

Harry Edwards

Harry Edwards (1893-1976) was a celebrated British spiritual healer of the mid-twentieth century, who at the peak of his career received thousands of requests for help each week. Edwards faced determined critics in the religious and medical establishments, with whom he engaged in vigorous controversy, but he also found some support among doctors and clerics. This article describes his life and work, and also inconclusive attempts to confirm the true extent of his cures.

Introduction

Henry (Harry) James Edwards (1893-1976) was the best known spiritual healer in the English-speaking world in the mid-twentieth century. At the peak of his career he was giving public demonstrations of healing at venues ranging from local Spiritualist churches to the Royal Albert Hall. In addition to weekly clinics, he handled around ten thousand requests per week for distant healing from his base at Burrows Lea, Shere, in Surrey, for which he employed a staff of sixty and a team of voluntary healers. Edwards made no charge for healing, but accepted voluntary donations from all except pensioners.

At public demonstrations, Edwards often invited to the platform individuals suffering from organic conditions such as osteoarthritis, which he said he found responded most readily to healing. He also invited doctors present to examine the volunteers and to comment on any improvements that followed healing. These were frequently immediate, although he stressed that an instant cure could not always be expected, and that the improvements might not be permanent, recommending that patients seek further healing from local healers. His activities were reported widely in the media.

Edwards was a Spiritualist, but advocated a non-denominational approach to healing theory and practice. He faced much hostility from the medical profession, but spent much of his career attempting to form a working relationship with it, gaining support from individual medical practitioners in the UK and abroad. He was instrumental in promoting the UK National Federation of Spiritual Healers (NFSH) when it was founded in 1954, becoming its first president. In consultation with the medical profession he designed a formal training program for healers, and this led in 1959 to the creation of a code of conduct, allowing NFSH healers to work in around 1600 UK hospitals. In 1977, a year after Edwards's death, the General Medical Council (GMC) gave permission for doctors to refer patients to accredited healers,^{[1](#)} a development that would have been inconceivable without his influence.

Edwards also faced hostility from the established Church, despite the support of some individual clerics. A public controversy erupted when, as part of the Archbishops' Commission on Divine Healing in 1954, he was asked to advise a medical panel on how to reintroduce healing to the Church's activities and supply case histories. The war of words lasted for many years, and brought both the Church and its medical advisors much criticism in the press.

During his lifetime Edwards was a popular public figure who, despite his Spiritualist beliefs, presented healing in a non-religious, down-to-earth manner, and did not demand either faith or money for his services.² Even today, anecdotal accounts of encounters with Edwards are common, especially in the Spiritualist and wider healing communities, where he remains something of a sainted figure. The present author has encountered a number of people who witnessed Edwards at work, including two who claimed to have seen him, at small demonstrations at local Spiritualist churches, dissolve large goitres in a matter of minutes. On one of these occasions Edwards told the audience a humorous story while he waited for the goitre to disperse.

Even Dr Louis Rose (see below), a critic who questioned the validity of Edwards's claims, found him co-operative and wrote of him in almost affectionate terms.

Biography

Early Life

Edwards was born on May 29, 1893, in Islington, North London, the eldest son of a print compositor who was a rationalist and atheist. According to his biographer and healer colleague, Raymus (Ray) Branch, Edwards as a child was '...a holy terror of the first order', among other things causing the derailment of railway trucks near the family home in Wood Green and the premature release of a hot-air balloon at Alexandra Palace.³

Branch credits a sudden transformation in Edwards's character to a wish to impress a local girl, also an interest in the scouting movement and its egalitarian ideals. As a teenager, Edwards became politically active while apprenticed to a publishing house as trainee printer. He joined the Young Liberals and, aged 16, delivered his first lecture in support of the anti-vivisection movement.⁴ He continued to gain experience of public speaking at political rallies.

At the outbreak of World War I, Edwards enlisted in the 2nd/6th Cyclist Battalion of the Royal Sussex Regiment, which the following year was sent to India. He was despatched to the North West Frontier where he was seconded to the King's Own Sappers and Miners and promoted to lance corporal. After undergoing rudimentary training as an engineer, Edwards was sent to Baghdad, where he was commissioned in the field to the rank of captain. He was then despatched to Tikrit to supervise the laying of a railway between Tikrit and Baghdad.⁵

Edwards later said this was when the first signs of his healing ability appeared, although he did not recognize it at the time. As the representative of the military authority in a remote district, he often had to treat serious injuries equipped with little more than bandages and iodine, and was surprised by the unusually high recovery rate. A notable example was when a local sheik brought his critically ill-mother for treatment: Edwards could do no more than apply tooth cleaning powder, yet she rapidly recovered.⁶ As a result of these healings Edwards said locals called him by the title 'Hakim', meaning healer, ruler or judge.

Edwards returned to Britain in 1921 and was obliged to go back to printing, a trade he had come to detest. He opened two shops in Balham in South West London, bought a house nearby, and married his fiancée Phyllis. There followed, in his words, 'twelve years of struggle', which ended when his brother took over the business to allow him to focus on healing.

Determined to address post-war social injustice, Edwards also returned to politics, standing unsuccessfully for the Liberals in local and national elections. [7](#)

Healing Career 1936-1945

Edwards was initially sceptical about Spiritualism and mediumship. He was a keen amateur conjurer and had friends in the Magic Circle. His first visit to a Spiritualist church – in Clements Road, Ilford, in 1924 – was carried out with the intention of exposing trickery. However, he was unable to account for the seemingly accurate content of messages relayed to him by the medium. [8](#)

In the mid-1930s he attended a second Spiritualist service in a small church in Cloudsdale Road in Balham following the death of his nephew in a road accident, a family friend having claimed that a medium there had provided evidence of the boy's postmortem survival. Edwards became intrigued and began attending a development circle at the church with Phyllis. The medium is said to have told him that he was 'born to heal', and that there were spirit guides that wished to 'use' him. He started taking his family to regular Sunday services and to give addresses, to the embarrassment of his daughter Felicity, who had never heard him express an interest in religious matters. [9](#)

By his own account, at the development circle Edwards began to experience vivid clairvoyant visions, feeling impelled to speak. [10](#) He became fascinated by the experience and came to adopt a Spiritualist world view, in which such phenomena are regarded as being due to discarnate influence. He later became an accomplished trance medium, although he only demonstrated to close colleagues.

In 1937, [11](#) he was told by another medium that he should attempt absent healing on the next person that he heard of that was seriously ill. He did so for a patient suffering from consumption and pleurisy in London's Brompton Hospital, and claimed to have had a clear vision of the patient in his hospital bed. A week later it was reported that a big improvement had taken place in the condition of the patient, who eventually returned to work. [12](#) In another early case, Edwards agreed to a Mrs Newlands's request to help her husband, who had been sent home by St Thomas's hospital with terminal lung cancer. Newland had improved significantly by the following morning, and when he was re-examined at the hospital, the doctor at first doubted that the x-rays were of this patient. Edwards claimed that Newland was still alive eighteen years later, when his wife attended Edwards' sixtieth birthday dinner. [13](#)

Edwards's first attempt at contact healing occurred when a young woman called at his house asking for help for her sister Gladys, a bedridden consumptive with a collapsed lung. He visited the patient the next day finding her unconscious in bed.

