The Disembodied Spirit in Psychotherapy

An Exploration of Psychotherapists' Experiences of Integrating Energy Healing into their Clinical Practice

By

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Abstract

Although the roots of healing and energy healing are old, the implications of the advancements in the field of quantum physics are strengthening the sense of a paradigm shift from reductionistic and fragmentary methods towards holistic and participatory approaches to health and healing. The boundaries between transformation, growth and spirituality are more fluid and with the focus on finding one’s own life purpose, the gap between modern integrative psychotherapies and holistic healing is narrowing. The aim of this qualitative research was to explore in detail the humanistic - integrative psychotherapists’ personal experiences of integrating non-invasive energy healing in their clinical work and how they perceive the impact on their own and on the client’s process. The investigation was supported by an Interpretative Phenomenological Analysis. Three themes emerged: energy healing as process; intersubjectivity as energetic assimilation and dissociation as energetic misalignment. The study finds that the concept of process has a central role in both the participants’ professional and personal lives. Their respect for the client’s process and their perceived role as a facilitator is evident throughout the study which reflects their humanistic stance and values. The participants also offer their insight from an energetic perspective into what is commonly referred to as intersubjectivity. When working energetically with clients, they support the client’s unconscious healing mechanisms through the mobilisation of subtle energies guided by their increased extrasensory perception and ability for conscious energetic attunement into the intersubjective therapeutic space. The study also sheds more light on the dissociative state, which, according to the participants observations, coincides with a misalignment between the person’s energy body and physical body while a shift occurs in the person’s conscious awareness. The process reflects modern consciousness research findings on Out-of-Body Experiences and resonates with ancient holistic views of a person as an embodied spirit. The finding is further substantiated by an account describing the final separation process from the physical body at the time of death. Energy healers are therefore capable of integrating human experiences that are often diminished or pathologized by mainstream psychiatry, psychology, psychotherapy and organised religion which are slow to embrace the new scientific paradigm about the nature of reality and human consciousness. Energy work offers a gateway and an experiential avenue to life beyond the physical world and in turn can promote new insights, meaning and purpose in a wider, universal context.
“There are more things in heaven and earth, Horatio, than are dreamt of in your philosophy.”

William Shakespeare, *Hamlet*
Chapter 1: Introduction

1.1 Background and Context

The holistic approach to health and healing goes back thousands of years to ancient wisdom traditions governed by the awareness of mind-body-spirit connection (Barnett & Shale, 2012; Walter, 1999). Holism is based on the system theory which follows the laws of nature in that it recognises an ultimate interconnectedness between micro- and macro-level processes (S. E. Taylor, 2006) in the universe as well as in human beings who form an essential part of it. The re-discovery of this ancient principle started with the emergence of New Physics. It replaced the Newtonian mechanistic world view in the 20th century with the Einsteinian mass-energy equivalence concept and the Quantum theory about a responsive universe. It informs us that subatomic particles behave like waves when the observer is looking for a wave and behave like particles when the observer is looking for a particle. Thus, energy and matter convert into each other like steam to water and water to ice. Biological systems are no exception. (Eden & Feinstein, 2008; Gerber, 2002; Peirce, 2009).

The progress towards holistic views regarding health and mental health in Ireland is slow but observable. Both ‘A Vision for Change’ (Government of Ireland, 2006) and the ‘Preventing Chronic Disease’ report (Health Service Executive, 2014) discuss the need for a paradigm shift from the conventional biomedical model towards the biopsychosocial model. The biopsychosocial model (Sarafino & Smith, 2011; S. E. Taylor, 2006) rejects mind-body dualism and maintains that in terms of health and illness multiple factors such as biological, social and psychological have to be considered. Furthermore, in order to tackle the ‘burden of chronic illness’ on the
healthcare system (Government of Ireland, 2014) it stresses the interdisciplinary team approach as most efficient.

Initiatives in relation to the mobilisation of interdisciplinary teams internationally include 76 hospitals using Reiki energy healing practitioners in the US (“Center for Reiki Research,” n.d.; Rand, 1998) to provide complementary support for patient recovery and the same approach is adopted by various hospitals in the UK, Canada, Australia, Germany and Switzerland (“Reiki – studies and use in hospitals | Cancer Support Group,” n.d.).

A journal article published on the American Psychological Association website (apa.org) asserts that not only the overall population of the US in general is rapidly adopting non-western health and wellness promoting practices such as mindfulness, yoga, meditation and spiritual practices, the medical field also shows a growing interest in traditional forms of medicine such as Traditional Chinese Medicine and Ayurvedic Medicine. Thus, healthcare professionals gradually embrace the potential benefits of Complementary and Alternative Medicine (CAM) (Barnett & Shale, 2012). Barnett and Shale (2012) argue that consequently, “all practicing psychologists should have at least a basic level of familiarity with CAM and the relevant literature about its uses, benefits, limitations and contraindications” (p. 582).

From an Irish perspective, the necessity for integration of CAM and psychotherapy has also been voiced on the IAHIP conference in 2016. In her paper ‘Widening our lens’, Haughey (2016) acknowledges a similarly increasing demand in the Irish society which is, in her views, a result of dramatic social changes, the growing dissatisfaction
over the authorities’ abuse of power and the oppression of the previous centuries by church and state. She maintains, as modern physics and neuroscience is gradually catching up with the knowledge of the ancient healing traditions, those seeking empowerment and control over their own lives turn to these avenues for self-discovery, self-awareness and healing. Haughey (2016) argues that this is also a value consistent with the aims of psychotherapy and calls for psychotherapy professionals to at least keep an open mind when it comes to these practices.

The current research proposes to closely examine the experience of psychotherapists who believe that incorporating energy healing in their clinical work is adding value to the client’s process. It aims to contribute to the field via an Interpretative Phenomenological Analysis.

The study is a response to the article “Is Bio Energy Therapy a Viable Resource within the Counselling Setting?” (L. Taylor, 2016) published in Éisteach in Spring 2016 and also, to previous researches conducted by former DBS psychotherapy students (O’Keeffe, 2016; Takacsy, 2016; White, 2014) who also observed underlying subtle energy dynamics and mechanisms regarding the human body and human relating.

1.2 Aims and Objectives

The aim of this qualitative research is to explore in detail the integrative psychotherapists’ personal experiences of integrating energy healing in their clinical work and how they perceive the impact on their own and on the client’s process. The objectives of the research are outlined as follows:
- To examine the context and rationale for the psychotherapists’ inclusion of energy healing
- To understand the participants’ sense and meaning making process of these sessions
- To explore the psychotherapists’ experience of the effect of this type of integration on the therapeutic relationship including the transferential dynamics
- To examine the therapists’ decision-making process regarding clients’ suitability and fitness
Chapter 2: Literature Review

The literature review will first look at the definitions of Energy and Bioenergy and their place in modern physics, following then a summary of literature regarding the Human Energy Field and the psychology of the Chakras. The review will then explore the energetic model of health and illness and the existing integrative models to psychotherapy which draw on the energy concept. The review will conclude with the implications of the integration of energy healing into psychotherapy practice.

