

SOUL RETRIEVAL FOLLOWING TRAUMA: A CULTURAL COMPARISON

JANE A. SIMINGTON

Taking Flight International Corporation

jane@takingflightinternational.com

JOAN I. J. WAGNER

University of Regina

ABSTRACT

Post-traumatic Stress Disorder (PTSD) is a disabling psychiatric condition involving an ongoing re-experiencing of the traumatic events. In attempting to escape the distressing emotions involved in the reliving, many PTSD patients with prolonged traumatic experiences, such as childhood abuse and war experiences, show a clinical syndrome that is characterized by dissociation (Lanius, 2010). Spiritual interventions, such as various types of soul retrieval that have been practiced by various First Peoples worldwide, can be effective in addressing the soul loss that occurs as a result of dissociation. This study applied a soul retrieval regression therapy intervention to two different research groups, university students and Indigenous adults, with statistically significant results.

Keywords

PTSD, trauma, dissociation, soul retrieval,
therapeutic regression, spirituality

Introduction

Although evidenced-based psychological and pharmaceutical approaches for treating Post-traumatic Stress Disorder (PTSD) and the symptoms of dissociation show benefits, these approaches may not be completely effective for all (Grunert *et al.* 2007; Wahbeh *et al.* 2017). Some researchers contend that the Western approach to the PTSD diagnostic criterion does not capture the dynamics of trauma experienced by those who view their health and illness as a function of their spirit and spirituality (Afana *et al.* 2010; Mutambara and Sodi 2018).

The relationship between spirituality and psychiatric concerns has been a topic of interest for many researchers, beginning with Sigmund Freud (Koenig 2012; Foster *et al.* 2016; Smothers and Koenig 2018). Spirituality has been noted as a key factor in PTSD (Bormann *et al.* 2011; Currie, *et al.* 2015; Hinton *et al.* 2020; Eisenbruch 2017). Enhancing spiritual connection has been found to help those who are traumatized achieve a sense of mastery over the traumatic events (Mutambara and Sodi, 2018).

Schuman (2016) found that combat veterans requested the inclusion of complementary and alternative treatment approaches for their PTSD symptoms that included attention to their spiritual needs. Spiritually based complementary and alternative treatment approaches that demonstrate measures of success when used to help those with PTSD include: compassion meditation (Lang *et al.* 2019), mantra and mantram repetition (Hughes and Handzo 2010; Bormann, *et al.* 2009; 2011), mindfulness (Lang 2017), energy touch therapies (Engebretson and Wardell, 2012), drumming (Harner 1995; Winkelman 2003), spiritually integrated intervention groups (Dyer *et al.* 2004; Harris *et al.* 2011), soul restoration workshops (Opus Peace 2018), and Shamanic healing practices (Engel-Smith 2014; Wahbeh *et al.* 2017).

Researchers have also reported the positive effects of spiritual practices on physiological markers of PTSD, including brain wave patterns (EEG), heart rate and rhythms (EKG), heart rate variability (HRV), blood pressure, pulse, and respirations (Steibhubl *et al.* 2015; Chalmers *et al.* 2014; Sammito *et al.* 2015). Knowledge of the positive neurophysiology effects on PTSD symptoms produced by soulful experiences has stimulated a resurgence of interest in the conceptual approaches to psyche proposed by Carl Jung.

Jungian psychotherapist Donald Kalsched (2013) reported that Jung recognized the universality of the beliefs surrounding soul loss resulting from dissociation. Kalsched commented that Jung believed the fractured soul part was held in a non-ordinary reality, an archetypal container, where it was supported by ancestral spirits and soul animals. Jung stressed the importance of providing therapeutic regression to connect the traumatized person with the fractured soul part. According to Kalsched (2013), Jung noted that to connect with the soul, the soul's language must be used – the language of metaphor and symbol.

