

# Curing, Healing & Wholeness

by Ian Watson

From my homeopathic training I became familiar with the concept of a 'direction of cure'. This set of observations, originally attributed to Constantine Hering, provide a useful guide to the progress of a person undergoing homeopathic or any other form of treatment. For the most part, the established criteria do seem to be reliable indicators, although there are certain situations where things are not quite so clearcut.

What I noticed in my practice work over a number of years was that another, parallel process was unfolding in the lives of many of the people that I worked with, which perhaps could be called 'the direction of healing'. I use the word 'healing' deliberately here because of its original definition pertaining to wholeness.

Although the two terms - healing and curing - are often used interchangeably, they do carry different connotations. Curing tends to imply something that is done to a person, by the prescribing of certain medicines and procedures, whereas healing is itself the unfolding process through which a greater sense of wholeness or one-ness is experienced.

One important characteristic of healing that differentiates it from curing is that it is not directly concerned with the removal of symptoms or disease states. That is to say, healing (or a sense of wholeness) may be experienced as a result of certain symptoms being 'cured', but this is not a necessary precondition.

There are many people who are free of symptoms but do not feel themselves to be 'whole', and there are just as many who are undergoing a radical self-healing process in the very midst of suffering and disease. Also, it can often be witnessed that the dying process brings the most profound healing of all, and this is frequently the case for those who have been proven to be 'incurable'.

The direction of healing, then, is a movement towards greater wholeness, which does not always coincide with the direction in which symptoms and diseases are moving. It is concerned with a much larger process than any particular illness, a process which continues to unfold gradually throughout a person's entire life, through both sickness and health. The Swiss psychologist C.G. Jung coined the term 'individuation' to describe this lifelong endeavour.

I found through experience, as do many practitioners, that the reasons for which people come for treatment are many and varied. A great number are clearly seeking a 'cure' for some ailment that has resisted the efforts of orthodox medicine. These individuals will typically be only too glad to hand over the responsibility for their well-being to the homeopath, whose job it now becomes to find the cure on their behalf. They are not particularly interested in what the illness might mean or to what effect their lifestyle may be contributing to their suffering - they just want it to go

away so they can resume their normal life.

This group of patients (and they are known as patients at this stage) will invariably respond best to what may be described as 'medical homeopathy', and it is here that the traditional 'direction of cure' guidelines will be most applicable. The homeopath acts in a role which is analagous to that of the general practitioner, and he or she may find that they have become a kind of GP substitute for many of their patients. Having adopted this mode in my earlier years of homeopathic practice, I can report that it is the fastest route I know of to establishing a busy practice with a large client base.

The downside of this mode of practice is that the patients are relatively passive and may well feel themselves to be victims of their disease who are unable to help themselves. The homeopath is now the expert upon whom they feel dependent, just as the doctor or consultant once was. The practitioner holds most of the power in the relationship and will, over time, begin to experience the burden of responsibility for others' health and well-being to be an increasingly heavy load. It is, in short, the best recipe for practitioner burnout that I can think of.

Fortunately for those of us who have felt the limitations of practising in this way, a second client group has emerged in ever-increasing numbers during the past few decades. This group consists of those individuals who are no longer prepared to be the passive and helpless patient. They may still tend to view their disease as a nuisance and something to be gotten rid of, but they are not content to hand that role over completely to someone else. They want to participate. They ask a lot of questions. They spend hours on the internet researching their disease. They demand (quite rightly in my opinion) to be told exactly what they are being given, and why, and what it is supposed to do for them. And you can be sure they will look it up in their materia medica the minute they get home!

Now, depending on the consciousness of the practitioner, this kind of client will either feel like a breath of fresh air, or will feel like a 'difficult case'. The homeopath, like the GP, who is used to being 'the expert' will find these clients challenging to say the least. They may well find themselves struggling to get these people to comply with some rule or other which the practitioner deems crucial to the success of the treatment. The patient, of course, has other ideas and won't be afraid to try them out.

What I noticed in my own practice was that the 'normal' rules of homeopathic engagement became increasingly burdensome and less relevant as more of my clients became interested in participating in their own self-healing process. It didn't seem to matter so much whether I 'found the remedy' or not. The emphasis of the interview began to shift away from 'taking the case' and more towards working with the client's process directly at it emerged there and then. There was less of a need for me to 'fix' anything or to make it all okay, and more of a recognition that we were sharing this journey together and were both equally responsible for any progress that was made.

My own instinct tells me that there is a growing movement in consciousness, of which the emergence of this second group described above is but a symptom. Medical homeopathy, for all its successes, is beginning to look increasingly outmoded

as a model for practice in the future. It is not that homeopathy 'doesn't work' on this level, but rather that the relationship between practitioner and client, based as it is on the old medical model, is not sustainable for either party in the long term.

And it can only get worse. Or better, depending on how we choose to look at it. As my own interest in prescribing 'a remedy for everything' has waned, I find myself now working exclusively with 'group two' clients, together with an increasing number who have outgrown this mode of healing relationship as well. Let's call them 'group three'.

This latter group consists of those who have a radically different relationship to their disease process than the former two groups. They are interested primarily in understanding their dis-ease, rather than getting rid of it. They tend to see it as an opportunity for growth rather than as a curse, and will actively resist any attempts to just make it go away. They want to learn from it and to discover what purpose it serves in their life. They may even want to explore the possibility that they themselves have originated this problem in order to promote their own growth and self-development.

As you can imagine or may already be aware, working with clients who have this kind of consciousness is a very different proposition, and the 'direction of cure' as homeopaths normally understand it is a meaningless concept in this situation. What I call the 'direction of healing' however, comes into its own here, because there are recognizable stages through which people typically move on this journey of increased self-awareness.

One of the signs I've learned to pay attention to is known as 'the descent', wherein a person begins to lose a sense of what was formerly meaningful and valuable to them, and they experience a kind of free-fall into uncertainty. This will often be labelled as a state of depression or a mid-life crisis, neither of which does justice to what is really taking place. Psychologically, it seems we need these times of introversion during which our old identity falls away and we are left floundering in the unknown until a rebirth of the self can take place.

I've found that if I remain stuck in the mode of just 'giving remedies' to a person undergoing this kind of transition, I am probably missing the point. The point being, nothing needs to be fixed or taken away here, despite appearances to the contrary. These transitions are completely natural to the larger process of becoming a whole human being, and delaying the inevitable is generally less than helpful. What might be helpful is to be a supportive partner in this process, who can hold the space within which a person may find their own way. Invariably, the most valuable things are to be found within ourselves and remain unavailable to us for as long as we seek outside.

What we are addressing here is the place where curing, healing and self-development intersect, and it's an area that I believe homeopaths would do well to consider more consciously. Homeopathy as a 'medical system' which is practiced by experts will, inevitably, fall prey to many of the afflictions suffered by the orthodox medical establishment. Perhaps the time is ripe for homeopathy as a tool for self-healing and the recovery of personal autonomy to come into its own.

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