

We're running, dieting, flossing and getting checkups,
but conventional health care often ignores what's really ailing us.
For that, many people turn to spiritual healing.



IT'S TUESDAY NIGHT, and 13 New Jersey suburbanites are sitting on the plush carpet of a darkened living room. Eight women and five men, mostly in their 30s, form a rough circle, holding hands, eyes gently closed in meditation. After nearly half an hour, they begin to stir and look about with quiet smiles and nods. They tell each other their meditative experiences, problems and needs, offer sympathy and swap advice on nutrition, exercise and child psychology.

Each person around the circle tells of some special problem or need expected in the coming week—recurring pain, anxiety, fear, a rebellious teenager, an upcoming interview or medical test. The three-hour session closes with another meditation on these particular needs. Some of the meditators linger for refreshments before saying farewell until the next week's meeting.

This healing group is hardly unique in its upper-middle-class suburban community. Numerous other groups in the same area also view nonmedical healing as an important part of their lives. Like millions more across this land, some seek healing in churches and prayer meetings. Others take classes to learn self-healing methods or meet in informal groups for mutual healing. Some go out of their way to grow and prepare special foods required by their healing system, and others go to practitioners of various nonmedical approaches.

Social scientists often assume that only the lower classes subscribe to alternative healing systems, a remnant of folk culture presumed to be waning as level of education and socioeconomic prospects increase. But many middle-class people now adhere to a wide range of beliefs and practices not sanctioned by mainstream medicine. These

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approaches range from the ordinary to the peculiar: naturopathy, faith healing, Christian Science, psychic healing, Transcendental Meditation (TM) and other meditation systems, occult and New Age therapies, human-potential therapeutic methods (such as Arica, psychosynthesis and est), iridology and Native American healing methods.

A 1976 Gallup poll found that 4 percent of those polled had engaged in TM, 3 percent practiced yoga and 1 percent were involved in an Eastern religion. These figures suggest that more than 10 million Americans are involved in just a few of these "alternatives." A 1973 study in California found a predictably higher percentage of participants in the San Francisco Bay area: approximately 8 percent in est alone and 1.1 percent in Scientology.

MORAL SIDE OF SICKNESS? Data are scant on how widespread alternative healing is in the United States and whether it is actually gaining middle-class adherents (see "Mysticism Goes Mainstream," this article). Whatever the trend, alternative healing is an intriguing presence in our society and may provide some insights into American culture.

My colleagues and I at the Alternative Healing Systems Project at Montclair State College have recently completed a four-year, in-depth study of alternative health beliefs and practices among middle-income people in northern New Jersey, especially the comfortable suburban areas outside Newark. We wanted to understand the alternative health systems used by these educated, middle-class people—the whys and what-fors of their rituals.

We identified more than 130 different groups of healers of five broad healing types. As participant-observers, we studied some groups of each type intensively for 10 to 18 months and visited others occasionally. In all, we observed 255 sessions in 31 groups and recorded them in detail.

To learn more about the participants' perspectives, we conducted more than 300 1- to 3-hour open-ended interviews with leaders, healers, adherents and clients of the various forms of healing. We also interviewed a number of non-adherents selected from comparable neighborhoods and matched for gender and age.

NOT DEATHBED CONVERTS. We believe our study provides the first detailed look at mostly middle-class, middle-aged, well-educated, socially, culturally and residentially established suburbanites who adopt alternative health beliefs and practices. If it

points to some of the shortcomings of the mainstream medical system, it also reveals the spiritual concerns and social strains that may be reshaping our society. Studies of other cultures and U.S. subcultures reveal a link between healing practices and broader sociocultural issues. Our data show that American suburbanites, too, have come to use health, illness and healing as expressions of their concerns for meaning, moral order and individual effectiveness and power in their daily world.

Our study corrects a number of misconceptions about the use of alternative health systems. First, most adherents use conventional health care as well as alternative healing, but they have very different ideas of what health, illness and healing really are. From a sociological perspective, the values and beliefs of mainstream medicine must be seen as one among many competing conceptions of illness, its causes and treatment.