Regression therapy uses techniques to help the traumatized person enter the subconscious terrain of the non-ordinary realities. It has gained support since Ruth Lanius (2004) reported MRI findings showing that when trauma clients relate their trauma narratives, they replay these memories through the imaging functions of the brain's right hemisphere. Her discoveries

were supported by those of Scare (2005) and Shore (2008) who demonstrated that alignment with right hemispheric processes is essential for the treatment of dissociation. The MRI studies strengthened the findings of Levine (2005) and Pugh (2004), who had found that by offering the nervous system right hemisphere options, such as imagery, the transformation of wounding into healing became a possibility. These studies support the re-examination of ancient and cultural healing methods which relied on experiences that more readily engaged the brain's right hemisphere than the left. These healing methods drew on metaphors and symbols that appeared in nature, dreams, and visions. They relied on practices once used by the medicine people known in many cultures as Shamans (Karatidi, 1997).

The word Shamanism originates in the language of the Tungus tribe in Siberia. It is now commonly used to refer to spiritual healing practices that have been a part of First Peoples' cultures around the world for thousands of years (Harner 1990; Ingerman and Wasserman 2010; Vilaldo 2011; Alexander 2019). Shamanism is not a religion: its healing methods are non-denominational. Shamanic interventions are based on a belief in an unseen world that can be accessed in an altered state, and on an understanding that there are ancestors and spirit guides (some in animal form) who assist with the healing work (Ingerman and Wasserman 2010; Mutambara and Sodi 2018; Alexander 2019). In the Shamanic worldview, it is believed that physical, mental, emotional, and social maladies are often rooted in spiritual concerns and that soul healing results in healing of the body and the mind (Alexander, 2019). Alexandra King, Inaugural Cameco Chair in Indigenous Health and Wellness at the University of Saskatchewan, affirms this view: "if the spirit is wounded or it is not well, then the way towards healing is spiritual – it requires interventions like Indigenous ceremony or reconnecting with culture and land that would then help with this kind of healing" (Glazebrook 2019).

Duran introduced the word *soul* into American psychology with his work on the soul injury experienced by Indigenous people (Duran and Firehammer 2016; Duran, 2017). Jimenez (2018) wrote that a soul injury is a moral wound beyond PTSD. Opus Peace claims that soul injury more clearly describes the inclusiveness of the effects of trauma, and that it leads to a sense of being defective and empty (Opus Peace 2018).

Soul retrieval, a major Shamanic healing method, flows from the belief that when trauma happens, a part of the soul can fracture off and remain trapped in the non-ordinary realities (Kalsched 2013) that exist alongside the scene of the trauma. In traditional Shamanic practice, the Shaman enters the non-ordinary realities to retrieve the missing soul fragment(s).

In neo-Shamanism, the traumatized person is, through the use of a guided visualization, induced into a deep state of relaxation and then regressed back to the scene of the trauma, there to reclaim, heal, and reintegrate the fractured soul part(s) back into the whole soul, allowing the person to feel more healed and whole (Simington and Wagner 2020).

Purpose of the study

To date, the literature describing the processes and the positive effects of soul healing following trauma that rely on help from spirit guides and ancestors (Mutambara and Sodi 2018; Simington and Wagner 2020) and on soul retrieval to reclaim and reintegrate a fractured soul part(s) (Simington and Wagner 2020) have been conducted with subjects from First People cultures. The purpose of this study was to identify whether these methods would have similar and positive outcomes for subjects who did not belong to an Indigenous community or background and who therefore likely did not hold deeply ingrained cultural beliefs and values with regard to soul retrieval.

The guiding question for this research was: Will there be consistency between the qualitative and quantitative findings from the data obtained from the research conducted with a sample of First Peoples and the data obtained from the sample of Caucasian university students and professors?

Methodology

Sampling and subject selection

Previously published research described the qualitative and quantitative findings following a soul retrieval intervention conducted individually, with eight members from an Indigenous community in Canada who had completed a *Trauma Recovery Certification* Training (Simington 2019; Simington and Wagner 2020). During the trauma course, participants had been introduced to the theoretical concepts of soul loss following trauma from both Jungian and Shamanic perspectives.

Six months after that study was completed, it was replicated with a sample of convenience drawn from a pool of university students and professors. These individuals volunteered to participate following the receipt of written materials, poster presentations, and Zoom and Power Point presentations introducing them to the Jungian and Shamanic theory of soul retrieval, as well as to the purpose and process of the study.

