

# What Is This Thing Called "Healing"?

By Stephen Lewis

I keep avoiding every request to write an article on, "Just What Is This Thing Called Healing". The problem is, it's too big. Healing is inextricably bound to spirituality and both are inseparable from consciousness. The problem with consciousness is I don't know where it begins and there is no end. Just as there's always more and greater consciousness, ultimately, there is always more and greater healing until, at last, one heals the rift of his separation from the universe... and from his creator, and even then we must heal our collective separation from our universe. But, that's for later, for now, we best begin at the ridiculous and work our way up toward the sublime.

First of all, if you have a shaving cut you will not need to go on disability, and should not quit your day job. The consciousness required to heal it is of the most primitive type, e.g. the limbic system. (Remember the classic neurology joke. The limbic system is in charge of the four F's: Fight, Flight, Feeding, and Reproduction).

Leaving limbic man behind, let's consider healing the "bigger stuff", like cancer, brain damage... any of the heavyweights. Now, it's absolutely true, that we heal with consciousness, but one does not have to be more conscious to heal an untreatable disease or to repair irreparable damage. In fact, one may be totally self-involved, (which is diametrically opposed to conscious), and yet routinely perform apparent "miracles" of healing. Healing ones body is not necessarily a function of higher consciousness, but rather, a function of more focused consciousness.

In simple terms, if you focus on healing something, you will probably do it. This, at its most basic level is a function of the AIM Program of Energetic Balancing. You are compelled to focus on healing each and every imbalance (if it's in our database), 24/7... Until you have healed them. Again, that is healing ones body. In fact, there is almost no choice offered you, because healing ones body is survival and survival as we know is a very basic instinct. It is part of a package you should have gotten at no extra cost when you came here.

All that being said (or written) we do have a choice to make and we are, ultimately, the result of the power of our intention.

Here is the way it works. There is nothing random or accidental in the universe... or in its inhabitants. If you are born with the propensity for cancer, heart disease, etc (hereditary, ancestral, past life, karmic...?) and even if your propensity becomes an active reality at the level of you that is truly eternal your propensity for your disease is not causal, but is a symptom of a deep,

deeper, deepest problem. It is a symptom of a fundamental disease of your soul, and that disease of your soul can not be healed by you without increasing your consciousness.

I believe that to the extent that your (our) consciousness is not total and quantum, there is a fragmentation, a disharmony between your soul and the composite soul of the universe... which I call God.

I believe that as long as this disharmony exists we will develop "symptoms" which we call diseases. We may heal these "symptoms" such as cancer, heart disease, MS, but as we heal each one new "symptoms" will appear, and so on and so on, until each of us perceives or understands that these are symptoms and that the real disease is the choice we have made, and continue to make to separate ourselves from everything and everyone in the universe.

That separation is your only disease, and it is volitional. It is the cause, everything else is an effect.

So, this gives rise to an entirely new class of questions. Who separated each of us from our universe? What perpetuates that separation? How do we break this cycle? How can we regain our soul, rather than spend our lives waiting for the next symptom? Easy, or, at least, easily answered. As always, "the devil is in the details".

