Buddhist Psychology Past Life Regression Therapy

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Abstract
The purpose of this study was to determine whether Past Life Regression Therapy using Buddhist Psychology Approach can lead to better quality of lives, more profound belief about karma, and better psychological well. This Quasi-experimental research with a control group is designed to use twenty individuals (N=20) aging between 25 and 60 working at ICC International Company Limited as the experimental group (E), and the control group (C) of twenty working individuals working at the same company. Each experimental participant underwent past life regression facilitated by trained professional for this purpose during three 2.5 hours therapy sessions, and 7 days of designed life improvement practice between each session. Over the period of 35 days, participants in the experimental group had better score in quality of life than those in the control group with level of confidence at 0.05. Within the experimental group, scores on law of karma belief as well as quality of life and psychological well-being improved significantly with level of confidence at 0.05. The roles of past life experiences and lessons learnt in past-life regression toward the altered behaviors and beliefs were also examined. Since the role of life improvement practice in the experimental group did not show significance to improved life quality compared to the control group, this may have implications for further research on how long participants should take.

Keywords: past-life regression, quality of life, psychological well-being, law of karma, beliefs about consciousness and reality, abreaction (let go bad energy)

Introduction
Buddhist Psychology Regression Therapy (BPRT) consists of guiding a participant, through the use of regression session and counseling, to recall stories from previous life-times and to apply this learning to improve one’s life quality. Not only is BPRT to cure immediate illness but also to improve psychology well-being (Brian Weiss, 1988), wisdom of living as a wiser man, and life quality. Advocates of the procedure maintain that it is an effective means of facilitating self-development (Ian Stevenson, 1966) or of resolving various psychological difficulties such as phobias, problems with relationships, and addictions; as well as life quality improvement (Freedman,
However, the use of Past Life Therapy is yet still uncommon to use for improving life quality and the wisdom of living as a wise man. Two basic questions are raised by the use of this therapy: whether or not the abreaction (Salman Akhtar, ed., 2013) (reliving an experience to purge it of its emotional excesses) of past life negative energy will improve the course of present life, whether or not improvement of psychology well-being can improve quality of present life, and whether or not BPRT can lead to more insights and profound understanding of Law of Karma.

Some believe that the negative residuals of unfinished business in one’s past life have energy to attract negative similar incidents to one’s present life (Carroll, Robert Todd, 2014). The residuals are buried deep in unconscious level of mind, in which individuals would not be aware of them. The abreaction of the negative residuals would therefore reduce bad incidents to occur one’s present life. BPRT also introduces the practices which are suggested by law of karma. One’s karma is unique to the individual, and he or her who can recall the memories and relook at them with wiser mind would know how their present life better than anyone else.

The researcher conducted the same therapy procedure to all participants, and customized counseling advices to the individual cases. To improve the accuracy of hypnosis, all participants were asked to put-on the brain-wave equipment (Bio Feedback, the Wild Divine Software Programs with the classic Iom, Connects via Finger Sensors and to Mac or PC via USB) during the hypnosis period. By using this equipment, the therapist started the regression procedure when the brain wave dropped and relaxed to the point of near unconscious stage.

All participants had been asked to complete quality of life and psychological well-being questionnaire, once preceding the therapy and two more preceding the following two treatments. Fifteen participants reported past-life experiences during regression, whereas two participants did not respond adequately to hypnosis and did not receive any deliberate treatment. For those who did receive it, the treatment consisted of 3 sessions (each session lasting around 2 hours) in which participants were asked to recall the root cause of each of their problematic situation during the hypnosis period. This study showed that all fifteen participants revealed the improvement in their psychology and life well-being.

The purpose of this study was to determine whether experiencing past-life regression can finally lead to enhanced life quality. The idea was to evoke a past-life experiences in all 3 consecutive sessions (1 week time interval) for each participant using a guided regression technique and to see whether there would be any differences in life quality of each participant. All participants revealed that the abreaction of negative vibrant (or residuals) from their unconscious memories would itself reduce bad luck incidents in their present life. This study also measures relationship between the hypnotherapy and the improvement in psychological well-being at the unconscious level. With the improvement in psychological well-being, participants revealed that they see new opportunities in lives. This study uses the statistical quantitative
method called repeated MANOVA to measure significance improvement in psychological well-being, before, during and after the treatment. In addition to changes in psychological well-being, improvement in fundamental beliefs about law of karma is a matter of this study. An in-depth interview was conducted with the assessment questionnaire to measure life changes such as increase in good incidents, decrease in bad incidents, and more insights in 4 Noble Truths (Ariyasat) and Meritorious Actions.