Another misconception: the belief that marginal medicine is merely a last resort that people use only when all else fails. In much of alternative healing, beliefs and practices related to health and illness are embedded within a larger system of meaning. Most adherents, we found, were initially attracted by that larger belief system, which provides, among other things, an alternative explanation of the origins of illness and a specific theory of health, deviance and healing power.

Some people view alternative healing as simply a collection of methods, devices or even "tricks" that might be used instead of conventional medical techniques. They want to know if healing techniques "work" in the same sense that mainstream medical techniques "work" in treating disease. But alternative healing is less concerned with disease than with illness and suf-

fering—the way a sick person experiences his or her disorder in a given social and cultural context. Viewed from its own perspectives and goals, it often works as well as, if not better than, conventional medical treatment, even though at times it may have little effect on disease per se.

Healing groups usually have notions of what constitutes therapeutic success or failure—and rationales to justify them—but being healed is not necessarily the same as being cured. In some groups it is common and accepted to have received a healing and still have symptoms or recurrences of the illness.

LOVE OR MONEY. In contrast to media images, most alternative healing we observed is not done by specialized "healers"; rather, ordinary members use healing on themselves or other members. The vast majority of healing encountered in this study involves no exchange of money whatsoever. Technique practitioners and some psychic healers charge a fee for service, while some other forms of healing involve fees for classes in healing methods. Overall, however, there is little or no financial incentive for doing healing in most groups.

Alternative healing systems are extraordinarily diverse, but fall roughly into five broad types: Christian healing; Eastern meditation and human-potential groups; traditional metaphysical groups; psychic and occult groups; and manipulation/technique practitioners. (See the chart, "Membership and Practices.")

Despite their diversity, the groups share certain basic healing beliefs and practices that distinguish them from mainstream medicine. In general, they view health, illness and healing from a perspective much broader than medicine's main focus on biological functioning. Members of

An illness "caused" by Satan is treated differently from one "caused" by imbalance and immoderation.



meditation and human-potential groups, for example, most often describe their ideals of health in terms of energy, balance and flexibility, holism, self-awareness and responsibility. In these groups, the holistic norm is usually linked to spiritual sources. As one member of a Christian healing group put it: "Health, wholeness—all these words to me are Scripture and salvation. . . . A healthy person to me would be one that was whole in spirit, soul, mind and body."

Alternative healing groups often explain the origins of illness in terms of both physical and moral events (for example, violation of a moral norm). In keeping with their often unusual ideas about the causes of illness, their treatments may also be unusual. The belief that an illness is caused by lack of balance and moderation suggests a quite different treatment than does the belief that it is caused by Satan. In some cases, determining the identity and causes of illness may be at least as important for the individual or group as the therapeutic actions that follow.

THE SELF AND SUFFERING. One especially important point of contrast between alternatives and "scientific" medicine is their concept of the self—and of suffering the self experiences. Suffering is not necessarily proportional to the seriousness of disease or the intensity of pain. Childbirth, for example, may be more painful than arthritis, but it typically causes less suffering because women view it as temporary and associated with something they want.

Most people are driven to seek help and healing not so much by disease per se but by suffering and affliction. But biomedical models of illness, which focus on bodies, not on selves, often make it easy to deny the reality of suffering and invalidate—or even exacerbate—the very experiences that make people seek help.

Medical personnel who fail to recognize the personal context of illness often do not comprehend the depth of people's emotional pain, especially after patients are "cured" and free of physical pain. One woman, for example, still suffered greatly from a hysterectomy she had undergone six years earlier. "It meant losing a huge part of my future," she explained. Unmarried, childless and only 29, she lost a lot of her hopes and dreams. She was intensely angry at the insensitivity of the physicians and hospital staff. They treated her "like an ungrateful child, crying over spilt milk." Even well-intentioned caregivers probably felt their only duty was to treat correctly her specific biological problem; as they

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o alternative healers, physical, emotional, social and spiritual "troubles" are one- and all relevant.



defined their healing task, her agony was irrelevant.