2.1 Universal Energy Field and Modern Physics

“If you want to find the secrets of the universe, think in terms of energy, frequency and vibration” (Tesla, 1942)

Physics defines energy as the system’s ability to do work; it is like a “fuel” that makes the system function (Minero, 2012). The consulted literature is consistent in describing the entire universe as such a system or field in which everything is vibrating, waves of energy are flowing and oscillating in and out of form (Brennan, 1990; Peirce, 2009; Wynne, 2015). O’Farrell (2015, p. 18) elucidates on Einstein’s theories, the Law of Conservation of Energy and the Mass – Energy Equivalence theory. The former informs us, energy cannot be created or destroyed, only converted from one form to another, while the latter states, energy and matter are essentially two forms of the same property. Consequently, the only difference between the two is that matter is a denser energy form in which it is slowed down to the point where it becomes visible to the ordinary human eyes.
Quantum physics examines the behaviour of the smallest units of energy, the quantum. Nelson (2007) argues, experiments provide evidence that the quantum is “intelligent to some degree” because it responds to the expectation of the observer or experimenter defying the rules of the old Newtonian physics (2007, p. 97). In other words, the quantum aligns its behaviour with what is expected from it; particle (matter) or wave (energy). The implication of this revolutionary discovery is that “objective reality does not exist as elements of the field are always altered by their position in relation to other things” (Gaffney & O’Neill, 2013, p. 103). Furthermore, spiritual literature and authors in the field of energy medicine (Brennan, 2011; Gerber, 2002; Judith, 2004; Minero, 2012; Peirce, 2009), who believe that human beings create their own physical reality, back their argument with this very concept of quantum physics. They postulate, that the conscious or unconscious transmission of energetic vibrations emitted by human consciousness (spirit, soul, higher self, essence) such as desires, expectations, thoughts and emotions mould the energy field and create physical experiences.

Another milestone finding is that regardless of their distance, change effected on one quantum particle results in an “instantaneous and equivalent change” in the other (Nelson, 2007, p. 98). The notion of interconnectedness is resonant with the holistic views of the ancient wisdom cultures (Bevell, 2015; Gerber, 2002; Judith, 2004; Peirce, 2009) and is beginning to be embraced by contemporary psychotherapy as Intersubjectivity Theory following the lead of Field theorists and new neuroscience research (Gaffney & O’Neill, 2013; Schore, 2003; J. B. Taylor, 2009) Neuroscientist Ramachandran writes in relation to the mysterious Mirror Neuron System that “Perhaps we need to remain open to the Upanishadic doctrine that the ordinary rules
of numerosity and arithmetic, of "one vs. many", or indeed of two-valued, binary yes/no logic, simply doesn't apply to minds — the very notion of a separate "you " or "I" is an illusion, like the passage of time itself" (Ramachandran, n.d.)

All this bears with an important implication to the current research, for it informs us that interaction does not require touch.

### 2.2 Bioenergy and Research

Bioenergy is what moves the machine of life (Szent-Györgyi as cited in Lowen, 1994, p. 45), it is the energy that is vibrating within and around the human body. Literature (Bruce, 2011; Minero, 2012; Peirce, 2009; Wynne, 2015) refer to this subtle energy as a life force which “animates, regulates, organises and supports all forms of life” (Curtin, 2015, p. 2). Also referred to as: ki, chi or vital energy (China), prana and kundalini (India), reiki and jyorei (Japan), orgone (Reich), astral light (Blavatsky), Nous (Plato), yesod (Kabbalists) and also, cosmic fluid, bioflux and bioplasm (Baginski & Sharamon, 1988; Brennan, 1990; K. S. Cohen, 2000; Curtin, 2015; Eden & Feinstein, 2008; Judith, 2004).

According to IAC\(^1\) researchers Minero (2012) and Trivellato (2017), Bioenergy can be classified as Immanent or Consciental Energy. Immanent Energy is a clean, pure and unprocessed energy inherent in nature, such as cosmoenergy, hydroenergy (water), geoenergy (earth), aeroenergy (air) and phytoenergy (plants). Consciental Energy on the other hand is the processed Immanent Energy used by the Consciousness (spirit, soul, higher self). As animals and humans absorb Immanent Energy, they transform it

\(^1\) International Academy of Consciousness
by imprinting a specific information on it. The information is added via feelings, moods, thoughts, intentions, motivations, sensations, actions etc. and are reflected in their individual subtle energy systems which is called the Human Energy Field (HEF) or Aura. Through the nonstop reception and transmission of these subtle energies, the HEF is in constant communication and exchange with the environment and also with other living organisms.

Although not always rigorously referenced, authors (Brennan, 1990; Nelson, 2007; Oschman, 2015; Peirce, 2009) in the field of energy medicine outline that some scientific research is already available which can verify magnetically, thermally, electronically and radioactively the generation and flow of the electrical energy throughout the energy transportation system of the HEF. Perhaps the most recognised complementary medicine research is Kirlian photography ("Kirlian photography - Wikipedia," n.d.) which is claimed to depict the Aura surrounding the living beings. Also, quite recently, Wagner Alegretti, a Brazilian engineer with a background in the field of electricity generation and medical electronic equipment, posted a YouTube video (TEDx Talks, 2016) about the promising results of his experiments in relation to the detection of Bioenergy using Functional Magnetic Resonance Imaging (fMRI). The study will still need to be independently validated.

The interdisciplinary science of Biophysics studies the biological energy transduction process in biological systems ("Transduction (biophysics)," 2014). It is concerned with the transmission of electromagnetic energy between two electrons with the help of the resonant-energy-transferring molecules. The study reveals, the transportation of energy brings about a change in the energy type, for instance it might dissipate luminic
energy as heat. Two links with this research topic have to be noted. Firstly, practitioners of energy medicine often report heat as one of the most immediate energetic sensations (Baginski & Sharamon, 1988; Brennan, 1990; Bruce, 2011; K. S. Cohen, 2000) and secondly, it confirms that human cells are interacting via energetic resonance.

The term resonance also reappears in the work of contemporary neuroscientists and prominent authors in Attachment Theory research. In relation to affect attunement process within the mother – infant and the “affectively synchronised therapeutic dialogue” Shore (2003) writes, “resonance phenomena are now thought to play one of the most important roles in brain organization and in central nervous system regulatory processes” (2003, p. 51).

Siegel also talks about “aligned emotional resonance” as a requisite to help clients maintaining arousal within the window of tolerance (1999, as cited in Ogden, Minton, Pain, Siegel, & Kolk, 2006, p. 45). The alignment is here described as an empathic matching of affective states through which the therapist “stays with” the client through his or her dysregulated states and fosters their self-regulating and mentalising capacity.