Edwards, feeling 'embarrassed and self-conscious', placed his hands on her head; he then 'became conscious of a new experience for I felt rooted to the floor, my body alive with 'energy' which seemed to possess me and then to flow in a stream down my arms into my hands and thence into the patient.' The next day Gladys brought up a 'huge quantity of a red flesh-like substance' after which she was substantially improved. Edwards continued to give absent healing and Gladys was declared free of consumption early the following year, becoming a nurse at the sanatorium where she had previously been treated.[14](#)

Two of these early cases were reported in the local press and in the Spiritualist paper *Psychic News*, as a result of which Edwards was inundated with requests for healing. He commented, 'Needless to say, after these first healings, all my doubts vanished. I accepted Spiritual Healing as a truth and, though I had much to learn, I entered into the healing work with all my heart.'[15](#)

By the outbreak of war in 1939, Edwards was holding regular healing sessions at his home, and sometimes arrived at his house to find a long queue of people waiting outside. He also received many requests for absent healing by letter. At this point he started to formally record the progress of each patient.[16](#)

Edwards served in the Home Guard as a platoon commander, but his healing practice continued to be reported both in the local press, and in *Psychic News*. In 1944, his house was badly damaged by a V1 flying bomb, and most of his patient records were destroyed.[17](#) He moved his family and healing practice to Ewell in Surrey. Demands for healing increased further, requiring the employment of a full-time secretary.[18](#)

Healing Career 1945-1976

In 1946, Edwards purchased Burrows Lea, a large country house set in fourteen acres of private grounds, near the village of Shere in Surrey.[19](#) By this time he was receiving hundreds of requests for absent healing every day and eventually employed up to seventy staff (including 50 secretaries) to deal with the correspondence, while the healing intercessions themselves were carried out by a team of healers.[20](#)

The previous year, while giving a talk to a Spiritualist group in London, and feeling impelled to demonstrate healing, Edwards had asked anyone in the audience suffering from arthritis to come forward. This was Edwards's first public demonstration, and formed a procedural pattern for the many hundreds that would follow. Thereafter, he received requests to give public demonstrations all over the UK, many of which received press coverage, further adding to the demand.

On July 13, 1946, Edwards gave a healing demonstration in Croydon Civic Hall before an audience of a thousand, during which he treated conditions ranging from poor eyesight to arthritis. The *Croydon Advertiser* reported how, regarding the case of a small girl who suffered from curvature of the spine, 'To all appearances the spine was straightened...'[21](#) At this demonstration Edwards met Olive and George Burton, who went on to serve as his closest healing assistants at Burrows Lea and at

public demonstrations for many years, until they were succeeded by Ray and Joan Branch in 1974.

By the early 1950s, Edwards was a national figure, and his reputation was also growing outside Britain.

In 1951, Edwards began a long and cordial, although sometimes fractious, relationship with Dr Louis Rose, a sceptical psychiatrist who wished to conduct his own research into healing, and sought Edwards's cooperation. (See below, Controversy and Criticism)

In 1954, Edwards provided evidence for healing to the Archbishops' Commission on Divine Healing in an attempt to help the Church reintroduce healing into its ministry (see below, Controversy and Criticism). In the same year he became the first member and president of the National Federation of Spiritual Healers (NFSH) an organisation founded by John Britnell.[22](#) He remained president until his death.

For the rest of the decade Edwards intensified his efforts to bring healing to the attention of the clergy and the medical profession. He claimed to have gained the – largely covert – support of many doctors who referred patients to him secretly, declaring that doctors frequently expressed support to him privately.[23](#)

In 1959, the NFSH sought permission for its accredited healers to give healing in NHS hospitals. This was granted by 270 health authorities covering more than 1,600 hospitals. The NFSH drew up a code of conduct for healers to follow in order to avoid infringement of hospital regulations or medical ethics. In 1960, the British Medical Association, aided by the Bishop of Lichfield, began an active campaign to have permission withdrawn; however, this was resisted by the minister for health and only few hospital authorities did so. In 1961, accredited healers were still able to attend the sick in around 1,500 hospitals.[24](#)

Throughout the 1960s, Edwards continued to campaign on behalf of the healing movement, giving large public demonstrations both in the UK and abroad. By the early 1970s, Edwards and his staff at Burrows Lea still claimed to be handling around 10,000 requests for absent healing per week, with around 3000 of those coming from abroad (300 from the United States).[25](#)

Harry Edwards died aged 83, on December 7, 1976.[26](#)

Healing Methodology and Theory

General Beliefs

Edwards's beliefs about healing, which evolved over the course of his career, are summarized in his 1974 book *A Guide to the Understanding and Practice of Spiritual Healing*[27](#). He initially imitated the practices of other Spiritualist healers, such as dramatic healing 'passes', or blowing onto the affected area. But he soon abandoned them, claiming they were unnecessary and invited ridicule.[28](#) He was also sceptical of the idea that the 'aura' played any part in the healing process, claiming that it was merely 'a reflection of the person's spiritual, bodily, and mental

health states', and that 'one cannot heal a reflection any more than one can heal a shadow'.[29](#)

Edwards's beliefs about healing came to be based on a combination of his own, relatively informal, observations of his own practice and information that he communicated while in trance at private séances, as recorded by others present.[30](#) As a relatively sceptical outsider, he rejected many established practices and beliefs of Spiritualist healers, retaining only those aspects that seemed logical or reasonable according to his own experience and his layman's understanding of the medical literature of his time.

Edwards also castigated, very publicly, the established Church for not placing healing at the centre of its activities, and for over-reliance on arcane beliefs and practices not mentioned in biblical accounts of Jesus's healings.[31](#)

Edwards's religious/spiritual attitude to true 'Spiritual Healing' (or 'Spirit Healing', as he sometimes termed it) can be summarized briefly as follows:

- Healing is not the preserve of any religion or belief system, and any dogmatic attempt to present it as such works against the selfless attitude needed for true healing 'attunement', reducing its scope and effectiveness.
- The ultimate source of healing is divine, but God does not intervene directly or favour any one individual. Instead, spiritual healing is a form of mediumship achieved via a chain of attunement, extending from the source (God) via spirit healing 'guides', through the healer, to the patient.
- Healing does not depend upon religious faith on the part of either patient or healer; the mechanisms are independent.
- Disease is not a divine punishment but usually results from 'dis-ease' – deep-seated distress or frustration.
- Spiritual healing is the result of law-governed forces that induce change. Therefore successful healing depends on what is possible within the total scope of these laws (spiritual, psychological, biological and physiological).
- Set rituals and prayers have little or no impact on the healing outcome itself. The personal belief systems of healers are of secondary importance to the innate spiritual/moral qualities of the individual, the most important of which are compassion and empathy, which must be exercised without desire for reward.
- A number of healing mechanisms can come into play during healing, including psychological influence from the patient's psyche on what Edwards termed the 'bodily intelligence'; or the replenishment of the patient's depleted spiritual energies; or direct application of spiritual energies by healing guides through the healer to induce a chemical/physiological effect.

Healing Mechanisms

Edwards viewed healing as a 'planned act' that involves system of cooperating 'intelligences', namely: 'bodily intelligence' (primarily, the parasympathetic nervous system of the patient, coordinated by the brain); the conscious and subconscious ('spirit') minds of the patient and healer; and the mind of the spirit healing guide. These various levels of intelligence are brought into cooperation by

the state of attunement, and this facilitates the actual healing, which may operate on one or a number of levels.

