Patricia Meyer first made contact with Andrea Shor, founder and director of Peninsula Educational Services, when a 17-year-old student in her program, who began using flower essences recommended by Meyer, made dramatic improvements in his work. Shor was so impressed with the qualitative changes which she observed that she decided to seek help for her own healing issues. She had experienced chronic allergies as well as cystitis since childhood. A trinity of Yarrow remedies (Golden Yarrow, White Yarrow and Pink Yarrow), as well as Crab Apple and Self-Heal provided clear relief from her symptoms. Subsequent emotional work brought many deeper insights, including a recognition of early childhood trauma which had made her quite vulnerable and psychically sensitive to her surroundings.

She came to realize that these were the underlying issues which had resulted in her physical allergies. As this deeper healing work progressed she made a permanent shift in her own personal wellness, and no longer suffers from these allergic symptoms. Shor notes, “This personal healing experience was very important to me. I began to realize that many of the learning disorders exhibited in my students probably had their basis in early childhood trauma. Many of these young children also display extraordinary sensitivity and emotional vulnerability.”

Patricia Meyer and Andrea Shor have since engaged in a highly fruitful, collaborative program benefiting many children who have been diagnosed with Attention Deficit Disorder (ADD) and Attention Deficit Disorder with Hyperactivity (ADHD). To date they have helped 24 children and have confirmed clear patterns in their work. Patricia Meyer’s insights are also enhanced by other similar consultative services with professional associates, and she has worked with approximately 50 clients who have been evaluated for ADD or ADHD in the last four years.

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Cases involving these learning disorders nearly always include identifiable trauma, usually stemming from early childhood. Quite frequently such trauma occurs during birth, or even before birth. In some cases this involves neurological impairment such as brain injury or anoxia. Extreme stress during the mother’s pregnancy, due to marital tension, divorce or death, may also be a contributing factor. Birth trauma may result from Caesarean section deliveries, induced labor, or adoption. Many other forms of significant early childhood trauma may also play a role in later learning disorders. These include abandonment issues such as an unavailable, absent or ill parent, family discord.
including frequent verbal and physical altercations, divorce, or other family system dysfunction.

Successful therapeutic intervention using flower essences involves taking a substantive case history of each child, and employing other counseling and diagnostic measures which accurately identify the nature of the emotional trauma which is nearly always present in the child. The various learning and behavioral problems are symptoms the child experiences; however, the essences facilitate an emotional pathway by which the child begins to heal and to create a new, healthier identity.

As a trained professional who has had ample opportunity to observe traditional drug treatment for ADD and ADHD, alongside flower essence therapy, Andrea Shor comments that, “Traditional drugs are geared to treat symptoms. They do not address the cause of these problems, the emotional roots. In fact, I would say that only a small percentage of children diagnosed with learning disorders are actually neurologically handicapped. Most have been severely traumatized in some way and develop dysfunctional ways of coping with their underlying emotional feelings.” Shor has noted that complete remediation is difficult for children who are on drugs. She finds that some children get depressed if they are on Ritalin for long periods of time. Others develop allergies, stomach problems, erratic twitches or similar afflictions.

On the other hand, Shor finds that flower essences initiate a much different change - the client may get worse temporarily, producing a kind of aggravation or healing crisis. However, as children work through their emotional traumas, they become less oppositional, more able to focus on what they are learning, less obsessively self-centered, and more receptive to educational therapy and social interaction. She theorizes that pharmaceutical drugs affect chemicals in the brain, called neurotransmitters, which seem to act in the more cerebral part of the brain. While not yet scientifically tested, Shor believes that flower essences benefit an entirely different dimension of the human being, stimulating what is known as the “mid-brain,” or emotional center.

ADD and ADHD Children

There are two major diagnoses for learning disorders. Attention Deficit Disorder (ADD) children often fail to pay close attention to tasks requiring great detail. They may make careless errors in school work or other activities requiring sustained concentration and attention. They may not listen when spoken to, or may have difficulties processing sequential instructions or multi-step mathematical problems. Difficulties occur in planning and organizing academic and long-term projects. Procrastination and avoidance of complex activities are also seen in this population due to inability to sustain attention which requires mental effort. Frequently, this type of child loses items which are necessary for tasks at home or in school, or becomes easily distracted by auditory, visual, or social stimuli.

