



# LIFESTREAM

NAEH Newsletter

Volume II Issue 3

September 2012



Fall is here! The hot summer is fading into cool fall breezes as we move through the changing seasons and cycles of life.

The 2013 NAEH Conference will be *Cycles of Life: Before Birth through Death and Beyond*, April 26-28. We hope that some of our membership will submit ideas for presentations.

Concurrent with that theme, Diane Rolke, a hospice nurse, shares with our readers a touching end of life account she experienced in her job. The name has been changed for reasons of confidentiality. Thank you, Diane for sharing this touching story!

In *Fran's Facts*, Fran Oppenheimer focuses on high blood pressure, a condition that we likely have, or will have, experience with in treatments.

Stephanie Urdang provided a wonderful fall recipe, comfort food that is healthy and delicious!

Those who attended the conferences have met Auntie Karana. In this issue, we introduce Auntie Karana to the rest of the membership! Auntie is waiting to answer your Esoteric Healing<sup>SM</sup> questions!

So, we hope you take some time to snuggle up with this newsletter and see how our community is growing.

Kelly Yoakam

**Tell us your stories! How has Esoteric Healing impacted your life?  
Do you have an yummy recipes you can share with us?**

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# Say Our Stories

## *End-of-Life Story*

by Diane M. Rolka, December 2009

“Uh oh,” I judgmentally thought to myself as I walked by and glanced into the Hospice House patient room 100. There in bed sat a heavy-set, bald-headed person and I wondered, “Is this patient a man or a woman and what is the diagnosis?”

I’d been working the midnight shift as a registered nurse for six months and was appreciating the variety of challenges working at the Hospice House; not the least of which was my personal struggle being nonjudgmental about what appeared unusual to me. I realized that once again I was jumping to conclusions. In the nursing report between shifts, I soon found out that the occupant was an extremely anxious woman named Tessa Kay. She was in her late 50’s with terminal lung cancer. To be a resident of the Hospice House a patient needed to have a life expectancy of less than six months. Tessa Kay was my patient that midnight shift and many nights thereafter. Her middle name piqued my interest as it was the same as my 23-year-old daughter, Emma Kay, and we began to make a unique connection as our hospice relationship evolved.

Tessa Kay had no local immediate family. Her history was one of illicit drug use, alcoholism, and cigarette smoking. She intensely wanted to be pro-active with her caregiving staff at the Hospice House and was interested in all aspects of her hospice care. Tessa Kay was curious about all of her medications and treatments and was adamant in arranging her portable oxygen. Her prescribed medications, common to lung cancer patients to address frequent bouts of shortness of breath and generalized pain, essentially involved liquid oral morphine for pain and shortness of breath, anti-anxiety medication, and nebulized breathing treatments. To better facilitate and customize her plan of care, the Alcoholics Anonymous group she attended actually came to the facility to include her for meetings.

Initially, Tessa’s mobility at the facility was independent; however, she soon declined physically. I’d see her dashing from her bed to her bathroom to alleviate feelings of breathlessness. On a broader plane, she was enthusiastically planning on traveling hundreds of miles out of state to visit extended family. I wanted to support her last visit but felt she was being ridiculous with overly ambitious plans—after all, we were still working on her shortness of breath and pain issues! Fortunately, Tessa Kay acquired a motorized scooter and progressed to maneuvering around the facility halls and dining room with relative ease. Gradually, she relinquished out-of-state travel plans as her energy level diminished. Part of her activities involved faithfully charging the scooter battery in her room and keeping stock of her portable oxygen tanks. She’d zip down the hall on her scooter and avail herself to frequent cups of coffee in the dining room. She continued to be challenged by her awareness of the names of her caregivers at the facility as well their respective capacities. She was persistent in being able to comprehend the rationale for each component of her care as it evolved.

Tessa’s social circle included several close friends, her AA group and her pastor. As our caregiving relationship grew, she became curious about my family. She was fascinated with my adventure in homeschooling my four children. Specifically, my only daughter, Emma Kay, had just begun her solitary hike of all 2,100 miles on the Appalachian Trail. Tessa Kay would offer a multitude of opinions such as: “Your daughter needs to be more cautious being alone.” and “You haven’t heard from her! You tell her to call home more so you know where she is!” We’d laugh together as we shared an appreciation for the unusual and the strident energy of individualism that my daughter embodied.