Another prominent writer in the field of psychotherapy, Casement (2013) uses the expression “emphatic resonance” when he emphasises the necessity of the continuous expansion of the therapist’s receptivity of the client’s unconscious communication. He posits, as unconscious speaks to the unconscious, the resonance to the “unfamiliar ‘keys’ or dissonant ‘harmonies’ of others (...) will enhance the
receptivity to these unconsciously interactive cues that are often central to understanding of patients” (2013, p. 83).

It is interesting to note that the unconscious to unconscious communication is also described by Shore (2003, 2014) as right brain to right brain communication which according to him also involves an access to a state of “reverie” (Bion as cited in Wallin, 2007). Reverie is considered an altered state of consciousness where alpha and theta brain waves are the most prevalent and considered as a gateway to an expanded mind (Austin, n.d.; Fannin, n.d.).

Literature indicates that subtle energy research is of growing interest. While recognising insufficient rigorous research, contemporary scientific efforts are apparent with regard to the study of the physical reality of the subtle energy which was previously thought as part of the metaphoric domain (Alegretti, 2004; Oschman, 2015; Trivellato, 2017). Oschman (2015), a cellular biologist and writer of the book Energy Medicine – The Scientific Basis, highlights that the different approaches to the science of energy systems are inherently interlinked and reminds us that science and scientific medicine is an ever evolving and unfinished business. Rama et al (2014) states with some wit, the current understanding of energy of the Western world is like that of “chemistry before the periodic table was discovered” (2014, p. 35).

2.3 Human Energy Field (HEF)

The HEF (aka Biofield, Auric Field, Energosoma, Electromagnetic Field) is the underlying subtle energy blueprint of the physical body which is an inseparable part of the Universal Energy Field (UEF) (Brennan, 2011; Henderson, 2015; Judith, 2004;
Myss, 1996; O'Farrell, 2015). The oval shaped Aura penetrates and surrounds the physical body (see figure 1). It comprises of various layers of subtle bodies filled with different energy patterns which are connected to physical, emotional, mental and spiritual aspect of the person. It is described in many cultures that these energy patterns form a kind of personal signature, and their quality is directly linked to a person’s emotional, mental and physical health (Rama et al., 2014). The human energy system is just as complex as the physical counterpart (Bruce, 2011). It is in constant energetic exchange with the UEF through the chakras and meridians, the body’s energy transformation, energy storing and energy transportation systems (Brennan, 1990; Bruce, 2011; Eden & Feinstein, 2008; Judith, 2004; Myss, 1996) In religious arts, the Aura is often depicted as a luminous halo around the person (Eden & Feinstein, 2008, p. 110).

![Figure 1: The Human Energy Field and the Chakras](image-url)

**Figure 1: The Human Energy Field and the Chakras**
2.4 The Psychology of the Chakras and the Embodied Spirit

Judith (2004) refers to the Chakra System as the seven-levelled model of psychological and spiritual developmental process of human beings which is “capable of spanning mind, body and spirit” (p. xii).

Appendix V. is a summary of the characteristics of the seven Chakras based on the work of Brennan (2011), Judith (2004) and Myss (1996). Their aim is to facilitate the integration of the traditional energy concept and modern psychology in order to provide a synthesis of the holistic understanding of body, mind and spirit. According to the authors, the awakening of the energy centres not only mirrors well recognised theories of psychological development, it also integrates spiritual concepts such as the manifestation of consciousness in the physical dimension at the time of birth and its liberation from the physical body at the time of death. The title of Myss’ book, Anatomy of the Spirit describes the concept of the embodied spirit very well.

The researcher found that the embodied spirit concept is also associated with Out-of-Body experience (OBE) (see figure 2), Near-death Experience (NDE) and the Shaman’s journey. They all have been referred to in many cultures throughout history and many people perceive them as a temporary detachment from the physical body (Montenegro, 2015) (see figure 3). Although authors such as Kornfield (2002) highlight the risks of OBE as a spiritual practice, others (Buhlman, 2001; iacworld.org, n.d.; Minero, 2012; Monroe, 1989) maintain, it is an ordinary human condition which can be exercised for the purpose of self-knowledge.
Minero (2012) and Buhlman (2001) describe three types of OBE; Spontaneous, Provoked at Will and Forced. They state, forced projection occurs when the person’s physical experience becomes unbearable to the point where the consciousness (spirit) is forced to defend itself by distancing from the situation (abuse or accident) which links in with the phenomenon of dissociation in trauma theories.

OBE is also well documented in psychotherapy literature but is speculated to be linked to neurobiological processes in the brain (Chu, 2011; Ogden et al., 2006; Rothschild, 2000). Ogden at al. (2006) describe it this way: “the hypoarousal of the submissive response leads to a subjective detachment from emotions as well as an evacuation, so to speak, of emotional experience” and illustrate the dissociative condition with a client account: “I would leave my body and watch her (herself, being the client) from the crack of the ceiling. I felt sorry for her during the abuse. I wouldn’t go back to my body until it was all over” (2006, p. 97).
The researcher notes the lack of dialogue between modern physics, neuroscience and psychopathology which is articulated by various authors (Barušs, 2006; Cardeña, Lynn, & Krippner, 2017; Phil Borges, 2014). Stanislav Grof (1985) argues, the “rigid adherence to Newtonian – Cartesian paradigm has had particularly detrimental consequences for the practice of psychiatry and psychotherapy” in that any non-ordinary states of consciousness which differ from their “objective reality” is seen as symptoms of serious psychopathology.

2.5 The Energy Model to Health, Illness and Symptom Formation

In an energetically well balanced human being the energy is free-flowing. Nelson (2007) writes, “Since 4000 B.C, healers have understood that our health greatly depends on the quality of energy that flows through and makes up our bodies” (p. 42). In agreement with this statement, proponents (K. S. Cohen, 2000; Eden & Feinstein, 2008; Judith, 2004; L. Taylor, 2016; Wynne, 2015) explain, when chakras are not working at the optimum the energy can become trapped and stagnant. Blockages as well as an excess of energy causes imbalance and disruption in the whole system and manifest physically. Several sources consider unresolved painful emotional experiences to be the underlying cause of impaired energy flows and thus, physical ailments (Brennan, 1990; K. S. Cohen, 2000; Gerber, 2002; Judith, 2004; Nelson, 2007). According to Nelson (2007) and Peirce (2009) every thought and emotion mobilise energies that have an effect on another part of the human system, namely the physical body. Furthermore, as human energy exists within the universal energy field, thoughts and emotions also affect other human beings and the environment.
Judith (2004) posits, the unblocking of the energy centres requires addressing issues on multiple levels. This includes the understanding of the optimal functioning of the particular chakra associated with the mental, emotional or physical issue of the person, a deeper examination of the personal history in order to understand the programming encoded in the energetic layers of the body and the balancing of the excess and the deficiency in the energy centres through techniques which directly target the energetic layers.

The emerging rationale for the integration of psychotherapy and energy therapy is apparent in that it aims to address the client’s issues on both psychological and energetic levels.