Alternative healing approaches address the problem of suffering by a process that places the sick person's experience within a larger order, usually transcendent. They make no neat distinctions among physical, emotional, social or spiritual "troubles"—all are relevant. The person's condition is transformed symbolically, often through ritual words and actions. This transformation involves reestablishing order or meaning for the disordered situation that "caused" the suffering.

These and other healing actions often mobilize the person's self-healing processes. The kinds of transformation and growth promoted by many of these groups can create resilience, enabling suffering people to tap resources within or around themselves. When successful, healing often creates the sense of becoming enlarged—not reduced—by the experience of illness.

People told us of renewed close ties with loved ones, fresh visions or hopes for the future, purification and insight. Their suffering was resolved or reduced by taking control in the face of their problems, gaining insight into how they could change their selves accordingly, experiencing the support of empathic others and seeing how their lives and suffering were linked with something larger—interpreted variously as God, cosmic energy or universal Mind.

SPIRITUALIZING SICKNESS. Assigning responsibility for illness is a central issue for all healing belief systems. Virtually every one we studied has some theory concerning who (or what) is responsible for the development of the illness, for its continuation or healing and who or what should be held responsible if therapy fails. These ideas involve important moral eval-

uations; they are not, as in conventional medicine, merely neutral descriptions of a situation. Alternative healing systems differ dramatically from the dominant medical system (and among themselves) in how they attribute moral responsibility and related notions of control and power.

In most of the healing groups we studied, the moral concerns pertaining to salvation are expressed in the idiom of health and illness: What must I do to be healed ("saved")? Where does healing ("salvific") power come from and how is it channeled to me? What does it require to be truly healthy ("righteous")? Some Christian and Jewish healing groups affirm traditional "biblical" answers to these essentially moral questions, but many other groups have either borrowed Eastern approaches, modified Western traditional answers or developed appreciably different moral responses.

Some observers have suggested that alternative healing movements help to medicalize moral issues—for example, by defining deviance, such as alcoholism, promiscuity, child abuse and gambling, as "sickness" to be treated by the medical system. We found, however, that although the groups we studied used metaphors of illness and healing to refer to a wide range of human concerns, they spiritualize rather than medicalize these issues. In so doing, they challenge the medical model of healing by redefining the sources of illness and individual responsibility for it.

Most Christian healing groups we studied consider personal sin a major source of illness, although they differ widely in how much they hold the individual responsible. Likewise, metaphysical groups attribute most misfortune, including illness, to the individual's incorrect ways of thinking and speaking, evidence of the person's lack of ►



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The Rev. Edward Evan Martin Jr. at Grace Episcopal Church in Rutherford, New Jersey, loves the ancient healing rite lately restored to *The Book of Common Prayer*. "This very intense ministry brings the pieces of life back together," he says.

Here's how: At a recent workshop on alternative psychology held in Mt. Pocono, Pennsylvania, healer Ron Mangravite demonstrates how to use hands-on healing for neck and shoulder pain.



Unmasking the self: Making these life masks, displayed at the alternative psychology workshop, gave their creators a new way of looking at themselves.



Salib Ilutzi uses shiatsu, a Japanese massage technique, to prepare Stefanie Nagorka for childbirth.



Salib (see cover) uses shiatsu on Dina Tomesetti. Shiatsu can be done anywhere and in several positions, even with the recipient sitting in a chair. Executives love it.



Self-healing: During a workshop lunch break, Doris Carvell, a reflexology masseuse, unwinds with her own relaxation routine, which combines Tai Chi and free-flowing movement.

connection with Truth or Divine Mind.

Eastern and human potential groups are least likely to hold the individual responsible as the cause of illness and are more likely than others to emphasize social and individual lifestyle factors, as well as spiritual means, in protecting oneself from illness. Psychic and related occult healing groups are typically the strongest in their emphasis on individual responsibility for illness and other troubles.

TAKING RESPONSIBILITY. The corollary of this notion of responsibility for illness is belief in the individual's control. The more responsibility one assumes, the more one is asserting control over the problem.

