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Chapter 7

Crystal and Spiritual Healing in Northern England: Folk-inspired Systems of Medicine

Stuart McClean

Introduction

The World Health Organisation has claimed that people living in non-Western or 'developing' societies receive the majority of their health care from indigenous or 'traditional' medicine (WHO 2002). In such societies, drawing a demarcation between orthodox as opposed to 'folk' or heterodox medicine is unlikely to be meaningful. In common perhaps with Britain prior to the latter part of the nineteenth century, some of these societies have held to a plural system of healthcare. With the widespread proliferation of complementary and alternative medicine (CAM) one could argue that the situation in many of these societies is not completely dissimilar to the one we are witness to in Britain today; superficially at least there is a notable return to a form of medical pluralism. Moreover, despite the increased attention to questions of regulation, formalisation and professionalisation, many complementary health practitioners still depend on their practices' received 'folk' wisdom, and many adhere to the principles that are central to folk healing.

In this chapter I consider the significance and meaning of contemporary folk healing, in the form of crystal and spiritual healing practices.¹ In England, spiritual healing has its roots in spiritualism and the spiritualist practices of Victorian society prevalent between the 1860s and 1880s, the proverbial 'golden age' of spiritualism

(Owen 2004).² During the mid Victorian period, and at a time of a perceived crisis of faith (Oppenheim 1985), England fostered a significant social and historical tradition of religious and 'spiritualist' healing – such as Mesmerism – with its origins in the north and north-east of England (Barrow 1986; Owen 2004). Such heterodox 'spiritualist' and spiritual healing practices, inclusive of Pentecostalism and Christian Science, were also prevalent in the United States during this time (Lee 1976; Braude 1989; English-Lueck 1990). Evidenced in spiritualist approaches such as mediumship, they are based on the idea that entering a state of 'trance' allows the individual a form of communication between the living and the dead and empirical proof of the immortality of the soul. These practices were deemed spiritually meaningful by their proponents, though they also reflected materialist – social and scientific – concerns of the Victorian age (Braude 1989; Owen 2004).³

Here I consider the revitalisation and reinvention of these folk-inspired spiritual practices, but with features that are new to the contemporary scene. One such practice is crystal healing, best described as a 'fringe' and esoteric therapy used in conjunction with other spiritual healing practices, particularly those deemed 'New Age'.⁴ CAM practices such as crystal and spiritual healing are commonly practised by individuals and at healing centres that exert little regulatory control over their practices, and the case discussed in this chapter is no exception to this. The status of crystal healing as one of the more minor or 'fringe' complementary health practices is further confirmed by its place in a major House of Lords Select Committee review of complementary medicine (House of Lords 2000).

This chapter reports on ethnographic research carried out in the late 1990s, which explored healing practices and practitioners at an institutional centre for healing in the north of England. The Centre was founded and run by a charismatic and entrepreneurial healer, whilst other healers used the Centre to practice and share knowledge. Folk healing practices are infrequently associated with such organised institutions, but one of the key philosophies which emerged at the Centre was to do with encouraging healers to locate and establish their own unique, individualised practice, 'what works for you'. The healers thus practised personalised systems of healing,

which were in turn sanctioned by the institutional philosophy of the healing Centre and its founder. This situation can be seen as particularly paradoxical, and it also raises important questions about the boundaries between folk healing knowledge and more systematised and culturally legitimate forms of CAM. This chapter also alludes to the impact of professionalisation processes, such as training and other forms of systematisation, on healing practices with folk origins.

Crystal and Spiritual Healing

Crystals, amulets and gemstones have been used as healing objects, as well as for protection, decoration and adornment, in a range of cultural and healing traditions across the world.⁵ Social scientists exploring both the New Age phenomenon and the growth of CAM have tended to see crystal healing as typical of an emerging New Age movement (Sharma 1992; Hess 1993; Brown 1997). Within this schema, crystal healing, or the 'laying-on of stones', has been widely perceived by observers as the middle-class New Age healing activity par excellence. Moreover, crystal healers, even amongst complementary therapists, have earned themselves a dubious reputation. Amongst the medical profession and the media things are worse, and as peddlers of 'gobbledygook' (Sample 2007), they are placed as rather marginal and insignificant complementary therapists amongst the gamut of available CAM.⁶

Too much attention in the existing research, however, had been given over to generalising the phenomenon by relying on 'expert' New Age writers, making broad statements about a 'movement', and neglecting the issue of local variation and atypical cases. Crystal and spiritual healing as practice and as ideology (its culturally situated meaningfulness) needs to be understood in the contexts in which it emerges and is practised. As Napolitano and Flores explain in their analysis of CAM practices in Mexico: 'alternative and "traditional" forms of medical knowledge cannot be disentangled from those who practise them: knowledge cannot be disembodied, nor de-contextualized from its strategic applications. It is always a form of situated knowledge' (Napolitano and Flores 2003: 82).