Healing Intelligences

In *A Guide to the Understanding and Practice of Spiritual Healing*, Edwards described his ideas about the intelligences involved in healing work.[32](#)

Bodily Intelligence

Edwards defined the bodily intelligence as a bi-directional autonomic process governed, according to his dualist Spiritualist view of consciousness, by the physical brain without input from the higher aspects of consciousness ('spirit mind'). Without stating as much, he identified this mechanism with the parasympathetic nervous system. But Edwards extended the definition to encompass cellular, molecular and sub-atomic levels. He believed that each cell, and the atoms that make up each cell, all have a rudimentary intelligence devoted to their particular function.[33](#) Every individual intelligent component therefore communicates with every other in what, ideally, is a harmonious system of regulation that links the internal environment of the organism to the outside world.

Although largely autonomic in nature, the bodily intelligence is influenced by the emotional/mental state of the individual, for good or ill, and can be influenced consciously for the better by meditative practices. Crucially for Edwards and his view of healing, however, the bodily intelligence can also be influenced by other, external, intelligences; namely the mind of a healer which is 'attuned' to the mind of a healing guide/s.

Mind

Edwards maintained a dualist view in relation to consciousness and the mind, asserting that 'Man is both a physical and a spirit being *now*. He has a physical and a spirit body and a physical and a spirit mind.'[34](#)

To Edwards, both the physical and spirit minds were capable of reasoning, but he attributed the higher 'spiritual' functions to the spirit mind, although these were influenced by 'the character genes in the human make-up'. He was vague, however, in relation to the status and nature of the subconscious.

The importance of the foregoing to the healing process, to Edwards, turned on the part that both aspects of mind play in the all-important state of attunement. The physical mind of the patient acts as a channel for passing information from the bodily intelligence to the physical mind, thence to the spirit minds of patient and the healer, who is in attunement with the spirit mind of the healing guide. Edwards called this ideal state of attunement a 'blending' of the consciousness of patient, healer and healing guide.[35](#)

Roles of Healer and Guides

To Spiritualists, healing is a form of mediumship, and Edwards based his view of healing around this concept. He viewed true spiritual healing as mediated by discarnate entities, or guides, who have the knowledge to effect medical improvement or cures by influencing a patient's bodily systems – either via attunement with another incarnate entity (the healer) or directly (in the case of absent healing). For this reason, Edwards often used the term 'spirit healing' rather than 'spiritual healing'.

Healing guides were often identified as personalities who had been involved with caring for the sick in some capacity during their lives. They could work either alone with a single healer, or co-operate with several healers and other healing guides when possible. Indeed, Edwards often referred to healing guides as 'spirit doctors'. To Edwards, the identity of healing guides, though a matter of interest, was of little importance, although he did eventually claim that he had been provided with evidence that two of his guides were Louis Pasteur and Joseph Lister.³⁶

Edwards did not regard complete trance possession of the healer by the guide, or guides, as being necessary or (necessarily) desirable; rather, he recommended cultivating a state of conscious 'attunement' on the part of the healer.

To Edwards, the healing guide was the predominant intelligence involved in the 'planned act' of healing, where necessary, although the bodily intelligence of the patient might be quite capable of correcting matters on its own if healing could help to provide an improved mental/emotional equilibrium on the part of the patient.

To Edwards, the healer was a largely passive channel for healing during the act of healing itself – a link between the healing guide (or 'spirit') and the patient. Nevertheless, the role of the healer was important during contact healing in providing psychological assurance to the patient and, in absent healing, providing a mental request via attunement to the healing guides.

Principle of Attunement

Attunement rather than religious outlook was central to Edwards's healing ethos:³⁷ it refers to a healer's ability to form a mental/psychic link to the discarnate healing guide, or guides but, also, to the patient.³⁸ Edwards maintained that it is via this attunement that the healer passes an impression of the patient's trouble to the mind of the guide, who can then direct the appropriate 'spiritual energies' through the healer in an attempt to remedy the problem. He maintained that the beliefs of the healer are of little importance to healing guides.

Edwards considered that, when healers became proficient at conscious attunement, attaining the state could become second nature. A healer could also become, in effect, permanently attuned to the guides to a varying degree. He speculated that this may account for occasions when he or other healers were asked casually to seek absent healing by word of mouth by a third party, forgot to do so but discovered later that the patient had experienced a remarkable recovery.

It was Edwards's view that non-healers could also be attuned in a less specific sense to 'spirit', and that this could account for some instances of spontaneous remission of chronic illness without intervention of a healer. He did not discount the possibility that anyone possessing the right qualities could be a natural healer, yet still be unaware of their capabilities – interpreting the phenomenon in a non-Spiritualist context, as he himself had done while serving in the army.

Healing Energy/Forces

Edwards stated that, 'one function of the healer is to be the means, where necessary, for non-physical energy to be made physical'. He added

For the alleviation and healing of physical ill-effects the healing forces produce a changed chemical effect in the patient's body. This implies a profound spirit knowledge of chemistry and energies.

The spirit healing forces, producing a planned chemical change, must, before the act of transformation, be synonymous with the energy formations comprising physical matter.

These healing forces are able to create chemical changes through the application of one given form of energy to another.

Beneficial chemical changes are also induced through the bodily intelligence.[39](#)

In other words, Edwards believed that healing guides are able to effect physiological changes, at a chemical/molecular or subatomic level, in a patient's body by using the healer as an energy transformer.[40](#)

Nature of Illness

Edwards believed that all illness apart from accidental injury is caused primarily by psychological or emotional distress; by lifestyle factors that violate divine laws governing health; or by a bodily system not being able to fulfil its intended purpose. In *A Guide to the Understanding and Practice of Spiritual Healing*, he cited numerous examples, giving special attention to cancer. He proposed that each individual cell, having a rudimentary intelligence devoted to a particular purpose, could, in effect, be driven insane, becoming more vulnerable to physical factors that correlate to the occurrence of cancer and multiplying in an uncontrolled manner.

Edwards also suggested that prolonged mental distress could cause illness on its own, citing research findings that men released from Japanese prisoner of war camps had a cancer rate more than twice the norm in the six year period following release.[41](#)

Contact Healing

Edwards gave personal contact healing at his sanctuary several times a week and scores of demonstrations at venues large and small in the UK and abroad every year.⁴² He usually worked with two assistant healers, one of whom stood behind the patient, with hands resting on the patient's shoulders. Edwards sat facing the seated patient and carried out much of the healing by leaning forwards, while still seated, reaching around to access the back if necessary. He claimed a higher success rate for contact healing than with absent healing, with around 90% of patients reporting improvement.⁴³

Edwards believed that during contact healing the healer acts as a passive energy transformer, channelling curative energies through the hands. Although he claimed it was not always necessary for the healer to touch the patient, Edwards viewed the hands as performing an important role in expressing the healing intention. He often employed gentle physical manipulation of limbs and joints to assess any immediate improvement, although these did not resemble chiropractic practices. He also recommended using the hands to express the healing intention physically, for example:

If the trouble be a goitre or a growth, the healer will allow his hand or hands to rest lightly where it is located and seek within his mind for dispersal to take place. It may be the healer will wish his fingers to move in a gentle erasing movement over the goitre as if to soften and disperse it.⁴⁴

He summarized the act of contact healing as follows:

The healer possesses the art of attunement between his spirit mind and his conscious mind thus becoming an instrument to be used by the spirit guides. The guide is able to direct the healing purpose to the physical mind via the spirit mind, and so with *experience* to become a conscious instrument in the act of healing. The hands are used as terminal points whereby the healing energies are transformed and transmitted to the patient, generally in a very short time – perhaps in a matter of seconds.⁴⁵

Edwards claimed that the ideal situation was to have a 'blending' of the consciousness between the patient, healer and healing guide, but he prescribed no ritualistic routine, or prayer, to achieve this state.