After weeks at the Hospice House, her routine grew more comfortable. She was becoming increasingly satisfied with her hospice care and resolving her end-of-life issues of anxiety, breathlessness and pain. One night when I was assigned to her care, she was particularly anxious and waved her hand signaling me to come into her room and patted her bed.

“Do you have some time to talk?” Fortunately, that night my patient assignment was light.

“Ya, what’s up?”

She explained, “You know that relative I have out of state? Well, he just phoned me and he has bad news...he has a form of leukemia that is fast moving, and...” she hesitated for a moment, “I...I want to tell him about hospice. I’m so sad that now he can’t even go to his own son’s wedding hundreds of miles away, and that’s not all. The actual

wedding date is my relative's own anniversary and that's very special to him!" Tessa Kay was frustrated with feeling sadness. Then, with a subtle look of satisfaction, she shared with me that she did, indeed, broach the subject of hospice with him. She appeared astonished by her own confidence in recommending hospice care for another person in an end-of-life situation.

With an awareness of the boundaries of patients' rights as well as wanting to find a common language, I inquired if she'd be okay with me "praying with her." She was amenable, so we held hands and I voiced calming and supportive words for both her and her family's peace and well-being. During our brief exchange, I noticed her breathing becoming labored. I sought to offer assistance. My interest in complementary and alternative medicine for the past several years has led me to study a form of energy bodywork called Esoteric Healing. My instructor and practitioner was a local physician. The website [www.ineh.org](http://www.ineh.org) states:

The International Network of Esoteric Healing (INEH) is a group of people dedicated to the practice and study of Esoteric Healing.

Through meditation, Esoteric Healing uses triangles of etheric energy relating the centres and the endocrine system in order to release the unimpeded flow of the life principle and soul energy which can lead to wholeness and healing.

I explained to Tessa Kay how I'd been learning Esoteric Healing and that it works on the energy systems of the body. With her permission, I could practice what I had been learning with her. I shared how my instructor would encourage her students studying Esoteric Healing to "Practice, practice, practice!" Tessa Kay nodded affirmatively. I mentioned that this form of energy work does not involve direct touch and I would position my hands a distance from her body to deliver the treatment. I silently aligned and attuned myself and positioned my hands with the intention that "energy follows thought." Before proceeding, I intoned, "healing be according to the will of her soul." After several minutes, as the treatment concluded, Tessa Kay's eyes widened and she said, "Wow, I can breathe better now...thank you."

As our relationship grew, Tessa Kay shared stories about her youth or inquired about the location of my daughter on the Appalachian Trail. She continued to offer a plethora of suggestions and opinions for me to communicate to Emma Kay. Occasionally, Tessa Kay would ask for an Esoteric Healing treatment and, if the timing was inconvenient for me, I would let her know that I could perform a "distance healing" as soon as I was able. I explained it as "focused prayer." She eagerly agreed and told me later that she'd experienced a similar measure of relief. Additionally, Tessa Kay began telling staff on other shifts about "the midnight nurse who helped so much." I felt a curious mixture of happiness and embarrassment. When challenged by breathing and pain levels, we continued her medications and various treatments and she experienced an improved level of comfort. Treating end-of-life issues often requires frequent adjustments to the individualized hospice plan of care for lung cancer to address increasing bouts of shortness of breath, pain and anxiety.

One sleepless night, Tessa Kay boarded her scooter to track me down and, upon finding me, she motioned her hands in a panic towards her chest and looked pleadingly for a treatment and I was able to help. Another night while I was in her room Tessa Kay confided in me, "I did things I shouldn't have when I was younger and...and...saw an aura; so when you talk about energy, I kind of know what you're talking about." Later, during an Esoteric Healing treatment for her shortness of breath, I sensed a pronounced electrical tingling sensation in my hands. Moments later, she expectorated a large mucous plug and with wide eyes said, "I've never had *that* happen before." I re-checked her and sensed that the energy sensation had shifted and diminished.