The various learning and behavioral problems are symptoms the child experiences; however, the essences facilitate an emotional pathway by which the child begins to heal and to create a new, healthier identity.

The Attention Deficit Disorder with Hyperactivity (ADHD) child may often be unusually restless. They are unable to stay seated or still for reasonable periods of time. They have chaotic, excessive and random motor activities, with a marked absence of quiet play or sustained attention. Many behavioral features such as inability to delay gratification or to wait for one’s turn, or speaking or acting impulsively can also be observed.

The following case study involving male twins is chosen from many similar cases. Nathan and Keith (not their real names) were 14 years old when beginning flower essence therapy in November 1993. Both were diagnosed with ADHD by their psychiatrist. Their very aggressive and violent sibling rivalry resulted in hospitalization, so that their medications could be adjusted. They received Imipramine, Dextedrine and BuSpar. The mother of these twins was very committed to helping with consistent application of flower essences. Steady
Patricia Meyer, B.F.A. (Witwatersrand University, South Africa), C.H.T., Flower Essence Society Certified Practitioner, Reiki Practitioner, South-African born artist and wholistic practitioner, has been involved with flower essences for 26 years. She provides private consultations, is a keynote speaker for The Flower Essence Society and other international and local seminars, and a guest speaker at state colleges, universities and in her community. She regularly holds training classes on Flower Essence Therapy. Patricia writes and publishes a bi-annual newsletter “The Essential Flower”. Recently her practice has become specialized in helping children with attention and learning issues.

Readers who wish to consult with Patricia Meyer may call her at 650-348-7697; or fax 650-348-8947.

Andrea Shor, M.Ed., has been in the field of special education for 23 years. She is a professional member of the Association of Educational Therapy, and is the founder and director of Peninsula Educational Services, a consulting and tutorial agency treating children and adults with attention, learning and language difficulties. The agency provides diagnostic/assessment services, educational therapy, and consultation and advocacy for parents and clients. She has offered in-service teacher training for school districts in California and Canada, has been a guest lecturer in private and state colleges, a professional speaker for the Association of Educational Therapy, a writer for the Journal of Educational Therapy, and for the past thirteen years, a consultant for the Parent Participation Co-op Nursery Association.

Improvements have been noted, especially in that the boys show a greater sense of well-being and ability to tackle schoolwork. They still display some sibling tension, but as individuals they are more mature and cooperative. Andrea has recently tested Nathan and found him to be very present, focused and calm. Their medications have been reduced regularly since beginning flower essence therapy. As of September 1994, they are no longer taking Dexedrine.

In taking the case histories of Keith and Nathan, birth trauma was noted. Keith had blocked Nathan from coming into the birth canal. As Keith presented, the obstetrician manually forced him back into the birth canal to free Nathan. An emergency C-Section was performed in order to deliver Keith who was born blue and resuscitated after a couple of minutes. The father was present for Nathan’s birth, but not for Keith’s. The mother reported that the twins had colic throughout infancy. In early
childhood, they were not socially responsive, tending instead to be rough and willful. Marital tension was present during their early childhood and the parents divorced when the boys were three and a half years old. The mother remarried and had another son. Both twins had severe behavioral problems at school, used disrespectful language, and were generally impulsive, aggressive, or violent with each other. These problems were so severe that the parents had finally resorted to separating them.

Nathan is the stronger of the two, physically larger, more self-assured and more likely to be the aggressor. His first set of essences included the Five-Flower Formula, Self-Heal, Lotus, Holly and California Wild Rose. These were repeated for several months and then Holly and Lotus were replaced by Chicory, Chamomile and St. John's Wort. His mother noted an immediate change in his tendency to anger, and a favorable improvement in his disposition. He is now in a regular high school and is able to carry out his homework tasks effectively. His aggressive behavior is much diminished and he has a more relaxed attitude. In rare instances when he does become aggressive, he is able to reflect upon his behavior and express regret.