Ethical consideration

Ethical approval was obtained from the Ethics Review Committee at the University of Regina, Saskatchewan, Canada. Written consent was

obtained from all study participants. Verbal consent was again obtained just prior to the research intervention.

The soul retrieval research intervention was facilitated by an internationally recognized trauma recovery specialist with extensive experience in using guided visualization to safely and effectively regress a client into the soul retrieval experience. The facilitator of this research intervention had also facilitated the soul retrieval intervention in the initial study conducted with the sample from a Canadian Indigenous community.

Prior to leaving the research setting, participants in both studies were assessed for their emotional stability and for their orientation to all three spheres (person, place, time). They were reassessed three hours post-research intervention and then given contact information of counselors to call if they felt any post-intervention distress. Their emotional stability was again reassessed on day three post-research intervention.

Measures

PCL-5

The PCL-5 is a twenty-item self-report measure that corresponds with the DSM-V symptom criteria for PTSD (www.ptsd.va.gov). Subjects rate the severity of each symptom on a five-point Likert-type scale. Psychometric properties of the PCL-5 have been established for clinical and research uses (Blevins *et al.* 2015; Bovin *et al.* 2015; Wortmann *et al.* 2016). In this study, the PCL-5 was self-scored by each study participant in both groups three days pre-research intervention and repeated three days post-research intervention.

Semi-structured interviews

Three days post-intervention, one-hour interviews were conducted with each study participant in both groups. Open-ended questions that focused on the physical, mental, emotional, social, and spiritual impact experienced both immediately and three days post-intervention were used to guide the interviews.

Method

The methodology utilized with both groups was replicated as closely as possible. The major difference was that the research with the Indigenous group was conducted in a hotel suite owned by and located on their land. The research conducted with the University group took place in a conference room, located on the university premises.

Upon arrival at the research site, each participant in both groups was given a brief review of the research intervention and asked to provide a

verbal consent. After allowing a few moments for the establishment of emotional safety, the research intervention facilitator began the research intervention by asking the study participant to briefly describe a traumatic life event. When the research intervention facilitator recognized that the relating of the trauma had caused a nervous system hyper-arousal, the study participant was asked to nod if he or she was “back at the scene of the trauma.” If a positive nod was given, the study participant was asked to nod if he or she was witnessing a “former self that looked like you did, at the time of that trauma.” When the nod confirmed the connection, the study participant was provided the following guidance:

“Ask your Spirit Guides and Helpers to assist you in making that part of you feel safe.”

“Ask your Spirit Guides and Helpers to assist you in doing a healing for that part of you.”

“Update that part of you to all you are now doing in your life.”

“Invite that part of you to return and be with you in the reality you now live in. Let that part of you know you want this to happen so you can be reunited, and together be more whole and complete.”

When the study participant nodded that the above process was completed and there was a sense the soul part was ready to return, the study participant was guided to follow a visualization which symbolized bringing the soul part up through levels of consciousness and back into the present reality. When the study participant nodded to indicate this was complete, the study participant was led through a visualization which helped reintegrate the soul part into the larger soul.

Following the reintegration, a breathing and body awareness technique was employed to facilitate the study participant’s safe return from the regressed state. When it was assessed that the study participant was fully present in all three spheres, moments of introspective silence were provided, and post-intervention journal writing was encouraged. When it was assessed that the study participant was orientated in all three spheres, follow-up directions, to ensure emotional safety, were given.

On the third post-research intervention day, study participants met individually with a member of the research team who had been present during the research intervention to self-score the PCL-5. After completing this post-intervention measure, a semi-structured audio-recorded interview was conducted. Open-ended questions guided the interview in which the study participant was asked to describe any physical, mental, emotional, or spiritual effects noted since the soul retrieval. The study participant was

also asked to identify any relationship changes that had occurred since the soul retrieval.

Findings

Demographics

Study participants in the Indigenous group consisted of seven females and one male, ranging in ages from twenty-five to sixty-nine years of age. Study participants in the University group consisted of two Caucasian males and six Caucasian females, ranging in ages from twenty-four to sixty-two years of age.