During the last two weeks of her life, Tessa Kay inquired why I wasn't being assigned to her care. I explained that to better care for all 30 of our Hospice House patients the staff typically rotated assignments. She puffed in exasperation, "But I want you!" Attempting to alleviate her anxiety, I said "I'm generally available and I will help as I can."

Tessa Kay's mobility suffered as she often climbed on her motorized scooter to fend off sleepless nights. On the eve of her passing, she slept in her bed for about an hour at the beginning my shift; and then boarded her beloved scooter to navigate the halls of the facility. That shift her care was assigned to another nurse. The change in patient assignment continued to befuddle her as she complained, "Why can't I have *you*." I, too, felt confused with the facility's boundaries and again patiently explained that we nurses rotated patient care but that I continued to be available. Later in my shift, she clumsily spilled her morphine nebulizer treatment and required a refill. I was free to prepare and assist her. While in

her room, she directed me to a small, yellow legal tablet with handwritten notes she had dictated to her pastor regarding her continued questions and observations on her hospice care. Neither of us realized at this point that she was in “terminal restlessness.” For some patients, that is a period preceding imminent death evidenced by heightened physical and emotional activity. Tessa Kay required more frequent anti-anxiety medication as well as short-acting oral morphine to facilitate comfort.

As the shift progressed, she motored her scooter down the hall attempting to locate me again as she frantically attempted to talk herself into a more relaxed state. When she found me at the far end of the Hospice House hall, she asked for an immediate Esoteric Healing treatment and rushed to explain, “I’m trying to calm myself down!” and then she detailed that she was distressed to be “seeing double, even triple and hallucinating.” I agreed to do an esoteric healing as requested and her breathing and anxiety calmed.

My mid-shift break followed, she tailed me on her scooter and said, “I’m going to get some coffee.” I tried to reassure her saying, “I’ll be back to do another treatment after I review my Esoteric Healing text. I want to focus on treating your eyes. I was just at another intensive Esoteric Healing workshop last weekend and we covered that information.”

Our conversation switched gears and I shared with her my personal challenges remaining nonjudgmental, particularly with people who smoke cigarettes often resulting in terminal lung cancer. It was an issue that I had struggled with many years ago with an uncle’s death, long before my interest in hospice nursing. I shared that I believed that I had finally come to a more peaceful place. Suddenly, the table of caregiving reversed. Tessa Kay gently grasped my hand and said, “I feel you. I feel your aura.” Caught off guard, I tearfully expressed my deepest appreciation as I methodically prepared her next breathing treatment.

Due to her weakening physical state, I offered to hold the nebulizer device to her mouth as she continued to perch on her scooter. As I held the device to her mouth, my mind wandered and I realized that this episode was her most severe so far. At that, Tessa Kay’s body jerked almost imperceptibly and she made a sour comment about the other nurse assigned to her care while I continued to hold her nebulizer. Soon, I noticed her drooling and that her leg slipped off the scooter. Her hands and lips took on a dusky hue. I vainly called her name, and grabbing my dangling stethoscope, I listened to an absent heartbeat and the silence of the usual rhythmic puffing of the on-demand oxygen tank. Incredulously, my own breath paused; she had died in the presence of her “favorite nurse.” I felt a mixture of overwhelming sadness with her passing as well as excitement that she had achieved a new level of peace.

True to Tessa Kay’s passion for life, an element of levity prevailed with her passing. Most deaths at the Hospice House happen naturally with the patient in bed. However, true to the independent spirit of my patient, she chose the unusual position of breathing her last breath in my presence while upright on her beloved scooter.

My life was enriched through my relationship with Tessa Kay. I was honored and humbled that she felt most comfortable to pass with me at her side. My confidence in using Esoteric Healing increased as well as my desire to practice. Tessa Kay completed her life journey in my presence; and, yes, Emma Kay did complete all 2,100 miles of the Appalachian Trail from Georgia to Maine. Incidentally, I was with my daughter, too, for a final section of her hike in Maine later on in the year--thanks, perhaps, to the many suggestions and opinions of my patient.

