guise of different names (i.e., distance healing, distance intentionality, spiritual healing, energy healing, psychic healing, vibrational healing, consciousness-based healing, psychokinesis, prayer healing, quantum healing, subtle energy healing, and nonlocal healing). According to Dossey (2002), who strongly endorses the use of the term *nonlocal healing*, "If you want to sell something, be careful what you call it" (p. 2). He contends that because this field of healing is so young, we are in the perfect time to choose exactly what to call it so that the scientific community and the public at large will be more receptive. The term *nonlocal healing* is derived from the theory of nonlocality in physics: "the ability of a quantum entity such as an individual electron to influence another quantum particle instantaneously over any distance despite there

being no exchange of force or energy” (McTaggart, p. 11). This “spooky action at a distance” as Albert Einstein called it, shattered the very foundations of classical physics. McTaggart states that this new theory completely disrupted Einstein’s fundamental foundations in a major way—“matter could no longer be considered separate . . . subatomic particles had no meaning in isolation but could only be understood in their relationships” (McTaggart, p.11).

According to Dossey (2007), *nonlocal* literally means not local, or not confined to a specific place in space or time; therefore, nonlocal healing is instantaneous and infinite (p. 192). Studies in nonlocal healing also suggest that distance does not limit the effects of healing (Benor, 2000; Dossey, 2004); therefore, this type of healing cannot be explained through conventional energy fields because the energy would diminish in strength with increasing separation. So rather than viewing the universe as tiny bits of matter as in the conventional perspective of physics, recent quantum theory suggests that the universe may need to be viewed as tiny bits of *information* (Dossey, 2007, p. 192).

So how does a healer bridge this strange nonlocal gap in order to access the information needed to affect the healee? According to current literature, there are two possible methods for manifestation of nonlocal healing: 1) precognition and 2) psychokinesis or intention. The Decision Augmentation Theory (DAT) (May, Utts, & Spottiswoode, 1995) is the primary proponent of precognition. Dossey (2002) summarized this complicated statistical study by stating:

According to this view, people don’t push the world around with their intentions or prayers. Instead, they intuit what is going to happen in the future and align their intentions with these developments, which gives the illusion that their intentions caused the pattern of events that ensues. So DAT essentially abolishes psychokinesis in favor of precognition. (p. 8).

A number of researchers from prestigious institutions across the United States and Europe have corroborated the existence of a specific field by which psychokinesis or intention is utilized to access the nonlocal gap. The Zero Point Field, according to McTaggart (2001), is a subatomic field of unimaginably large quantum energy in what was once deemed empty space. This dynamic cobweb of energy “creates a medium enabling the molecules to speak to each other nonlocally and virtually instantaneously” (p. 68). Substantiation of this theory creates profound implications for all humanity in that the Zero-Point Field theory connects everything in the universe and is “responsible for our mind's highest functions - our memory, intuition, and creativity” (McTaggart, 2001, website). In fact, systems theorist, Ervin Lazlo, argues that “the brain is simply the retrieval and read-out mechanism of the ultimate storage medium—The Field” (McTaggart, 2001). If memory is not localized in the brain, the question becomes: Where (and what) is consciousness? Further study of the Zero-Point Field as it relates to nonlocality should provide interesting revelations for the powers inherent in consciousness.

Although a strictly scientific stance may lend more credibility to nonlocal healing than a mystical one, Dossey is emphatic that physics does not *own* nonlocality. He reminds us that research in parapsychology uncovered nonlocal events about a hundred years before quantum mechanics was ever discovered (p. 10). Dossey also cautions us that people and particles are different (2004, p. 2). Because people are so much more complex than subatomic particles, there is no reason to believe that experiments in physics necessarily “prove” proposed nonlocal connections between humans. “Quantum mechanics therefore provides us with a potent metaphor—but *only* a metaphor—for what is happening between separated humans” (2002, p. 11).