Hands-on spiritual healing also featured prominently during my fieldwork. Hands-on healing, or what is also referred to as the 'laying-on of hands', is an established and indeed increasingly ubiquitous tradition in healing communities. Hands-on healing is synonymous with the healing activities of Christian groups, metaphysical and psychic healers, and mediumistic and spiritual healers (see Skultans 1974; Benor 1984; Easthope 1986; McGuire 1988; Frohock 1992). In Western societies, crystal healing is used predominantly by spiritual healers of a New Age persuasion, both as an adjunct to hands-on healing and as a healing practice in its own right. Such practices constitute 'symbolic healing systems' (Glik 1988) in that their effect and power relies on the ritualised, metaphorical and mimetic nature of their actions.

Folk healing, if there is a definition free of ambiguity, refers to healing practices that are historically situated and rooted, non-systematised, and learned informally – perhaps through word of mouth or through a loose and open 'system' of apprenticeship – and draw on direct experience, though the boundaries between folk healing and CAM are fluid and contextual. In this chapter, by evoking a particular ethnographic context, I identify aspects of contemporary crystal and spiritual healing that typically exemplify folk healing in some ways, but in other ways raise important questions and dilemmas about the boundaries (both metaphorical and concrete) between the folk and the mainstream, as well as the boundaries between folk healing and CAM.

The Ethnographic Context: The Vital Energy Healing Centre

The fieldwork for the ethnographic study took place in a town in the north of England not particularly renowned for alternative therapies, though it is not drastically untypical of other contexts where New Age healing flourishes. The Vital Energy Healing Centre (VEHC) was a short walk from the centre of the town.⁷ Other retail shops in close proximity to the healing centre included a trophy shop, a fish and chip shop and a carpet salesroom. From the outside, the healing centre looked inconspicuous: a three storey Victorian terraced house, the only visible sign marking it off as different to the other shops and

dwelling being a small placard above the door giving the name of the business, decorated brightly in all the colours of the rainbow. Inside was a different story: a veritable Aladdin's Cave of brightly coloured murals and posters with New Age depictions of religious and mythical figures as well as dolphins. Crystals of all shapes, sizes and colours were laid out haphazardly in the reception area of the Centre on the ground floor, taking up most of the available space, although there was also room for a desk, some chairs for visitors and clients, as well as other gift-type objects, such as greeting cards, dream catchers, joss sticks and aromatherapy bottles.

One of the healing rooms, known as the 'front room', was located on the ground floor. On the first floor were two more healing rooms: one was called the 'sanctuary', a room that acted as the focal point for group meditation every Wednesday evening; the other, across the landing on the first floor, was the 'pink room'. On the second floor was an office, in the process of renovation, as well as a guest room cum library, which contained a vast range of esoteric and mystical texts. The 'front room' and the 'pink room' contained a biomedical-style couch for clients to lie on during healing; rolls of Kimberly Clark paper towels were fixed to the wall. A small hand basin was located in the corner of the 'front room'. This was not used for washing or sterilising medical equipment, but for 'cleansing and purifying' the healing crystals. The presence and use of flowers, candles, joss sticks, New Age type paintings of Jesus and other religious figures, all denoted a curious, eclectic fusion of medicine, healing and a broad, syncretic religiosity.

The owner and principal healer at the Centre, Teresa, established the business in 1981. Teresa organised the business side of the Centre as well as teaching crystal healing as part of a diploma-level crystal-healing course. She was also active in the establishment of national standards through her participation in a national healing organisation. As Teresa taught healers that subsequently set up their own healing Centres, she oversaw their activities on behalf of this quasi-regulatory body. In this respect, the healing Centre was closer to the activities and philosophy of complementary medicine than folk healing. In addition to the training programme, Teresa oversaw other healers who used the rooms at the Centre for a percentage of their earnings. Teresa's project at the Centre in many ways mirrored the professionalisation process that many healing Centres have

undergone in order to widen their appeal and safeguard their practices.

The healers at the Centre charged a fee for their healing services, which again is atypical of folk healing, although they all operated sliding fee scales as well as providing free sessions and forms of gift exchange. One client who attended the centre regularly would give vegetables and flowers from his allotment in exchange for healing; such non-economic exchanges were regular amongst a local community which was not particularly wealthy. Such systems of exchange are also more common with folk healers as opposed to complementary medicine practitioners.

In addition to healing sessions and workshops, Teresa attended to her crystal-healing course, which she set up in response to the interest crystal healing had received over the years; much of this interest stemmed from ex-clients. This is significant because through a period of treatment clients are often encouraged to discover healing ability in themselves (the 'gift'). This is no surprise, as a key healing tenet at the centre was the notion that the client holds important individual (and expert) knowledge about their own body. An emphasis on the 'personalisation' in New Age forms of folk healing stands in sharp contrast to the 'depersonalisation' evident in formal biomedicine.

The Route to Healing Identities: Identifying the 'Gift' and the Calling

The healers I encountered at the Centre, Teresa notwithstanding, talked about the ways that they got involved in healing. Each of their stories was unique but there were common themes that linked together their individual narratives. Charlie, for instance, was a young male healer, and a local person, in his late twenties. The healers that I had spoken to at the centre by the time I met Charlie were all women. Apart from one other, older male healer, Charlie was the only male healer who played a key role in the life of the Centre. Charlie was a bodybuilder as well as a healer.