Keith performs slightly better academically, is more sensitive and more likely to be the victim in the twins’ interactions. Although disruptive and aggressive, he was also somewhat depressed, anxious, and easily discouraged. His first flower essence formula consisted of Five-Flower Formula, Self-Heal, and Holly. In the second set of essences, Holly was replaced by Rosemary, Buttercup, Love-Lies-Bleeding (Amaranthus), Shooting Star, White Chestnut, Mycena (Bloesem Remedies Nederland), River Beauty (Alaskan Flower Essence Project), and Fireweed (Alaska). This set of essences was continued for several months. His mother has observed that Keith is more centered and happier. His typically intense or whining behavior has changed. He has moved into a more advanced group at his special school. Recently he has shown many signs of maturation and has a girlfriend. His teacher is delighted with him and comments that “he doesn’t show any signs of Attention Deficit Disorder.” Recently his medication, a tricylic anti-depressant, was reduced to half the dosage.

Other Considerations and Therapeutic Approaches

It is recommended that multiple interventions, which include many sets of flower essences, collaboration between the educational therapist and the flower essence practitioner, and a psychological and educational program designed to correct learning and emotional blocks, be provided for the child identified with ADD/ADHD. This multidisciplinary approach insures that the whole child is treated and that all aspects of their physical, emotional, academic and psychological life is addressed.

The educational therapy program is designed from referral questions pertaining to attention and learning. A learning plan is devised utilizing parent, child and teacher surveys, classroom observation, psycho-educational testing and diagnostic teaching techniques. The educational therapist collaborates with the flower essence practitioner and notes any improvements seen in the child as the result of a new set of essences. For example, after a male twelve-year-old was treated with essences, he became less reactive and more responsive to instructional strategies. In another case of a ten-year-old, he became more “grounded”, and his “free flight of ideas” and self-distracting behavior occurred less frequently. As a result, his writing skills improved and he was able to complete a two-page story without interruption. A third student, quite depressed before receiving essences, was receiving educational therapy for writing and study skills. He also received mental health counseling one hour a week as he began flower essences. The combination of seeing a therapist and receiving the essences helped reduce the depression until it eventually subsided. He became more responsive to educational therapy and began to assume more responsibility for his school work.
The educational therapy program is enhanced when parents also receive flower essences. Many concerned parents inadvertently become intrusive forces in their child’s life. They may over-protect and over-schedule their children, hoping this strategy may improve school success. Many parents lack effective parenting skills, or they may themselves suffer from ADD, ADHD, or related disorders such as alcoholism. These adverse conditions create stress in the child who counter-reacts by avoiding school, or acting in other negative and inappropriate ways. Flower essences for the parent, combined with psychotherapy, often teaches the parents necessary boundaries and how to balance their interest with appropriate distance.

Flower essences appear to assist in the release of imprinted patterns related to early childhood or birth trauma in children who are diagnosed with learning disorders.

Other influences can also negatively affect the progress of the child. Nutritional deficiencies or a dependence on “junk foods” creates a poor physical matrix for the child’s healing. Excessive exposure to television, video games, computers, or other chaotic sensory stimulation can overwhelm ADD or ADHD children who are already hypersensitive. Despite these challenges, flower essences can make dramatic improvements, but when these environmental and cultural factors are also addressed, recovery may be quicker and deeper.

The Role of the Flower Essences

Flower essences appear to assist in the release of imprinted patterns related to early childhood or birth trauma in children who are diagnosed with learning disorders. Many such children have a disturbed or delayed incarnation process and do not fully inhabit their bodies. The flower essences facilitate embodiment and a quality of being present. An outstanding introductory remedy for this process is Five-Flower Formula, providing an important matrix of serenity, calm, stability, balance and harmony. Self-Heal encourages a healthy, vital sense of Self and assists in physical healing and bodily integrity. Other indicated essences may include California Wild Rose for willingness to engage in life experience and to feel at home on Earth, and Rosemary for physical warmth and mind-body awareness. These flowers stimulate the incarnation or embodiment process. The Cauliflower (Perelandra) essence may also be used to facilitate “rebirthing”. One child, who was born in Australia, needed the Emergency Formula (Australian Bush Flower Essences) as well as the Five-Flower Formula. An embodiment formula may be needed for several months, and it, or parts of it, may be repeated through different levels of the healing, or “whole-making” process.

Within six weeks, many parents notice changes in their children. One parent stated, “He used to be furious for the whole day if I stopped him doing something — now he cuts off after half an hour.” Another parent recalled, “I thought it was my imagination at first, that it was too soon. But there were a couple of situations that occurred where he would normally go quite crazy... and he calmed down much sooner, it surprised me. He seems less reactive.” A mother of a nine-year-old boy said, “He is doing good, has an increased appetite after being a poor eater, is filling out, as if going through a growth spurt. He seems much happier in himself,

Love-Lies-Bleeding
Amaranthus caudatus
more independent and less clinging to me.” Her son related to the mother, “I have faith in myself.” The children also appear to release anxiety, becoming more relaxed and surprisingly more affectionate.