Quantitative outcomes

PCL-5 scores

For the Indigenous group, there was a difference from pre-to-post intervention of more than five points for all seven study participants. Based on scoring criterion, this indicates that all participants achieved a positive response from the soul retrieval intervention. The scores of all study participants showed a difference of ten points pre-to-post, indicating that clinically meaningful progress was achieved from the intervention. The total average pre-to-post intervention score is thirty-three; this score indicates that the Indigenous group attained clinically meaningful results from the soul retrieval intervention (see Table 1).

Study participant	Pre score /80	Post score /80	Pre to post score difference
1	54	7	-47
2	37	3	-34
3	27	0	-27
4	48	8	-40
5	65	24	-41
6	12	0	-12
7	33	3	-30
Average scores			
	39	6	-33
>33/80 indicates need for further PTSD assessment. A difference of 5 points is the threshold for indication of positive response to treatment. A difference of 10 points is the threshold for indication of clinically meaningful progress.			

Table 1. PCL-5 Scores for Indigenous group

Applying the criterion outlined by Weathers *et al.* (2013), it can be noted that pre scores for five of the eight study participants in the University group fall within the category that would indicate the possibility of PTSD symptoms (see Table 2).

The post scores for one study participant showed an increased score from pre to post intervention, indicating an increase in PTSD symptoms following the intervention. The post scores for six of the eight study participants showed a difference of more than five points, indicating that they achieved a positive response to the soul retrieval intervention. Five of the eight scored a pre to post difference of more than ten points. These pre to post score differences indicate that meaningful clinical progress resulted from the soul retrieval intervention. The total average pre-to-post intervention score of fifteen would indicate that the University group attained clinically meaningful results from the soul retrieval intervention.

Study participant	Pre score /80	Post score /80	Pre to post score difference
1	43	16	-27
2	29	41	12
3	52	19	-33
4	8	5	-3
5	25	8	-17
6	60	34	-26
7	35	22	-13
8	62	53	-9
AVERAGE SCORES			
	39	25	-15
>33/80 indicates need for further PTSD assessment. A difference of 5 points is the threshold for indication of positive response to treatment. A difference of 10 points is the threshold for indication of clinically meaningful progress.			

Table 2. PCL-5 Scores for university group

As these results show, there is no significant difference between the Indigenous participants and the University participants before the soul retrieval intervention $t = .288$ $p = 0.778$ (2-tailed).

Comparison between Indigenous (I) and university (U) groups				
		Mean	Std. Deviation	Std. Error Mean
Pre-Retrieval	I	41.88	17.844	6.309
	U	39.25	18.622	6.584
<u>Independent Samples Test</u>				
F = 0.007 Sig-.935				
t = 0.288 df=14 Sig = .778 (2 tailed)				
		Mean	Std. Deviation	Std. Error Mean
Post-Retrieval	I	6.33	9.136	3.730
	U	24.75	16.628	5.879
<u>Independent Samples Test</u>				
F = 3.053 Sig- = .1060				
t = -2.435 df = 12 Sig = .031 (2 tailed)				

Table 3. t-Test Comparison

As the above results indicate, there is a significant difference between the Indigenous and the University participants after the soul retrieval intervention: $t = 2.435$ $df = 12$ $Sig = 0.031$ (2 tailed). Comparison of the Indigenous group pre-retrieval intervention to post-retrieval intervention indicates a significant difference pre-retrieval intervention to post-retrieval intervention: $t = 7.271$ $df = 6$ $p = 0.000$ (2 tailed). Comparison of the University group pre-retrieval intervention to post-retrieval intervention indicates a significant difference from pre-retrieval intervention to post-retrieval intervention: $t = 2.798$ $df = 7$ $p = 0.027$.

