

May, 2015

Volume 15, No. 2

## Healing the Collective PTSD of Humanity

Daniel Benor, MD

*All concepts setting boundaries to what we term the self are arbitrary. In the systems view, we consist of and are sustained by interweaving currents of matter, energy, and information that flow through us, interconnecting us with our environment and other beings.*

*Yet, we are accustomed to identifying ourselves only with that small arc of the flow-through that is lit, like the narrow beam of a flashlight, by our individual subjective awareness.*

*But we don't have to so limit our self-perceptions... It is as plausible to align our identity with the larger pattern, interexistent with all beings, as to break off one segment of the process and build our borders there.*

- Joanna Macy

### Abstract

Serious global challenges in our world threaten the continuation of human life and of most life as we know it on our planet today. Humanity as a whole appears determined to suicide through any or all of a variety of abuses by humans of each other and of our planet. This discussion explores the possibility that the collective human suicide is a manifestation of a post-traumatic stress disorder (PTSD) in the collective consciousness of humanity. In individuals, a severe PTSD may be associated with anger, violence and abusive behaviors, and with suicidal thoughts and actions. In the collective consciousness, this may explain the murderous and suicidal behaviors of humanity as a whole. Ways are suggested to bring healing to the collective PTSD through proxy healing, which might mitigate or halt the collective march to suicide.

Key words: collective consciousness, collective PTSD, suicide of humanity, proxy healing, sixth extinction

### Introduction

Humanity as a whole appears determined to suicide through any or all of a variety of abuses by humans of each other and of our planet. This discussion explores:

1. Serious global challenges in our world today that threaten the continuation of human life and of most life as we know it on our planet today
2. The possibility that the highly likely collective human suicide is a manifestation of a post-traumatic stress disorder (PTSD) in the collective consciousness of humanity

3. Ways in which Energy Psychology (EP) and other therapeutic modalities might help to mitigate the collective PTSD through proxy healing, a method of offering healing over any distance to those in need
4. Ways in which proxy healing might mitigate or heal the collective march to suicide

Before reading this discussion, a word of caution. This subject matter deals with serious traumas to individuals and to humanity as a whole, and with threats to the continuation of all life on this planet. Some readers could find this distressing or even traumatizing. If you find yourself getting upset, you might wish to pause or stop reading. Using de-stressing methods such as EFT (Emotional Freedom Techniques) or TWR (Transformative Wholistic Reintegration) to address your stress responses or to create a place of peace, love and healing to which you can psychologically retreat for respite and rejuvenation could also help (Benor, 2010). For dealing with the anxieties themselves, and for installing positives to replace the negatives you release, there are many methods you can use (Benor web reference TWR; Google for EFT, TFT, TAT; HBLU; BSFF).

### **1. Serious global challenges in our world today threaten the continuation of human life and of all life as we know it on our planet today**

*Men just cannot do to this world within what they do not also do to the world without, and to the world without, that which does not provoke a corresponding consequence within.*

- Laurens van der Post.

#### **1A. We, members of the human species, are facing numerous self-created and self-perpetuating challenges that threaten the survival of humanity and of most other living beings.**

These challenges include:

- Global climate change;
- Overpopulation;
- Major pollutions of our air, land and waters;
- Increasing ocean acidity and de-oxygenation – contributing to impending extinctions of fish, whales and other ocean life;
- Depletion of numerous resources essential for life;
- Numerous extinctions, with losses of vitally important species (e.g. bees, fish, birds) and losses of biodiversity that contributes to resilience;
- World hunger and starvation;
- Increasing local, national, international and global social dysfunctions;
- Social and religious conflicts and ongoing wars;
- Major investments in wars at the expense of education, healthcare and social services; and
- Nuclear disasters, civilian and military.

The dangers inherent in the unmitigated continuation of these behaviors severely threaten the quality of life on this planet at the least, and appear very likely to threaten the continued survival of humans and many (if not most) other species on our planet as we know it today (Jamail, 2015). In combination, the abusive, destructive, suicidal and human genocidal behaviors (towards other humans, towards most other life as we know it today, and towards our planet as an ecosystem) are leading us inexorably to the sixth major global extinction in the history of our planet.

#### **1B. A meta-challenge we face is our lack of understanding and explanations for why humans are behaving in these ways:**

- Humans are grossly abusive and murderous to other humans;
- Humans are grossly abusive and murderous to other species;
- Humans are grossly abusive and destructive to the environment;
- Humans are so self-destructive in all of these behaviors as to warrant saying we are suicidal.

**1C. Another meta-challenge is to clarify why we are not doing much about these problems. We appear, for the most part, to be passively marching to extinction with hardly a murmur of acknowledgment on the whole that we are doing so, much less taking effective actions to halt these behaviors – despite the fact that their dire effects are public knowledge, well supported by scientific research.**

## **2. Could the collective human abusiveness and suicidal behaviors represent a collective PTSD?**

*We must trust the perfection of the creation so far as to believe that whatever curiosity the order of things has awakened in our minds, the order of things can satisfy. Every man's condition is a solution in hieroglyphic to those inquires he would put.*

- Ralph Waldo Emerson

To hypothesize a collective human PTSD we would have to establish that:

- A. A collective consciousness exists;
- B. The collective behaviors of humanity resemble a PTSD as it appears in individual human beings; and
- C. A collective human PTSD exists.

### **2A. Evidence for a collective consciousness**

*We humans are individual and collective microcosms within a vast, intricately interwoven macrocosm. We are fragments of the Whole, yet we are vital parts contributing to the Whole. Just as each cell in our bodies (whether an eye, skin or liver cell) contains the DNA, the genetic blueprint for the Whole; so each of us contains the blueprint for the entire Universe.*

- David Bohm & Karl Pribram

2A-1. Conventional explanations for the existence of a collective consciousness can be found in sociological, anthropological and psychological studies of families, communities and broader cultural groups. Within these disciplines of studies of human behaviors it is clearly demonstrated that people absorb the cultural history, beliefs, myths and attitudes about the world that are prevalent in the society in which they are born and raised.

Relevant to PTSD experiences:

- It is very common for people to grow up with societal teachings about the historic, ideological and political experiences of the past, which demonstrate that 'others' pose threats that require varieties of defensive behaviors – following historical conflicts over territories, resources and religious differences. Distrust and fears about the negative intentions of 'others' who are not part of one's culture are prevalent globally.
- The historical conflicts have often involved persecutions, wars and other traumas of major proportions, which must have left residues of post traumatic stress (described below) in many members of the population.
- These sorts of distrusts and fears are often further generated, intensified and used by leaders of social, religious and national groups in order to manipulate the population under the rule of the leaders through fears of being attacked – to give the leaders greater, often autocratic, powers.
- Poverty, still prevalent and in many places growing, generates environments where trauma occurs frequently, and where police and medical services do not provide adequate protections or treatments (Haugen & Boutros, 2014);

- The collective trauma experiences of individuals within social and national groups, and within humanity as a whole, can be said to constitute a global, collective experience of traumas – which has been accumulating over thousands of years.