Before attending the Centre as a client, Charlie was reliant on the use of steroids to build his muscles for lifting weights, which led to both physical and emotional difficulties. In order to counteract the pain that the steroids were causing he took painkillers. Charlie

explained, 'I was in a real mess', and added; 'I'm now going to look at how crystals can help me in weight training, you know, doing it the natural way'. Charlie also claimed that there was a genuine physical reason for the healing interest: 'Before I started coming here I used to feel my hands burning up all the time, like they were on fire. When I came here and asked Teresa what it was that I was feeling, she said it was because I was a healer and have also been a healer in my past lives'.

In common with many of the healers at the Centre, the underlying issue here is that Charlie visited a healer in connection with some ill health and/or emotional, psychosocial problems. His visit to a healer was prompted by his growing addiction to steroid drugs for bodybuilding. His realisation about his healing potential, encouraged by the other healers at the Centre, gave him another chance and allowed him to channel his energies into a new venture, albeit one that was significantly different to bodybuilding. There are issues that also resonate with the folk healing literature, particularly surrounding the initiation into healing circles and that healers experience the sensation, not always unpleasant, of heat through the hands (see Snow 1978; Hufford 1988; Alver 1995). For Charlie, the experience of being brought into healing symbolises the 'calling', one which is brought on by other healers recognising the 'gift' of the ability to channel healing energy.

As a healer with a perceived 'gift', Charlie seemed critical of Teresa's attempts to professionalise and standardise activities at the Centre. On the occasion that such issues were discussed by Teresa and the other healers, Charlie expressed open hostility to these agendas. Charlie believed in doing his own thing, manifested in both his healing practice and in his critical attitude towards Teresa's vested interest in professionalism. Such blatant individualism, exemplified by Charlie, was allowable as the 'folk' philosophy of the Centre – 'what works for you' – sanctioned this approach. For example, on one occasion Teresa proudly informed me that the Centre was setting up a crystal-healing diploma that would run in conjunction with a complementary medicine course at a university in the Midlands. Charlie was singularly unimpressed and pulled a disgruntled face: 'Part of a university degree, eh? Oh yeah, right!' His response showed significant opposition towards Teresa's approaches and its inherent professionalisation agenda.

The two other healers that I came into the most contact with over the fieldwork period were Stella and Sally, both women in their fifties. Stella had been practising hands-on healing for approximately eight years. Like Charlie, Stella ventured into healing after visiting the Centre as a client. Stella experienced a form of lower back pain (osteoarthritis) for many years and biomedical treatment could only treat the symptoms. As she explained: 'I was told I had osteoarthritis and the GP said that I had to go and learn to live with it. Now, I wasn't going to do that, I'm not like that. So, I started coming here and seeing Teresa, which helped, and then I became a healer. I started with crystals and then later learned hypnotherapy'. Although primarily a hands-on spiritual healer, Stella also practised crystal healing. Much of her free time was spent at the Centre's open and free healing session on a Wednesday evening, referred to as 'meditation night'.

Sally was also an established and valued member of the Centre. A longstanding friend of Teresa, Sally offered her healing services free of charge at the Centre on Wednesday evenings. By day she was employed locally at a residential care home which became the source of a number of problems. Like many of the healers I came into contact with, Sally took pleasure in looking after those around her, but over two years of employment at the care home the work had drained her both physically and emotionally. Teresa explained that the frequent physical illness Sally experienced came about because she got too involved in patients' lives. For example, on meditation night Sally normally asked Teresa to 'send out' healing energy to her patients at the care home ('absent' or 'distant' healing also featured prominently at the Centre).

One day Sally came into the Centre visibly upset. Five patients at the care home, whom Sally had become attached to, had died over the space of a few weeks. Whilst Teresa admired Sally's compassion, she felt that she should retain more distance from the patients, as this could affect her health: 'The problem is, Sally gets too emotionally involved, and they [the care home staff] have told her not to, but Sally will do what she wants. I think they want you to be a compassionate person without being involved'. Indeed, Sally often rang in to say she couldn't heal because she was too tired or not feeling well.

A common issue is that the healer's interest in healing largely developed during their time as a client, a familiar theme in the folk-healing literature. Such a collective of similarly afflicted people in healing groups is not surprising, as 'part of the treatment is to be initiated into a fellowship of the similarly afflicted' (Frankenberg 1986: 621). Edgar, in a social anthropological study of therapeutic 'dreamwork' groups, explains that the participants in his study were often propelled to join the group as a way of reflecting on more general life crises or transitions. As Edgar states, 'Almost all the members who stayed through a group term of ten weeks disclosed either to the group or in the follow-up interviews that they were going through a period of their life which involved, in their eyes, great change or considerable crisis' (Edgar 1995: 10).⁸ There are therefore important similarities between healing and the initiation into folk and other shamanic traditions: 'Many of those who were in the process of becoming healers had experienced a dramatic healing or improvement in some condition or illness prior to trying to heal others ... Sickness of the healer prior to initiation is similar to the process of shamanistic initiation in other cultures' (Glik 1988: 1200).⁹

Stella's and Sally's involvement as healers at the Centre is also a consequence of their experiences with formal biomedicine, and it conveys a larger story about the lack of control that people face in the context of their experiences with biomedical treatment. For example, Stella often made allusions to how older people are not treated seriously by the medical profession, and that this attitude impacted on the way she was treated by doctors. As a lay person she did not wield the power and autonomy that expert-based knowledge confers upon the individual. As a consequence, her healing practices and ideas, not unlike other healers at the Centre, manifested themselves as a unique combination of the spiritual approach and folk-inspired common-sense ones.