Because any effects of past-life experiences could be transient, the treatment was designed to have 3 repeated sessions (the repetition happens 7 days following the previous session) with law of karma (Parvesh Singla, 2011) counseling followed by Meritorious Actions consultation. This procedure is believed to be intense enough to instill lasting changes in the cognitive and behavioral levels. It was the regression therapy that participants who had past-life experiences would have greater increases in psychological well-being, and both transcendent beliefs and improved psychological welling have improved their life quality. All participants confirmed that improvement changes at trance state have better outcomes than those with present-life experiences.

Research Design

The research methodology is Quasi-experimental with Control Group Design approach. Both approaches are treated equally important and are applied in parallel (Equal and Parallel Qualitative and Quantitative Method), where the same population members were treated by the same treatment and both qualitative and quantitative were measured with equal weights.

The independent variable in this research is Buddhist Psychological Regression Therapy. The dependent variables are Psychological well-being (Ryff, Carol D., 1989), Past Life Learning and Life Quality (Costanza, R. et al., 2008). The measurement variables of Psychological well-being are (1) Autonomy, Purpose in Life, Growth, Self-Acceptance (2) Environmental Mastery and (3) Relation with Others. The measurement variables of Past Life Learning are morale awareness, commitment to good deeds, and beliefs. Finally, the measurement variables of Life Quality are decrease in Bad Incidents, increase in Good Incidents and more profound in 4 Noble Truths.

Participants

This Quasi-experimental research with a control group is designed to use twenty individuals (N=20) aging between 25 and 60 working at ICC International Company Limited (www.icc.co.th/dotnet/html/eng/corporate_overview.aspx) as the experimental group (E), and the control group (C) of twenty working individuals working at the same company. They are volunteers, who have strong determination to improve their life quality. It was made clear that those with a history of traumatic emotional, physical, or sexual abuse or those experiencing problems with concentration, memory, or thinking are not participated in the study. Nine of the participants were men
and eleven were women in the experimental group and 8 of the participants were men and twelve were women in the control group. 20 indicated that they wanted to improve their psychology well-being, 5 wanted to improve their body health and 10 wanted to improve their relationship.

Instruments

In addition to a General Information Questionnaire that was used for gathering demographic information, and four other instruments were used. The questionnaire used for measuring psychological well-being was the Psychological Well-Being (General Health Questionnaire (GHQ)), tailored from Psychological Well-Being of Department of Mental Health, which consists of 12 five-point Likert-type items with which respondents can agree or disagree. The questionnaire items include questions such as Positive Relations with Others, Autonomy, Environmental Mastery, Personal Growth, Purpose in Life, and Self-Acceptance.

Law of Karma Consciousness consists of five-point Likert-type items that make up three scales: 9 items on morale (shame on misconduct) and 5 items on beliefs (faith in right conduct), are specially designed to measure their level of shame for sinful conducts, and their faith to conduct good deeds. All 14 items together make up a Global Scale that is an indication of a person’s position along the material transcendent dimension of beliefs about consciousness and reality.

Finally, Quality of Life was modified from the original WHOQOL – 26 from Department of Mental Health to have left 20 questions. These questions are designed to assess a participant’s evaluation of his or her both perception and actual evidences of desired incidents and undesired incidents (both numbers and intensity) happened during the experimental period of 2 weeks. This questionnaire consists of 20 five-point Likert-type items about the extent to which it has opened participant’s desired incidents and reduced participant’s undesired incidents with the open spaces for filling in actual incidents. As well as, the individual’s confidence in their present living in the way they design their own purpose.

Apparatus

A reclining chair was used during the guided imaginary sessions to enable volunteers to lie back with their feet up from the floor. This study used both guided imagery techniques and regression to attempt to induce past-life experiences. Guided imagery techniques as such have been widely used in counseling and psychotherapeutic settings.

A participant lies back in a reclining chair with her feet up and is told to close his or her eyes and relax. Then, in a series of nine stages, he or she is told to imagine his or herself expanding beyond the boundaries of his or her physical body. Having become expanded, participants are asked to recall memories and describe in detail. Following that, the participant is told to go up in the air to progressively greater heights above his or her living place and to describe what he or she sees. At one point he or she is
asked to change the scene from day to night and back again and asked who is creating these changes. Eventually he or she is told to recall going up so far in the air that he or she can no longer see the earth. Then the following statements are made:

**Procedure**

Participants came individually to sessions and were required to sign a research consent form. Then participants were left at a table in a regress therapy room to complete the Quality of Life forms. Once they were finished, they sat back in the reclining chair and the researcher led them through a guided imagery exercise using the modified imagery technique, giving them either an open suggestion or past-life suggestion. The researcher noted which suggestion had been given and whether any past-life, present-life, or future-life imagery was present. The guided imagery experience lasted for about an hour. Afterwards, participants completed the Psychological Well-being, the Trance State Health. They were also given an opportunity to make any written comments. Fourteen days following a session, participants were sent the Psychological Well-being, Quality of Life, and Trance State quality. Upon receipt of their completed questionnaires, participants were sent a debriefing form.