*2A-2. There is substantial research evidence on direct mind-mind and mind-matter interactions to strongly suggest that a human collective consciousness exists as an aware collective entity. This evidence supports a view that each person functions in ways similar to a cell in a vaster mind. You and I are parts of a giant collective conscious awareness.*

Meta-analyses of a variety of studies of non-local consciousness demonstrate highly significant effects, including:

- Telepathy, mind to mind awarenesses and communications (Radin, 1997);
- Clairsentience, knowing information about the physical world without cues from our ordinary senses, (Radin, 1997);
- Precognition (Honorton & Ferrari, 1989);
- Intentional influence over the throw of dice (Radin & Ferrari, 1991);
- Intentional influence by one person on the electrodermal responses of another person (Braud & Schlitz, 1989; 1991);
- Intentional influence on bacteria and cells in laboratory culture (Roe, Sonnex, and Roxburgh, 2015);
- Intentional individual influence on a single electronic random number generator (RNG), and a broader range of effects influencing RNGs around the world – generated by large numbers of humans who focused on an event that was of interest to them (Radin, 1997; Radin & Nelson, internet reference)

*2A-3. There is a wealth of anecdotal reports from individuals in many countries around the world, supporting the occurrence of telepathy, clairsentience, precognition and mind-matter interactions (Feather & Schmicker, 2005; JB Rhine, 1964; LE Rhine, 1961; Radin, 2006). These provide weaker evidence in validation of abilities of people to connect with each other, but suggest that the occurrence of such abilities is very widely prevalent in human beings. The spontaneous occurrences of these interactions is more frequent when strong emotions are present and when the participants are emotionally related.*

*2A-4. There is a wealth of anecdotal evidence for a collective consciousness (Jung, 1970; Radin, 2006; Jacobi, 1974; Surowiecki, 2005; von Franz, 1980). Carl Jung, a Psychoanalyst follower of Sigmund Freud, brought a lot of attention to expressions of the collective consciousness revealed in dreams of his patients. They would often report symbolic figures in dreams that he, with his wealth of knowledge of literature and cross-cultural myth and symbols could interpret. The clients usually had little or no awareness that they were connecting with the collective consciousness of humanity, yet they were able to bring to Jung, their analyst, very significant information through the symbols in their dreams and he was able to interpret these symbols in order to move their therapy forward.*

*2A-5. Jung also brought attention to synchronicities, the startling, meaningful coincidences in people's everyday experiences that often bring them deep, helpful insights and understanding about their lives. Synchronicities are not rare occurrences. There are numerous collections of examples of synchronicities (Castleman, 2004; Combs, 2000; Mansfield, 1995; Peat, 1987; von Franz, 1980; Wilcock, 2013). Once we are aware of these, we tend either to notice them more, or they occur more often, or both. These coincidences appear to represent links between various participants in the collective consciousness.*

*Example 1:*

In his article *Synchronicity, An Acausal Connecting Principle*, Carl G. Jung gives an example which has, over time, become famous: "A young woman I was treating had, at a critical moment, a

dream in which she was given a golden scarab. While she was telling me this dream I sat with my back to the closed window. Suddenly I heard a noise behind me, like a gentle tapping. I turned round and saw a flying insect knocking against the window-pane from outside. I opened the window and caught the creature in the air as it flew in. It was the nearest analogy to a golden scarab that one finds in our latitudes, a scarabaeid beetle, the common rose-chafer (*Cetonia aurata*), which contrary to its usual habits had evidently felt an urge to get into a dark room at this particular moment." (Jung, Coll. Works, 1970]

This synchronicity helped Jung to help his patient accept that the contents of her consciousness could transcend logic and reason – thereby making her more receptive to exploring her unconscious mind. Synchronicities are manifestations in the everyday world that are produced from the collective consciousness.

*Example 2:*

I (Dan) have collected varieties of examples myself. Here is but one of many I can share:

I made an appointment at a doctor's office that I had never visited before. I neglected to ask for the address. Although I had passed through that part of town on numerous occasions and could guess the approximate location, I could not place it with any certainty in my mind. I thought of phoning the office to inquire, but the pressure of numerous other duties prevented my doing so over several days. Each evening, as the date of the appointment grew closer, I resolved that the next day I would phone, but invariably did not. Although this was just a little thing, I wanted to make sure I had it right, as my tight schedule on the day of the appointment seemed likely to make it difficult to fit in that doctor's visit plus all the other obligations of a busy job. The day prior to the appointment, upon returning home after work (with the call still unmade!), I found a letter from that very doctor - addressed to the prior owner of my home, in which I had been living for several years - with the desired return address on the envelope.

In light of the research evidence confirming telepathic communications, I could postulate that I might have broadcasted my need telepathically, which the doctor or his secretary had responded to. Alternatively, I may have perceived telepathically, clairvoyantly or precognitively that the letter was going to arrive - therefore procrastinating because in my unconscious mind I knew the address would arrive without external efforts on my part.

*2A-6. Manifestations, which are consciously invited synchronicities, are also common. When a wish or a need is held in one's awareness, this appears invite the occurrence of circumstances that facilitate the manifestation of the wish into our lives. Much has been written about this under popular titles such as "The Law of Attraction" and related popular titles (Chopra, 2003; Hicks & Hicks, 2006; Spangler, 2009). Many of the manifestations rely upon cooperation of two or more individuals. This suggests collaborations through a collective consciousness. Holding the outcome as a mental image is said to enhance its effectiveness.*

*Example:*

This is an easy one to explore personally. Ask mentally for a parking space to be available at your driving destination. While I know of no research to confirm this application of manifestations, my personal experience and that of many others I've spoken with is that this is a worthwhile and often successful exercise in generating a manifestation. A word of caution: When you visualize the outcome, you should be very specific. I once arrived at my destination and, sure enough, there was an empty parking space just in front of the bank that I really wanted to have – as a stop in a hectic shopping schedule. However, there was another car driving into that spot, the only empty one in the parking lot! Since then, I've always held the image of my car driving into the empty spot.

*2A-7. There are numerous anecdotal reports of individuals recalling experiences in past lives. Recall may be spontaneous (Snow, 1999; Stevenson, 1974; 1987; 1995; Sutphen, 1978) or may occur within*

*various forms of psychotherapy (Kelsey & Grant, 1967; Netherton & Shiffrin, 1978; Weiss, 1994).* With the growing interest in this area, there is now an International Board for Regression Therapy (IBRT) that certifies practitioners (IBRT web reference).

2A-7a. Effectiveness of past life therapy is being validated in early clinical research as an effective clinical tool for helping people with varieties of problems (Denning, 1987; Freeman, 1977; Past Life Regressions Academy, web reference; Rivera, 2012; Snow, 1986; Van der Maesen, 1998; 1999).

*Example 1:*

Brian Weiss is a Harvard psychiatrist who left his conventional practice to pursue hypnotherapy as a gateway to helping people resolve current life problems by clearing past life trauma memories. He finds that past life traumas can often contribute to current life problems.

Kathy had had a successful hypnotic regression session in which she cleared residues of psychological trauma from an automobile accident in her childhood. She returned for further help, wishing to focus on her inability to lose weight. She had struggled with this for as long as she could remember, with only brief, temporary weight losses through dieting.

In a hypnotic trance, she was invited to go back to any memories that might be relevant to her weight problem. She immediately returned to memories of being as thin as a skeleton when she was imprisoned in a Nazi concentration camp, where she had been the subject of various inhumane medical experiments. She found release in death, recalling how she was welcomed into the white light with love.

Spontaneously, she also returned to an earlier lifetime when she had suffered from a sexually transmitted disease, again wasting away to a skeleton before her untimely death.