The Personalised and Individuated Nature of Healing Practice

Teresa's role as head of the Centre was partly to enforce the primary ideological premise: healers are encouraged to practice their form of

crystal healing, a premise quite unlike many CAM therapies. Individuation – or the creative act or will to express individuality – was a central philosophy at the Centre, and expressing agency or being individual was institutionalised at the Centre as a form of collective ideology. One consequence of this extreme personalisation and individuation was that crystal and spiritual healing enabled the healer to develop their own distinctive style of healing. Crucially, this individuation provided its own legitimacy (which here I term ‘internal’ legitimacy), and represented a move away from the kind of legitimacy conferred by science, medicine and/or community (‘external’ legitimacy).

For the healers, individuation denoted three things. First, healers recognised and celebrated the individually constructed nature of health, illness and disease. Second, healers (and clients) created, adopted and utilised healing practices and diagnostic procedures that were also individually constructed. Finally, their understanding of health, the body and illness also manifested themselves in individual and highly personalised theories. The emphasis on individuation, I suggest, is particularly prevalent in a form of CAM like crystal healing, because it engages with spirituality and celebrates, at its core, folk notions about the body, health and illness. Let us now turn to some examples of how such personalisation worked in practice, and consider what this reveals about the folk-inspired nature of such healing practices.

‘Good Vibrations’: The Nature of Health and Illness, and How Healing Works

One area that personalisation clearly operated in is healers’ explanations of the healing process, and in particular the concept of intuition in healing diagnosis. However, first let us consider how healers conceptualise health and illness. Healers at the Centre perceived health not as the absence of disease but as the absence of ‘blockages’ that occur first in the ‘chakra’ or ‘etheric’ areas of the body. Chakras are defined as the area where ‘vital’ energy in the etheric or spiritual body intersects with an area in the physical or material body. The blockages are seen as being caused by ‘negativity’ and negative emotions, which may arise from the individual

themselves or from an external agent. As individuals we therefore have a moral responsibility to protect ourselves from these negative energies (see McClean 2005 for a fuller description of this process). As Teresa explained: 'You see, a lot of our illnesses are caused by personal, private problems. It's those emotions that block our chakras and cloud our auras'. Such blockages are removed either by the hands of the healer or by a crystal that is able to act as a 'scalpel', drawing the negative energies out. The healer may employ a number of techniques to ensure protection of their own spiritual bodies, a method that bore more than a passing resemblance to other folk-healing practices (see Fisch 1968).

Hufford (1988) has suggested that a common feature of folk healing is the focus on 'energy', which connects folk traditions of healing to the theory of 'vitalism', also prominent in New Age healing. Healers at the Centre saw healing as the process of transferring (and sometimes 'injecting') positive healing energy into the client whilst simultaneously drawing negative energies out of the etheric or spiritual body. For example, healers sometimes used a 'laser-wand' crystal to 'blast' energy into the patient, which at the same time would also draw 'harmful energies' out of the patient's spiritual body. The implications and significance of such mimicry of formal medical practice has been discussed elsewhere (McClean 2003). Hufford's description of a Pennsylvanian Pow-wow healer's practice has obvious parallels with the healers' approach at the VEHC, as well as Mexican-American *curanderos*: 'Folk healers often view their activities as based on a transfer of good energies into the patient and the removal of negative forces from him' (Hufford 1988: 239). In his discussion of Norwegian folk healers, Alver also recounts a similar process in which a healer with warm hands can 'heal by dissolving "blockages" in the body through "radiation" from the palms of his hands' (Alver 1995: 27).

The practice of crystal and spiritual healing represents a continuing trend with what is thus termed 'energy medicine', of which there are folk and 'professional' variations. Nevertheless, energy is seen as a shared concept amongst CAM therapists (see, e.g., McGuire 1988; Frohock 1992; O'Connor 2000; Fadlon 2004), although it is more commonly associated with New Age practices (English-Lueck 1990). More specifically, the New Age healers' focus on concepts such as 'energy' or 'vital force' represents a clear

challenge to the scientific concept of the body as machine (Synnott 1992; O'Connor 1995).