One woman explained: "Self-awareness and taking responsibility go together hand in hand. If I walk around unaware, then I feel like bad things just 'happen' to me. I'm a victim. The more I understand myself and my situation, then the more control I have in my life. I realize that I have choices—like choosing not to accept a promotion if it means 16-hour days . . . or like choosing to be an adult and not a little girl to my mother for the first time in 37 years. . . . And I can choose my responses to situations and to other people. I don't have to get caught up in stress or anger."

Many alternative healing groups promote believers' active adaptation—not merely adjusting to the fact of suffering or limitation but actively changing one's life. "Taking responsibility" does not typically produce victim-blaming because it is linked with rituals of empowerment.

Nevertheless, by locating health and illness within a comprehensive moral order, many of the groups intentionally or inadvertently promote the notion that one is personally culpable for failing to achieve a healthy state. As in the larger culture, many adherents apply negative moral tags to being overweight or addicted to cigarettes, diet pills or alcohol. Lack of control implies a moral failing, and deliberate "abuse" of one's own or another's body is considered morally reprehensible.

Many people we interviewed recognize and criticize the social sources of illness and illness-producing behavior. But the solutions they typically suggest—with the notable exception of several Eastern meditation groups—are not political but individual: One should resist destructive advertising messages, refuse to accept stressful and dangerous work, move away from pollution and address social problems with spiritual means.

Many alternative healing groups are highly pluralistic in their notions of personal responsibility and remarkably unwill-

ing to judge and blame others' "failings." For example, one man suggested his friend's weight "problem" was not what she "needed to be working on" at that time, even though it was ultimately her responsibility. Since her "growth" in another area of her life was more important, she should not be accountable for weight control until her personal "right time." Because virtually all groups define health as a gradual, progressive development, individual episodes of illness lose some of their sting as "failure." Indeed, such illness is often interpreted as a sign of progress.

Alternative healing systems stand in clear contrast to mainstream medicine and challenge it. But they also propose new ways of experiencing the world and offer extensive transformations of physical and emotional life. If we take these aspects seriously, we must consider their potential significance for society at large.

ARE WE EVER SEPARATE? Two features of these movements, in particular, may reflect emerging changes in the relationship between individuals and our society. First, all the groups we studied propound a world image that is holistic—even beyond the sense of body-mind holism—insisting upon the interdependence of all aspects of the cosmos. One minister, who used many forms of healing, expressed this interdependence vividly: "It's only literally in the level of the epidermis that we can say that we're really absolutely separate. I more and more believe that people's lives are profoundly interconnected."

Second, in all of the groups, healing rituals are prominent, frequently pervaded by symbols of power and order. What is especially interesting is that, in many groups, members engage in these rituals collectively but simultaneously seek privately experienced ways to transform and

validate themselves. Health to them is an idealized self and "healing" is growth toward that ideal. . . .

THE NEW INDIVIDUALISM.

ing groups reaffirm, in new ways, traditional moral norms, roles and social patterns. Obvious examples include the charismatic groups within the Catholic and several mainline Protestant churches. In such groups, illness is identified with sin—both personal and general—and healing is a ritual response of the individual and group to sin. Sin itself is connected with contemporary urges to "free" the self from the constraints of social roles and norms and from guilt for violating them. Healing is also aimed at restoring wholeness in the face of the fragmentation of everyday life in a highly specialized and differentiated world. Such groups are not advocates of the status quo, trying to apply moralistic brakes against change. Rather, their healing practices express a profound dissatisfaction with the separation of important parts of our lives: religion, family, work, education, leisure activities and community.

Healing groups that encourage non-traditional norms and patterns of identity are particularly interesting when considered within their broader social and historical framework. While our society was becoming industrialized, it often rewarded people who were faceless, responsible individuals who "fit" the bureaucracy. Such individuals internalized specific values—such as perseverance, dependability, consistency, integrity and duty—that were suited to the rationalized economic sphere.