...Once again, Kathy floated above her body. And, once again, she found the brilliant light that did not hurt her eyes.

"I never found someone to love in that life," she wistfully observed. Her spirit had starved as had her body.

In both of these past life memories, she had died in a state of starvation. She was literally just skin and bones.

"Is there a connection between these two lifetimes and your current weight problem?" I asked...

The answer came quickly and effortlessly. "In this life, I needed the extra weight for protection. I needed to guarantee that I would not starve again." After a pause Kathy added, "But now I no longer need this protection."

Because Kathy had remembered the traumas of starvation, she no longer needed layers of fat to protect her.

Over the next six or eight months, Kathy slowly and steadily lost all of her extra weight. At the time of this writing, she has sustained the loss. Perhaps even more significantly, Kathy has started a wonderful new romantic relationship since losing the weight. Feeling good about herself and liking how she looks definitely played an important part in Kathy's ability to let this new relationship into her life. (Weiss, 1994, p. 117)

*Example 2:*

My own experience of using WHEE/TWR (Wholistic Hybrid of EMDR and EFT/ Transformative Wholistic Reintegration) to help people clear memories of past life PTSDs is that this is highly effective and that people almost always respond more rapidly than people with current life PTSD.

'Angie' (assumed name) came for help because she had had many relationships with men that turned out to be unpleasantly unsuccessful. Though she did her best to choose men who seemed

gentle and considerate, her choices invariably proved to be very negative ones. In a past life regression she uncovered a life in which she had been a man who was a sexual predator, having many affairs that were both abusive in his direct interactions with women and indirectly destructive to their marital relationships. After a several therapy sessions in which she sent healing wishes to those whom she had abused, her choices in men proved remarkably more successful.

*2A-7b. Investigations of past life memories have uncovered validating numerical evidence (Wambach, 1978).*

*Examples:*

Helen Wambach gathered two large groups of past-life memories under group hypnosis in Southern California. One series had 850 cases; the other had 350. Wambach sorted each group separately, first by century and within each century distributed them geographically. In each geographic area she sifted the cases into their apparent socio-economic groups. These sortings produced percentages of upper, middle and lower classes that closely parallel what is known of population distributions in the respective historical periods. Gender distribution in past lives was split 50 percent male/female in both groups, although the real-life distribution in her first series was 78 percent female. She also studied clothing, food and other items mentioned in past-life recall. There were cases in which verified types of historical items were mentioned that the subjects claimed they had had no conscious knowledge of prior to the hypnotic regressions. There were very few cases of objects misplaced from current time to their past life reports.

Wambach also explored future life 'memories,' finding considerable overlaps in the details of the reports of her subjects from the 1980's (Snow, 1993). While these are interesting, they are obviously difficult to assess when predictions are made for the distant future. Most troubling in Wambach's series, paralleled by those of other researcher exploring future lives, is that only about five percent of subjects were able to identify lives in the years 2100-2200. This suggests the possibility of a major decrease in planetary population (Summary from Benor, 2006).

*2A-7c. Investigations of past life memories have uncovered validations of anecdotal details reported about previous lives (Kelsey & Grant, 1987; Netherton & Schiffrin, 1978; Stevenson 1974; 1987; 1995; Sutphen, 1978; Weiss, 1994).*

*Examples:*

The late Ian Stevenson, a psychiatrist at the University of Virginia, carefully documented reports of children about their memories of previous lives. Working in the 1970's and 1980's, he chose children in locations in countries where travel was very limited and there were no media available to provide information about people living hundreds of miles away. He carefully recorded the children's reports of memories of a previous life and in many cases was able to validate precise details of their reports. Some of his more striking findings were of children who spoke words of dialects from hundreds of miles away – when these dialects had never been spoken in their presence. In other cases he found birthmarks on the bodies of the children that correlated with wounds suffered by the person whose past life they reported.

*2A-7c. Past life memories, linking people across time to one or more other persons, may constitute further stitches in the fabric of the collective consciousness.*

*2A-7d. Explanations and implications of past and future life reports are fascinating (discussed in Benor, 2006). They are obviously important in the light of a possible total extinction of humanity but are too complex, however, for a discussion here.*

*2A-8. Pre- and Peri-Natal (PPN) Therapy is somewhat similar to past life therapy. It has been found that babies recall their mother's emotions and thoughts, telepathic conversations they had with their*

mother, their own experiences in-utero and throughout the birth process, and throughout their infancy. There are coherent and meaningful memories of these experiences antedating the development of speech, including trauma memories that can leave the same sorts of trauma residues as are experienced by verbal children and adults (McCarty, 2012).

2A-9. *Past life memories and clearings of past life traumas open windows of awareness into our participation in a collective consciousness.* These are small windows relative to the totality of the collective consciousness, but they reveal patterns of inter-relationships between the consciousnesses of individuals across space and time. The meanings and purposes of these interactions within the web of consciousness is a fascinating subject to explore and ponder, but is beyond the scope of the current focus on the existence of a collective PTSD and how we might helpfully address it.

2A-10. *In summary, the research studies and anecdotal reports provide strong evidence that:*

- Mind to mind communications occur;
- Mind-matter interactions occur;
- These communications and interactions may occur across space and time;
- There is a foundation of research and anecdotes to support a belief in a collective consciousness; and
- Healing within the collective consciousness appears possible across time and space.

## **2B. Could there be current trauma experiences and trauma memories in the collective consciousness that would constitute a Collective PTSD?**

2B-1. *The diagnosis of PTSD, includes:*

### **According to the Diagnostic and Statistical Manual (DSM-5) of the American Psychiatric Association:**

2B-1a. *A history of exposure to a traumatic event that may be*

- *a direct experience, witnessing trauma of others,*
- *or (what may be termed 'secondary trauma') through indirect experience of resonating with the trauma of others – such as family members or people with whom one has a therapeutic relationships (as in first responders, doctors, nurses, psychotherapists and other caregivers).*

2B-1b. *The trauma produces symptoms of:*

- *cognitive and emotional intrusions ('flashbacks' to images and feelings of the trauma);*
- *avoidance of situations that trigger memories of the trauma;*
- *negative alterations in cognitions and mood (dissociative amnesia; negative self-thinking; blame of self and others; fear, anger, guilt, or shame; constricted affect and decreased ability to experience pleasure);*
- *alterations in arousal and reactivity (anger, temper outbursts, insomnia, nightmares).*

2B-1c. *Observed characteristics:*

- *Symptoms are present for at least a month;*
- *everyday functioning is impaired; and*
- *the symptoms are not primarily attributable to a substance or co-occurring medical condition. (See Appendix A for more details.)*

### **Soldiers' experiences of PTSDs**

2B-1d. *Self-medication is common with marijuana, alcohol, street drugs.*

2B-1e. *Abusive behaviors are common towards family members, friends and strangers, due to buried, unconscious and unprocessed emotions of hurt, anger, fear and the like left over from the military trauma.*



*2B-1f. Depression and suicide in the US are common among veterans of the Iraq and Afghanistan wars, at twice the rate of the male population as a whole (Hudenko, Homaifar & Wortzel, web reference).*

**General observations about PTSDs**

*2B-1g. I am very surprised that the SDM-5 does not mention depression or suicide as part of the PTSD syndrome. Considerable research and clinical experience confirm these are often serious problems in civilian populations as well as in the military (A(mir, Kaplan, Efroni, et al., 1999; Ferrada-Noli, et al., 1998; Sareen, Houlahan, Cox, et al., 2005; Sareen, Cox, Stein, et al., 2007; Thompson, Kaslow, Kingree, et al., 1999).*

*2b-1h. Meta-anxieties develop about releasing the PTSD symptoms. Meta-anxieties are fears of people with PTSDs that they might endanger themselves if they become less vigilant – possibly exposing themselves again to being abused (Benor, 2009).* Meta-anxieties contribute to avoidance behaviors of isolating oneself socially (including from the family) and self-medication with drugs and alcohol. These meta-anxieties contribute to persistence of the PTSD, with venting of residual trauma feelings upon others, often without understanding why people are behaving in these ways.