Qualitative data

Semi-structured interviews

A semi-structured audio-recorded interview was conducted with each participant in both groups on day three post- intervention. The interview focused on determining the physical, mental, emotional, social, and spiritual effects the study participants had experienced immediately following, and in the three post-intervention days. Six of the seven study participants in the Indigenous group returned for the interview. All eight study participants in the University group returned for the interview. Audio recordings were transcribed by a hired individual who was independent of the study. Transcriptions were analyzed and the following six major themes emerged:

Increased positive feelings

Indigenous group	University group
Five of the seven participants spoke of having an increased sense of inner peace. “After the soul retrieval I was able to have just a good feeling without all the interruptions in my mind.” “I was able to feel calmness and enjoy my own company.” “Since the retrieval, I have a sense of inner peace, a sense of stillness.”	Five of the eight participants described the experience as giving a sense of empowerment. “It’s a unique kind of empowering experience.” “Ah, yah, positive. I think maybe an increased feeling of wellbeing.” “A kind of an enlightening experience... the ability to kind of see yourself through a different lens.” “I just feel more joy.” “I just generally felt uplifted, and I felt in my energy, just like in feelings of joy. I feel more love for myself.”

Increased spirituality

Indigenous group	University group
Five of the seven participants described changes in their spirituality. “After the death of my baby I lost my spirituality, the soul retrieval brought a sense of spiritual healing.” “I do believe, I did always believe in my spirit, just that I thought it was so wounded, but after the soul retrieval there was a feeling that I got, just like I had a full warm chest, inside. It still feels warm inside to be able to have a part of my spirit back.” “My whole spirit is better. I think I can feel some forgiveness.”	Four of the eight participants spoke of how the results of the soul retrieval intervention had impacted them spiritually. “You know it’s a really big thing when there is all this fragmentation, each fragment umm...its not only the fragments that are lost, but the personality of the soul that is functioning in the world is actually fragmented itself, so it’s a big thing to get the soul fragments back.” “I don’t identify with the type of spiritual practices that are related to it and so, that did not resonate with me in the moment. And, at the time of the process, I didn’t feel like I was connecting with it properly, but I’ve been amazed at the impact that it had on me since.” “But, yah, so I think I came into this study without realizing that it was...I didn’t realize that the um, importance of the, um, soul, and, and energy and all that’s to the study, and so I didn’t connect with it very well during the study, but then boy did it have an impact.” “I think it does resonate with me in a way that it’s also something that I resist. Both my grandmothers were very spiritual type people and not part of organized religion, so um, I think I have always felt partly attracted to that and resisted it. And I think that this just pushed me on the spectrum toward appreciating it.”

Feeling more in the body

Indigenous group	University group
Five of the seven participants spoke of feeling more grounded and connected. “I feel very grounded.” “I am more settled.” “I feel focused, like laser focused almost.” “I feel so focused and grounded and less chaotic.”	Seven of the eight participants spoke of being more grounded. “I think I am more gathered.” “I am able to sit longer and do things. I have always been distracted easily so this is good for me.” “I have felt more present since the intervention.” “I feel more together.” “So, the big thing for me is that in being grounded, in knowing what’s happening, I don’t feel like I’m triggered in the way that is causing me to react to everything.” “It really changed me, and really opened up my heart a little bit too. And I am able to stay more present too.” “I would say I’m maybe a little more grounded and a little less anxious, just a bit more collected, less scattered, less nervous.”

Increased awareness

Indigenous group	University group
Four of the seven participants spoke of gaining an increased sense of awareness. “It feels like my world is really bright, like the sky and all. I could notice things more than before. I saw them before but not so vibrant.” “I seem to have more awareness, more space in my head. I can see things and enjoy, and I feel joy.” “It’s opened up doors in my thinking. I know where I can take risks to do some stuff I have wanted to do.” “I feel a sense of clarity. I feel calm, thoughts are not rushing through my head as quickly and radically as they usually do. My mind is completely at ease.”	Five of the eight participants spoke of being more aware of self and surroundings. “The piece I brought back was like a little fourteen-year-old, boy, but there is a piece of innocence that came back with him. I can really see how that has come through a lot more in my daily experiences. I actually went back to work on the day [...] after the intervention. It was like I had a really good time, like it was fun. It was amazing really.” “I am able to think more clearly as opposed to feeling like my thoughts were muddled and I felt less numb.” “I could think more clearly and concentrate and felt more energized.” “I felt way less numb and way less tired.” “I felt less detached from my children, and I was aware that I had not known how detached I had felt.”