Absent Healing

'Absent healing', as Edwards called it,⁴⁶ has also been described by other terms such as 'distant healing' and 'healing by prayer'. Edwards himself admitted it was a misnomer, insisting that healing cannot be 'absent' and that 'distant healing' would be a truer definition. To Edwards it was simply the act of a healer – having received a request for healing in a case where physical contact was not possible – seeking attunement with the healing guides to request help on behalf of the patient. During such intercessions the healer simply passed on details of the patient's symptoms, general state, and other pertinent information, such as medical diagnosis.

Absent healing formed by far the greater portion of Edwards's work. As has been mentioned, at the peak of his career, he was receiving around 10,000 to 14,000 requests for absent healing per week by letter from all over the world.⁴⁷ To handle this workload, by 1974, a team of attuned healers were in intercession throughout each day, and 50 secretaries were employed to deal with the correspondence involved.⁴⁸

Edwards believed that absent healing was a more advanced form of healing than contact healing, stating that 'to attain mastery over the cause of a disease... without the presence of the healer to act as a communicating transformer for the corrective healing energies, indicates that Absent Healing is a superior science.'⁴⁹ However, he also stressed the psychological benefit to a patient of being physically present with a healer and '...hearing his words, of feeling the flow of healing energy from the healer into themselves'.

Edwards claimed an 80% success rate from absent healing; success meaning that the patient reported some degree of 'betterment', with around a third of that percentage reporting complete recovery.⁵⁰ To account for this with absent healing, he hypothesized that the healing guides, having received a mental picture of the nature of the patient's condition from the attuned healer, are able to make direct contact with the patient and choose the best time to apply a curative influence – usually when the patient is asleep. Although Edwards did not say so explicitly, he implied that the guides were able to influence the bodily intelligence of the patient or apply curative energies directly.

Controversy and Criticism

Throughout his career Edwards faced much – relatively superficial and uninformed – criticism for his activities. Attacks by sceptical physicians sometimes appeared in the press, but these rarely amounted to anything more than bald statements of opinion.⁵¹

It is also the case that Edwards seemed to thrive on criticism, of himself and healing. As its best-known exponent, he was adept at answering ecclesiastical and medical objections. According to his biographer Branch he even 'revelled in adverse comments made about his work.'⁵²

Religious Criticism

Religious criticism manifested largely in letters from fundamentalist Christians published by newspapers. Maurice Barbanell, in his 1953 book *Harry Edwards and his Healing*, cites an example from a local Balham newspaper, which had devoted several issues to interviewing the healer, and examining his claims.

I do not mind you printing about healing... but does your man know he [Edwards] is dealing with the affairs of the Devil? Do any of our clergymen who belong to the Holy Church do this work? My priest tells me it is the Devil's work...⁵³

On such accusations of satanic agency Edwards remarked, 'If helping tortured bodies and minds is the Devil's work, then the Devil cannot be such a bad fellow after all!' [54](#)

On the other hand, more moderate Christians were often supportive. A clergyman wrote to the *Daily Telegraph* complaining of the British Medical Association's opposition to healers working in hospitals:

I acknowledge gratefully my debt to the friendly guidance of Mr Harry Edwards and others, whose views I may not share, but who have taught me most of what I know as a healer, which is nothing more or different from what in theory we have all for long accepted from the teaching of Christ.' [55](#)

Criticism of *The Evidence for Spirit Healing*

In 1953, Edwards published *The Evidence for Spirit Healing* as 'a Challenge to Medicine and the Church'. [56](#) This 574-page book contains extracts from thousands of letters from absent healing patients, claiming improvement or cure. There are also examples of Edwards's brief progress notes for some cases. Edwards had source material cross-checked by a firm of chartered accountants who testified in writing that 'the references are to letters which exist and which appear to be quite bona fide'. [57](#)

However the brevity of the extracts, paucity of detail in most cases and, by necessity, omission of patients' names, addresses and medical records brought criticism. [58](#) Edwards replied that healers were denied access to medical records. He also complained that the critics habitually attacked the weakest cases. [59](#)

Response to Medical Criticisms

Edwards commented on the objections of hostile doctors that he encountered throughout his career. Broadly these objections were summarized in the report of the medical panel of the Archbishops' Commission. Edwards answered them in *The Truth About Spiritual Healing* (1956), characterizing them as 'evasions' and giving detailed examples: [60](#)

Mistaken Diagnosis 'This is the most common excuse. The attitude is that is a patient recovers from an 'incurable' disease, then he could never have had it. This evasion indicts the doctors' efficiency.'

Remission 'They ignore the point that under medical treatment there was no remission and that this is invariably dated by the commencement of spiritual healing.'

Too much time has elapsed to comment on the recovery. '...In cases where the recovery is but eighteen months old the doctors, who dealt with the patient and have all the history at their command, put forward this excuse to avoid giving an opinion.'

X-Ray plates wrongly labelled. 'When corroborative evidence exists of fundamental changes for the better which cannot be medically explained, the

excuse is given that the first X-ray plates... cannot apply to the patient and... have been wrongly labelled.'

Spontaneous Healing 'This reason is frequently given without any explanation, implying that the patient has 'just' got better. It is surprising how many sufferers just suddenly recover when given spiritual healing. The fact that the recovery is dated by the spiritual healing is not considered.'

Louis Rose

Dr Louis Rose was associate chief assistant in the department of psychological medicine at St Bartholomew's Hospital, and honorary neuro-psychiatrist at the Lowestoft and North Suffolk Hospital.[61](#)

Early in 1951, at the suggestion of KM Goldney, secretary of the Society for Psychical Research, Rose attended one of Edwards's demonstrations at the Royal Festival Hall. The following year he began a study into the claims of healers. He approached Edwards and other healers, including Dr Christopher Woodard, for help in obtaining details of cases worthy of examination. Rose also posted notices in the *Lancet* and *British Medical Journal* asking for information about successful cures. He claimed to have received letters from all over the world from people claiming to have been healed, and from healers themselves. To those who responded Rose sent a questionnaire inviting them to obtain the co-operation of their doctors, hoping to 'gather such details of their diseases as duration, the names of hospitals attended, and the dates during which treatment had been given.'[62](#)

Several healers submitted cases, but Edwards was the only one named in the study. For this reason, criticisms voiced against healing in general were often directed at Edwards specifically (for instance in [Wikipedia](#)).