*Example:* A woman who has been raped may well be reluctant to relinquish her fears about getting close to any man (due to meta-anxieties generalized from her trauma) – out of fears that she could place herself in danger of being raped again if she released her fearful memories. She may be irritable and aggressive, triggered into fear, flashbacks and anger by social interactions that would generally be considered innocuous by other women in similar situations. She may be resistant to considering therapy because of her fears of becoming unsafe if she lets go of her meta-anxieties and of the trauma memories and feelings.

*2b-1i. Psychotherapists find that meta-anxieties develop from re-experiencing the PTSD symptoms, both from the original PTSD and from ongoing PTSD behaviors.* Opening the doors to conscious awareness of clients' buried inner memories and to their trauma-generated behaviors may be a re-traumatizing experience.

*2b-1j. People who are abusive very commonly have suffered violence and abuse themselves and have suffered PTSDs, most frequently in their childhood (Ardino, 2012; Browne, Miller & Maguin, 199; Dong et al., 2004; Dutton, 1995; Dziuba-Leatherman & Finkelhor, 1994; Finkelhor, 2008; Hussey, Chang, & Kotch, 2006; Garbarino, 2002; Jordan, Schlenger, Fairbank, & Cadell, 1996; Maxfield & Widom, 1996; Smith, Ireland & Thornberry, 2005; Showyra & Cocozza, 2006; Widom & Maxfield, 2001).*

*2b-1k. Humans are the most viciously abusive of other members of their own species, relative to all other species on our planet.* This might be explained by the accumulation over many generations of unresolved negative experiences in the collective unconscious.

*2B-1l. It has taken many decades and repeated world-wide traumas, particularly the major wars of the 20<sup>th</sup> Century, for an understanding to grow and deepen about the nature of PTSDs. The diagnosis of PTSD was first acknowledged by the American Psychiatric Association in 1980 (Friedman, web ref.).* It is only since the Korean War that relatively effective methods for treating PTSDs have been developed. Notable among these are EMDR (Eye Movement Desensitization and Reprocessing); Energy Psychology (Feinstein, 2012), including EFT (Emotional Freedom Techniques) and TFT (Thought Field Therapy); and CBT (Cognitive Behavior Therapy), which has been modestly helpful in treating PTSD (Kar, 2011).

*2B-1m. Secondary (“observer”) PTSDs may explain the slowness of caregivers to come to modern-day understandings of PTSDs. This avoidance of dealing with painful experiences of others could, in part, be due to unconscious, collective avoidance of the anxieties raised in the caregivers themselves by hearing vivid reports and seeing the PTSD trauma of their clients.*

Caregivers of all sorts find that the experience of listening to reports of traumas is traumatic to the caregivers. In these settings it is often called “compassion fatigue.” Secondary PTSDs are common in psychotherapists treating people with trauma, first response team members, doctors, nurses, emergency room personnel, police, firefighters, court stenographers, and others who are witnesses to the PTSD experiences or the recounting of these traumas by the victims (Mathieu, 2011; Rothschild, 2006; P. Smith, 2009).

*Example:*

‘Charlotte’ was a very competent and successful nurse with six years of experience in a busy emergency room at a teaching hospital. She found herself having increasing difficulties falling asleep and staying asleep at night; uncharacteristically irritable with co-workers and her family; depressed; and losing weight because of diminished appetite. Her supervisor suggested she take a few days off. There was some lightening of her symptoms, but they all returned in full force when she came back to work.

On her supervisor’s advice, she came to me for help (as a psychotherapist). It quickly became clear that Charlotte was feeling utterly drained by having to help people, day after day, with severe physical injuries, pains and distress following major bodily injuries. She was very responsive to Energy Psychology methods for releasing trauma. Within two weeks she was free of all of her symptoms. It was particularly helpful to her to clear memories of having witnessed her younger brother’s injuries in an auto accident when she was eleven years old. (This had also been one of her motivations in choosing a nursing career.)

*2B-2. Within the conventional explanations of cultural collective consciousness considered in section (2A-1), verbal and written reports of historical traumas have been passed down from one generation to another, constituting a potential contribution to the development of collective PTSDs.*

*2B-2a. In almost all cultures there occur natural disasters, such as droughts, floods, losses of sources of food or water, epidemic diseases, and the like.*

*2B-2b. In almost all cultures there occur traumas to individuals, groups and nations from economic inequalities, social and economic discriminations and persecutions, wars and the like.*

*2B-2c. These culturally embedded trauma experiences alone might be sufficient to cause a collective PTSD in the ordinary consciousness of many individuals within the totality of currently living human beings.*

*2B-2d. These trauma memories are often inflamed by politicians for purposes of uniting the population behind a leader – to serve the purposes of the leader and the ruling elite. This is how young men are inspired to volunteer as soldiers.*

An apocryphal quote, of unknown source, attributed to Caesar, succinctly illustrates this:

*Beware the leader who bangs the drums of war in order to whip the citizenry into a patriotic fervor, for patriotism is indeed a double-edged sword. It both emboldens the blood, just as it narrows the mind.*

*And when the drums of war have reached a fever pitch and the blood boils with hate and the mind has closed, the leader will have no need in seizing the rights of the citizenry. Rather, the citizenry, infused with fear and blinded by patriotism, will offer up all of their rights unto the leader and gladly so.*

*How do I know? For this is what I have done. And I am Caesar.*

*2B-3. Relevant to a collective PTSD, research studies and anecdotal reports of collective consciousness experiences in (2A-2) – (2A-5) and (2A-7) – (2A-9) suggest that people in general, as individuals, as collective sub-groups of humanity, and as all of humanity, could also be experiencing secondary PTSDs:*

- From connecting with cognitive and emotional experiences of individual and group traumas anywhere in the world today;
- From connecting with cognitive and emotional responses of individuals and groups experiencing traumas in past generations (memories from past lives are most often about traumatic experiences, frequently about violent death);
- From connecting with trauma responses of individuals and groups to in current time, most of which go untreated;
- From connecting with traumas responses of individuals and groups to in past generations – during eras when there was little understanding of emotions, trauma responses, psychological responses to the trauma experiences, and of how to achieve trauma releases and cures of PTSD.

*2B-4. Experiencing secondary trauma through our intuitive awarenesses of the collective consciousness would arguably be a more intense experience than witnessing them through one's ordinary senses in other persons in current life, because there would be direct perceptions of the cognitive and emotional reactions of those experiencing the trauma.* Simply viewing photos of traumatizing situations around the world can provide a small taste of such resonations (Salgado, 2013). We can well imagine how much more impacting and traumatizing the more direct, immediate, in-depth perceptions of trauma would be from awarenesses of suffering perceived through the collective consciousness.