## **NAEH Conference 2013**

### ***Cycles of Life: Before Birth, Through Death, and Beyond***

Because we have so many talented members, the committee is calling for submissions to present at next year's conference. If you, or another member you know, resonate with this topic and would like to present at the conference, develop a topic and contact us at [info@nafeh.net](mailto:info@nafeh.net) by December 1, 2012.

## Fran's Facts - Focus on High Blood Pressure

by Fran Oppenheimer RN, LMT, CPEH

As Esoteric Healing facilitators we will inevitably come in contact with people who have various disease processes or conditions. Although we do not treat or diagnose these conditions, it is in the best interest of both the client and ourselves to be familiar with some of these ailments. In this column I will be taking a look at some of the more common conditions that we may see in our practices and exploring them from both a physical and metaphysical perspective.

### **High blood pressure (Hypertension) –**

**The American Heart Association estimates that high blood pressure affects approximately one in three adults in the United States which equals about 73 million people. Based on these figures it is easy to see that we will come in contact with clients that have high blood pressure in our practice of Esoteric Healing. Therefore it is important for us to know what this disease is and how it affects the body over time.**

High blood pressure, also called hypertension, is a condition where there is higher than normal pressure in the arteries. Arteries are the blood vessels that carry blood away from the heart to all the tissues and organs of the body. High blood pressure typically develops over many years and it can have a profound effect on many systems of the body.

Blood pressure is recorded using two numbers that are called systolic and diastolic. Normal blood pressure is below 120/80. Blood pressure between 120/80 and 139/89 is called "pre-hypertension", and a blood pressure of 140/90 or above is considered high or hypertensive.

The first, or top, number is the systolic blood pressure and this corresponds to the pressure in the arteries as the heart contracts and pumps blood forward into the body via the arteries. The second, or bottom, number is the diastolic blood pressure and represents the pressure in the arteries as the heart relaxes. The diastolic pressure reflects the lowest pressure to which the arteries are exposed.

One can have high blood pressure for years without any symptoms but eventually this may lead to disease of the heart, kidneys, eyes, brain (stroke) and the arteries themselves. This is why high blood pressure is sometimes referred to as a 'silent killer'.

Excessive pressure on the artery walls caused by high blood pressure can damage blood vessels, as well as organs in the body. The higher the blood pressure and the longer it goes uncontrolled, the greater the damage.

### **There are two types of high blood pressure:**

#### 1) Primary (essential) hypertension –

This is when there is no medically identifiable cause of high blood pressure. This is the most common type of high blood pressure (95%) and tends to develop gradually over many years.

#### 2) Secondary hypertension –

Some people have high blood pressure caused by an underlying condition. This type of high blood pressure tends to appear suddenly and cause higher blood pressure than primary hypertension.

Various conditions and medications can lead to secondary hypertension, including:

- Kidney problems
- Adrenal gland tumors
- Certain medications, such as birth control pills, cold remedies, decongestants, over-the-counter pain relievers and some prescription drugs
- Illegal drugs, such as cocaine and amphetamines

**Some risk factors for developing high blood pressure are:**

- **Age**
- **Race.** High blood pressure is more common in African Americans than in Hispanic or Caucasian peoples. Serious complications, such as stroke and heart attack, also are more common in African Americans.
- **Family history**
- **Being overweight or obese**
- **Not being physically active**
- **Using tobacco.** Smoking or chewing tobacco immediately causes an immediate temporary rise in blood pressure. The chemicals in tobacco can damage the lining of the artery walls causing the arteries to narrow, increasing blood pressure.
- **Too much salt (sodium) in the diet**
- **Drinking too much alcohol**
- **Stress**

**Uncontrolled high blood pressure can lead to:**

- **Heart attack or stroke**
- **Aneurysm**
- **Heart failure**
- **Kidney damage or failure**
- **Thickened, narrowed or torn blood vessels in the eyes**
- **Trouble with memory or understanding**

**Areas of the body that are involved in the regulation of blood pressure:**

- Medulla oblongata of the brain which contains an area called the Cardiovascular (or CV) center
- The heart organ
- Autonomic nervous system: Sympathetic nervous system raises blood pressure and Parasympathetic nervous system lowers blood pressure.
- Special receptors in the aorta and internal carotid arteries
- The kidneys and the adrenal glands

These areas work to regulate heart rate, blood vessel diameter, and blood volume using nerve impulses and hormones.