Rose was sceptical of the claims made by 'faith healers' in general, and of those of Edwards in particular. He was also critical of other researchers in the field. After attending a 1954 conference held in France by the International Study Group on Unorthodox Healings, he expressed bafflement that the agenda of the meeting indicated the intention to study the mechanisms behind 'paranormal cures', when he did not feel that it had been established that such 'cures' took place at all.[63](#)

On March 10, 1951, again at the suggestion of Goldney, he attended a healing demonstration by Edwards at Kingsway Hall, London. Although he had found Edwards's approach 'pleasantly free of mystification or deliberate attempts to trade on suggestibility', Rose was less impressed when, having volunteered to Edwards's call for a doctor in the audience to verify that a young man was suffering from curvature of the spine, he felt he was not given the time to examine the patient properly. Feeling pressured by expectation to agree with Edwards that the patient exhibited 'spasticity of the spinal muscles', he refused to agree because he could not tell whether this was the case through the patient's garments. He claimed also that he was not invited to take further part in the proceedings, also that he later observed a woman who had walked away from the platform apparently cured, again using her sticks. Rose further claimed that on a subsequent occasion at the Royal Festival Hall the healer (although he does not name Edwards this time) sometimes

appeared to be 'editing' his patients' responses, upon relaying these to the audience, when he asked them if they felt any improvement after healing.

Nevertheless, Rose conceded that he witnessed 'many dozens of sufferers' of arthritis and like conditions, who claimed not to have been helped by conventional treatment, who '...*did* appear to have their disability at least temporarily ameliorated...' [emphasis in original] by Edwards' 'painless ministrations'.[64](#)

Rose visited Edwards at Burrows Lea to observe him working and, over the course of three years Edwards supplied him with 'nearly one hundred' for examination.[65](#)

A statistical approach is to compare the progress of patients given healing to individuals in a control group. However, Rose rejected this as it would require 'a team of experts' to administer,[66](#) and instead followed up cases to see if the actual medical outcome corroborated the claims of healers and patients, and/or details of cases where they had been reported in the press. Although he did not say so explicitly in the preamble of his paper, he wished to ascertain, simply, whether or not improvements had been permanent and could be attributed solely to healing treatment. But he acknowledged that this approach too would present numerous difficulties, for instance in finding cases where the patient had *not* been given conventional medical treatment, and also those where patients, or their doctors, refused access to medical records.[67](#) In the event, factors such as this, along with a general vagueness exhibited throughout his paper, compromised the effectiveness of the study.

Rose published his results in December 1954 in the *British Medical Journal* and an expanded version the following year in the *Journal of the Society for Psychical Research (JSPR)*. He also included a synopsis and analysis in his 1968 book *Faith Healing*. He looked at 95 cases (96 in his 1968 book) with some case details changed in the book.[68](#)

Crucially, however, Rose did not provide a breakdown of who had supplied which cases – whether Edwards, other healers, patients, or his medical colleagues – or which cases he had taken from a press report. He only stated that 'Most [of the cases] were treated by one healer.' Edwards later revealed that he had supplied '...nearly one hundred...' cases to Rose. [69](#) But, of the 95 cases that were used in the study, the reader is left to presume that Edwards supplied the larger number of those actually used by Rose – a number which could be anywhere between 49 and 95, in the case of the book version.

A further drawback was that Rose had to reject 58 cases (over 60%) because '...it was not possible to obtain medical or other records so that the claims remain unconfirmed.' Part of the reason for this, Rose claimed was that 'many doctors have failed to respond to specific enquiry...'. A further 22 cases (almost 23%) were rejected because 'records were so much at variance with the claims that it was considered useless to continue the investigation further.' But he only provided a detailed explanation as to the individual reasons for these latter rejections in two cases. [70](#)

Only 15 cases were left, of which Edwards was mentioned as being the healer in only eight (in the later *JSPR* and book versions). The *JSPR* version of Rose's paper contained case notes that, oddly, had been expanded to include extra comments that answered criticisms that Edwards did not publish himself until one year later. The case notes of one case, a 'Miss. B.', who had been suffering from bilateral tuberculosis cavities and laryngitis – but whose doctor had written to Rose stating that she'd also been prescribed antibiotics – had disappeared completely. There was probably an innocent explanation for these inconsistencies, but Rose did not supply one.

Rose divided the remaining fifteen cases into eight groups. Groups one and two were the rejected cases mentioned above. The remainder were as follows:[71](#)

Group 3: 'In 2 cases the evidence in the medical records suggests that the healer may have contributed to amelioration of an organic condition.'

Group 4: 'In 1 case demonstrable organic disability was relieved or cured after intervention of the healer.'

Group 5: '3 cases improved but relapsed.'

Group 6: '4 cases showed a satisfactory degree of improvement in function although re-examination and comparison of medical records revealed no change in the organic state.'

Group 7: 'In 4 cases there was improvement when healing was received concurrently with orthodox medical treatment.'

Group 8: 'One case examined before and after treatment by the healer gained no benefit and continued to deteriorate.'

Rose went on to expand in detail on a number of cases, including the sole case in Group 4 (not involving Edwards, though reported in the press). The patient was a doctor, 'Dr. O', suffering from a hernia. He had received no medical treatment at the time of his successful healing; although, by the time the paper was published his maladies had expanded to include a slipped disc. The doctor had claimed that his problems had each been cured after receiving healing, stating that, in the case of the slipped disc, 'The acute pain left me at once... How should I have fared under orthodox surgical methods? I have often wondered.' Rose did not discount possible spontaneous remission, but gave no indication of having interviewed the doctor or of having followed up the case.[72](#)

Edwards and Rose remained on friendly terms and continued correspondence until at least 1966.[73](#) But Edwards rejected the relevance of the study, complaining of the 'incredible and fantastic lengths' that medical specialists would go to...to avoid attributing a patient's cure to his healing. With regard to the 58 cases that Rose had rejected because of a failure to obtain medical records, Edwards pointed out that Rose was handicapped by members of his own profession. Of the further 22 cases rejected because of variance with the records, he wrote,

Of course the medical records would be at variance with the result. This is surely the case for spiritual healing... so often do we see, following a successful healing, that the doctors change their diagnoses to fit in with the improved conditions.[74](#)

With regard to the remaining 15 cases, Edwards agreed that, one being 'unproven', the rest had responded in 'various ways', but contested the medical statements that explained the healings. For instance, in the case of a 'Mr. R.B' from Group 3 suffering from throat cancer, two specialists examined him under anaesthetic, after he had received contact healing from Edwards, and declared the cancer to have disappeared. Yet one, responding to an enquiry from Rose, explained it by the lucky chance of the original biopsy having removed a piece that 'happened to contain all of the carcinomatous tissue'. This 'fantastic evasion', as Edwards described it, was published in the *British Medical Journal*, without further comment. Rose himself later claimed to have come across just such a case of a 'cure by biopsy' that did not involve a healer[75](#) and a decade later called it 'an accepted fact' that such cures are far from rare.[76](#) Yet an extensive internet search, including of PubMed, by the present author for examples of 'cure by biopsy', as Rose termed it, failed to find any reference to such a phenomenon.