It seems that with the help of flower essences, children acquire more options. Instead of acting from a self-limiting range of automatic reactions, they begin to discern new possibilities. At times, if their stress level becomes overwhelming, they might still regress to earlier, existing tendencies. However, with coaching and care, they can embrace new, more viable patterns. Whereas previously the child simply reacted, the child is now open to new behavioral and emotional choices; they want to change.

After the initial stabilization phase, other essences are selected according to particular symptoms in each case. A child that demands a lot of attention may require Chicory or Mariposa Lily to be able to experience unconditional love. Many children with learning disabilities suffer from environmental and food allergies. People with allergic reactions do not feel safe in their environments. Vulnerability indicates a need for protection, and the Yarrow essences, White, Pink, Yellow, or Golden Yarrow, may be useful here, to strengthen and restore the aura which surrounds and protects us. Vulnerability can be emotional or physical; the playground can be a rough and scary place. Criticism, sarcasm, goading and teasing can feel like knife wounds to a child with few defenses. Environmental pressure to fit in and achieve academically may negatively affect self-esteem. Many children need Larch for confidence in themselves and Buttercup for self-worth and self-acceptance. The essence Pine, too, plays an enormous role in any dysfunctional family where the child internalizes self-blame and guilt. Unexpressed anger may underlie depression, and many children are angry because of unending, frustrating, and painful situations they cannot resolve. Lacking new information on choices, their only available alternative is to exist in a world of fight or flight.

Because of the difficulties dealing with their children, many parents permit their children to eat junk foods just to avoid upsets. Poor nutrition, including refined sugars and artificial food additives, can cause tiredness and depression, and consequently aggravate the problem. Improving nutrition is important, and to facilitate this Manzanita can be a beneficial essence. It is directly indicated for eating disorders, and encourages embodiment by integrating the spiritual Self with the physical world.

The ADD/ADHD child is usually not the only family member needing help. In most cases the parents require support and new awareness. For example, Penstemon, for perseverance and for seeing the silver linings on clouds, may be perfect. Sibling behavior is invariably affected by the situation and family counseling can become an opportunity for benefiting everybody.

Patricia Meyer and Andrea Shor are pleased to discover the efficacious role of flower essence therapy in helping children with learning disorders, and look forward to further research in this important area. They are presently collaborating on an in-depth article, “A Multidisciplinary Approach to Attention Deficit Disorder (ADD) / with Hyperactivity (ADHD), and Benefits of Using Flower Essences.”
This picture was drawn by a twelve-year-old boy who had been diagnosed with Attention Deficit Disorder. It portrays, perhaps better than words, the sense of disassociation, or splitting of the Self, that affects many children with learning disorders. This child was somewhat responsive if he received undivided attention. However, he exhibited severe behavioral problems otherwise. These included such actions as intentionally wetting the floor, stealing from his parents or peer group, and destructive habits such as breaking things. He also showed a macabre attraction to horror and death since four years of age. This boy’s birth was not traumatic, although he was put in full-time child-care after only one month of age, which may have precipitated some abandonment issues. At five years of age, he was in a car accident, hit by a drunk driver. Although physically unharmed, he showed signs of sleep disturbance following this incident. There was much marital strife during his early childhood, and by 5 years of age his parents were divorced. There has been continued antagonism between the mother and father, with the father showing signs of alcoholism.

The drawing was done during the first therapeutic session when he was asked to express how he was feeling. The figure in front suggests a “masked” persona, who is larger and perhaps more macho. His hand signal denotes “everything’s cool.” Behind this being is a boy who appears as though he is crying for help. His facial expression denotes pain and trauma. As a whole, the picture suggests a lack of embodiment and integration.

Major remedies for this young boy have included Five-Flower Formula, to treat extreme stress and provide balance, and Goldenrod to provide a healthy individuation pattern. Auxiliary remedies have included Sunflower to help bring a positive masculine archetype and to cope with the emotions surrounding his absent father, Chicory to address his extreme neediness, Rosemary and Dogwood to provide warmth and embodiment, and Yerba Santa and Chamomile to bring calm and emotional acceptance.