2.6 Psychotherapy and The Energy Concept

The following is a review of the historical account of the inclusion of the energy concept in psychotherapy. It can be noted that there is considerable debate as to whether psychotherapists mean energy metaphorically or literally and also, whether they think that it stems from a universal life force energy or from the body’s metabolic processes (Totton, 2003).

Freud coined the term libido to describe sexual energy. According to Rama at al. (2014) he in fact used it in its “hydraulic” sense (2014, p. 37). Before it became widely criticised by his contemporaries, Freud believed that this energy is capable of blockages which may be the underlying issue behind the symptoms of emotional illnesses.
Reich on the other hand embraced the physical energy concept which he incorporated in his embodiment and character theories (Reich & Higgins, 1963). According to him, early emotional experiences create an energetic patterning in the infant’s system which freeze into the developing tissue of the organs and musculature resulting in the specific armouring of the person. Myss (1996, p. 34) refers to the same process when she writes “biography becomes biology” indicating that the emotional energy stemming from negative and positive life experiences will become encoded in the physical tissue. Bioenergetics (Lowen, 1994) works on the premises of the Reichian characterology. Through the focus on muscle tension and subtle bodily movements, they aim to bring awareness to state-bound, unconscious body processes tapping into energetic and emotional patterns of the trauma.

Similarly, in the Trauma/Discharge model of body psychotherapy, trauma is also considered as an energetic phenomenon (Totton, 2003). Levine (2008; 1997) proposes that when the highly evolved neo-cortex (rational brain) of humans overwrites the subtle instinctual and emotional impulses, it interferes with the energy dynamics of the organism. Immense energies get bound in the freeze response – the immobility state which is a natural response to life threatening fear and shock –, and unless they are allowed to become mobilized again, they can and will get stored in the body resulting in the development of various traumatic symptoms.

Another modality which accepts the energy concept to health and illness is Energy Psychology (EP). It draws on the teachings of Traditional Chinese Medicine. Through the use of various techniques such as tapping, it aims to remove blockages and increase the free flow of subtle energy in the meridians. In this system, the issues of
mind and body are also seen as bioenergetic patterns. EP proves to be beneficial in
treatment of trauma, anxiety, depression, pain, stress, psychophysiological issues,

A possible way of integration of energy healing and psychotherapy is illustrated in
Curtin’s (2015) work on Psychotherapeutic Reiki, a co-participating and experiential
approach. The idea is that the therapist’s channelling of Reiki energy is capable of
clearing away the energetic disruptions and blockages in the chakras and in turn
activate the body’s natural healing mechanisms. Curtin concurs with advocates, that
the shifting of the heavy emotional holdings that are bound in the energy system
directly influence the cells, tissues and organs on a physical level. Following the
energy healing session, the therapist uses traditional talking therapy to integrate the
client’s experience of the healing session.

The research into the literature proved that somatic psychotherapeutic approaches
are quicker to acknowledge the subtle energetic reality of a person although the
scientific basis of this inclusion is not yet widely accepted. Totton (2014) argues, that
64).

### 2.7 Healing and Energy Healing

Although the roots of healing and energy healing are old, the implications of the
advancements in the field of quantum physics are strengthening the sense of a
paradigm shift from reductionistic and fragmentary methods towards holistic and
participatory approaches to health and healing. The boundaries between transformation, growth and spirituality are more fluid and with the focus on finding one’s own life purpose, the gap between modern integrative psychotherapies and holistic healing is narrowing. Moodley and West (2005) writes that a “psychospiritual revolution” is gaining increasing momentum and represents a fundamental change in the population’s belief systems. There is more trust in the inner wisdom, intuition and insight and the self-healing potential of body and mind.

Moodley and West (2005) points out that similarly to client-centred psychotherapy practice (Rogers, 2004), presence and responsive attunement are at the core of the unfolding healing process in spiritual healing or energetic healing. The healer is rather a therapist who acts as a facilitator of the healing process “with the understanding that forces beyond the grasp of the practitioners are at work in healing moments” which can take many turns (2005, p. 261).

Taylor (2016) proposes that the inclusion of energy healing within the counselling and psychotherapeutic setting can facilitate clients gain a more complete, multidimensional understanding of themselves and their issues. The subtle energetic shift can fast-forward psychological processes such as the releasing of suppressed emotions and the attainment of deeper knowledge and insight into previously out of awareness self-sabotaging patterns. These can then be integrated into the conscious psyche as part of traditional psychotherapeutic work.

Cohen (2002, p. 403) highlights the controversy around the inclusion of healing in a medical setting that may or may not immediately affect physical health for its potential
abuse of power and authority. In the meantime, he argues that the ethical rules governing counselling and psychotherapy could provide a ‘useful analogue’ for the regulation of the therapies of CAM\(^2\). The implication for this current research is that the potential for harm may be mitigated by the psychotherapist’s respect for the client’s vulnerability and emotional boundaries in the work and an awareness of the transferential dynamics.

### 2.8 Implications for Practice

Naturally every integrative psychotherapy practice has specific characteristics and implications for clients and therapists. The following is an overview of some of these aspects.

**Preparation of Clients**

Curtin (2015) outlines a few preparatory tasks prior to the session where energy healing is planned as part of the client’s treatment. Firstly, the therapist explains the energy model of health and illness and how energy healing works. Secondly, the therapist informs and orients the client about what they can expect in the session including sensations, demonstration of hand movements and touch if applicable. It is important to highlight to clients that they remain fully dressed throughout the session and that it is their right to stop and discontinue the session in case of any discomfort. Curtin emphasises, energy healing is usually experienced as relaxing, however, in certain cases it may trigger strong physiological and emotional responses which requires an attuned response from the therapist.

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\(^2\) Complementary and Alternative Medicine
Touch

It is well documented that touch is a controversial topic between psychotherapist and client and considered by many professionals as a breach of boundaries (O’Keeffe, 2016). For this reason, energy healing modalities which involve touch to various degrees are contraindicated within the psychotherapeutic setting (Barnett & Shale, 2012; M. H. Cohen, 2002). As previous chapters explored however, scientific research is coming closer to resolving the mystery in relation to the fact that every interaction involves an energetic movement and therefore it does not require touch. Human beings are in constant energetic exchange with the environment and with other human beings. Minero (2012) terms the energetic exchange and attunement without physical contact as Auric Coupling or Sympathetic Assimilation. (see figure 3)

Figure 3: Auric Coupling

Minero (2012), Nelson (2007) and Peirce (2009) posit, people might not be sensitive enough to consciously receive and understand the broadcasted information conveyed through the unseen frequencies, resonance, vibrations of the environment - including
other people's energetic information. However, in reality the field speaks to them constantly. The information is still registered in the unconscious realms of mind and body. The literature review indicates that this is where energy therapists and intuitive healers are tuning into when reading information about the person in the field (Bruce, 2011; K. S. Cohen, 2000; Minero, 2012; O'Farrell, 2015; Wynne, 2015). It is also highlighted that while some people are born with increased energetic sensitivity, the perception of energy is a “learnable skill” (L. Taylor, 2016, p. 11).