But older forms of individualism, with their characteristic patterns of self-control, may not fit the experiences (and socioeconomic conditions) of many people in modern Western societies. For example,

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Membership and Practices

CHRISTIAN GROUPS

WHO BELONGS:

Faith healing has typically been associated with lower-class religiosity, but in recent years it has increased among the middle class. Most participants are middle-aged, and more women than men are active members, though men tend to dominate the Christian groups. The groups are not racially mixed, and we found no black Christian healing groups in the racially mixed suburban communities we studied.

WHAT THEY PRACTICE:

Most of the Christian groups base their healing on the New Testament descriptions of Jesus's healing ministry and the place of healing in the early churches, although some also incorporate elements of medieval and modern popular religiosity. Some Christian groups are intolerant of non-Christian forms of healing while Episcopalians and some others are more open to different ideas and people.

METAPHYSICAL GROUPS

WHO BELONGS:

Metaphysical groups are quite varied — far more diverse than Christian groups. Some have almost exclusively elderly members, but others attract a range of ages, including numerous young adults. Some groups are all or mostly white; others are racially mixed. Women predominate in both membership and leadership.

WHAT THEY PRACTICE:

These groups were spawned by the early 20th-century metaphysical movement, including Christian Science, Unity and Religious Science. While holding many beliefs in common with the psychic and occult groups, they are organized more like denominations, maintaining church buildings and controlling religious teaching. They emphasize continuity with Christian traditions. Members are not particularly sectarian, but they are not as eclectic as adherents of meditation, human potential and occult groups.

TECHNIQUE PRACTITIONERS

WHO BELONGS:

Clients are middle-class. Many belong to other kinds of healing groups as well. All ages, including children, are involved.

WHAT THEY PRACTICE:

These healing approaches are based on technique, typically applied one-on-one rather than in a group. Healing methods include shiatsu, iridology, acupuncture and reflexology. Related methods, sometimes organized as therapeutic groups, include rolfing and the Alexander and Feldenkrais methods. Also in this category: homeopathy, naturopathy and other nonorthodox medicine.

EASTERN MEDITATION AND HUMAN POTENTIAL GROUPS

WHO BELONGS:

Members are generally upper-middle-class and very well educated. Women predominate somewhat, although these groups attract more men than do most other groups. Members are younger, between 25 and



40. In racially mixed communities, these groups attract a proportional share of the middle-class, non-white community. No all-black groups were found.

WHAT THEY PRACTICE:

These groups draw from Eastern forms of meditation and exercise disciplines and from popular psychotherapeutic methods, such as sensitivity training and bioenergetics. They include Transcendental Meditation, Jain yoga and meditation, Tibetan Buddhist meditation, psychosynthesis, rebirthing, est and Arica. In contrast to the other groups, these are relatively open to forms of healing other than their own, though they generally view their own as superior.

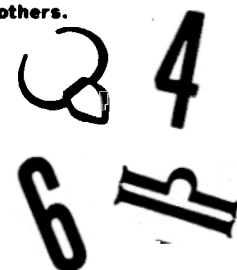
PSYCHIC AND OCCULT GROUPS

WHO BELONGS:

Several of these groups have a broad age spectrum, although the middle-aged predominate. Far more women than men belong, though several groups have a substantial proportion of men. Our study focused on group efforts for psychic healing, but individuals often do the work.

WHAT THEY PRACTICE:

This is the most diverse and difficult to categorize. It includes such groups as Eckankar, Great White Brotherhood and Spiritual Frontiers Fellowship as well as unaffiliated psychic healing circles and many individual psychics and practitioners of astrology, numerology, crystal healing and divining. Like the metaphysical groups, they emphasize the potential of individuals to gain power and control in their lives. In their view, only people who are spiritually attuned, psychically developed or adept in special occult knowledge can tap this great power or channel it to others.



the persevering, nose-to-the-grindstone, solitary, rugged individualist may be ill-suited to social and economic settings that increasingly demand cooperation, communication and creativity. These New Jersey suburbanites generally are "bright-collar" workers (see "New Collars, Bright Collars," *Psychology Today*, October 1988), members of a new class now emerging in our society. They are well-educated knowledge workers who talk, write and compute for a living. In both their work and personal lives they value communication and interpersonal negotiation. Bright-collar workers may need new ways of organizing work—greater autonomy and flexibility, more unstructured time for communicating ideas and new social arrangements and interpersonal ties that foster it.