In Esoteric Healing we are taught two triangles for the treatment of high blood pressure that involve the heart or heart center, ajna, and spleen or spleen minor.

Alan Hopking in his book Esoteric Healing, page 200, reminds us that these triangles are a good ‘tonic’ for helping the body to regulate blood pressure but that they are not to be used by themselves. The practitioner is reminded to stay tuned in to the direction of the soul and to treat the patient as a whole.

Hopking goes on to offer a third triangle that uses the alta major, vagus point and basic center and suggests that this triangle be used with the first triangle(s). This triangle would impact the medulla oblongata, heart, parasympathetic nervous system via the vagus nerve, and the kidney and adrenals thus creating a more specific focus of treatment.

While it is important to treat the heart center and circulatory system, in addition to the triangles for high blood pressure we must remember that when treating patients we must be open and receptive in our treatment protocol while still bearing in mind the organs and/or systems that may be affected in each individual patient.

On the metaphysical side, Dr. Christine Page, in her book Frontiers of Health page 112, states that high blood pressure is a “secretive” disease with almost no symptoms until it finally explodes outward in the form of a stroke or heart disease. She observes that her patients with high blood pressure appear to be calm and laid back while

their inner state is actually on high alert over fear of being found out, being out of control or not being good enough. This inner turmoil leads to building pressure which eventually leads to outer disease. She advocates dancing, singing, writing or other creative expression to release the inner tensions.

Louise L. Hay in her book *Heal Your Body*, page 19, feels that high blood pressure represents a long standing emotional problem that has not been solved. She offers the affirmation, "I joyously release the past. I am at peace" to help with the release of old emotions.

High blood pressure or Hypertension is a condition that we will inevitably see in our practice of Esoteric Healing and it is important that we become familiar with the condition and its effects on the body. Esoteric Healing works beautifully to assist the body's homeostasis and balance. As practitioners we must also support our patients in making good lifestyle decisions which should include medical support as untreated high blood pressure can lead to serious complications over time. DK, in *Esoteric Healing* by Alice Bailey, pages 28 and 48, reminds us that mankind is indebted to the medical profession and that it is by honoring and group effort of all healers that medicine will take on a new expression of usefulness and enter the new age of healing.

Fran Oppenheimer is a certified practitioner of Esoteric Healing and has been actively practicing the healing arts for almost twenty years. She is also a Registered Nurse and Licensed Massage Therapist and delights in exploring the physical and metaphysical connections to dis-ease in the body. Fran has an active practice in Gainesville, Florida.



## If aspects of Esoteric Healing have you stumped - ask Auntie!

Q: We are supposed to read Alice Bailey's *Esoteric Healing* and while I really want to, I can't get through the first page. The language is so dense and foreign, her concepts so complicated, that after a few minutes, I have either gotten totally lost or worn out and her words don't penetrate my mind. What can I do to make this task accomplishable?

A: You may be comforted by knowing that you are not alone in this reaction to Alice Bailey's transmissions of Djwhal Khul.

Like any translation from one culture to another, if the phrasing is not adjusted accordingly for the new readers, it will sound foreign. In the case of *Esoteric Healing*, as well as Bailey's other volumes from D.K., the words were recorded as the information came through and altering them would have changed the original concepts.

The best way new readers of *Esoteric Healing* can begin to tackle the information is to be in a group and to read it out loud or listen to it being read, with a discussion after every few paragraphs. This practice insures that everyone comprehends what's being read before moving forward.

Reading *Esoteric Healing* produces the same effect as studying the subject in classes: at first, it may seem that you are in a foreign land, or that you recognize the land but don't know where you're going. As the reading continues and you include a regular meditation practice, the language and its rhythm become more natural, knowledge is accumulated, and at some point it's clear that you are building a framework. After a while those architectural bones start looking familiar, then integrated. You'll find that you have made Esoteric Healing and its healers your spiritual home.

