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The Wilson Effect A Case for Transpersonal Healing Properties of Placebo

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Introduction

The word placebo derives from the Latin phrase “I shall please” (The Merriam-Webster Dictionary, 1974). In modern clinical medicine, the placebo has become known as a pharmacologically inert treatment provided to compare/contrast with an active treatment (e.g. medication, surgery, psychotherapy, healing) in clinical trials (Harrington, 1999). However, in the broader setting of general medical practice, the placebo can take on many guises. Placebos can be sugar pills, saline injections, sham incisions or other physical procedures, even the aura of professionalism created by credentials on the wall, and white coat figures offering words of reassurance.

Can an inert placebo take on a transpersonal role and be helpful to patients? A lovely example of this is presented in a recent film starring Tom Hanks (directed by the Robert Zemeckis and written by William Broyles, Jr.) which depicts an anti-Gilligan's Island whose realism defies every stereotype of the alone-on-an-island genre.

In *Cast Away*, Tom Hanks stars as a FedEx inspector who survives a plane crash that leaves him stranded, alone, on a remote desert island for four years. This contemporary drama is about a man who is isolated and forced to transform himself in order to survive both physically and emotionally, and about his adjustment when he finally returns to civilization and to his fiancée, played by Helen Hunt (Broyles, 2001).

In the movie script, Hanks discovers that many of the FedEx parcels are washed up onto the island where he is stranded. Upon opening the parcels, he finds a Wilson volley ball. Using his own blood, Hanks paints a face onto the volley ball and affectionately names it “Wilson.” From then on Wilson takes on transpersonal properties of placebo that play a key role in Hanks’ transformation and survival.

A few months ago, when the movie “Cast Away” was popular, I asked my Epidemiology students to participate in a pilot study. Half the class was randomized to a control group and half the class was randomized to an experimental group. All students were asked to guess a specific number between zero and 10. The control group was asked to face the back of the classroom while the experimental group faced the front of the classroom where “Wilson” was “sitting” on a table. Wilson had a “post it” pasted to his forehead (the number was written on the back of the post it so it could not be seen). The study was not blinded and the number (five) was picked by the instructor prior to the class meeting. The results were suggestive. One out of

12 students from the control group guessed correctly while 4 out of 12 students from the treatment group guessed correctly.

However, are these data statistically significant or could the differential results between the two groups have happened by chance? Under the null hypothesis (no effect of Wilson), all eleven numbers (0 to 10) would be equally likely to be the outcome of an individual guess. Therefore, one approach is to compute the p-value from a binomial distribution with the probability of success 1/11. The control group outcome is consistent with the null hypothesis ($1/12 = 8.33\%$ versus $1/11 = 9.09\%$). In contrast, for the treatment group, the probability of 4 or more successes out of 12 under the assumption that the null hypothesis is true is computed as a cumulative binomial distribution with $p = {}_{12}C_4 (1/11)^4 (10/11)^8 = 0.0315$ (two-sided) and four or more successes $p = 0.037$ (two sided). Since $p < 0.05$, we would conclude that these results are statistically significant and may not be due to chance alone.

I believe that Wilson may also manifest a transpersonal placebo effect, initiated by my expectations, including a non-local mind effect (Dossey, 2001). That is, the concept of non-local mind suggests that our minds may not be confined by time and space and thus may have access to extra-sensory information. Students may in fact find that their intuition is enhanced in this setting and be more confident with a hunch that comes to mind.

This could also be an effect of suggestion. Students presumably were familiar with the film, *Cast Away* and would have had positive associations to "Wilson." While I did not record who had seen it, most indicated they were familiar with the film.

How is the "Wilson effect" relevant or useful to patients?

The Behavioral Health Center at Enloe Hospital is an acute inpatient psychiatric unit. I conduct a weekly spiritual care group and see patients on a one-to-one basis for exploring spiritual dimensions of their mental health issues. From time to time, depending on the group composition, I use the Wilson concept to initiate the transpersonal placebo effect. The patients are in a circle with Wilson "sitting" on one of the chairs.

I then ask the patients if they have seen the movie *Cast Away*. At a recent group, only one out of 10 patients had seen the film. I explained how Tom Hanks ended up on a deserted island with the volleyball. The patients begin to describe how Wilson might be used in such a situation. Such comments as "two heads are better than one," "companionship," "someone to talk to," "someone to love and be loved by," "someone" to express anger to," "someone to get guidance from," "someone to strategize with," "someone to play with," and "someone to play catch with" suggest that Wilson is playing a role of an anthropomorphic placebo.

A healthy transpersonal model

Furthermore, the patients acknowledge that Wilson is loving, caring, compassionate, sensitive, playful, wise and non-judgmental. Then I ask Is God like this? That's when the discussion gets lively.