Immediately after taking the remedies the boy reported a feeling of inner happiness. However, a significant incident occurred soon after, when he stole several gold coins from his father. This incident suggested a strong metaphoric quality, as he was struggling to find his own inner solar, or masculine radiance. With the essences of Goldenrod and Sunflower he was able to address the emotional wounding he felt from his father, and to find his own inner light and confidence. Some other negative incidents also ensued at school, but with these gradually came more reflective consciousness. There have been steady improvements to date, along with further cycles of flower essences. His mother has noted real behavior changes, although he is still working on many intense feelings common to all boys entering puberty. To date, he has received flower essence therapy for one year.
I have worked in the field of psychotherapy as a Licensed Clinical Social worker for nearly 30 years. I specialize in work with young children, employing Jungian Sandplay Therapy and other holistic methods of healing. I have been using flower essences in my practice since 1982, when I was certified through the Flower Essence Society training program. I use flower essences for about three-quarters of my clients and find them to be a key element in the healing process. They truly form a bridge to that part of the human being which we could call the soul, the numinous or light-endowed Self which is really at the core of all creativity and true healing.

It is extremely important to me to know that flower essence therapy offers another viable and efficacious way of helping children diagnosed with Attention Deficit Disorder, a way which does not depend on traditional drug therapy. The following two cases demonstrate very positive results:

Case One: Serious concerns were first voiced by a seven-year-old boy’s first grade teacher. She observed him to be restless, constantly fidgeting, inattentive, excitable, impulsive, of short attention span, with demands that needed to be met immediately. He often disturbed other children and displayed various forms of explosive and unpredictable behavior. In taking his case history, I noted that he was born via an emergency Caesarean and that he had colic for the first six weeks of life.

The flower essences of Mariposa Lily, Five-Flower Formula, Clematis, Shasta Daisy, California Wild Rose, and Terra (Bloesem Remedies Nederland) were chosen to address his original birth trauma and to help him “anchor” his core identity or Self. Mariposa Lily was chosen for his original birth trauma, which was perhaps compounded by the birth of a sibling only 20 months later who underwent heart surgery. These events left his mother depressed and exhausted and not as available for her older child. Clematis was chosen to facilitate a more focused and embodied presence, Shasta Daisy to provide integration by helping the emotional feelings to interweave positively with the core identity. The final two remedies encouraged a stronger incarnation process: California Wild Rose to help this child to find true heart forces for his life on Earth, and Terra to assist his ability to be in present time, with his spiritual self fully present on Earth.

Within one month, dramatic results were observed. The child responded by “settling down” in class. The teacher observed that he responded better to the transitions of the daily classroom schedule, no longer demanding to be first and more able to consider others. She expressed appreciation for his sweetness and newly emerging, trusting attitude.
His parents described him as being more secure, less fearful, showing more interest in artistic activities, and being more inclusive and responsive to his younger brother. In my work with children, I share with them that there is a “wise part” that lives within their hearts and that this part can be called upon whenever needed.

His little brother once asked him the question, “If we all love each other, does it mean we are all stuck together?” He went deep inside and reflected that, “No, we are not all stuck together. All of our Love meets together everywhere but our feet are firm upon the earth.”

This little boy has discovered a deep connection to his wise Self and lets it guide him more frequently. For instance, in the past he had many problems on the playground, but recently he said, “Now, I can ask my Wise Part to help me figure it out. I am so happy to have found my wise friend inside my heart.”

Case two involves a young girl, age six, who was diagnosed with Attention Deficit Disorder in kindergarten. In taking her case history I noted that she had been adopted at birth. Throughout her childhood there had been many problems with fearfulness, impulsivity, restlessness, distractibility, poor sleep patterns, hyperactivity, eating problems, and coping with mistakes by blaming others. She had been on Ritalin drug therapy for one full year before starting flower essence therapy. After three weeks she was weaned entirely off this drug.

The essences I selected for her included Mariposa Lily for her status as an adopted child, including core trauma of abandonment from her natural mother; Mimulus for many fears which she displayed, often masked as restlessness or hyperactivity; Chicory for ways in which she manipulated to receive love through negative attention-getting behavior; Holly for her anger and for helping her to come to a feeling of inclusion in her family and social groups; Impatiens for her irritable and often intolerant behavior; and Five-Flower Formula to help promote general stability and calm. She responded immediately to these essences and remarked that she much preferred “the fairy drops” to her drug therapy because they made her feel “happy rather than sleepy.” Her parents reported that after one month she was more agreeable and happy. She tolerated greater stress and daily responsibilities. Her sleep became more normal after years of night terrors. Most importantly, her school work remained consistent with her performance level, even though she had discontinued Ritalin.