*2B-5. There are also individual and collective traumas from human selfishness, greed and violence that usually might not be considered as PTSDs in a single instance, but that with repeated traumas over long period of time would be equivalent to PTSDs.* Individual, family, and broader cultural memories of such traumas may contribute to a collective, cultural PTSD.

*Example:*

In the US, being black very often carries family and cultural memories of traumas, reinforced by current life challenges, personal experiences of prejudice, exclusion, disruptions of family life due to harassments, police stops and searches, incarcerations, drug abuse, violence, and limited educational and work opportunities that result in limited income or in poverty, lack of medical care, poor nutrition, and deaths from violence (Powers, 2015).

This is just one of uncounted examples of persecuted and traumatized populations around the world. The religious persecutions and the genocides committed around the world; the inter-cultural and religious persecutions, tortures, terrorism and wars throughout recorded history; the prevalence of culturally sanctioned rape in India today and of honor killings of women around the world are all examples of traumas that have only recently begun to be addressed with any clearing of individual trauma memories or collective resolution through processes of reconciliation. The aggregate of individual, family, community, national collective traumas of persecuted people on our planet clearly can be seen as a collective PTSD experience.

*Slaves, serfs, and the poor are the forests, soils, and oceans of society; each constitutes surplus value that has been exploited repeatedly by those in power, whether governments or multinational corporations.*

- Paul Hawken

**2C. As with individuals who suicide because of their PTSD, humanity as a collective consciousness appears to be suiciding, with a strong possibility that a collective PTSD is contributing to these suicidal behaviors.** This might explain some or much of the suicidal behaviors of humanity per (1A) – (1C).

2C-1. *We must consider alternate ways of understanding our world and relating to it if we are to identify and implement ways to change much of the above.* What humans are doing now to address the multiple threats to human and other species' survival is quite limited. (Center for Biological Diversity, web reference; Suzuki, web references).

2C-2. *We humans are inextricably embedded in the world at large, but we are destroying many of the resources we need for our survival.*

- Our bodies are composed of the plants and animals we eat.
- We are totally dependent on the soil and water required for the nurture of plants and animals.
- We are affected by the impurities in the fluids we drink, and totally dependent on the lakes, steams and rivers they come from.
- We are similarly dependent on the air we breathe and affected by airborne pollution.
- Our health and well-being are inextricably interconnected with the health and survival of other species, and with very subtle yet complex patterns of inter-relationship with all forms of life and sustaining substances on this planet.

2C-3. As we pollute, deforest and damage our natural world, we damage ourselves and diminish the quality of our own lives.

2C-4. *There are relatively few among the 7+ billion people on this planet who demonstrate a clear awareness of the enormity of the self-destructive processes in progress, of our individual and collective contributions to creating and worsening these problems, and of their inevitable consequences – perhaps already having passed tipping points of no return.*

2C-4a. Many people are suffering privations and traumas of such severity that they have no time to look beyond their immediate needs, and no energies or resources to invest in anything more than their basic survival needs. In resource-poor countries, particularly where overpopulation is a problem, the immediate needs of the population for their survival often produce damage to the environment, thereby hastening the impending crises threatening survival.

2C-4b. Some people are capable of awareness of the collective PTSD behaviors but are ignorant of the immanent dangers and their seriousness.

2C-4c. A very modest but growing number are aware of the problems and interested to help avert them, but most of these see no way to contribute in seriously impacting ways to their resolution – within the requirements of enormous resources to avert planetary disaster and limited timeframes available.

2C-4d. Many of those aware of the problems feel hopelessness or despair in the face of the multitude and enormity of the problems and in consideration of the failure of governmental bodies to act in ways that would have more than token impacts on the problems.

2C-4e. The corporate world is almost unanimously against any actions that would affect their bottom lines. They actively oppose and block media reports on the serious issues facing the world and those on proposals to mitigate the problems.

2C-4f. Politicians, most of whom are beholden to corporate contributions for their past and future elections, promote the corporate agendas rather than the needs of their electorate or of the environment.

2C-4g. It is not difficult to propose that in all of the (2C-4) groupings other than (2C-4b) there is a distinct probability that some aspects of a collective PTSD are contributing to the human indifference or failure to take action to address the impending threats to human and environmental survival.

### **3. Ways in which Energy Psychology (EP) and other therapeutic modalities may help to mitigate the collective PTSD through individual and proxy healing**

*...long-lasting change requires looking beyond individual "problems" to address the patterns that connect them. Author/ farmer/ philosopher Wendell Berry calls this perspective solving for pattern.*

- Michael K. Stone

#### **3A. Clearing individual PTSDs is possible:**

- There are research studies demonstrating significant effects of EMDR (Eye Movement Desensitization and Reprocessing) in clearing PTSDs (emdr.com web reference).
- There is a growing body of research confirming that Energy Psychology (EP), including EFT (Emotional Freedom Techniques) and TFT (Thought Field Therapy) are effective in treating PTSD (Feinstein, 2012).
- CBT (Cognitive Behavior Therapy) has been helpful in treating PTSD (Kar, 2011) but has not been fully successful in treating military PTSD.

#### **3A-1. People with trauma are helped by:**

- *EMDR – The simple process of alternately moving our eyes from right to left and back, while focusing our mind on something we want to feel better about, brings about a deep release of the negativity. After the negative issue is completely neutralized, people install positive cognitions and feelings to replace the negative ones they have released.*
- *Energy Psychology - EFT and TFT – Similar releases of negativity can be achieved by tap on one's own acupuncture points while focusing the mind on thoughts and feelings needing clearing, followed by a strongly positive statement. In EFT (always) and TFT (in many cases) people will also recite a calming statement after the focusing statements.*
- *WHEE/TWR (Wholistic Hybrid derived from EMDR and EFT/ Transformative Wholistic Reintegration) is an EP approach that combines EMDR and EFT approaches, using alternating right and left stimulation combined with mental focus and positive counteracting statements.*

#### **Example:**

*'Gina' witnessed an auto accident on the freeway just in front of her in which a passenger was thrown from the car and severely injured. She herself narrowly avoided running over this person, but ran her car into the guardrail. Gina was afraid to drive a car following this accident. With the help of an EP therapist, Gina was able to clear her trauma memories and release her fear of driving. She used phrases including, "Even though I feel very scared when I think of how I nearly ran over that person in the accident" and "Even though I am terrified when I remember losing control of my car," followed by, "I still love and accept myself, wholly and completely." Within two therapy sessions her stress reaction was completely cleared.*

*3A-2. CBT may include systematic desensitization in treatment of PTSD. A person will focus on an aspect of the PTSD, such as a trauma memory or fear, following which they will focus on a positive thought and feeling. The positive counteracts the negative. In this way, the CBT and EP uses of focusing statements combined with counteracting affirmations are similar.*

I have personally used systematic desensitization for several decades but over the past two decades switched to EP methods because I find that EP works much more quickly and empowers people by giving them the tools to use for trauma release and containment whenever and wherever they need them. I've also used EMDR but this can produce heavy emotional releases that could be retraumatizing and is therefore recommended for use only in the therapist's office.