The aim of this research is to explore the integration of energy healing modalities that are administered with minimal physical contact and can be administered without touch, such as Bio Energy Therapy (L. Taylor, 2016).

**Felt Sense**

Wallin (2007, p. 296) posits that due to the brain’s Mirror Neuron System, therapists become automatically attuned to the resonance of the clients’ somatic states which can provide cues on the unconscious processes of the client. Therefore, in the interpenetrative process between client and therapist, experiences will be shared and transformed into emotional and actual physical sensations.

Depending on the sensitivity and energetic awareness of the individuals, changes in energetic processes will become observable. In the unavoidable energetic assimilation, client and therapist may engage in an energetic dance which, without the knowledge of the underlying subtle energy dynamics can be difficult to pinpoint. An experienced therapist may be naturally able to bring some energetic changes to conscious awareness and work with it in the therapeutic space but it might take more
practice and training to sense or even see the subtle energies flowing or struggling between client and therapist. Therapists who are trained to perceive subtle energy dynamics will access a new layer of understanding of the client’s issues (L. Taylor, 2016).

Bruce (2011) and Minero (2012) outline subtle energetic movements can be characterised by sensations such as, changes in temperature, tingling, surging, buzzing, fluttering, throbbing, body hair prickling, tightness, pressure, heaviness, fuzziness, bone-deep tickling, warm or cool sensations, magnetism, trembling, swaying, pulsations, electric currents running through the body, balloonment, sensation of becoming inflated, yawning and tearing (detox process), tics or jumps. These sensations can be felt in a specific area or throughout the entire body.

Literature is limited on how the discussion around energetic transference and countertransference should be conducted. Wallin (2007, p. 298) describes various ways of working with the body such as making observations or inviting the client to notice their own sensations and bring awareness to connecting thoughts and emotions and meaning. He advises that any suggestions should always be made tentatively and respectfully. The researcher assumes, the same being applicable to interventions in relation to subtle energy dynamics.

**Intuition**

Moodley and West (2005) state that apart from the visceral reactions generated in the therapists, practitioners of spiritual and energetic healing therapies often report an awareness of intuition, telepathy and an innate sense of knowing at play as part of
their countertransference responses to their clients. This increased ability to consciously “read” the information encoded in the client’s energetic and psychic field seems to coincide with experienced psychotherapists’ accounts of their innate sense into their client’s process which they understand to be part of the unconscious psychic interpenetrability and intermingling of the two minds, the basic tenets of modern intersubjectivity theory (Wallin, 2007). In psychotherapeutic literature however, it is referred to as a rather mysterious phenomenon and linking with the information exchange through energetic resonance is rather non-existent. The notion of the “analytic third” coined by Thomas Ogden comes close to recognising the actual physical reality of energetic or subatomic interconnectedness when he posits that the atmosphere or air between therapist and client is rich with unconscious meaning (Wallin, 2007, p. 186)

**Challenges**

West (2005) outlines healing as one or more of the following: “intuition, presence, inspiration, psychic, shamanic, altered states, (spiritual) healing methods, subtle energy work, mediumship, channelling, use of spirit guides, and transpersonal work” (2005, p. 39). His research (1997) focuses on how psychotherapists are integrating and conceptualising healing practices into their work and what issues arise from that integration.

West’s research outlined two areas of concern; language and supervision. Talking about healing experiences or spirituality can cause significant issues to contemporary psychotherapists and their clients due to the taboo and stigma attached to any
experience which has not been scientifically validated by secular Western healthcare models.

Besides language, West (1997) identified another key issue, the lack of adequate supervision for therapists who wish to include healing and consequently, spirituality in their psychotherapy practice. Naturally, it has a further implication for integrative training, practice, research and theory making. West argues, more and more therapists are interested in the integration of psychotherapy and traditional healing and calls for integrative training, supervision, research and theory making to “recognise this reality” (1997, p. 7)

2.9 Conclusion
While there is a substantial amount of literature in the field of energy medicine and energy healing incorporating the psychological aspect of the person, literature in relation to the intersection of energy healing and psychotherapy is very limited. This research sets out to contribute to the field by continuing the dialogue.
Chapter 3: Methodology

3.1 Research Design

Due to an in-depth exploration of the subjective experience of psychotherapists working with Energy Healing in their practice, the most suitable research design for this study is the Interpretative Phenomenological Analysis (IPA) which falls under the umbrella of qualitative research methodologies.

IPA is concerned with an interpretative activity in relation to the participants' perception and meaning-making process with regard to their personal lived experiences in a particular context. The interpretation is also extended to include the experience of the researcher while conducting the research. This dynamic and co-creative interpretation process is called the double hermeneutic and it permits the researcher to take an empathic and questioning stance. The latter is whereby the researcher assumes distance from the participant and critically reflects upon their sense- and meaning-making abilities (Breakwell, Smith, & Wright, 2012; Osborn & Smith, 2007).

While IPA does not attempt to draw general conclusions, it is committed to understanding the participants on an idiographic level, it is claimed (Breakwell et al., 2012, p. 443) that the detailed case-study level analysis is the essential first step for the observation of universal laws. Idiographic analysis is best supported by the phenomenological method, which originally aimed at philosophical investigation into the meaning of the fundamental
aspects of human life. It employs clarification, illumination and elucidation around the self-interpretation of the participating individuals.

From the literature review it is apparent that the integration of Energy Healing and talk therapy is a topic of relative novelty where little research is available. This justifies the use of the detailed phenomenological interpretation of individual cases in order to facilitate the acquisition of new data and insight into the emerging field.

### 3.2 Sample and Recruitment

To optimise the best outcome and in order to maintain focus on the richness of the individual cases, the IPA advises on small sample sizes (Osborn & Smith, 2007, p. 56). Initially, a sample of three experienced and accredited integrative psychotherapists who are also trained in Bio Energy Therapy was proposed to be selected for this research. Participants were going to be graduates of the Bio Energy Schools listed on the Bio Energy Therapists Association (BETA) website. BETA is a member of The Federation of Irish Complementary Therapy Associations (FICTA) and adheres to their code of ethics and standards of best practice.

The aim was to conduct the research using a fairly homogenous Irish sample but as expected, given the newness of the research topic, recruitment of the participants required an extension to other Energy Healing modalities. The sample selected consists of two psychotherapist who are also trained as Bio Energy therapists and one psychotherapist who has studied Energy Healing and Shamanism for several years in Ireland and Sweden respectively.
Geographic extension of the recruitment process to the UK was not necessary. A selection criterion included professional membership with IACP or IAHIP and an adherence to good ethical practice in view of the recognised gaps in the professional regulation of the CAM modalities. Participants were identified through internet research, snowballing and referral and contacted directly via email and phone. After verification of the research criteria, they were recruited and provided with the information about the study to support their informed consent.

The broadening of the sample also led the researcher to change the research title replacing Bio Energy Therapy with Energy Healing. The researcher feels that the extension brought a richer account to the study of the experience of psychotherapists incorporating the energetic dimension of a person into their clinical work.