Another case, discounted because of a possible normal explanation, concerned a 'Mr. J.E.E.' (Group 3) who had written to Edwards requesting absent healing for a cataractous eye, in which he had been blind for 50 years. Upon finding that he could now see with the eye, he had written to Edwards saying that his optician had described the recovery as 'miraculous' and had commented 'Vision perfect, eye clear, bright and in splendid condition...'.[77](#)

Yet the ophthalmist told Rose that this was a case of 'spontaneous dislocation of the lens which was cataractous. The lens dislocated back into its vitreous chamber, which is the old operation known as couching, and it is brought about by some violent exercise or some sudden jerk. Could there have been functional blindness after the couching which was relieved by suggestion, the patient beginning to see after being encouraged to look?'[77](#)

In other words, the lens had recovered spontaneously, but the patient had not noticed until after the suggestive effect of his having requested help from Edwards brought about a realization that he could now actually see.

Rose does not appear to have asked the individual whether he had been subjected to any 'sudden jerk', or if Edwards had encouraged him 'to look' in any of his letters. If such a thing was possible, Edwards pointed out, ophthalmists could have done this themselves at any time during the previous fifty years.[78](#)

Indeed, one of Edwards's main complaints was that Rose's study did not take into account spontaneous recoveries that only occurred after healing was given, where that was documented to be the case. Such was his 'common sense' criterion for judging that healing had been responsible for the improvement. He did not seem to appreciate that, according to the implicit aims of the study, Rose could not possibly have admitted that healing was responsible for the improvement if a condition was known to sometimes, if rarely, remedy itself with no medical intervention.

Although Edwards admitted that many medical conditions sometimes seemed to improve or disappear of their own accord without healing⁷⁹ his objection, as he remarked in the case of Dr. O, mentioned earlier, was that Rose had not taken the timing of healing being given in relation to the timings of improvements into account:

The evidence was given by a doctor. An operation was essential, according to medical minds. The cure took place under the hands of a healer and is timed by it, but this is unrecognised... ⁸⁰

For his part, comments by Rose seemed to indicate a lack of understanding as to what Edwards's claims actually were. For, example, Edwards made it clear at his public demonstrations, and in his writings, that he deliberately invited people onto the platform who had conditions that he had found responded most readily, and visibly, to healing. This was purely for the purposes of demonstration, and he would frequently give healing to anyone suffering from other conditions after the demonstration had ended. But he always emphasised that any immediate improvement that did occur would unlikely to be a 'cure'; may not be permanent; and that the patient should seek treatment from a local healer to maintain what had been achieved with Edwards, or to seek further improvement. Therefore Rose's observation of a woman using her sticks after having receiving healing at a demonstration, and who was not included in the study, was really moot point. In fact, one of the patients who Rose included in Group 5 (improved but relapsed), a Mrs GML, pointed out to him '...I am not cured of my complaint but... had I followed his [Edwards's] advice and continued with the Psychic Healing... I may have been by now. I certainly did feel free of pain; *for the time* a new woman.' [emphasis in original].

In the 'Skeptical reception' section of Edwards' *Wikipedia* page, it is stated of Rose's study that: -

In a hundred cases that were investigated, no single case revealed that the healer's intervention alone resulted in any improvement or cure of a measurable organic disability.'⁸¹

Not only is that, strictly speaking, untrue factually; it is also misleading, given that only 15 cases out of 95 could be investigated to a meaningful extent. Rose's actual summary discussion in the *British Medical Journal* was more thoughtful and measured, and addressed the timings of the recoveries with receiving healing, albeit only in passing:

Some of the patients investigated were functionally improved, although expert medical opinion admits no change in the organic condition except in those cases in which change is explicable in terms of normal medical experience. How was this achieved if other than by suggestion? In each of three cases, a change, rare but not unknown in orthodox medical experience, took place in the organic state soon after treatment by the healer. Was this coincidence? Thousands who have given up hope of improvement at the hands of orthodox medical practitioners either feel better or find new hope after contact with a healer. Is not this contribution of value to society?⁸²

However, he still concluded: -

No single case revealed conclusively that the healer's intervention *alone* resulted in improvement or cure of a measurable organic disability.' [emphasis in original][83](#)

Rose recommended that 'long-term controlled experiments in absent healing [should] be devised', along with a 'review of cases in which improvement has occurred *after* the cessation of medical treatment *without* the intervention of a healer.' [emphasis in original][84](#)

In further correspondence between himself and Edwards that Rose published in 1968, it is abundantly clear that the two men were continuing to talk past each other as late as 1966, with Edwards complaining that Rose's criterion of only accepting cases that had not received orthodox treatment was 'unreasonable'.

If a patient has received medical attention, you attribute the recovery, no matter how remarkable, to this and not to spiritual healing. Obviously, any patient condemned to being 'incurable' must have received medical treatment. The alternative is...[that] the sick person must not have received medical treatment at any time...there could be no medical diagnosis or history...and then you would dispute the healing because there could not have been a proper diagnosis. It's a case of 'heads I win, tails you lose' [85](#)

Rose could, perhaps, with just as much justification, have fielded the same maxim to Edwards.

Archbishops Commission on Divine Healing

In 1951, the Archbishops of Canterbury and York announced their intention to form a commission to investigate 'divine' healing.[86](#) It has been suggested that Edwards had been largely responsible for this because, for years, he had been accusing the Church of largely abandoning the most important part of its early mission...to heal the sick.[87](#) He had also been vocal in his criticisms of the Church's attitude to healing in general, especially the requirement of the sufferer to have 'faith' as a prerequisite, and/or undergo religious instruction. Edwards rejected this latter practice as outmoded, selfish and cruel[88](#), along with the ideas that God interceded directly to heal or that illness was a 'punishment' from God. He was also scornful of the idea that set rituals or prayers were necessary for healing to be effective.

The Church spent the next two years forming two panels which consisted of representatives of the Church and medical profession. The medical panel included psychologist Robert Thouless, a former president of the SPR, and psychiatrist Dr David Stafford Clark, who later became famous as the 'television psychiatrist' presenting the BBC series *Lifeline*. [89](#)

In 1954, Edwards was invited to give a fifteen-minute presentation to the Commission at Lambeth Palace, and to submit six recent examples of successful healings for examination. In the event, when he visited with his assistant Olive Burton on July 7, he took over seventy cases with him from the three previous months. But he claimed that one of the doctors on the panel cast the notes relating

to the cases aside, declaring, 'There is no evidence of spiritual healing here for they could all have been spontaneous (natural) healings.' When Edwards countered that the patients' doctors had described the healings as 'miracles', and that the cases were 'incurable', the reply was, 'Too many doctors are declaring people to be incurable when they are not.'[90](#)

Edwards also claimed that when he attempted to discuss the case of a 'blue baby' who had responded to healing, Stafford-Clark, with whom Edwards clashed bitterly on television in later years, shouted, 'impossible'. When Edwards attempted to offer supporting evidence, the doctor swung his chair around, so that Edwards found himself addressing Stafford-Clark's back.[91](#)

According to Edwards, the Commission then insisted on seeing six 'case histories' with medical documentation. Edwards claimed that, after pointing out that healers were not allowed access to medical records, he agreed to try, on condition that he be allowed to see the medical panel's findings before they were accepted for consideration by the Commission; the reason being '...to try and prevent further evasive excuses being presented to the commission as evidence.' Edwards eventually presented the Commission with eight cases 'with full supporting evidence'.[92](#)