A similar term used is 'vibrational healing' and refers to that which is beyond the material. The concept implies that behind the spiritual engagement with healing is a physical process; the term 'vibrational' denotes physical changes. In healing, the term refers to spiritual-level changes, although I stress that there is some overlap, as it is argued that healing that takes place at the spiritual level impacts on the physical body at a later stage. There are notable similarities between the concept of vibration in healing (Gerber 2001) and that of 'pulsation' which is more commonly used in Buddhist and Hindu thought (Singh 1992). In the following section I highlight how something as individual and personalised as the senses is central to the perceived success of healing energies.

The Senses in 'Vibrational' Healing

On one occasion Teresa explained the concept of 'resonance' to a group of healing trainees (myself included) in the sanctuary. She came into the room laden with an assortment of brass-coloured bowls and wooden pestles. Each of the bowls was individually made, had different markings, and was made of a composite of seven metals: lead, mercury, copper, nickel, silver, gold and brass. She also showed us a chime-type instrument that she struck with a crystal to give us some idea of the different sounds.

As Teresa chimed the instrument, she asked the healing trainees to 'feel' where the sound resonated in the body. Two trainees – Adele and Helen – closed their eyes to feel the sounds more clearly. Teresa then explained how the chiming bowls and other calming sounds can change the 'atmosphere' of a room, as sound alters the vibrations of an environment. She argued that sound can also alter the vibration of an individual, as it is used to bring 'clarity' to the chakras. As such, the bowls should be used before healing or personal meditation. As Teresa explained 'The sound can be used to balance and cleanse the chakras. You should hold them [the bowls] under the base with the palm of your hand, and press the wooden stick against the rim, moving it at a constant speed around the bowl. With the chime I also use crystals to tap the keys to make a sound, as I think that with the crystals you get a clearer sound'.

On another occasion Teresa asked us to explore the sense of smell, again using the 'resonance' technique. Taking each of the healing trainees in turn, she demonstrated channelling an 'essential oil' (aromatherapy oil) through the hands and asked us how we experienced the vibration of the oils. This was achieved by the healer rubbing the oil onto their own hands and wafting the smell over the client's aura. Teresa went on to suggest that the vibration of a crystal, flower or oil can be channelled or resonate through anything because it doesn't matter what physical barriers exist. 'With the energy of vibration you can get through anything: concrete, wood, glass, whatever', she said.

The senses clearly play a key role in vibrational healing. It is argued by healers that vibrational healing operates at a level beyond the physical. Rendering physical barriers obsolete, vibrational healing operates on a 'subtle' level of healing energy. For a healer to 'tune in' they must, it is claimed, raise the level of their senses and become 'sensitive' to the healing process. The healer's emphasis on the senses highlights the folk-inspired (as well as feminised) nature of crystal healing as it is healers with the 'gift' for being 'sensitive' that are better able to 'tune in' to healing energies.¹⁰

The Crystals and the Stones: Not Just Any Old Rock

Drifting around New Age shops and other related premises that sell crystals, as I frequently did during my fieldwork period, it was interesting to note how many people purchased crystals as 'lucky charms', such as amulets, all imbued with powerful personal meaning. Whilst sitting in the reception area of the Centre reading a book or engaged in conversation with healers or clients, I was able to watch people come and go, pick up crystals, feel them in their hands, taking note of the colour, shape, clarity and so on. People browsing in reception were often just passers-by, perhaps purchasing a crystal for a friend or a relative. Most importantly, they would ask one of us what 'something was good for', hoping for the perfect crystal for their problem, a strategy not unlike that of many other folk remedies, like the copper bracelet.

Crystals embody particular qualities that can be isolated and looked up in a crystal healing textbook. Crystal healers frequently refer to these textbook typologies of crystals when making decisions about which crystals to use in healing, but other healers were more

prepared to make their own decisions rather than follow those of the experts in the textbooks, thus making their own intuitive and individual choices over crystal selection. Jenny, a healer who was taught by Teresa but worked in a neighbouring town, said: 'Often the properties in the books for each stone are all vastly different, so you have to go by what you think. There are guidelines with the colours of the chakras though ... the chakras are divided by colour, although you can place a crystal from one area into another if it feels right'. The general guiding principle – 'if it feels right' – reflects the idea that healing is individuated rather than systematised and expert-based.

In addition, one of the ways in which healing beliefs or practices can be defined as 'folk' is by considering its indigenous application. Geographically, folk concepts and constructs are frequently bounded by symbolic constructions of space and place. Here, healers provided their own version of this geographically-bounded construct, particularly when considering the significance of which crystals to use and whether the energies of crystals differed depending on where they were sourced. As rocks, crystals are said to represent indigenous healing energies. Quartz is found widely in all parts of the world and the U.K. is no exception. Teresa stressed the importance in using crystals indigenous to your area. This was reflected in an occasion when Teresa handed round some Blue John stone to assist in a group meditation. A stone indigenous to the Derbyshire Peak District in the U.K., Teresa felt that the use of Blue John would intensify the meditation experience. After our meditation and group reflection, Teresa added: 'These are indigenous stones of course, they are hand gathered, and with this comes a purer experience in meditation'. As natural objects they are rooted in the healer's idea about what constitutes a natural environment. Teresa's concern for rooting the experience of healing in local contexts is also symbolic of crystal healing's folk origins.