Table 1. Demographics of Participants

<table>
<thead>
<tr>
<th>Name (pseudonym)</th>
<th>Brigit</th>
<th>Oonagh</th>
<th>Martin</th>
</tr>
</thead>
<tbody>
<tr>
<td>Orientation</td>
<td>Person Centered</td>
<td>Integrative</td>
<td>Humanistic Integrative</td>
</tr>
<tr>
<td>Accreditation</td>
<td>IACP</td>
<td>IACP</td>
<td>IACP</td>
</tr>
<tr>
<td>Years in psychotherapy practice</td>
<td>15</td>
<td>7</td>
<td>20</td>
</tr>
<tr>
<td>Years working with subtle energies</td>
<td>10</td>
<td>2</td>
<td>10</td>
</tr>
</tbody>
</table>

3.3 Data Collection

The recommended method of data collection for an IPA research is through semi-structured face-to-face interviews (Breakwell et al., 2012; Osborn & Smith, 2007). The interviews were inductive and aimed at using exploratory, open-ended questions in
line with the phenomenological method of inquiry. The participants were treated as “experiential experts” (Breakwell et al., 2012, p. 447). The researcher focussed on the experience of the psychotherapists while attempting to understand and interpret the narratives offered by them. The researcher constructed the questions in such a way so to elicit detailed information from the participants on their experience and the implications Energy Healing has had on their practice. The researcher remained open to the moment-to-moment experience of the interviews which aided in the emergence of any relevant and important themes that had not been anticipated. It also supported the development of the researcher’s own responses and impressions in relation to the participants and their unfolding experiential accounts.

Each interview took place at the time and place of the participant’s convenience and lasted approximately forty-five minutes. Each verbal account was taped using an audio-recorder called Voice Memo and subsequently transcribed verbatim. The transcribing process deepened the researcher’s engagement with the data.

Demographic questionnaire was used to obtain information about training backgrounds, professional memberships and years in both psychotherapy and Energy Healing clinical practices. The questions were general and descriptive in nature at first and moved towards more specific and analytical ones later. Some relevant material emerged naturally and unprompted while others were obtained through previously unplanned questions.
3.4 Data Analysis

The in-depth analysis of the transcripts followed the usual IPA method (Breakwell et al., 2012; Osborn & Smith, 2007). Initial reflections, thoughts and perceptions of the researcher were recorded before moving on to a more in-depth thematic analysis of the data.

Phase one started with the immersion in the data of the first case via repeated listening to the audio-recording and re-reading of the original transcript which allowed the researcher to integrate the material.

Phase two consisted of descriptive, linguistic and conceptual commenting as recommended by Smith at al. (2009). The aim of the initial exploratory commentary was to find interesting and significant words and themes in the text and also, to document any associations or preliminary interpretations in relation to the case. A higher-level analysis was then conducted to capture emergent themes which also allowed the researcher to make theoretical connections as part of phase three.

In phase four, the researcher produced a table with thematic clusters derived from the emergent themes and identified connections and divergence between them. This was checked against the original transcripts to ensure consistency with the primary source material. The clustering of themes was then further analysed for super-ordinate and sub-ordinate themes and essentially supported by evidence from the transcript. The same analysis was completed for the other two transcripts while the researcher kept refining the master themes across the three transcripts.
As a final stage, master themes were translated to narrative accounts in line with the concept of hermeneutic circle (Smith et al., 2009, p. 27).

### 3.5 Ethical Considerations

The SRA Ethics Guidelines outlines the researcher’s obligations to participants emphasising the importance of their protection from harm arising from their participation in the research (2003, p. 14). The participation in the study was on a voluntary basis.

In order to adhere to the ethical guidelines participants were fully informed regarding the topic, context, methodology and the purpose of the current research and were given an opportunity to ask further questions regarding the study.

Participants were provided with information with regard to their rights as research participants. They were made aware of their freedom of choice in relation to disclosing personal matters, the consequences and potential risks of their participation as well as their right to withdraw from the research. Furthermore, they were made aware of their right to consult the final research document.

Consent form and information leaflet were circulated via email several days before the interview. In order to protect the identity of the participants all data was anonymised and safely stored in locked files which can be accessed only by the researcher. To protect the participants’ anonymity the pseudonyms Brigit, Oonagh and Martin were used throughout this research paper.
Chapter 4: Findings

4.1 Introduction

The researcher followed the common processes and principles of Interpretative Phenomenological Analysis (Smith et al., 2009) and used her own analytic and reflective skills to examine and interpret the abundant data obtained during interviews with three IACP accredited humanistic psychotherapists who use some form of non-invasive subtle energy healing modality in conjunction with their traditional psychotherapy practice. It must be noted that the emergence of the three master themes was only partly the result of the rigorous in-dept analysis of the material capturing the participants’ experiences. The researcher also noted a creative process through which the three themes had become unexpectedly crystallised at some point in the form of insight. To be true to the topic, the researcher cannot overlook the possibility that the information was simply picked up from the energetic field surrounding the research project itself. The three main themes which all have a set of nested themes are as follows:

1. Energy Healing as Process
2. Intersubjectivity as Energetic Assimilation
3. Dissociation as Energetic Misalignment

To portray the themes through the participants’ lived experience, the chapter provides detailed interpretative narratives of their accounts illustrated by transcript extracts as an evidentiary base.
4.2 **Energy Healing as Process**

The overall aim of the researcher during the three interviews was to grasp the participants’ understanding of energy healing and their rationale for its integration into their own practice. It is apparent from each account that the concept of process has a central role in both the participants’ professional and personal lives.

The two organising sub-themes identified are:

- Introduction to Energy Healing
- Therapist as Instrument

4.2.1 **Introduction to Energy Healing**

This theme is concerned mostly with the practical considerations and concerns for the work. It involves the participants’ personal experiences with energy healing, its introduction to the client and their suitability to the method.

Brigit recounts her experiences as a small child with energy and healing which have left a profound impact on her:

**Brigit:** I think I have always had an interest in healing from a small child. My father brought us to a healer because my siblings and I, we had warts on our hands and he knew a healer could get rid of warts and heal people. So, I think my parents were very open. My mother was very open to energy... even though they were very Catholic, they still had this piece inside of them, so it wasn’t particularly alien to me. I used to like hearing about miracles and laying on of hands in school. I’m talking about Jesus performing miracles, this just resonated with me.

The juxtaposing of the 'piece inside of them' and 'alien' suggests an internal struggle – between her inner and outer world and her perception of energy healing. What is a precious, hidden gem for her and her parents is seen as something foreign and perhaps unaccepted by others. While it is not explicitly articulated the researcher
senses that Brigit is aware of her own evolution from a small fascinated child to an adult who is now consciously working with subtle energies to help others.