Aware of spiritual guides

Indigenous group	University group
Four of the seven participants spoke of becoming aware of their Spirit Helpers and of how that awareness made the soul retrieval intervention safer. "I guess the freedom to bring our Spirit Helpers, you know which is kind of in our culture, that made it easier to do the deep work, since it is in our beliefs." "The buffalos were there, and they surrounded me." "Knowing that my Grandmother was there, knowing that it was her who was helping me."	One of the eight participants commented on being assisted by a spiritual helper in animal form. "It was strange. During the retrieval, when I was back into my house and calling for help, and when I opened my front door my dog was lying on my front step. She was there. And my being has always been animals right since I could walk, it was, all I wanted was to be with animals, and now my dog from the past was there to help me."

Positive impact on relationships

Indigenous group	University group
All seven participants spoke of noticing a positive change in their behaviours in relationships. "It has changed for the better. I feel more connected." "I want to be with my family, be with my nieces and nephews." "I am usually cheerful, but after the retrieval my energy was lighter, and I was greeting people." "My daughter is going through a rough time, but since the retrieval I am more patient with her children." "I had fun with my granddaughter last night, more fun than we usually have. I think it took the block away." "I sure hugged my six year old, initiated the hug and demanded lots of them. "I feel somehow softer as a person toward family."	Six of the eight participants spoke of noticing positive effects the intervention had on their relationships. "I think I feel more accepting of the way people are. I noticed in a couple of my interactions since the intervention, that it was okay that they were the way they were." "I was very happy to cater to my children more, and just connect with them more and listen to them and find out more about what was going on in their lives." "On the playground when I went to pick up my daughter, I noticed that even on that day after the intervention, I wanted to stay and let her play and I felt comfortable interacting and less alone with... in the company of the other parents. There was before, a part of me that always wanted to quickly retreat because I was different, and that day, I didn't." "Like I just feel connected. I felt like my kids really responded almost like they were sort of aware." "The night of (the intervention) like super connected to my little one. Just like on cloud nine." "I feel I am a little more aware of where people are in their lives and what they are experiencing."

Overall sense of healing and wholeness

Indigenous group	University group
All seven participants voiced they believed that the soul retrieval intervention had provided healing. “It was so beneficial for me. I believe soul retrieval is one of the best ways to heal. I have worked on that before, but I feel so much better now.” “I can move past it now, and I won’t have to hold it in and pretend I am strong.” “It feels like a weight off my chest, which is pretty big, and I feel fuller in my chest.” “Oh my God it was such freedom. I knew it worked because I felt so free and I really, really, wanted to get home to be with my grandkids.” “Since I had it, it feels like I really needed that part back and it feels amazing.” “Having her back makes me feel really, good.” “It was very healing for me, even though it was scary.” “I don’t have to look behind me now.” Three participants added the word “wholeness” in conjunction with their description of their healing experience. “I feel whole, and it feels really good to talk about it.” “I feel like my spirit is more whole.” “I can’t describe how whole this healing is for me.”	All eight participants spoke of having a sense that the soul retrieval intervention had given them a certain amount of healing. “A deepening relationship with me [...] with that part of me. I am determined to take care of her.” “I appreciate the work [...] the healing work.” “I am happy that more helpers are recognizing this need [...] the need for healing.” “Gave me the ability to move forward, if that makes sense.” “I feel like it brought a sense of closure for the childhood event.” “I feel more energy. I even see a change in my posture [...] I feel more whole, more healed, I guess.” “I felt uplifted. I felt relief. I felt more, maybe more healed.” “I feel like I have incorporated that lost part of myself and at yoga when we were all dancing, I had a sense that she was also dancing, dancing finally, and quite happy.” “If I continue to embrace her and recognize her and incorporate her, I think it will make me stronger as a person, with boundaries that I didn’t have before.”