This same formula of flower essences was continued for another month. Then, during the third month I retained the Mariposa Lily, Five-Flower Formula and Holly, and I added Clematis to facilitate more focus and presence, Terra to help clear...
blockages so that her soul-spiritual self could be more present on earth, and Snowdrop (Netherlands) to release many deep pains, fears and traumas which had been stored for years within her being.

This child’s teacher has reported a noticeable improvement in her social skills at school, with other children being able to be more responsive and loving toward her. There are also new signs of initiative and self-responsibility. For example, she has had difficulty learning to play the recorder and was easily distracted. Recently she asked her teacher to help her during recess with her recorder.

She has a difficult school history and has often come home complaining about school, or stating that she doesn’t want to go back. Her mother was very touched recently when she came home from school and announced with real conviction, “I had a great day at school!” While this young girl still has some challenges related to Attention Deficit Disorder, there is a marked change in her, which will no doubt continue to unfold and stabilize. I have especially noted a less chaotic element in her. I perceive a new order and harmony within her soul. As she works through the pain and confusion of her early childhood trauma, she is able to literally reconstellate her core identity.

The accompanying illustration shows a sandtray which this little girl constructed during a recent therapeutic session. Many of the symbols which she chose show a strong healing impulse surfacing in her soul life. Particularly significant is a rose embraced by candles, suggesting a quality of inner soul warmth. Beautiful blue stones are placed in a circular pattern, showing a movement to the center, or Self identity. In general, this sandtray shows a great deal of order and coherency. The various parts show a real relationship to each other and demonstrate in yet another way how this courageous little girl is creating a new sense of wholeness and meaning in her life.

Comments about Mariposa Lily essence:

Mariposa Lily is the major remedy in my practice, and I use it in over 80% of my cases. As a family therapist I specialize in abuse issues, custody cases, parenting problems, and learning disorders. A primary component in nearly all of these cases is a disturbance in the developmental process of the child. The child’s ability to have a healthy self-concept or ego identity depends on parent-child bonding through an unconditional matrix of love and support. This is never ideal in any child’s development, but for many children this is severely disturbed. I have practiced psychotherapy for nearly 30 years and since using flower essences for the past thirteen years I have consistently noted that all the therapeutic modalities I employ are greatly enhanced. When I use flower essences the healing is deeper, more stabilized, and generally quicker to obtain. Sometimes I cannot use flower essences because of the parent’s suspicions or distrust, or if there is inadequate opportunity for follow-through with the child. I note that these cases tend to be generally more challenging and take longer to resolve. Of all the essences I use, the Mariposa Lily is definitely the most basic, going right to the core of the problem. If I had to choose only one essence for my entire practice, it would be the Mariposa Lily. I feel that strongly about it in the line of work I am doing.

Note: Emily Whiteside Olson, LCSW, teaches seminars which help psychotherapists to develop a viable flower essence practice. Call her at 916-265-8261 for schedules and details.
About the Mariposa Lily plant

The Mariposa Lily is a member of the Lily Family (Liliaceae), in which are also found the flower essence plants of Tiger Lily, Aloe Vera, Trillium, Garlic, and Star of Bethlehem, with their characteristic bulbs and three flowers and three sepals. Lily Family plants are also all monocotyledons, meaning that they have one seed leaf. The monocots have long, linear leaves with parallel veins (as in the grasses, for example) and produce flowers on the plan of three or six.

The Mariposa Lily (also called Mariposa Tulip) belongs to the Calochortus genus within the Lily Family. Other species in this genus which are used as flower essences include the Star Tulip (Cat’s Ears), Yellow Star Tulip, and Fairy Lantern (also known as Globe Lily). All of these wildflowers are native to western North America, and are found in colors ranging from white to lilac/white, yellow, and even ochre. Calochortus comes from the Greek words kalos, meaning beautiful, and chortus, meaning grass, referring to the beautiful flowered plant with the grass-like leaves. Mariposa is the Spanish word for butterfly.