Martin’s career as a therapist started later in his life when a personal loss has catalysed his own personal journey. In the following vignette he explains how, through a specific form of initiation, his ‘hands came alive’ which could be translated as an energy centre activation in his palms which allows for an increased energy flow to run through his hands while channelling energy. The researcher feels that the notion of a ‘gift’ is associated with feelings of respect and privilege in relation to his work, something that is not taken for granted.

**Martin:** There is a procedure there, where you can be baptized in the Spirit. The belief is that the Holy Spirit can give you gifts. So, I did that a year before my wife died and my hands came alive for the first time. So, that was the beginning of it. And then once I started studying therapy and my hands were still alive, I became interested in energy healing. [...] and then, later I became interested in shamanic healing.

Each therapist articulated their awareness around the risk and controversy that surrounds the use of touch while reporting that occasionally they still use it with the client’s permission:

**Brigit:** I thought Bio Energy Therapy (BET) would fit in nicely as there is not a lot of touch involved, which I think would fit a lot of people in counselling. [...] I ask permission to touch their head and knees, though it can be administered without either of those. Nobody has refused yet and I would always check.

**Martin:** Mostly the healing that I do is non-touch. I will sometimes, with their permission, hold their feet or hold their head. But other than that, it's non-touch which is important because obviously some clients may have suffered various traumas and touch can be problematic and frightening.
Oonagh’s own sensitivity and awareness of the risk of intrusion is evidenced by the following extract describing her personal experience with BET:

**Oonagh:** I really liked the fact that there was very little touching. Not that I do mind being touched but in the right places at the right times. So, then what I found for myself that there was... I just got great healing from it. [...] It allowed me to cry, it allowed that vulnerable place to come up... and there was no touching me, hugging me, or trying to invade my space, it was just allowing me to be me.

The researcher notes that the impact is similar to what psychotherapy clients might report. This sense is verified by the next vignette where Oonagh speaks about clients in the counselling service where she works and uses the word ‘healed’. Witnessing positive change inspired her to pursue a career as a psychotherapist:

**Oonagh:** I suppose just seeing people coming in, in various states of distress and seeing them as the time went on how they got healed.

Birgit gently articulates a similar association between psychotherapy and healing and the therapist’s role in both as follows:

**Birgit:** When you sit with a client you are actually healing them by sitting with them. By listening to them, giving your full attention and being alert to them and caring. To me, that’s all healing as well. Being open, responsive and inquisitive and sensitive to their needs.

All three participants named ‘word of mouth’ as the main route to getting clients who come for the integrative work and that these clients would already understand it. The following extracts offer a sense of how participants introduce it to clients who are initially coming for psychotherapy only. They emphasise the centrality of ‘meeting the client where they are at’.
**Brigit:** I have crystals over there and invariably the client will talk about energy, healing... they will introduce it.

**Oonagh:** As you see I don't advertise it in my room or anything. It kind of just came up with them talking about energy. I wouldn't say it to people who don't already have an understanding of it. I don't intrude on where the person is or where they want to be.

Martin references ‘intuition’ and ‘reading’ the client’s energy which illustrate his deeper awareness of the subtle energetic signals from the client to which he responds:

**Martin:** It's a matter of intuition and I suppose it's from reading their energy myself [...] there is a degree of openness to it.

Following the researcher’s question about contraindications, Brigit and Martin both articulate their intrinsic awareness of the fragile energetic field of certain clients, for example those with a history of psychosis:

**Brigit:** I would think schizophrenia or someone who has had major split personality trauma like that, who has been in the system, medicated.

She recounted an experience she had with a client supporting this:

**Brigit:** Now my sense was that her energy was terribly light, very fragile. [...] I thought I won’t work with her because my sense was she was already too light. I didn’t know what I was taking on. My sense was not to. So, I didn’t and as it transpired, she would have had been under psychiatric care...

Martin explains his energetic understanding of psychiatric disorders:

**Martin:** And, if someone is psychotic or has had psychotic episodes, it means that their energy field is very unstable. So, for instance in some cases but not always it’s someone who’s had an experience of doing drugs. This will show up in the energy field, particularly around the head because the energy field will
end up with holes. So, their personal shield if you like has been damaged. And if you want to explain what psychosis is at the energy level, it is where they're open to outside influences.

In the context of the psychospiritual worldview of energy healers - which will become evident later in the chapter – ‘outside influence’ to which Martin refers could mean an increased sensitivity to influences coming from non-physical [spiritual, subtle energetic] dimensions. A sensitivity, which without sufficient ego-strength might result in the person’s extreme confusion. This hypothesis however calls for further research in relation to our understanding of consciousness, taking into account modern physics as opposed to the old worldview of psychopathology.

### 4.2.2 Therapist as Instrument

All participants articulated similar views in terms of their stance as practitioners; none of them made the shift from ‘facilitator’ to ‘expert’ when moving between talk therapy and energy healing, despite adopting a more active role as they worked energetically:

**Brigit:** I work in a circular motion within the energy field, to bring the energy up around the arms and open up their energy centres. In the opening section when they are standing, I connect in with my own energy. Then I detox the system by running energy down through the body and through the feet. The next part then is to balance it.

Brigit explains, even though she directs the energy, the energy will go where it needs to go which is consonant with the other two participants’ descriptions. They all seem to identify as an instrument of the energetic healing process that takes place through them for the client:

**Brigit:** The energy is more intelligent than I am. […] It allows the person to evolve themselves. […] Whatever needs to happen for them will happen for them. I just happen to be in the room with them. The energy goes to where it's
needed. They know what they want to release and what they are ready to release. [...] I often say to myself, 'Let go and let God'…

Martin is keen to point out that energy healing is not a cure and it can take people in a completely different direction to what they expected. He believes in the intelligence of both the channelled energy and the person’s own intuitive healing mechanism which he calls a ‘blueprint’. He is also very clear about his role in simply holding the space for the client's process:

**Martin:** I might pick up what the problem is, but I can't dictate where the energy will move to and what they will actually deal with. So, people will often come for healing and really, they are looking for a cure, but what they experience is the healing. There's an important distinction between the two. I don't fix people I simply hold the space and channel the energy and then the person's own energy field will draw the energy that I'm channelling in accordance with their own blueprint which is an unconscious thing with the client.

There is a sense of sadness in his voice as he recounts the story of his client who suffered from cancer but the piece seems to carry a sense of hope also. The extract demonstrates his ability for containment and his respect for the client’s pace in processing:

**Martin:** I think she was hoping that she would experience a cure. [...] I picked up the cancer and I knew exactly where it was, but I also knew that she wouldn't survive but that healing was still possible. I also knew that the source of it was unresolved grief from childhood. [...] she stayed with me and we did a few healings while also working psychotherapeutically for about a year. She began to recognize in herself how much unresolved grief she was actually carrying, however she didn't realize that it was the cause of the cancer… But unfortunately, she died. So, she experienced healing but not a cure.

On one hand, his high regard for healing even when a cure is not possible can mean the client’s acceptance of the inevitable. In a spiritual context however, which is clearly named in the following vignette and which considers the wider, transpersonal self,
healing might also mean a positive impact beyond her current physical existence. Martin points out that energy healing allows the client to experience spirituality and it is apparent that this is a valued piece for him which he believes propels the client’s process.