Informal Knowledge Transmission and Learning in Crystal Healing

In exploring contemporary 'New Age' crystal and spiritual healing, and the boundaries between 'folk' and CAM, the final theme I want

to consider is that of healing-knowledge transmission, socialisation and learning. Along with six other novice healers, I attended the crystal healing diploma at the VEHC. Teresa and I agreed that in order for me to carry out my research on healing effectively I would have to take part in a training course for a diploma in crystal healing. Attending the diploma training provided me with some important insights into the process of becoming a healer, and it offered me legitimate access to other curative practices. I also attended partly in response to other healers at the Centre who said that I should get more involved.

The diploma course was loosely structured and addressed topics and themes which were considered central to crystal healing. However, despite some systematised and professionalised elements the course relied mostly on exploring intuitive knowledge and encouraging healers to develop their own healing style. The diploma was taught in two-day blocks, six times per year over two years, and at the end of the course healer apprentices had to write a lengthier dissertation-type study about an aspect of their practice and its relationship to 'theory'. The teaching on the course itself was unstructured; most sessions emphasised the importance and value of the individual's knowledge over that of a book or so-called 'expert'. In the following I provide a description of two illustrative examples from my fieldwork about the process of learning crystal-healing knowledge and being a healing apprentice.

Crystal Healing: Example A

On this occasion the crystal healing apprentices, myself included, were upstairs in the sanctuary with Teresa. Teresa wrote the following on the whiteboard:

Resonance Therapy
Everything resonates at a different rate
Everything *has* a vibration

She then explained how the flow of energy can transfer from the resonating object to what she called the 'generator' (the healer's hand). Here, Teresa demonstrated one of her styles of crystal healing called 'resonance therapy'. The purpose of resonance therapy is to enable the patient to maintain a semi-alert state of mind, so that the healer can carry out 'deep work'. Out of our group of apprentices

(Elsie, Sarah, Margaret, Anne, Katie and I), Sarah volunteered and got on the couch. Teresa then explained the healing:

When you are healing somebody it is important to use visualisations when you can. These can be guided visualisations in that you can take the patient through it and this helps the patient to release anything that is inside them. I think it is important for you to develop your own kind of guided visualisation. Try to vary it as well from time to time, depending of course on what you want to open the patient up to.

Teresa started the healing session and described her actions as she progressed. 'You should place – as you know – one clear quartz at the feet pointing up, one at the crown pointing down and one in each of the palms of the hands'. She asked Sarah whether she was left-handed, which she wasn't. 'First, you ask for guidance, and then you ask for a blessing for your healing'. She grasped her crystal pendulum and moved it nonchalantly over each chakra point, remarking that as it swings wildly you take that as a sign of an imbalanced chakra, 'You balance each chakra as you move the pendulum down the body. The pendulum will go from spinning fast and with a wide arc, to circling slowly. Once the pendulum reaches the feet so as to check the "earth star", it can be moved up again through each of the chakra points to check that they have been balanced okay'.

Teresa then explained that she was going to 'channel' the energy of a 'tumbled' turquoise crystal.¹¹ The energy of the turquoise was channelled through Teresa's body (from the left arm), over the head, down the right arm and out of the right hand. With her hand above the 'soul star', she said that light would usher in at this chakra point.¹² She moved on to the crown chakra, then the brow, each time asking Sarah questions related to the sensations she experienced. She used open questions such as: 'Where would you like to go with [such and such a colour]?'; 'What do you want to do with that sensation?'; and 'What are you feeling with this energy?' However, she said the questions should never be too specific: 'Counselling is not giving advice. It's letting them go with what they are experiencing'. Furthermore,

You need to question the patients very gently, to ask them what they are experiencing. Whether, if they see a golden light, they want to wrap themselves in it or breathe it in, or anything else. This is very important. Also, they may experience visualising pictures, memories of their childhood

or a painful memory. If you find that you have hit on a difficult memory then you can leave it if they don't really want to explore it, and then you can return to it at a later stage if you can take a note of it. You should ask them what they want to do with the picture or the memory or the object or whatever, and don't forget to do that. You are the instrument and you should fine tune the instrument for what you are doing, whatever the purpose of the healing is.

At the brow chakra, Teresa explained, 'It is important to give them plenty of space at the brow chakra. Don't press too heavily'. She held the crystal about six inches above Sarah's brow point and asked her if the energy was too strong. It was, so Teresa moved her hand up until Sarah was more comfortable, about twelve inches above the chakra point. Teresa continued, 'That is very important for the three higher chakras, but for the lower chakras you can sometimes find yourself wanting to press right in so that it feels like you are almost touching them'. As Teresa reached the throat chakra, Sarah said she was experiencing a rush of golden light: 'What do you want to do with that light? Do you want to wrap yourself in it?' Teresa asked. 'I am the light', Sarah replied, matter of factly. 'I feel like I am the universe. It's a wonderful feeling', she added. 'Good', said Teresa, 'Stay with the golden light for a while'.