Discussion

The present research was conducted to determine if the positive results obtained from previous research conducted with an Indigenous group to reclaim a soul part that had fractured during trauma (Simington and Wagner 2020) would replicate with a Caucasian University group. The methodology was to determine if study participants would show a score decrease from pre- to post-soul retrieval intervention on the PCL-5 and describe positive post-intervention effects on the physical, mental, emotional, social, and spiritual aspects of their being, and would there be consistency between the qualitative and quantitative data findings?

As noted in the “Findings” section above, study participants in the Indigenous group had PCL-5 pre-to post-score differences ranging from

twelve to forty-seven. PCL 5 results for the University group show pre- to post-score differences ranged from three to thirty-three. According to the scoring criterion for this measure (Weathers *et al.* 2013), the pre- to post-score differences for both groups indicate that the soul retrieval intervention had resulted in a positive response for participants in both the Indigenous group and the University group.

Results of the t-Test comparison of the group scores indicate that there was a significant difference from before the soul retrieval intervention, to after the soul retrieval intervention for both the Indigenous group and the University group.

As also reported previously, the t-test comparison showed no significant difference between the Indigenous participants and the University participants before the soul retrieval intervention. Results of the t-test do show a significant difference between the Indigenous and the University participants after the soul retrieval intervention; $t = 2.435$ $df = 12$ $Sig = .031$ (2 tailed). These results would indicate that the soul retrieval intervention had a significantly greater effect on the Indigenous group participants than it had on the participants in the University group.

The six themes derived from the narrative descriptions taken from the audio recorded interviews conducted on day three post-intervention suggest that study participants in both groups found the soul retrieval intervention had helped them: feel more in the body; have an increased awareness; increased positive feelings; improved relationships; and an overall sense of healing and wholeness. Five of the seven participants in the Indigenous group and four of the eight in the University group reported an increase in spirituality. Four of the seven in the Indigenous group and one in the University group reported being aware of Spirit Guides during the soul retrieval intervention.

The cross-verification of the information obtained from both qualitative and quantitative sources supports the validity of the results obtained (Bekhet and Zauszniewski 2012). This indicates that the soul retrieval intervention produced positive and significant effects on the PTSD symptoms for participants in both groups. The positive effects were somewhat greater for the Indigenous group participants than for the participants in the University group. This result may reflect the influence of differences in belief systems; that is, how one interprets a spiritual experience can impact the outcome of a spiritually-focused intervention (Bahari 2020; Hinton *et al.* 2020; Eisenbruch, 2017) including soul retrieval (Wahbeh *et al.* 2017). As one participant in this study stated, “I guess the freedom to bring our Spirit Helpers, which is kind of in our culture, that made it easier to do the deep work, since it is in our beliefs.”

Conclusion

Spirituality has been noted as an important factor in coping with trauma (Currie *et al.* 2015; Simington 2004, 2018, 2019; Wahbeh *et al.* 2017); yet “few psychotherapists recognize the possibility of soul loss” (Baldwin 2005). “The experience of the trauma is literally stored in a fragment of the consciousness [...] which becomes separated and isolated from the main personality” (Baldwin 2005 172). Baldwin’s explanation of the soul fragment being stored in a layer of consciousness supports Kalsched’s (2013) description of Jung’s interpretation of dissociation causing soul loss – and the need for regression therapy in order for the traumatized person to retrieve and reintegrate the soul part back into the larger soul. Worldwide, soul retrieval has been an important part of the healing practices of most First Peoples. In these cultures the Shaman “soul travelled” to find and reintegrate the fractured soul part back into the larger soul. In recognition of the disempowerment that results from trauma, in this study the research intervention facilitator applied a process of regression therapy in which the client engaged in the soul retrieval process, empowering the traumatized person by allowing them to be an active participant in the healing process.

In this study, soul retrieval was found to be an effective spiritual intervention for PTSD study participants from two cultures. Positive effects for participants from the Indigenous culture were somewhat more significant than were the effects experienced by the participants from the Caucasian university culture. As Hinton *et al.* (2020) and Bahari (2020) have noted: in the selection of treatment approaches, it is important to address cultural beliefs because they are often deeply rooted and intertwined with spiritual beliefs and practices that may impact treatment outcomes.

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