Up until October 1954 Edwards conducted 'considerable correspondence' with the Commission, reminding them of his precondition for cooperation. But when it became clear that they were not going to honour it, he wrote in protest to the Commission Secretary, Rev Eric Jay. He also voiced his growing frustrations in the *Spiritual Healer*. Then, on May 8 1956, Edwards received a letter from the Commission chairman, the Bishop of Lincoln and Jay, granting his request to see the medical panel's findings in advance. Edwards was so pleased that he suspended publication of a book in which he had detailed his full complaints against the Commission's behaviour, only to find that the medical panel published their findings in the *Supplement To The British Medical Journal*[93](#) on May 12, anyway.[94](#)

Edwards regarded this as a betrayal, and was further outraged at the medical panel's statements about his cases (these, bizarrely, numbered nine, although he had only submitted eight). He published his rebuttals to the medical panel's findings alongside his original documentation and further information from the patients or their families.[95](#)

The BMA panel had considered case histories from many sources other than Edwards, a 'large proportion' of which had come from mission hospitals. They had been asked by the Commission to comment on '...evidence that the medical profession might be able to submit of spontaneous cures of apparently incurable disorders or of rapid or accelerated recovery from serious illness, following upon spiritual ministrations... whether there was any evidence of the physical or psychological value of healing services, the laying on of hands, unction, and the influence of public and private prayer...'

After remarking that the medical definition of a 'cure' often differed from that of patients, they concluded that:

Most of the 'cures' of organic diseases claimed for spiritual healing are explained, in the view of the Committee, by mistaken diagnosis or prognosis, alleviation or remission, spontaneous cure and combined treatment... Summing up, the Committee finds no evidence 'that there is any type of illness cured by spiritual healing alone which could not have been cured by medical treatment, which necessarily includes consideration of environmental factors.

Throughout the report there was scant detail of individual cases, but the eight supplied by Edwards (plus the ninth that wasn't) received special, albeit brief, mention at the end of the report:

During the inquiry two of the patients suffering from leukaemia died, so did the patient suffering from carcinoma of the bladder. *These three patients all died of the diseases from which they were alleged to have recovered.* [emphasis added]

However, upon carrying out his own enquiries, Edwards claimed to have found that in one of the 'fatal' cases of leukaemia, a five-year old girl, the patient had relapsed but that, following more healing, the blood levels had returned to normal. The girl had died after falling out of bed in hospital. He stated, 'From the shock and ill effects of this unhappy accident she passed away [while] waiting to go to a convalescent home to build up her strength.'[96](#)

The other fatal leukaemia case turned out to be the mystery ninth case, which Edwards had not submitted; although he did admit to having given healing, he had been told that the patient had improved dramatically, but had heard nothing more after that.[97](#)

In another leukaemia case, the patient's parents had been told on December 16, 1952, that their son would not survive and that radiotherapy would not help. Edwards had begun absent healing on December 18 and on the following day a Dr Franklin had told the parents that 'something different' had taken place. The child continued to improve until January 15th when it was observed that his white cell count was only half what it had been when he was admitted. It was then decided to give x-ray treatment after all, but Edwards had carried on with the absent healing. After remaining in good health until April 1954, the boy had suffered a slight relapse, but recovered again, in the absence of more radiotherapy, immediately absent healing was given. The BMA report stated that the child 'continues to show active signs of the disease such as enlargement of the spleen and a characteristic blood picture'; however, Edwards himself had conceded that the spleen would continue to be enlarged after recovery and further stated that a Dr Bodley Scott had declared that the blood count could now be 'ignored'.[98](#)

Here, as with Louis Rose's study, it is difficult to see how the panel could have attributed anything definite to some of the cases regarding the part that healing may have played. However, in many instances it is difficult to avoid the implication of lying and incompetence, whether on the part of the panel or of Edwards and the patients' families.

For instance, the panel claimed that the patient with ‘carcinoma of the bladder’ had died of the disease with ‘...extensive secondary growths.’ But Edwards claimed to find upon further inquiry that the man had died of a heart attack in 1955, having last being checked for cancer in December 1954 and found to be still free of the condition. He commented:

Did the B.M.A. committee, knowing that the man had been proved to have had, at one time, a malignant cancer of the bladder, presume that this was the cause of death, and its findings are based upon presumption and not on fact?[99](#)

But that raises the question as to how the panel was able to ‘presume’ that the man had ‘secondary growths’. If that was not the case, why did the panel claim that it was, and why did the patient’s family claim otherwise? (In 1997 the present author wrote to Ray Branch to ask if Edwards’s correspondence and notes, including a copy of the death certificate, for this case still existed. He was told that it probably did, but that it would be amongst unsorted documents stacked ‘floor to ceiling’ in the basement of Burrows Lea.)

Another case, diagnosed by Princess Elizabeth hospital in Guernsey, involved a small girl whose fingers had become infected by fungoid growths.[100](#) She was scheduled to receive a special lotion and undergo an operation. But according to her father, whose letter Edwards quotes at length, neither of these occurred: it was found that the lotion was not made any more, and since she had started to improve immediately after Edwards started absent healing in April the following year, she did not undergo surgery either. The father also remarked that her fingers were ‘completely normal’ by the time a substitute lotion had arrived at the end of the following March. The family applied it anyway because ‘...where a child was concerned, we had no right to refuse medical help or risk antagonising the doctor.’ The father also stated that the family had never told the doctor about Edwards’ involvement.

With regard to all this the committee simply stated, ‘The patient with ringworm of the fingers-nails *improved* but also had medical treatment.’ [emphasis added] [101](#)

Edwards commented:

The committee had all these facts before them, [yet] tried to ‘save its face’ by this untrue reference to medical treatment.[102](#)

Edwards’s analyses of the other cases revealed the Medical Committee’s treatment of the remaining cases to have been similarly questionable. He wrote to Eric Jay warning him of the inaccuracies and the results of his own investigations:

As I anticipated and as I have told you several times, the BMA findings are purposefully evasive, misleading and a distortion of the truth. I enclose a statement giving detail... If the commission is willing to accept the BMA report at its face value, that is its responsibility, but if, on the other hand, it cares to question this report, I shall be prepared to cooperate.[103](#)

Edwards said he did not receive a reply.

Even Edwards's most persistent critic, Dr Louis Rose, who had also submitted cases to the Committee, remarked of his complaints about the cases, and the eventual Archbishops' Commission's final report, that:

Harry Edwards had something of a field day [and]...in the absence of any reply to his subsequent complaints he would appear to have a case to answer in claiming that there were elements of negligence in the investigation of them. It was firmly stated by Mr. Edwards that the British Medical Association report contained inaccuracies concerning these cases; the archbishops' commission made no mention of them at all.[104](#)

The BMA Committee had been asked by the Archbishops' Commission to advise on:

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whether there was any evidence of the physical or psychological value of healing services, the laying on of hands, unction, and the influence of public and private prayer, and again in what circumstances these practices might be attended by possible harmful effects, such as the risk of delay in securing medical advice.[105](#)

This was so that the Church could advise the clergy on how to conduct healing according to its own dogmas (which were anathema to Edwards) and, perhaps, cooperate with doctors to that end. Doubtless this was, at least in part, because Edwards, a Spiritualist, was enjoying such visible public success while church congregations were dwindling. Yet Edwards insisted that healing should be non-denominational, given without preconditions of 'faith', and that the Church could only expect success with healing if it adopted a similar approach. It is hardly surprising that after, perhaps reluctantly, involving Edwards because of public pressure to do so, they then effectively ignored him.