One patient immediately said that her mother taught her that God punished us if we misbehaved. Another patient asked if God is all-loving how come He allows suffering, especially among children and babies. Patients often ask why God does not answer their prayers for healing. They note that if God answers prayer, He certainly is not fair. Some will say they have given up on God or are very angry at God. One patient stated that she felt she was spiritual but also felt lonely and longed for a personal relationship with God. These kinds of comments usually assume that God is omnipresent, omniscient and omnipotent.

In contrast, perhaps it was healthy that Wilson didn't have omnipotent power. That way Tom Hanks didn't ask Wilson to "move mountains" to save him. The assumption of omnipotence often breeds disempowerment and ultimately resentment if our requests are denied.

On the other hand, if Wilson is omnipresent, he/she can serve as our companion and friend in time of trauma in our life. Furthermore, if Wilson is omniscient, he/she can serve as a source of knowledge and wisdom.

We would like Wilson to offer guidance when asked without judgment. That is, we would like help with direction and would like help in discerning when we make wrong choices. Wilson can supply this with a loving attitude and without condemnation and punishment – a healthy transpersonal model.

Application to Patient Care

"Jane" was a 41 year old woman diagnosed with Post Traumatic Stress Disorder (PTSD), Dissociate Identity Disorder (DID, also called multiple personality disorder) and Bipolar (BP) disorder. She complained of pain due to a stomach disorder, fibromyalgia and arthritis. She is also a borderline diabetic.

She had had previous hospitalizations for her mental illness, including recent suicide attempts. She was feeling suicidal again and was voluntarily admitted to our unit. Jane's HMO had recommended to our clinical director that Jane undergo Electro Shock Treatment (ECT). Jane hoped for some relief from her depression; she would be grateful for just one day a week depression-free.

Jane had studied Hebrew for seven years and through other Christian church experience, Jane became a Bible "expert." However, at the time of admission, when she tried to open her Bible she got physically ill. Bible reading seemed to bring back "bad" memories.

Jane said she hated her life, her role and her circumstances. Her mother was very abusive. Jane related "She was sadistic toward me. I tell people I am a mother killer. I felt responsible for my mother's death. I pushed her, she had a heart attack and I just walked away. She was angry at her Mom and at God. Jane was raised Jewish but married a person of the Assembly of God faith and migrated over to the AG churches. "How can God let all these things happen? like my horrible family of origin. Our minister shot one of his kids. Another minister had an affair with the church secretary. Our family has been devastated by the church attitude toward our Jewish heritage and my mental illness. My physical and mental illness."

At this point I introduced the healthy transpersonal model. "I have found it helpful to change my model of God. I teach science, so that I like to think that the scientific explanation of the origin of the world and how the physical world works is more appropriate than the Biblical explanation. In the scientific model, God does not have much to do with the workings of the physical world. Consider a recent earthquake in India. In these events there is natural event that may not have much to do with God. However, God is available for help and guidance given our circumstances. Jane replied, "Yes that sounds reasonable. Shit happens. But then what about the times when God seems to act, such as when you just happen to be in a doorway when the earthquake hits and are saved." I reply, "Yes, Grace happens.

"Are you able to forgive?" I asked. Jane replied, "I can't forgive while I am depressed. That's why I want the ECT. If I could get some relief from the depression, then maybe I could work on forgiveness.

I responded, "In trying to forgive my own mother, I have found that I wish my childhood had been different and I want to blame someone for that. Forgiveness may involve letting go of the 'wish' for a different childhood and then removing the blame."

Jane replied, "Yes but look what my mother did to me. I just want to find some joy in my life."

I asked Jane if she could get help by reading spiritual texts. Jane replied, "I get sick when I try to read it (the Bible). I miss that part of my life now. Jane agreed, however, that she would consider reading other spiritual texts, as she loves to read."

I replied, "I think that God continues to reveal Him (Her)self in the sacred writings of today. I have found that the Course in Miracles is helpful to me. The same material is found in the writings of Glenda Green (wife of a Baptist minister), Love without End. Both the Course and Glenda's book were apparently "inspired" via the holy spirit and Jesus. Can I get you copies of these books?"

Jane agreed, and brightened considerably. Why would you bother to spend time with me?" I reply, "Because you and I are soul-mates and I love you."

Jane was very articulate and warm. She wants to be a social worker. I hope this can happen for her. She radiates love and needs love. I played the role of Wilson here, reflecting back love and caring. Furthermore, I tried to suggest that even though the world and her mind are at times "crazy" she can still find a portion of her mind (or heart) where she can feel God's love and relate to God in a healthy way – the healthy transpersonal model. She is an avid reader. I also gave her MaryAnn Williamson's Return to Love.