At this stage Teresa's hand shook slightly. She explained later that she received very strong vibrations from the throat and heart chakras. At the end, Teresa said you can place a few drops of oil (she used jasmine) onto the palms of your hands and wave it into the patient's aura, as this establishes calmness after the healing. With the oil in her hands, she moved them around the contours of Sarah's aura, making flat stroking actions as if straightening out a tablecloth. An alternative, she said, is to hold the bottle of the oil in the left hand along with the crystal. The crystal should point into the bottle of oil. This channels the vibration of the oil through the palm of your right hand. She later added that you should not channel more than three things during a healing: the crystal, an oil remedy and a flower would be sufficient.

Crystal Healing: Example B

On this occasion, Jack, a male healer and reflexologist in his late fifties, joined us for the day to teach some healing techniques. The first healing practice Jack demonstrated was the 'aura scan'. We were

sat upstairs in the pink room and Jack asked who would like to volunteer. 'Who would like a bit of a boost this morning?' he said merrily. Elsie seemed keen, so she climbed onto the couch. Jack then placed a crystal in the palm of each of her hands, the left one pointing to the heel of the hand and the right one towards the tips of the fingers. The healer holds the same crystals in their own hands in this manner. Jack then went through the invocation with the rest of us, which we repeated together. 'I invoke the light of the Christ within. I am a clear and perfect channel. Light is my guide'.

This was repeated three times. Then he placed his right hand on Elsie's hand and his left hand on her brow. He called this 'bridging', and explained further, 'which hand goes where depends upon which side of the client you are on. If you are on the left side, your left finger would be on the wrist and the right finger on the brow. You will then feel immediately a tingling sensation as the patient's energy field attunes to you and your crystals'.

Jack said that the crystal in the right hand should be placed loosely between the thumb and the fingers with the point towards the thumb. This crystal is then passed through the 'etheric energy field' (the aura) surrounding the body, and scans the body for imbalances. These imbalances, or what are sometimes termed 'blockages', create 'signals' which individuals detect in individually unique ways. As he explained:

Slowly move the crystal over the body from one side to the other. Now, feel any difference. These differences are signals of problem areas, energy blockages or weaknesses. They may be very subtle. Some detect the sensation as resistance, some as heat. Other people feel it as a sensation of cold. Don't worry if you feel hot and I feel cold. It doesn't then mean that I'm right and you're wrong – we're all individuals. Some people receive these signals fast and their conscious mind can't interpret them. It doesn't matter. They just know there is a blockage at that spot.

Jack pointed out that when a 'signal' is detected, you should stop at that area. At this point he directed the tip of the crystal to the place where he had stopped on Elsie, the right shoulder. He explained that you then circle the crystal from right to left until a strong pulling sensation is felt, drawing the crystal towards the body. He circled the crystal towards Elsie and then touched its tip on her shoulder. He said that this action grounds the change you have been making in the spirit body down to the physical body.

He continued to 'scan', moving down the body, repeating the process each time he picked up on a blocked area. As he moved the crystal down the body he scanned side to side, but explained that you can scan in any direction. Once he reached Elsie's feet he said he was rescanning the body, which is designed to go back and check on any particular areas that you may have missed. He termed this process the 'onion-peel effect'. By this he meant that the layers of suppressed emotions which can surface during healing are removed once the healing is complete.

At the end of the healing session he smoothed out the aura by moving his hands over the body with the crystals in either hand, a process he called 'smoothing the feathers'. This was achieved by moving the crystals with both hands down the body, starting at the head and descending to the feet. Following this Elsie got up off of the couch and the crystals were 'purified' in the basin.

Healing Apprenticeship and the Role of Innovation

In both healing examples we can note that healing is taught as a dynamic between structure (particular techniques, questions and gestures) and improvisation. Occasionally during fieldwork I experienced this dynamic as a tension, and one that was often paradoxical. Healers at the VEHC were encouraged to be creative and innovative and it was clear that the Centre supported and legitimated this creativity. This also gave credence to the notion that healing at the Centre was individuated as opposed to expert-led or systematised. However, there were aspects of these healing practices that could be considered folk-inspired. As exemplified at the VEHC, healing practices were placed on various ends of a spectrum – from the wholly individuated and personalised to the more expert-led and systematised. Along this spectrum are more folk-inspired practices and beliefs, ones which stem from the group and community-led nature of the healing Centre, and which provided the origins for many of their ideas about health and well-being.

Innovation arose initially from the healer's apprenticeship and training, in which they were often encouraged to mimic and draw upon another healer's style and, additionally, bring into play more personalised practices. Furthermore, both the media and the method of learning gave rise to individual innovation. As healing knowledge at the Centre was neither written down nor passed on through

intensive study, healing rituals are cursorily learnt from observation and then subjected to unfettered individual interpretation and modification.