Auntie Karana

Please send your questions to Auntie Karana at [info@nafeh.net](mailto:info@nafeh.net)

Q&A written by Stephanie Urdang

## National Association for Esoteric Healing NEWS

\* **2013 ELECTION** At the General Membership meeting at the 2013 Conference, 4 members will be elected to the Steering Committee. The official calls for nominations will be in the January newsletter, but begin thinking about NAEH members who would serve well in that capacity.

\***CERTIFICATION:** There are 20 members who have been accepted into the certification program for 2013! The second group certified practitioners of Esoteric Healing (CPEH) will be introduced at the 2013 Conference. Blessings to the candidates for this endeavor!

If you are considering the certification process for next year, it's not too early to begin logging your treatment times!

\* **TEACHERS** are teaching classes in several states. Wallace Smith is now teaching in the Detroit Area. Kelly Yoakam is teaching in Arkansas. Coral Thorsen is teaching in North Carolina and Florida. Barbara Briner is teaching in Michigan and Florida. See the website at [www.nafeh.net](http://www.nafeh.net) for more details on class schedules.

\***TEACHER TRAINEES:** There are five teacher trainees: Caroline Padgett—NC, Bonnie Dysinger—MI, Fran Oppenheimer, Maria Hubbuch, Katie Mulligan—FL.

## National Foundation for Esoteric Healing NEWS

\* The NFEH is interested in developing research grants to study energy medicine. If you are interested in participating or if you would like to develop prospective grants to support our organization through fundraising, please let us hear from you! Contact us at [info@nafeh.com](mailto:info@nafeh.com)

\* We continue to move forward as an organization!

## Meditate With Thought

It is Spirit's fire within the heart that sustains the bridge between the personality and the soul. Unless we invite that fire to ignite our hearts, in the stillness of meditation, we block the soul's ability to carry us upward.





## Recipes: Solar Plexus Savory

Stephanie Urdang

### Stephanie's Butternut and Apple Soup

As the winter squashes begin to ripen and fill the baskets of the markets, and when the nights start to cool, this soup is the perfect thing. It can be served to six or seven people in small cups as a first course. As the main course with a hearty salad, it serves four to five. It keeps well for a few days, is good reheated and lovely for lunch. And it's even delicious cold.

Preheat the oven to 375 degrees.

Split a butternut squash lengthwise down the middle and scoop out the seeds with a spoon. Place both halves in a shallow baking dish face down,. Cover with enough water to keep them from drying out, but not more than a quarter to a half-inch.

Bake uncovered for about 45 minutes, checking halfway through to make certain there is still enough water. Test with a knife. It should be still partially firm, yet tender.

Remove from the pan and water and let the squash cool enough to handle.

Meanwhile, saute a large onion in olive oil in a large soup pan. When it's transparent, add two Fuji's or other tart/sweet organic apples, peeled and cut into small pieces. Cook until onions and apples are tender.

Score into cubes the flesh of the squash. Scoop from the shells into the onion/apple mix. Add a 32-ounce carton of healthy chicken or vegetable stock. I always use organic and Imagine and Pacific are both good brands. Sprinkle with salt, only if needed, and freshly ground black pepper. Test the broth and if very strong, you can add a little more water.

Heat through and continue to cook until everything is tender. Blend the soup in the same pan with a hand blender until smooth, or you can transfer it in small batches to a counter blender for the same effect.

To serve, sprinkle each bowl of soup with a light grating of fresh nutmeg, or use fresh thyme leaves as a garnish for a savory finish instead of sweet. I prefer the nutmeg but for a change the thyme is really nice.

Enjoy in good health.



## Happenings

- **Membership Dues:** October begins a new membership year for the Association. This is the first year that the Membership year will be October 1 through September 30 of the next year.
- **NAEH Conference for 2013:** *Cycles of Life: Before Birth, Through Death, and Beyond* is the theme of next year's conference. It will be held on April 26- 28, 2013 at the Okemos Conference Center. Mark your calendars.
- **BECOME A CERTIFIED PRACTITIONER**  
You can start your certification process NOW. The deadline to apply for certification in 2013 has passed, but it's not too late to begin thinking and working toward certification in 2014. Find out all you need to know [HERE](#).