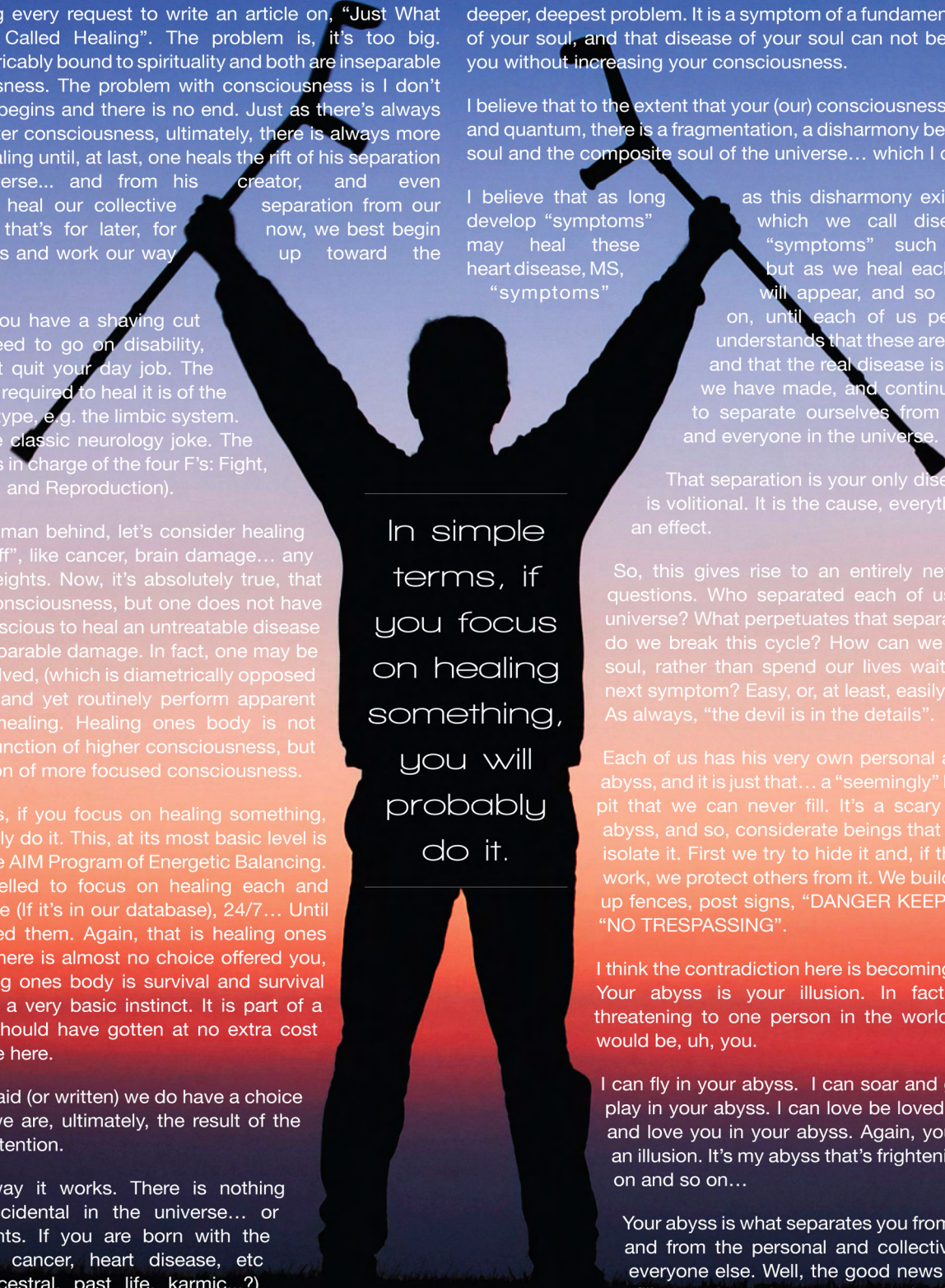
Each of us has his very own personal and private abyss, and it is just that... a "seemingly" bottomless pit that we can never fill. It's a scary place, the abyss, and so, considerate beings that we are, we isolate it. First we try to hide it and, if that doesn't work, we protect others from it. We build walls, put up fences, post signs, "DANGER KEEP OUT" and "NO TRESPASSING".

I think the contradiction here is becoming apparent. Your abyss is your illusion. In fact, it's only threatening to one person in the world, and that would be, uh, you.

I can fly in your abyss. I can soar and glide. I can play in your abyss. I can love be loved make love and love you in your abyss. Again, your abyss is an illusion. It's my abyss that's frightening. And so on and so on...

Your abyss is what separates you from your soul, and from the personal and collective souls of everyone else. Well, the good news is you can fill your abyss, just as you can heal your soul. The bad news is, you can not do it alone. You need the help of me and a few billion others who are ready, willing and able. All you need to provide is a little courage.

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The courage that is required is to face whatever it is you keep in your abyss, whatever it is you fear. Tear down your walls and fences. Remove your warning signs. Invite every curious creature in the universe to peek into your abyss and feed and pet the monster who lives there. Put a ribbon around its neck. Monsters don't do well with ribbons. There are a lot of curious creatures out there, and you know what's going to happen? It'll get over crowded, they're going to fill up that void and you'll have nothing left to hide from and no place to hide in. You will have healed your soul

from it's "original disease" and obviously, once that's gone you can't have any new symptoms. I could go on and on but I think you understand what I mean. All I can close with is, hopefully, we shall all find the courage to join hands and join forces and join souls... in the oneness. BINGO!