Although this field of research generates great opposition (Targ, 2002, p. 29), the future of nonlocal healing research holds tremendous potential. Dossey (2002) states that double-blind, controlled studies are being performed at major medical institutions throughout the country (p. 16), and according to Targ (2002):

Anecdotal reports of healing in a wide variety of conditions have, however, stimulated more than 150 controlled studies dealing with human and/or biological systems. Of these, two-thirds found a statistically significant effect . . . The US National Institutes of Health (NIH) now even has a category of studies entitled ‘Distant Intentionality on Biological Systems’ (p. 29).

Targ’s 2002 article discusses the importance of designing studies using solid methodology—which is often challenging. For example, in a study of intercessory prayer in a cardiac unit at San Francisco General Hospital (Byrd, 1988), Targ indicates that “the control group in this study may have been receiving the benefits of intercessory prayer efforts from friends and family members, thereby contaminating the study” (p. 32). In addition to false-negative results needing to be controlled for in future studies, below are other factors to be considered in future research design:

- Choosing effective healers based on specific parameters.
  - Documenting healer strategy.
  - Establishing length of time for healing interventions.
  - Designating individual versus group efforts.
  - Defining the specific healing intention.
  - Establishing parameters of mutual understanding, respect, and consideration between healers and the investigative team.
  - Assessing healer attitude toward the task.
  - Assessing the subjects’ beliefs about healing/spiritual issues.
  - Setting nonconfounded outcome measures.
  - Limiting the number of outcome measures.
  - Adjusting the target population to animals or in vitro targets to prevent psychological and placebo effects.
  - Establishing causality.
- (Targ, 2002, pp. 30 – 34)

Dossey (2007) boldly asserts that it is only a matter of time before a nonlocal perspective of consciousness becomes accepted by science and medicine because it is the only theory capable of adequately explaining the findings in prayer and distant healing studies (p.193). Distant healing studies reveal that the nonlocal mind comes from a place of deep love, compassion, and the desire to heal ourselves and heal the world. For centuries mankind has engaged in distant healing endeavors despite the consternation of skeptics. Even if future research cannot determine statistically significant results for remote or nonlocal healing and prayer, then as Targ (2002) suggests, we should focus our efforts on determining how these healing activities serve us by lifting our spirits and enriching our lives (p. 39).

## References

- Becker, G. & Becker, S. (2009). *The Living Matrix*. DVD. Becker Massey LLC, San Rafael, CA.
- Benor, D. (2000). Distant healing. *Subtle Energies*. 11(3), 249-2664. Retrieved May 1, 2010 from <http://www.noetic.org/research/dh/studies.html>.
- Byrd, R. (1988). Positive therapeutic effects of intercessory prayer in a coronary care unit population. *Southern Medical Journal*. 81, (7). 826-829.
- Dossey, L. (2002). How healing happens: Exploring the nonlocal gap. *Alternative Therapies in Health and Medicine*. 8(2)12-16, 103-110. Downloaded from <http://www.noetic.org/research/dh/articles.html> on May 1, 2010.
- Dossey, L. (2004). The unsolved mystery of healing. Distant healing: Healing mediated by nonlocal mind. *The Shift in Action*. Issue 5. Retrieved May 7, 2010 from [www.shiftinaction.com/node/112](http://www.shiftinaction.com/node/112).
- Dossey, L. (2007). PEAR lab and nonlocal mind: Why they matter. *EXPLORE: The Journal of Science and Healing*. 3, 191-196. Retrieved May 1, 2010 from <http://www.princeton.edu/~pear/pdfs/Explore-Intro.pdf>
- May, E., Utts, J. and Spottiswoode, J. (1995). Decision augmentation theory: Toward a model of anomalous mental phenomena. *The Journal of Parapsychology*. 59, 195-220.
- McTaggart, L. (2001). *The Field. The Quest for the Secret Force of the Universe*. New York, HarperCollins.
- McTaggart, L. (2001). *The Field. The Quest for the Secret Force of the Universe* [abridged]. Retrieved May 1, 2010 from [http://twm.co.nz/McTag\\_field.htm](http://twm.co.nz/McTag_field.htm).
- Targ, E. (2002). Research methodology for studies of prayer and distant healing. *Complementary Therapies in Nursing & Midwifery*. 8, 29-41.