**Experimental Results – Quantitative**

The purpose of the study was to determine whether BPRT can cause benefits to quality of life, trance state and psychology well-being, shown in Table 1

<table>
<thead>
<tr>
<th>Variables</th>
<th>Measure</th>
<th>Group</th>
<th>( \bar{x} )</th>
<th>SE</th>
<th>Sig. (1-tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of Life</td>
<td>Before experiment– control</td>
<td>.055</td>
<td>.130</td>
<td>.338</td>
<td></td>
</tr>
<tr>
<td></td>
<td>After experiment– control</td>
<td>.385</td>
<td>.105</td>
<td>.000*</td>
<td></td>
</tr>
<tr>
<td>Psychology Well Being</td>
<td>Before experiment– control</td>
<td>-.292</td>
<td>.399</td>
<td>.235</td>
<td></td>
</tr>
<tr>
<td></td>
<td>After experiment– control</td>
<td>-.042</td>
<td>.119</td>
<td>.364</td>
<td></td>
</tr>
</tbody>
</table>

In the experiment group, the result shows that PLRT has strong relationship towards quality of life, and psychological well-being. By comparing scores of the 3 variables before and after BPRT sessions using the paired-sample t-test), the result shows that quality of life, psychological well-being, and trance state after PLRT has higher scores than the scores before the treatment with level of confidence at 0.05. It this therefore
concludes that PLRT can improve quality of life, psychological well-being, and trance state.

Table 2 Illustrating improvement of scores - quality of life, trance state and psychology well-being (before and after BLRT) for the experiment group

<table>
<thead>
<tr>
<th>Dependent Variables</th>
<th>Measurement</th>
<th>n</th>
<th>( \bar{X} )</th>
<th>SD</th>
<th>SE</th>
<th>t</th>
<th>df</th>
<th>Sig. (1-tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>psychology well-being</td>
<td>Before</td>
<td>20</td>
<td>3.958</td>
<td>1.286</td>
<td>0.288</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>After</td>
<td>20</td>
<td>4.833</td>
<td>0.456</td>
<td>0.102</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>After – Before</td>
<td>0.875</td>
<td>1.344</td>
<td>0.301</td>
<td>2.911</td>
<td>19</td>
<td>0.004*</td>
<td></td>
</tr>
<tr>
<td>Trance state</td>
<td>Before</td>
<td>20</td>
<td>3.591</td>
<td>0.612</td>
<td>0.137</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>After</td>
<td>20</td>
<td>3.980</td>
<td>0.516</td>
<td>0.115</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>After – Before</td>
<td>0.389</td>
<td>0.518</td>
<td>0.116</td>
<td>3.358</td>
<td>19</td>
<td>0.001*</td>
<td></td>
</tr>
<tr>
<td>Quality of Life</td>
<td>Before</td>
<td>20</td>
<td>3.375</td>
<td>0.334</td>
<td>0.075</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>After</td>
<td>20</td>
<td>3.663</td>
<td>0.229</td>
<td>0.051</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>After – Before</td>
<td>0.288</td>
<td>0.291</td>
<td>0.065</td>
<td>4.425</td>
<td>19</td>
<td>0.000*</td>
<td></td>
</tr>
</tbody>
</table>

Note: a = .05

In the experiment group, the result shows that PLRT has strong relationship towards quality of life, and psychological well-being, with level of confidence at 0.05. It shows that there is positive relationship between psychological well-being and quality of life, with level of confidence at 0.05. However, it may show that trance state may not have influence in quality of life with level of confidence at 0.05.

The changes in psychological well-being that were found were in the predicted direction, which is to say that participants after receiving a past-life regression and counseling had higher well-being scores than the time before the treatment. And the scores have improved from one session to the next sessions. However, there were cases where there was a deterioration in scores at the 7-day follow-up for 21 days (but not immediately afterwards) for those who had received treatment.

Experimental Results – Qualitative

Of the 20 participants who received both past-life regression and the counseling, only 9 cases achieved full benefits of having insights in past life learning, improvement psychological well-being and improvement in life quality. That is their both conscious and unconscious minds have been reshaped to be more concentrate in their present life than before the treatment. Yet 5 other cases sited that they were very pleased with the treatment and outcomes. Finally all 14 cases were satisfied with the treatment since their psychology well-being and their shame of misconduct has increased.