New types of individual-to-society relationships, such as those that alternative healing groups often encourage, may be highly appealing to members of the new class. The groups may represent a genuine assertion—even rebellion—against the formal rationalization of the socioeconomic sphere.

SPIRITUAL GROWTH. Members may find certain alternative healing groups particularly congenial, especially those that do not assert traditional norms and selves but idealize a flexible self, with changing (often multiple) roles and norms. Rather than socializing members to fixed "right" and "wrong" images of self and moral expectations—the fundamentalist style—they have an ideal of experimentation and "growth," and expect continual change.

The end point of growth is, however, different from that of tradition-oriented groups. For these growth-oriented groups, greater awareness produces greater understanding of self and others, greater awareness of one's body and emotions and greater balance and harmony in relation to one's inner self, others and the cosmos. "Health" is linked with strong awareness of a core self able to choose relations and reactions, one who has a powerful sense of connectedness with others and with the natural environment (or, indeed, the entire cosmos).

New religious and healing movements may be attempts at the symbolic creation and socialization of a new way of viewing the self in relation to the world. But it is still too soon to know the full impact of these middle-class movements on our society.

Many alternative healing approaches promote a qualitatively different perspective from that of the dominant culture. They encourage a reflective and reflexive attitude toward oneself, one's body and

Mysticism Goes Mainstream

MEREDITH MCGUIRE, lead author of the new book, *Ritual Healing in Suburban America*, is now president of the Society for Scientific Study of Religion, a rigorous and scholarly national organization. Her sense that something important is stirring under the surface of religious life has made her a pioneer in this important field. As a scientist she is careful not to claim that the healing movement is expanding fast. With no prior baseline of data, she knows that the phenomenon could have been going on for years, just not noticed.

There are, however, other reasons to believe that the healing movements are indeed growing—and fast—among middle-class Americans. For instance, George Gallup Jr. has been convinced, from his annual religious surveys, that most forms of mysticism are on the rise. Or we at least talk about it more, says sociologist Andrew Greeley at the University of Chicago's National Opinion Research Council (NORC). In a recent 11-year period, the proportion of adults who say they have been in touch with the dead has risen from 27 percent to 42 percent. From NORC data, Greeley estimates that close to 20 million Americans now report profoundly mystical experiences, including healing. Sociologists analyzing a statewide poll in Virginia were startled to find 14.3 percent of all adults saying they had been healed by prayer or a divine source.

As a journalist who watches many lines of survey data, I would hazard to go an interpretive step beyond the researchers' reports. With body mysticism on the rise in many forms, the charismatic movements in Catholicism and Protestantism have now opened out into a much broader healing movement. Coming from the other direction, New Age mysticism is discovering a lost vein of faith among intellectuals who were once dogmatically secular. If these forces were to combine with the self-righteous fundamentalism that hit U.S. politics a few years ago, one could worry that a rightist revivalism may be on the way.

But a very different prospect is now coming into focus: As the healing movement rises from the roots of various religious groups, it is giving form to a sensitive spirituality in life-enhancing communities that respect one another's search for a truth that heals.

—T GEORGE HARRIS

emotional and social life. They affirm the right and power of the individual to choose the quality of experience of body and emotions, to choose how to achieve health, to choose and assert identity. And, in their holistic perspective, they promote a strong sense of connectedness with one's body and with other people.

If widespread, such a transformation of self could have far-reaching consequences for the cultural, political and economic spheres in modern society. Alternative health systems—and the new kinds of

individualism they promote—undoubtedly are symptoms and symbols of profound changes in our society and our selves. They may not only reflect social change but create it. ●

*This article is excerpted from the just-published book *Ritual Healing in Suburban America* (Rutgers University Press) by sociologist Meredith B. McGuire of Trinity University in San Antonio, assisted by Debra Kantor, an anthropology doctoral candidate at Rutgers.*