As it turned out, our approach to Jane's treatment was successful. She did not need the proposed ECT treatment. Previously, she had been returning to our unit every 4 or 5 months for suicidal tendencies. It has now been 16 months since Jane's last visit.

Here is another example of the Wilson transpersonal approach. "Joe" was in his sixties, in good physical health and pleasant to be around. He had retired a couple of years ago and had just finished building a new family home. Joe developed a sleeping disorder with episodes of depression. He was admitted to our unit for suicidal thoughts and impulses.

Joe grew up in a dysfunctional family. He and his older brother were physically abused by their father (following the same pattern that Joe's father had experienced from his father) until Joe's father died when Joe was eleven. His father also sexually abused Joe's sister. His mother remarried but continued to abuse the children emotionally until they grew up and left home. The one positive relationship he had was with his step-dad, with whom Joe bonded well and whom he loved.

Joe had been receiving outpatient patient psychiatric care. This included working through his past traumas. However, this "stirring up the past" added to his depression.

Joe did not have a religious background. My approach was to gently introduce him to the basic concepts of spiritual awareness. We generally introduce the medical model, the psychological model and a spiritual model to our patients. Joe had been in standard treatment with our medical model and psychological model for about a week. At that time, I introduced a spiritual model using the "Wilson" concept from the movie Cast Away (which he has seen). This, allowed him to grasp the concept of a transpersonal guidance and love without judgment and dogma. For visual purposes, he viewed a Wilson volleyball with Western style hat.

Second, I gave him a little book called *God Made Easy* (Karst, 1997), which suggests that God doesn't care what He is called – i.e. “Wilson” would be OK.

After the session with Wilson, Joe could imagine Wilson in his mind and talk openly with him. He thought this was helpful in opening up to prayer.

He read *God Made Easy* several times over the next few days. This led him to spontaneously develop a prayer for courage and resulted in one of his best night's sleep in a long time. The next day, while in group therapy, Joe was able to open up – expressing anger toward his father and mother. A lot of emotional “pus” came up. At the same time he was able to grieve their loss. Joe discovered that hate and love can go together. He felt really good about the session, telling his wife it was a “miracle.”

The combination of Wilson and *God Made Easy* gave Joe comfort. He realized he did not have to go to church to find spirituality. He could be angry at “God.” He could talk to Him. He could find courage through Him to face his problems.

Joe certainly had healthy response to our unit's medical and psychological treatment plan. However, it was the spiritual treatment plan via a transpersonal placebo (Wilson) that “tipped” his journey toward a healing of body, mind and spirit.

Raylene Jackson's story

I came into my room from our process group (in Enloe Behavioral Health). Monroe (a soft cloth monkey) was sitting on the bed. I asked him how it was going? He seemed to be happy to see me. I moved him to a different position. I felt comfort in doing that and knowing he was there.

Monroe doesn't judge me or talk back to me. He loves me. But I love my unanimated monkey as well. I can control Monroe. But I'm not, nor am I ever, cruel to him or my other things I talk to. He never talks back. He is a very good listener and he never judges me, or criticizes anything I may say or do. He can keep a secret. If I'm in a bad mood, he lets me be. I can hold him tight and squeeze him knowing he understands. I do the same with my dogs. I can't yell at them without feeling bad. If, I do, I get them a cookie.

Unconditional love. I never have to appease myself. I can be who ever I want or need to be. I don't have to hold back anything. He is always there when I need him. He never has a bad thing to say, he always has a smile on his face, and I love him for that.

I believe that Wilson kept Tom Hanks alive in *Castaway*. He had companionship. He felt love for Wilson. That was proven when he risked his life to save him when he went overboard.

So Wilson and Monroe are both lifesavers to us humans. It's important to have an unanimated to talk to. Many people pray to their higher power, which is very important and fulfilling for them. But it seems also very important to have a visual to hold, caress, touch, look into its eyes and know they are looking back.

I was asked to do this assignment by a very important person in my life by the name of Dave Swanson. I met him while I was a patient at the Behavioral Health Center. He taught a Spiritual group. My first reaction was that he reminded me of someone I knew who committed suicide five years ago. I didn't find that [mental association] to be sad or a negative thing. I felt excited and exhilarated like I was meant to be there [in the spiritual group]. [His DELETE]

Dave's voice was soothing and calming. He told stories of life, I was entranced by him. After the class, I approached him and told him the story of my friend. I asked if I could hug him! I felt such a connection. Since then I have returned to Behavioral Health two more times. I look forward to Dave's group every time. His words have changed my life. I owe all of my newfound spirituality to him and I will never be able to thank him enough. He has a beautiful, lovely wife named Kristin who works at Behavioral Health. She also has an effect on me. They are beautiful souls. God has given a grand gift by allowing them to share their stories and lives with us.

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