*3A-3. When people are helped in past life therapy to clear the trauma memories and emotions associated with their past life recall, there are often improvements in their current life emotions, behaviors and relationships.*

*3A-3a. This suggests that the past life therapy that is experienced in a current life:*

- either clears the residues of PTSD lingering from the past life into their current life;
- the trauma effects are cleared in the past lives of these people; or
- a combination of both is possible

*3A-3b. Regardless of the point at which these clearings is effected, the successes in past life therapy provide further evidence that clearing of trauma in a current life can lead to clearing of trauma residues from past lives.*

*3A-4. Problems often unrecognized and/or unacknowledged in the context of therapy, that nevertheless almost certainly contribute to the collective PTSD, include individual and collective greed in powerful people, whose self-centeredness, addiction to material possessions and pursuit of selfish, personal benefits at the expense of 'others' who are less fortunate and less powerful. These people are establishing global spheres of selfish, unregulated economic and political growth and control over local economies and governments.*

*3A-4a. The effects of these greedy people's behaviors are severely traumatizing to individuals and large groups of people who end up economically and socially indentured to enrich these selfish elite. Helping those who are traumatized can clearly be a benefit of addressing the collective PTSD.*

*3A-4b. These greedy, power-hungry people have been compared to addicts or even to cancers, as they exhibit a self-centered, selfish pursuit of short-term gains and of power at the abusive expense of long-term, wiser use of resources for the common good of all. Research shows that an annual income of \$75,000 is optimal for creating a happy life. Those with higher incomes are not happier than those who earn this amount (Kahneman & Deaton 2010). It is not clear how this aspect of the collective PTSD could be addressed – to clear the source rather than just help those who are being abused and traumatized.*

*3A-5. Clearing individuals' PTSDs would contribute to lessening the intensity of a collective human PTSD. In a linear fashion, each person whose PTSD intensity is lessened contributes to the lessening of the total load of PTSD in the collective consciousness. While this is clearly a contribution to clearing the collective human PTSD, this can only have a very limited effect, due to the enormity of human needs and the scarcity of resources for individual trauma release.*

**3B. Clearing the collective PTSD of humanity as a collective focus for healing appears theoretically possible, based on reports from a variety of therapeutic approaches**

3B-1. Distant healing has been validated (modest significance) in a meta-analysis of research that explored mental intent influencing groups of plants and of groups of cells in laboratory cultures (Roe, et al., 2015). It is of note that healing in these studies was sent for groups of organisms, with significant effects. Sending healing to the human collective consciousness appears a reasonable extension of these studies.

3B-2. Transcendental Meditation™ has demonstrated that if 1% of the population in a city joins in simultaneous meditation over a 24 hour period, there is less crime, less violence, and fewer admissions to the emergency room, among other parameters of general calming in the city. This has been confirmed in varieties of research studies (Maharishi Effect, web reference). With more advanced TM methods, “the square root of one per cent of a population practising the Transcendental Meditation and TM-Sidhi Programme morning and evening together in one place is sufficient to neutralize negative tendencies and promote positive trends throughout the whole population.” This could be as little as a few hundred meditators. This is, in effect, a proxy healing.

3B-2a. Observed effects include:

- *In Cities* – DECREASED auto accidents, fires, non-violent crime, violent crime and homicides; INCREASED confidence and economic prosperity (Cities included in separate studies - Washington, DC; Jerusalem, Israel)
- *In provinces* - DECREASED crime rate, mortality rate, auto accident rate, motor vehicle fatality rate, unemployment rate, pollution, beer consumption rate, and cigarette consumption rate, pollution, beer and cigarette consumption rates, consumption rate, fetal deaths, other deaths, non-violent and violent crime (Rhode Island, USA; Metro Manila Region and Philippines; Puerto Rico; Union Territory of Delhi, India; Massachusetts, USA)
- *In nations* – DECREASED crime rate, number of fatalities from suicide, homicide and accidents, fatality rate, air transport fatal accidents rate of infectious diseases, infant mortality rate, suicide rate, cigarette and alcohol consumption rate, divorce rate, percentage of civil cases reaching trial, worker-days lost in strikes, monthly index of inflation and unemployment,; with INCREASED gross national product per capita, patent application rate, degrees conferred per capita, index comprising data on crime, the national stock market, and national mood (USA; Canada; Israel; Lebanon; Holland))
- *In International Life* – IMPROVEMENT in domestic affairs and international relations for major trouble-spot countries; DECREASED war intensity and war deaths, increased progress towards peaceful resolution of conflicts; with INCREASED harmony in international affairs (Rhodesia/Zimbabwe; Lebanon; USA; Worldwide)

3B-3. Proxy healing is commonly used in Energy Psychology (and other methods, such as Kinesiology, Healing Touch and other healing methods). When the person in need is not present in the therapist’s office, a proxy person or object (such as a doll) may be used as a focus for the therapy. The intent is held for healing of the absent person who is in need of the healing. This is one of several common forms of healing from a distance (distant healing). Numerous anecdotal reports attest to successful healing with proxy healing. The only systematic review of a series I’ve found describes a collected series of 100 reports of proxy healing (Feinstein, 2013), finding that proxy healing was successful in every reported case. While I would speculate that this unusually high rate of success involves selective reporting of successful cases, the fact remains that this is a series of documented successes with proxy healing.

3B-4. Ho’oponopono is a Hawaiian form of proxy healing in which a healer clears issues of her own, offering such self-healing as a contribution towards clearing the problem(s) of another person. The

invocation of healing follows a formula such as this:

I am sorry for adding the burden of my [named issue] to the collective consciousness, where it becomes a burden to you who have a similar issue.

Please forgive me.

I send you my love and my healing,

and I thank you for this opportunity for healing.

While there are no studies of the effectiveness of this method, the respectful attitude it teaches when engaging in offering healing, is exemplary.

*3B-5. Family Constellation Therapy, developed over the past several decades, reveals that memories of traumas that occurred to individuals and to families as a whole in previous generations may leave psychological trauma residues in later generations – in individuals and in the family as a whole.*

Various individuals in later generations may manifest psychological and physical symptoms whose roots lie in the residual trauma memories that are passed down from previous generations. Such trauma residues can be identified and cleared through family constellation therapy, with *the therapeutic work of an individual member of the family (Hausner, 2011; Hellinger, 2001; Mason Boring, 2013; Payne, 2005; Reddy, 2012)*. Benefits are observed not only for the person who is engaging in the family constellation therapy, but also for family members in current, previous and later generations who are not present during the therapy sessions. This is a form of proxy healing for the collective traumas of the family, extending backwards and forwards in time.

*3B-5a. In the process of family constellation therapy, members of a therapy group assume the roles of the members of the traumatized family of one of the group members.* Group members are unfamiliar with the traumatized family of this focus member of the group, nor do they know anything about this member's family other than very brief details shared by this member to orient the group to the family situation. Through healing interactions, the group members clear the trauma residues. This often results in clearing of the symptoms of the member of the group whose family was constellated in the group. This is a living demonstration of collective consciousness.

*Example:*

Michael Reddy (2012), a shaman and Family Constellation Therapist, provides a clear example of this process and how it was resolved with the Family Constellation method. He goes on to identify various ways in which the representative family can clarify the underlying issues that are impeding the life progress of the focus person..

The client in the constellation had severe migraine headaches. He set up representatives in the constellation including (in the order of setting them up): his grandmother, his father, himself, his grandfather, and his uncle. The uncle had died at the age of four, when he tripped as he was running downstairs. He grabbed one of the banister support posts, which broke, and he fell to his death on the floor below. His mother (client's grandmother) blamed the father (client's grandfather) for having neglected to repair the post, and he blamed her for not watching the child properly. The anger between the grandparents appears to have blocked them from working through their grief.