I suggest that individuation is codified and sanctioned within the healing Centre as the normal orientation towards healing practice and knowledge. This can be noted in Teresa's suggestion that 'You are the instrument', by which she implied that the healer controls the event and generates the healing power. And yet we can see that there is a sense in which patient 'control' (as well as mutual 'interaction') over the experience of healing is also important, as Teresa had implied in her statement that healers should be 'letting patients go with what they are experiencing'. Personalised expression is therefore 'internally' legitimated through the ideology of the Centre. Again, Jack explained that it is not important if healers detected the 'sensations' at different times or even in the wrong order, because the sensations are 'subtle' and 'we're all individuals'.

Conclusion: Folk Inspired Systems of Medicine

In this chapter I have provided a cursory look into one of the more fringe and marginalised practices of complementary and alternative medicine. Crystal and spiritual healers are clearly attempting to engage in discourses of formalisation and professionalisation, and there were attempts by Teresa to bring more standardisation into the practices of the Vital Energy Healing Centre. However, we can note how healers at the Centre were heavily influenced by and acted upon folk models and conceptualisations of healing. This was evident in their approach to health and illness, as well as being a central part of their overall philosophy of healing and their approach to healing socialisation and the transmission of knowledge.

The healers' general philosophy at the Centre, in which they practised 'what works for you', encouraged a reliance on both individual and personalised knowledge as well as folk-inspired practices and beliefs. In deliberately distancing themselves from the depersonalised nature of formal medicine, this emphasis on individuated knowledge permeated all aspects and activities of the Centre as well as the process whereby one became a healer. Although

Teresa had a clear and vested interest in standardising aspects of healing practice, which can be taken as evidence of dealing with the wider project of professionalising 'folk' knowledge, the other healers maintained a significant distance from this, partly due to their own stories about coming to healing, but also because of the creativity and sense of agency they could achieve through generating their own practices and techniques. The endurance of such 'folk' models was also evident in the endurance of non-monetarised relationships and systems of exchange within the community (see Chapter 11, this volume, for a further discussion of this theme).

We can thus see how the agenda promoted by the House of Lords, the Department of Health, the World Health Organisation and other agencies is unlikely to influence how more spiritual and folk-inspired healing practices operate. Healers as well as their clients are drawn largely to the 'anything goes' philosophy of healing and the Centre, and so are unlikely to engage sufficiently with processes of professionalisation and regulation (despite Teresa's attempts otherwise). Although clearly paradoxical, crystal and spiritual healing, as it is experienced through one particular Centre in the north of England, presents itself as a 'system' of folk healing knowledge and practice; a model of personalised medicine for our postmodern times.

Notes

1. This chapter draws upon and reproduces some previously published material and data, with permission of the Edwin Mellen Press (see McClean 2006).
2. 'Spiritualist' is the name given to individuals interested in all aspects of the spiritual (not just healing), and although not a religion in the conventional sense, these practices are frequently tied to the activities of spiritualist churches.
3. A key theme in both Braude's (1989) writing on the United States and Owen's (2004) seminal research on the English context is that spiritualism reflected some of the gender politics of the Victorian age. In brief, women's interest in these practices is seen as both a subversion of existing gender power relations and a reflection of their emerging status and autonomy.
4. 'New Age' is a social movement incorporating diverse goals but which are likely to promote a variety of personal and interpersonal values such as self-responsibility, psychological growth and creativity (see English-Lueck 1990:

- 1). A range of key texts have provided timely analyses into understanding the nature of 'New Age' healing practices in both British and American society (McGuire 1988; Hess 1993; Heelas 1996; Brown 1997; Prince and Riches 2000; McClean 2006).
5. The historical evidence surrounding the use of gemstones and crystals for healing purposes is seemingly scant, and it is not the place to discuss the literature here. However, some healing texts frequently cite the origins of crystal healing in Egypt, where stones such as malachite were said to be used for healing and protection (Raven 2005); origins in Ayurvedic medicine have also been discussed (see Adler and Mukherji 1995; Beckman 1997). Crystal and crystalline structures have been used throughout history as both artefact and metaphor, symbolically representative of transcendence and spiritual transformation, most commonly noted in alchemy and the mythology of the philosopher's stone or *lapis* (Holy Grail) (see Bletter 1981).
6. In the House of Lords (2000) report, crystal healing is placed in the third group or tier of therapies, which 'lack any credible evidence base'. Spiritual healing, somewhat contradictorily, sits in the second group, which act to 'complement conventional medicine'.
7. All names of places and people have been changed to protect the anonymity and confidentiality of the participants in the study.
8. Schneirov and Geczik (2002: 211) also note that these difficult personal experiences led to people developing an interest in alternative medicine. In addition, Warkentin (2000: 214) highlights recovery from cancer as being the personal motivation for one particular healer in Canada.
9. These theories have not been exclusively applied to alternative healers; Löyttyniemi (2005) explores the use of illness stories amongst conventional medical doctors.
10. The word 'sensitive' is used by healers to describe individuals who are perceived as embodying some special abilities, through which they experience more acutely a connection with the spirit world.
11. 'Tumbled': a crystal that is rounded, with no rough or terminated edges.
12. The 'soul star' refers to a chakra point that is extended approximately six inches above the top of the head (Raphaell 1990: 29).

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