The participants who received the least benefits claimed their present lives have improved to the extent to which they are much happier; however,
their measurement of morality has lower scores than the rest of participants. There were difficulties in the step of abreaction (to end the effects of Karma), detachment (equanimity), confession (telling one’s life stories about the failings or wrong doings).

Five selected participants their past life experiences, levels of their noble truths discovery, and the number of past lives they could recalled. The following 7 observations are made,

1. Most recent past lives have influences to the present life.
2. 7 out of 15 could recall more than 1 past life, and the maximum number of recall is 10 past lives.
3. Of the 7, there is a moderate tendency that people are re-incarnated in the similar social status.
4. People can learn worldly experiences and karma of their own better than hearing from preaching.
5. Noble experiences could only occur to the ones that their past lives devoted to enlightenment endeavor.
6. Sex can be changed over different past lives.
7. Deed seated memory of thinking karma can hurt people’s lives.

There is no relationship between Psychological Well-Being, Past Life Learning, and Quality of Life and the discovery of people noble truth.

Conclusions

The purposes of this study, in general, were satisfactory. There were substantial psychological benefits or changes in beliefs associated with the presence of past-life story recalls. Any benefits associated with regression procedures may not pertain to the time periods actually recalls but to other factors such as their appropriateness at that time for a particular person. It may also be that the depth of trance was insufficient for psychological benefits to occur in the control group. The fact that those with past-life memory recall were more likely to have higher scores on a measure of altered experience suggests at least the relevance of depth of trance to past-life regression procedures. It may be that past-life regression used in isolation, as it was in this experiment, is not effective, and that other factors, such as a counseling or habit change practices, must be present in order to release any potential benefits.

It may also be that the presence of past-life memory therapy is more effective when targeted toward the treatment of specific psychological disorders rather than simply used in order to try to achieve greater psychological well-being. Studies are needed to ascertain whether the presence of past-life memory therapy can contribute to the alleviation of psychological problems such as phobias, undesirable addictions, and compulsive behaviors. In addition, whereas analogue studies such as this one can identify the contributing factors to successful counseling techniques when such factors are implicated, analogue studies cannot rule out contributing factors because of the complexities of the actual counseling and therapeutic dynamics that can be only partially reproduced in a laboratory. The overall
shift toward more transcendent beliefs is not surprising given the social cognitive features of the experimental sessions, such as the expectations of participants that they could experience past-life imagery. It may also be that the sessions provided participants with an opportunity to explore their own experiences and hence to sensitize or reintroduce them to the potential value of such inner exploration. This study had a number of limitations that could perhaps be addressed in future research. First, we were unable to reliably induce past-life experiences. It would be helpful to know what variables actually contribute to the evocation of such experiences.

Buddhism’s doctrine may be applied in the diagnosis step which can be extended to enhance an understanding of the clients’ symptoms. Clients of Past Life Regression Therapy tend to believe that reincarnation is real, and they already assumed that their sickness come from unresolved issues in their past live. The presumption is deteriorating the past life stories and quality of treatments. Frankly, Buddha emphasized the wisdom and karma of past lives than past lives themselves. This concept should be emphasized to the clients before the hypnosis process. Secondly, the inaccuracy lies in the use of suggestive questions by therapists to ask the clients recall their past life’s stories. In the West, clients are not asked to meditate before hypnosis; therefore, the clients may not even get the unconscious level when they are recalling their past life memories. The Buddhist way of breathing concentration can directly help the clients to the unconscious memory recall process.

When the therapists ask the clients’ learning points, the clients will formulate their life improvement by their free wheel. The problems are when the clients do not detach their feeling from past life recalls. Buddhism’s teaching on good deeds is an important contribution to this process, where the clients will focus on their present live more than what already had happened. The fourth step is the follow through so that the clients would develop good karma so that its energy will be stronger than bad karma the clients had committed in their past.

There are more scientific evidences to reveal successful cases of past life regression therapy than to whether or not past lives really existed. The experiment of past life regression shows that it is likely that negative perception of the world may have caused us the mysterious sickness and a series of bad lucks. Buddhism views that the wrong doing in the past may have caused certain sickness today; and this relationship can directly be described by the law of karma. Whether or not the past life stories are real or not, the past life karma is more real.

Most past life regression therapy cases reveal that the therapy could withdraw negative vibrations caused by both the recurring thoughts after the actions and the past life actions themselves. Since there are two layers of past life negative vibrations, multiple therapy sessions could be needed in some cases. Yet, bad past life karma cannot be alimented by the therapy. By developing good thoughts and good actions, new good karma will be
building up. The new good karma is developed by the wisdom from past life lesions will directly off-set bad past life karma.

References

Ian Stevenson.(1966). Twenty Cases Suggestive of Reincarnation, University of Virginia Press.