In brief, the constellation evolved through a process of acknowledging the loss of this child and releasing the grief, with the representatives of the grandparents coming to a reconciliation. The client's migraines were relieved following the constellation therapy.

*3B-5b. Relevant to addressing the clearing of the collective PTSD is the fact that the constellation therapy facilitator may include a representative from the group for a broadly traumatic cultural experience, such as a war, a famine or a flood that impacted the family.* The impact may have occurred tens or hundreds of years earlier. The group constellates the presence of the experience that traumatized an extended segment of the society in which the previous generation(s) of the



family were living (in the form of a representative of that experience within the group). The focus person is then able to connect with the relevant traumatizing memories and feelings about these events (in general, or sometimes with retrieval of relevant specific individual and/or family traumatic memories) that can then be cleared within the group.

*3B-5c. The process of family constellation therapy demonstrates that an individual member of the family can clear trauma experiences – which that family member had been carrying as an unconscious residue of trauma experienced by one or more family members in previous generations.* This suggests that trauma is passed on in the collective consciousness of the family and that it can be cleared by working through proxy healing on the focus member, who receives the help of the facilitator and group participants.

*3B-5d. Relative to the consideration of a collective family trauma consciousness, it is of further interest that sometimes the presenting problems of the focus persons involve current conflicts with other members of their families.* Following the constellation therapy, these other family members may alter their attitudes, behaviors and relationships with the focus person spontaneously – without having had any direct experience or even indirect conscious knowledge of the family constellation group in which the focus person participated. In effect, the clearing of trauma in the focus person appears to have served as a proxy healing for one or more other living members of the family.

*3B-6. Many shamanic healing interventions address not only the individual who is the primary symptom-bearer but also that person's relationships with other people and the world at large (Cohen, 2003; Harner, 1980; Ingerman, 2015; Krippner & Welch, 1992).*

*3B-6a. Shamanic focus may extend beyond the individual, to include the entire family and/or the entire community.* It is assumed that when one person is ill, this is a manifestation of being out of harmony within herself or himself, and that disharmony is a reflection of discord in that person's relationships as well. This discord may be on any level of one's being: body, emotions, mind, relationships and spirit.

*3B-6b. Harmony and disharmony between the world at large and the individual, the family and the community are also addressed by shamans.* Harmonies and discords may exist in attitudes or behaviors, in acts of commission or omission.

*Example 1:*

A person is expected to honor the land by asking permission to travel across it; to perform rituals to petition the land and the plants for their abundance, and to give thanks when these when they satisfy the needs of the petitioner.

*Example 2:*

In ending a prayer or invocation, many Native Americans will close with the phrase, "All my relations." This is an acknowledgment of oneness with the All.

*3B-6c. Remedies for healing various illnesses and injuries are identified by shamans in substances derived from specific plant, mineral and animal products.* These substances speak to the shamans, who hold in their consciousness the awareness of the individual or group of people and their problems. The plants, animals or minerals call out to the shamans, identifying themselves as being able to help those who are in need.

*3B-6d. Shamans identify geographic locations that have salutary, healing energies and others that are negative and likely to have negative influences on people and may produce illness.*

*Example:*

Sedona in Arizona is known to be a holy, healing location. The energies there are so potent, however, that people are cautioned in local Native American folklore only to visit but not to live there – lest the energies be too powerful for them to tolerate.

*3B-6e. Shamans also mediate between the world of humans and the worlds of spirits, giving thanks for that which is positive and petitioning for remedies and relief for that which is negative in people's lives. Spirits must be honored in various rituals. They may be angered by living human behaviors; may cause mischief, mishaps or illnesses in living humans; and may need to be propitiated and appeased in order to restore harmony and good relations between the worlds of the living and the spirits.*

*3B-6f. Shamans teach, guide and direct people in rituals to give thanks and to petition help from Mother Earth, Father Sun and the moon. These are perceived and addressed as living, conscious beings. The four cardinal directions are perceived as having different characteristics, some healing and others unfavorable. Ceremonial petitions are made to each of the four directions, asking for blessings and acknowledging negativity that might be needing awareness and healing.*

*3B-7. Healing for animals is widely reported anecdotally to be effective in the same ways that healing is for humans, with improvements in physical and behavioral problems (Coates, 2002; Guerrero, 2003).*

*3B-7a. Anecdotal reports indicate that domesticated animals are very closely linked cognitively and emotionally to the humans with whom they are associated. When their humans have problems of stress and emotional distress, the animals are affected – just as family members of a distressed human will often demonstrate their resonations with symptoms of their own. When the humans' problems are resolved, the animal's symptoms will often clear. This is similar to observations in family constellation therapy.*

*3B-7b. There is reason to believe that animals participate in the collective consciousness of all sentient beings on our planet. There are intuitively gifted people who can communicate with animals (P Smith, 1999; Schoen & Proctor, 1995). They usually do this on an individual basis, but some report they can also connect to the collective consciousness of an animal or plant species, or with all animals and/or plants, collectively. They report that animals and plants are far wiser than most humans give them credit for being. There is also early research to confirm animal-human telepathy (Sheldrake, 1999).*

*3B-7c. Plants have been reported by intuitively sensitive people to be conscious and to speak telepathically – between each other and to people.*

- Plants grow better when people send them healing intent (Grad, 1976).
- Plants grow better when classical music is played to them; worse with heavy metal music (Retallack, 1973).
- Plants demonstrate memory of negative human behaviors towards them (Backster, 1968).

*3B-7d. Considering the progressive losses of many animals and plants on our planet, with growing numbers of extinctions of species, there is reason to believe that there is a growing, collective PTSD in non-human consciousness on this planet, and numbers of sensitive people have reported this as a communication from the collective of animals and plants.*

*3B-7e. The collective PTSD of non-human species could also contribute to the severity of human collective PTSD. This could occur as resonations with the distress of the animals who are being abused and killed, and guilt in the collective human consciousness over these abusive behaviors.*

*3B-8. Many therapies consider their interventions complete when the suffering of presenting symptoms is alleviated. WHEE/TWR always, and EFT and CBT sometimes extend the therapy to include the installation and strengthening of positive feelings and thoughts – to replace the negative ones that have been released.*

*3B-8a Proxy healing through inviting the enhancement of positive feelings and thoughts in the collective consciousness of humans, animals and plants may also alleviate some of the traumas caused by selfish behaviors that are contributing to the collective PTSD.*

*3B-8b. Proxy healing for humans, animals and plants that are dying in distress, helping them have a more peaceful and healing transition out of this life, could alleviate some of the collective trauma continuing to accumulate in the collective global PTSD.*

*3B-8c. Proxy healing through inviting the enhancement of positive feelings and thoughts in the collective consciousness may also alleviate some of the selfish human behaviors that are contributing to the collective PTSD.*

*3B-9. Offering proxy healing for the PTSD in the collective consciousness is no different, in procedural terms, from offering proxy healing to one individual. The sender focuses healing on a proxy subject with the intent that the healing will be received by others who are not physically present.*

*3B-9A. The procedure simply involves invoking an intent such as the following, after completion of a healing on oneself. The same would apply when a therapist is providing healing to someone else who is present with the person who is offering the healing – in which case either or both participants in this healing could recite the following invocation, silently or out loud:*  
 I / We invite anyone and everyone  
 Anywhere and everywhere  
 Anywhen and everywhen  
 Who is ready to [accept this healing/ clear their issue(s)/ etc] with [me/ us] to do so.