- **To increase the visibility of our NAEH:** Please search NAEH or Esoteric Healing in your Google search engine. Each time you search, you increase the probability of NAEH showing up first for a new visitor...please do this as often as you can to help spread the word.
- **Say Our Stories:** The NAEH Publications committee is looking for interesting articles you might be interested in writing to publish in LIFESTREAM – JOURNAL or in the LIFESTREAM NEWSLETTER. If you have an idea you'd like to share in which you use Esoteric Healing<sup>SM</sup>, please e-mail it to: [info@nafeh.net](mailto:info@nafeh.net).
- **Tell us about you!** Do you have a unique skill set that you would like to share with the organization? Have you written a book that you would like to be reviewed in one of the publications? Please contact us at [info@nafeh.net](mailto:info@nafeh.net).
- **Facebook:** If you are a Facebook user, join us by typing in the search box "National Association for Esoteric Healing" and send us your request to join. You will be connected with other NAEH members who may help provide healing solutions to some tough issues, share new ideas, see what others are doing in the field of Esoteric Healing.
- **Esoteric Healing Practitioners in the Detroit area:** There is a practice group meeting in Royal Oak. Please contact Julie Lieberknecht or Ruth Perry if you are interested in joining. Info will be e-mailed to those interested. [julie\\_lieberknecht@yahoo.com](mailto:julie_lieberknecht@yahoo.com) 313-333-9240, [ruthperry@mac.com](mailto:ruthperry@mac.com).
- **Esoteric Healing Practice Group in Okemos:** Meets on the first Tuesday of the month at the Institute for Bioenergy Studies, 5:30-7:00pm. For more information or if you'd like to join the mailing list, contact Bonnie Dysinger [bkdysinger@aol.com](mailto:bkdysinger@aol.com)

Send us informative websites of clips regarding Esoteric Healing, Meditation, and Metaphysical Studies. Contact: [info@nafeh.net](mailto:info@nafeh.net)

## **Wanted: Pictures for the 2013 *Lifestream* Journal covers**

NAEH Members – send us your photos for consideration to use on the Spring and Fall 2013 *Lifestream* Journal covers. If the photo you submitted is selected, we will send you a \$25 Visa gift card and the photographer will be credited for the cover illustration on the Table of Contents page of the Journal.

Requirements:

- \* Photo must be submitted by an NAEH member (although the photo does not need to be taken by an NAEH member).
- \* Photographer of the picture must be willing to sign a release allowing the NAEH to use the photograph on the NAEH Journal cover and/or NAEH website. Signed release must be received back to the NAEH office within 7 calendar days.
- \* Photo must be have PORTRAIT orientation.
- \* Photo must maintain picture quality when expanded to size 8½ x 11.
- \* No people are to be in the picture.
- \* Photo is to be active and descriptive of life force, for example - light, wind, water, etc.
- \* Deadline for submission is February 1, 2013.
- \* Submit the photo by e-mail to [info@nafeh.net](mailto:info@nafeh.net). In the subject line type – Journal cover entry.

The NAEH Publications committee will select two pictures to use for the 2013 Journal covers. Submitters of the chosen photos will be notified by e-mail along with an attached release. Once the signed release is received back at the NAEH office, we will mail your \$25 Visa gift card.

## **Lifestream Newsletter Links September 2012**

Higgs Boson Particle Discovery and Why It Matters...

<http://www.nytimes.com/2012/07/14/opinion/weinberg-why-the-higgs-boson-matters.html?pagewanted=all>

The rhythm set by the New Group of World Servers is a three year cycle

[http://www.lucistrust.org/en/arcane\\_school/quote\\_of\\_the\\_month](http://www.lucistrust.org/en/arcane_school/quote_of_the_month)

With One Voice: A documentary that brings together mystics from fourteen different spiritual traditions to share their perspectives on the unifying truth that transcends all religions

<http://www.withonevoicedocumentary.org/>

Self-empowerment, spiritual, personal growth and transformational information

[MiraclesandInspiration.com](http://MiraclesandInspiration.com)

Inspirational Stories

<http://www.guideposts.org/inspirational-stories>