In 1958 Edwards received a letter from the Chaplain of the Commission to tell him that the evidence he had provided would not be used in the final report. One consequence of this was that, when it was eventually published later that year, the report received heavy criticism in the press, with the *Daily Express* writing that it amounted to '...a tremendous attack on Christian Scientists, Faith Healers, and Spiritualists'. The *Star*, a leading evening newspaper of the time asked, without a hint of irony, 'Why, for instance didn't the Commission probe and test the evidence of a man like Harry Edwards, whose following is immense? Because, they say, it was outside their terms of reference.'[106](#)

Two years before the Commission published its report, Edwards predicted that the report would:

- admit that non-Christian Healers could heal the sick, but make reference to evil spirits and the Devil
- suggest that applicants for spiritual healing receive devotional education and that patients become members of the Church
- accept that healing may be possible with 'nervous diseases' but not with 'organic conditions'
- discourage public demonstrations of healing[107](#)

This all proved to be accurate. The report conceded that non-Christian Healers may be 'gifted men', but 'in ways which as yet that we do not understand'. It referred frequently to 'demons' and the need for churchmen to 'exorcise' patients. It recommended that sickness be treated as 'a unique opportunity for instruction...' and that patients be 'prepared' for Church membership. Priests were also urged to ascertain whether patients were Christians, implying that healing should not be given to non-Christians and that '...great care is often needed to bring those who seek healing to a living faith, a right understanding and a sincere repentance, without which their attendance at a healing service could have disastrous results.'

As for how priests were supposed to administer healing, the report stated that they should anoint the patient with holy oil with cotton wool, which should then be burned.

Edwards retorted:

'Disastrous results' indeed, what nonsense! The only disastrous result will be that the patients may die while they are waiting for all this 'preparation' before they are allowed to enter the Church to be healed![108](#)

In answer to the report, Edwards organised a mass meeting at the Royal Albert hall which took place on July 7, 1958 with 300 other NFSH healers in attendance on the platform, as well as many of his former patients who testified that they had recovered completely from various conditions. Also in attendance was Rev Maurice Elliot, a Commission member who had been sympathetic to Edwards and Spiritualism and who publicly denounced the report from the platform. Edwards then gave his usual demonstration of healing.[109](#)

Edwards's biographer Raymond Branch remarked later that the effect of the Archbishops' Commission was to boost Harry Edwards with a tidal wave of publicity that effectively established him as the preeminent healer of his age.[110](#)

Legacy

Edwards's obituary in the *Daily Telegraph* remarked that he had been credited '...as the man who made psychic healing respectable'.[111](#) Certainly, as far as the UK and former British overseas territories are concerned, it would be difficult to argue the contrary. His non-denominational approach to healing, and non-ritualistic methods drew huge attention to the wider healing movement outside of Spiritualism, and forged links with the medical profession. His development of a formal code of conduct and training program for healers made it possible for doctors to refer patients to accredited healers and other accredited complimentary practitioners.

Steve Hume

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Endnotes

Footnotes

- [1](#). Branch (1991), 147.

- [2.](#) Barbanell (1943), 9.
- [3.](#) Branch (1991), 20-22.
- [4.](#) Branch (1991), 30-31.
- [5.](#) Medland (2008), 2; Branch (1991), 35-39.
- [6.](#) Branch (1991), 43-4.
- [7.](#) Branch (1991), 30-34.
- [8.](#) Branch (1991), 61; Miller (1948), 35; Medland (2008), 25.
- [9.](#) Medland (2008), 25.
- [10.](#) Branch (1991), 64.
- [11.](#) Miller (1948), 39, also Branch, 1991, 67-68.
- [12.](#) Branch (1991), 67.
- [13.](#) Branch (1991), 68.
- [14.](#) Branch (1991), 71-73.
- [15.](#) Branch (1991), 75.
- [16.](#) Branch (1991), 84-85.
- [17.](#) Branch (1991), 94.
- [18.](#) Branch (1991), 99.
- [19.](#) Medland (2008), 59,
- [20.](#) Denham (1973), 45.
- [21.](#) Barbanell (1943), 69, also Branch (1991), 117.
- [22.](#) NFSH, Anon (2020).
- [23.](#) Branch (1991), 137-147.
- [24.](#) Edwards (1963), 34-35.
- [25.](#) Denham (1973), 40.
- [26.](#) Branch (1991), 272.
- [27.](#) Edwards (1974), 71-93.
- [28.](#) Edwards (1974), 140.
- [29.](#) Edwards (1974), 141.
- [30.](#) Branch (1991), 253-261.
- [31.](#) Edwards (1956), 18-22.
- [32.](#) Edwards (1974), 241-263.
- [33.](#) Edwards (1974), 272.
- [34.](#) Edwards (1974). 18-19.
- [35.](#) Edwards (1974), 235.
- [36.](#) Branch (1991), 111-14.
- [37.](#) Edwards (1974), 78-83.
- [38.](#) Edwards (1974), 25-31.
- [39.](#) Edwards (1974), 75.
- [40.](#) Edwards (1974), 74-75 and Ch 4.
- [41.](#) Edwards (1974), 319-20.
- [42.](#) Edwards (1974), 103-7.
- [43.](#) Barbanell (1943) 107.
- [44.](#) Edwards (1974), 105.
- [45.](#) Edwards (1974), 107.
- [46.](#) Edwards (1974), 13-69.
- [47.](#) Edwards, 1974, 14.
- [48.](#) Denham (1973), 45.
- [49.](#) Edwards (1974), 15-16.

- [50.](#) Edwards (1974), 55.
- [51.](#) e.g.,. Barbanell (1943), 119-123.
- [52.](#) Branch (1991), 138.
- [53.](#) Barbanell (1943), 23.
- [54.](#) Branch (1991), 138.
- [55.](#) Bontoft de St. Quentin (1960).
- [56.](#) Edwards (1953a).
- [57.](#) Edwards (1953a), 11.
- [58.](#) Doncaster (1953), 2.
- [59.](#) Edwards (1953b), 10.
- [60.](#) Edwards (1956), 23-24.
- [61.](#) Edwards (1956), 24.
- [62.](#) Rose (1968), 142-147.
- [63.](#) Rose (1968), 149.
- [64.](#) Rose (1968), 142-43.
- [65.](#) Edwards (1956), 24.
- [66.](#) Rose (1968), 139.
- [67.](#) Rose (1968), 138-39.
- [68.](#) Rose (1954), 1329-32; Rose (1955), 105-21; Rose (1968), 151-68.
- [69.](#) Edwards (1956), 24.
- [70.](#) Rose (1955), 110.
- [71.](#) Rose (1955), 110.
- [72.](#) Rose (1955), 113.
- [73.](#) Rose (1968), 163-69.
- [74.](#) Edwards (1956), 25.
- [75.](#) Rose (1955), 112.
- [76.](#) Rose (1968), 154.
- [77.](#) Rose (1955), 112.
- [78.](#) Edwards (1956), 26.
- [79.](#) see Edwards (1974), 135,
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