Stephen Lewis is the founder of EMC<sup>2</sup> along with Roberta Hladek and Evan Slawson. Lewis is the developer of The AIM Program of Energetic Balancing, a spiritual

technology that has nearly 50,000 people worldwide to heal themselves using their hologram. Lewis has earned degrees in homeopathy and acupuncture, both forms of energetic healing. Neither EMC<sup>2</sup> nor AIM diagnose, treat, cure or prevent disease. The AIM Program is a TOOL that participants can use to self heal. Energetic imbalances exist first in consciousness. It is the belief of EMC<sup>2</sup> that if energetic imbalances are removed from consciousness, they can neither manifest nor be sustained in the physical body. To learn more visit [stephenlewis.org](http://stephenlewis.org) or [aimprogram.com](http://aimprogram.com)

## Circumcision Decision is Clear Cut

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**American origin:** Routine infant circumcision started in the U.S. in the 1870s when it was promoted as a preventive cure for masturbation. Subsequent American circumcision studies claimed dozens of benefits, from treating blindness, deafness, epilepsy, clumsiness, indigestion, swollen feet, and mental disorders in the late 1800s to preventing sexually transmitted diseases today. Though the claims generally did not withstand scrutiny by medical policy committees, their continued promotion led to medical myths that were believed by doctors as well as the public. Circumcision is the only surgery in history ever advocated as a widespread means of preventing disease.

**Male attitude:** Male satisfaction with circumcision depends on knowledge about circumcision. The more men know, the more likely they are to be dissatisfied. Some men wish they had a choice about their circumcision. In summary, their feelings include anger, sense of loss and being violated, confusion, grief, shame, fear, distrust, and pain. For most men, lack of awareness and understanding of circumcision, emotional repression, and fear of disclosure help to keep circumcision feelings a secret.

**Why Americans Circumcise:** Communication between the physician and parents about circumcision is often insufficient for informed parental consent, largely because of emotional discomfort with the subject. A so-called neutral or balanced presentation

of circumcision to parents is preferred by physicians and childbirth educators so that parents can feel "comfortable" with whatever choice they make, but it does not provide accurate and complete information. A national survey showed that doctors typically mention only three of eight common categories of complications and risks of circumcision to parents. Furthermore, myths about conformity and health benefits die hard.

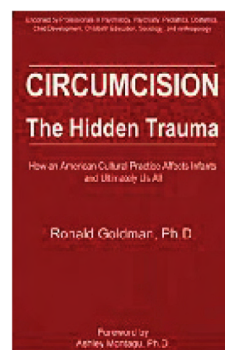
The solicitation of circumcision by hospital personnel suggests that it is an approved medical practice when it is actually a cultural practice. Defending circumcision requires producing overstated medical claims about protection from potential future harm and minimizing or denying the actual harm. Those men who most strongly insist on circumcision for their sons are least aware of the effect their own circumcision has had on them physically, sexually, and emotionally. Parents do not know what they are choosing, and physicians do not feel what they are doing. The separation of the decision maker from the decision implementer helps to perpetuate the pain.

**Ethical Action:** Circumcision knowledge and awareness come with an ethical challenge. When the welfare of a newborn infant is at issue, neutrality is unacceptable. One must take a stand. Silence gives implicit permission for more circumcisions. Passivity is complicity. To be opposed to circumcision requires action. For this reason, some doctors and nurses refuse to

perform or assist with circumcisions even though it may result in lost income.

Some people may have difficulty being motivated about the circumcision issue. They value only what they perceive affects them personally and directly. If they are circumcised or have circumcised sons, the typical attitude is, "It's done, and there is nothing I can do about it."

By withdrawing to our own little worlds and leaving the rest of society to take care of itself, we make a costly mistake. To think that newborn infants can be subjected to circumcision without its having any impact on others ignores the interconnectedness of all life. What we do about circumcision today for the next generation can help affirm our connectedness to others and prevent needless pain.



Ronald Goldman, Ph.D., is a psychologist, author of *Circumcision: The Hidden Trauma—How an American Cultural Practice Affects Infants and Ultimately Us All*, and executive director of the *Circumcision*

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