The FES Mariposa Lily essence is made from an alpine species, Calochortus leichtlinii, which grows from 4000 to 11,000 feet (1200 to 3350 meters) in the Sierra Nevada mountains and surrounding areas. It favors the exposed hillsides and ridges, and grows amongst the numerous granite outcroppings in the region. Calochortus leichtlinii is a white, three-petaled flower, with yellow and purple basal spots on each petal. The petals are slightly hairy at their base, which contrasts with the Star Tulip, whose petals are entirely covered by tiny hairs. The Mariposa Lily has a bowl-shaped corolla, and its three sepals appear as three small petals below, and between the true petals. It has erect stems from 8 to 16 inches (20 to 40 cm.) tall, with just a few narrow, linear leaves. The plant has very shallow roots, with a tiny bulb (about 1 cm. across).

Flower essence qualities

The Mariposa Lily has been called the “Madonna of the Rocks” by many practitioners. Mariposa Lily protects the purity and natural innocence which should be the birthright of every child. The heavenly, cosmic forces within this Lily counteract the overly harsh qualities which have traumatized and “hardened” the soul. Only gradually does the human child incarnate on earth, and the enfolding, nurturing forces of the Archetypal Mother are essential to the well-being of every child’s soul life. The Mariposa Lily cannot replace the human warmth of the mother, but it can help repair damage to the soul. It seems to help the psyche to address issues of pain, loss, and grief. It helps one to contact archetypal, maternal qualities beyond the immediate karmic situation with one’s own mother.

Therapeutic uses for Mariposa Lily have been dramatic, and widely documented. It is especially indicated for child abuse and abandonment, for handicapped children, for disturbed birthing or premature births, or for other traumas in the early bonding between child and mother. Furthermore, Mariposa Lily has outstanding healing qualities for many adult therapeutic issues which involve childhood pain or trauma.
An early Mariposa Lily case:

This case was reported to FES in 1983, one year after the Mariposa Lily was first prepared as an essence. The essence was still in our research category, and we had not published any information about its qualities. The report came from a woman in London, England, who had absolutely no understanding of the remedy’s properties, nor had she ever seen or heard of Mariposa Lily since the flower did not grow in her part of the world. She selected the remedy by strong kinesthetic attraction from amongst a number of research remedies she had obtained from FES.

Elizabeth (not her real name) had recently miscarried during the eighth week of pregnancy. The miscarriage was physically painful and had required hospitalization. She was not married, nor was the pregnancy planned. Her mate was supportive of the pregnancy, but apprehensive about the responsibility it would place on their lives. Elizabeth was 27 and her mate was 29 years of age. After returning home from the hospital she felt drained, depressed and full of very deep grief. She knew that she should be relieved that this unplanned pregnancy had come to an end, but instead she felt only sadness and loss.

She sought flower essences to help her to regain equilibrium. Elizabeth had no idea why she selected Mariposa Lily, but when she held it in her hands many deep feelings welled up within her. At first she experienced this as a sensation of comfort, as through there were a presence surrounding her. She sensed that a woman with a very large cape or shawl was holding her, protecting her and keeping her warm.

That night she had a very vivid dream: A being spoke to her out of a deep vast space, like a sea or sky of blue. This being assured her that the child which had sought to incarnate in her had returned to this blue sphere and was at peace. In the dream she asked why she had lost this child, and the response was, “If you will look within your own heart you will find the answers”.

Elizabeth continued taking the Mariposa Lily and these words of needing to look within her own heart stayed with her. In about a week she knew the answer involved her relationship with her mother. She had the strong inner sense after a week of taking Mariposa Lily that she needed to make peace on adult terms. She hadn’t told her mother about the pregnancy or miscarriage. When Elizabeth shared this, they both held each other and wept.

This opening up was the beginning of repairing many old, painful emotions between them. They both realized they needed to learn forgiveness and acceptance. Later that year Elizabeth did marry her boyfriend and her mother and family were part of her wedding celebration. In a follow-up inquiry to this case, she had a baby girl in 1986. She felt the Mariposa Lily was a catalyst for reclaiming her relationship with her mother; that her own ambivalence about mothering had perhaps caused the miscarriage at some subconscious level. In any case she knows for certain that the Mariposa Lily had helped her to heal from the grief of the miscarriage and then to “look within her heart” and see the need for healing with her own mother.

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