*3B-9B. Cautions in promoting healing, particularly in the collective consciousness.* This is new territory for most of the people who will read this editorial, as well as for many who practice healing in its many forms. So I share a little here about the ethics of using proxy healing.

Many people who are new to healing through conscious projection of general healing intents are eager to promote more in the world of whatever they believe could be helpful. They think that sending the intent that others should “Be more loving” or “Be more caring” or “Be more considerate and generous to others” will promote improvements in the world. Others believe that healing comes from a higher power and wish to share what feels healing to themselves in these ways with others, such as “May Christ’s love be accepted by all” or “May the devil be driven out of those who behave in evil ways.” Further along on the spectrum of such beliefs are those who send out prayers for Armageddon and the end of the world, so that they and other ‘True Believers’ will ascend to heaven.

Those who are more experienced and focused on therapeutic approaches to healing send healing with different intents from the above. These are therapists and healers experienced in helping people find their own paths of healing through various interpersonal therapies such as psychotherapy, bioenergy healing, and diverse other conventional and integrative/ complementary/ alternative approaches. They offer healing “for the highest good of the client and for the highest good of all.” This is an acknowledgement that neither the therapist nor the client may know what is ultimately for the best of the client in the long run.

*Example 1:*

'Sandra' was struggling as she neared the end of her first year of law school studies. Though she was a well organized student, put in long hours doing her course work, and was motivated by limited finances to complete her studies, she was getting such poor grades that she feared no one would want to hire her. In a state of serious anxieties, Sandra took a weekend off from studies and went to visit her aunt Doris, with whom she had always been able to speak her heart, and who fortunately lived only a few hours' drive away. Doris was an EFT practitioner but didn't feel comfortable doing counseling with a family member. At her suggestion, however, and with Sandra's agreement, she sent proxy healing with "the intent that there should be healing for Sandra's highest good and for the highest good of all."

Sandra was surprised when she woke up after her return to the university the next day to find she was much calmer than she had been in a long time. She realized that her heart wasn't in her studies because she really didn't want to become a lawyer. She had chosen law at the urging of her father, who had always pushed her (as his only child) to achieve in school. She decided she would much rather be an accountant, as she wanted a less demanding and stressful life than she would have had in a law practice.

*Example 2.*

'Evan' and 'Jody' had grown increasingly apart during their eleven years of living together. He was a very reasoned, logical person and she was much more emotional. Neither seemed able to fully hear or understand the other. They often argued very angrily and bitterly, despite their repeated promises to themselves and each other to discuss matters calmly, especially when their two children, 6 and 8 years old, were present. Their strongest bonds were their unexplainably good sexual relationship and their commitments to parenting their children. They requested proxy healing for their relationship, hoping this would help them sort out how to improve their relationships so they could stay together. Proxy healing was sent with "the intent that there should be healing for the highest good each and the highest good of all."

Within two days, they found themselves at a point of greater calmness about their relationship. Accepting that their differences were not reconcilable, they reluctantly resigned themselves to a separation. To their great surprise, they found that they got along quite well as parents once they were separated and were no longer struggling to be something for the other person that was not comfortable for either of them to be.

*Example 3:* 'John' had a rare, malignant form of bone cancer. He had suffered severe pains and several fractures over the two-year course of his illness. His wife, 'Barbara,' and grown children were very supportive, helping him through his various treatments and periods of convalescence after being in the hospital for weeks at a time. As everyone began to see that there was no hope of a medical cure for John, Barbara got onto the internet to search for alternative treatments for cancer. While she found a number of these for other varieties of cancers, no one had ever reported a cure for John's type of cancer. So she turned to exploring various healers, both local and around the world, who might help. They settled on a group in England that meets regularly, with many participants in attendance. They sent proxy healing "for the highest good of John and for the highest good of all."

Within hours of the group sending healing, John was feeling less pain and needing less pain medication. This was a true blessing, because the pain medicine had made his mind foggy and he had been only half there to interact with his family. Everyone was excited, believing that they were seeing the beginning of a miracle cure. However, on the third day after this group sent proxy healing, John passed away peacefully at night, in his bed at home. At first, Barbara was enormously disappointed and angry, feeling that she had been betrayed by the healing group.

Slowly, she came to sense that this ‘healing unto death’ had been a truly helpful healing to both John and the whole family. It brought a peaceful end to John’s suffering and to everyone’s distress.

#### **4. Ways in which proxy healing might mitigate or heal the collective human march to suicide**

*And so at a certain point “helper” and “helped” simply begin to dissolve. What’s real is the helping – the process in which we’re all blessed, according to our needs and our place at the moment.*

– Ram Dass & Paul Gorman

Proxy healing to promote healing of the collective PTSD of humanity appears likely to make a meaningful contribution. While proxy healing has traditionally been focused on individuals, there appears to be a high probability that it can be effective when directed to the collective consciousness of all of humanity. This could be beneficial in several ways:

#### **4A. A decrease in the intensity of the trauma memories could decrease the intensity of collective angers that have accumulated over uncounted generations, during the entire existence of the human species.**

*4A-1. Visible evidence of such an effect could be seen in:*

- Growing conscious awareness of the destructiveness of humanity’s behaviors
- Increasing participation in proxy healing for the purposes detailed in this discussion
- Increasing numbers of forums for exploring ways to heal the problems leading towards extinction
- Stopping governments from investing in wars and other programs that benefit only a few industries but are very harmful to the majority of the population
- Fewer wars
- Increasing awareness of and abiding by the rule of making decisions only after considering the outcomes that are best for all beings on the planet and for the environment
- Please send me your vision of what you would like to see here

*4A-2. With a positive response to clearing the collective PTSD of humanity, and with a resultant shift of attitudes and energies to major investments in addressing all of the problems contributing to the march towards the 6<sup>th</sup> major extinction, humanity and the remaining life on the planet could survive and thrive (Hawken, 2007; Korten, 2006; Macy & Brown, 2014).*

**4b. Some believe we may be too late to avert the human mass extinction that appears to be well on its way already on our planet.** Even if that should be true, we may yet be helpful to many souls through clearing their individual and collective PTSDs before they leave their current lives for unknown futures.,

*When asked at colleges if I am pessimistic or optimistic about the future, my answer is always the same: If you look at the science that describes what is happening on earth today and aren’t pessimistic, you don’t have the correct data. If you meet the people in this unnamed movement and aren’t optimistic, you haven’t got a heart. What I see are ordinary and some not-so-ordinary individuals willing to confront despair, power, and incalculable odds in an attempt to restore some semblance of grace, justice, and beauty to this world.*

- Paul Hawken

My thanks to John Freedom, CEHP, Chair, ACEP Research Committee, for his helpful inputs in the evolution of this discussion.

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**Daniel J. Benor, MD, Editor-in-Chief, IJHC**

Dr. Benor is author of *Seven Minutes to Pain Relief, of Healing Research, Volumes I-III* and of many articles on wholistic healing.

**Contact:**

IJHC – [www.ijhc.org](http://www.ijhc.org)

WHEE Book - [www.paintap.com](http://www.paintap.com)

[DB@WholisticHealingResearch.com](mailto:DB@WholisticHealingResearch.com)



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