**Martin:** Healing is primarily a spiritual thing. Therefore, experiencing healing can bring the client back in touch with something beyond themselves in an experiential way and that’s important. People will very often start meditating or seeing themselves in a very different way, in a spiritual way and that can add hugely to their experience of psychotherapy.

All three participants spoke of an increased insight and acceptance with regard to the impact of energy healing, which according to them is not always necessary to be expressed verbally due to an additional, non-verbal level of processing. Linguistic examination of the following extracts provides clues to the process orientation. The use of words such as clearing, releasing, lifting, lightening and shifting express their sense of the processing at an energetic level:

**Brigit:** It’s very good to help them energetically allow layers of coats lift off them that they had on for years. It relieves the client more emotionally than talk therapy. Psychotherapy is wonderful, it can move a lot in a client, but they are left with the residue of it. My sense is, working with bioenergy with clients, it relieves them of that overwhelm energetically. It’s like an energetic print that these traumas we have in life remain with us. It removes it, it lightens it, it eases it for them.

According to Brigit we not only have muscle memory but also energetic memory:

**Brigit:** We have muscle memory or tissue… they talk about muscle memory. Our body will hold memory as well from trauma. It remains in it. BET will release that quicker.

Martin explains how energy healing can bring new insight to the client’s past:
**Martin:** What it seems to do is to activate… so, that translates them into their own process and a curiosity about what makes them tick and insights into things from their past that might be impacting on them… that they are still carrying old patterns.

Participants explained that the integration of the energy work has its own timeline. When the researcher enquired about the therapeutic integration of energy healing all three participants acknowledged that it is a very much a client led process. Depending on what material comes up, it might take several psychotherapeutic sessions to talk it through and integrate it. They also expressed that this is client led.

### 4.3 Intersubjectivity as Energetic Assimilation

The second master theme that stood out from the interviews was in relation to the rich tapestry of subtle energetic interconnectivity which all participants have a deep sense of. They understand it to be present not only during the conscious energetic attunement within the energy healing session, but also in every encounter. The participants offered their insight from an energetic perspective into what is commonly referred to as intersubjectivity between therapist and client.

The theme is interpreted by the researcher utilizing the participants’ own words as they make sense of the following:

- Energetic Interconnectedness
- Energetic Attunement and Innate-sense
- Energetic Attunement and Felt-sense
- Countertransference and Self-care
4.3.1 Energetic interconnectedness

In the following vignette Brigit articulates her sense regarding the subtle energetic layer of human relating:

Brigit: When we sit with a client, we are holding space for them. Our energies, whether we know it or not will merge or hit off each other. You know the way someone either likes me or they don’t, you get a vibe. We are talking about their energy. We innately like some people because… we just like them because you just do, you are around the same vibration. Other people you think ‘awe, not so much’.

According to Brigit, people’s energies are in constant communication regardless of the social situation. The word ‘innately’ could refer to an energetic information detecting system that is inherent to every human being although they might not be consciously aware of it. The following vignettes illustrate that subtle energetic communication is not exclusive to human beings:

Oonagh: (speaking of her dog) She’d normally leave the room, you know if it was someone else, but she stayed, and she stayed right beside her and I asked, ‘are you comfortable with that?’ She knew my dog anyway. And when we finished the session she said she felt really sick. And my dog vomited. So that was really weird!

The above illustrates the participant’s understanding of the unconscious information exchange between humans’ and animals’ energetic fields. The following extract offers a window into Martin’s ability to consciously ‘read’ the field, another way of connecting. He uses a pendulum to do a quick demonstration.

Martin: I use a dowsing crystal to read their energy field. I will get someone to just do a little bit of breathing and relax and then I read their energy. I open the energy centre on the palm of my hand. You can see, it spins. If I close it now, it stops (pendulum spins and then stops). So, there are different movements that
indicate different conditions of the energy centres. I just follow how their energy field is, it's leading me if you like.

The metaphor of the ‘file download’ substantiates his increased ability to receive and translate energetic information:

**Martin:** Well, I have a good memory but it's also once I connect with the person and their energy then it's like the whole file downloads and I can remember all their previous healing sessions and what came up and sometimes I'm quite surprised that I can remember tiny details that turn out to be quite important, but I just trust that process.

Finally, Oonagh articulates another tenet of interconnectedness on a subtle energetic level namely that it surpasses physical proximity, an aspect she consciously makes use of. Oonagh clarifies, when the sender's intention is good, remote healing is considered acceptable. Such ethical consideration suggests an awareness around the possible risk of intrusion on the subtle level.

**Oonagh:** She doesn't have to be here... You see, I don't know if you realise this, the person doesn't have to be with you to have the healing. You can do the healing when they're not there. Now, it's better when they know the intention has been sent their way but it's not... it's not something like a malice, so it's okay to do it.

4.3.2 Energetic Attunement and Innate Sense

Beside the felt-sense which is the topic of the next sub-ordinate theme, another layer of ‘sensing’ emerged which participants consciously listen for and which informs their work. They made repeated references to extrasensory perception such as ‘intuition’, ‘sixth sense’, ‘innate sense’ and ‘knowing’ during the interviews in relation to the reception of subtle feedback from clients. The researcher noticed their struggle as they tried to put words into the often unverbalizable element:
**Brigit:** It's a knowing… because when you are working with energy… we are still listening to what's happening around. Even though the room can be quiet, we are picking up subtle feedback from the client. [...] Sometimes I might see a speck of colour around the person or I'd more of maybe get a sense of what's going on with them. It's just a knowing.

**Oonagh:** You know, I just kind of have an innate sense, have a connection. [...] I don't try to analyse it for myself or for the client:

Oonagh recalls an experience where both she and her client picked up a ‘presence’ in the room. Oonagh demonstrated her humanistic stance when she refrained from imposing her understanding on the client and instead, allowed her space to decide as to how to process the experience:

**Oonagh:** There is always a knowing. I was working with a client here one day and we knew her mom had recently passed. As I was working with the client I felt a presence enter the room. I immediately knew it to be her mother and the client kept pointing towards an area in the room … So, I felt that this is what she was doing. She started to cry and just … you know, got a release of energy and said to me afterwards “my mom was here”. I said, yes, I know… So, there's just a sense.

The account brings forth another emerging layer of the subtle energetic communication between the physical and non-physical dimensions of existence. This could be looked at as a spiritual realisation which ties in with Martin’s sense of the link to spiritual healing.

Martin integrates shamanic healing into his clinical practice which essentially involves the use of an altered state of consciousness and a ‘telepathic’ communication with spirits, the inhabitants of the non-physical dimensions. While it is a slightly different way of working with clients, similarly to Oonagh, he retains his commitment to his humanistic background. He does not try to flaunt his knowledge or impose his own
understanding on the client but instead remains humble and respectful of their process:

**Martin:** Sometimes I will get pictures of the person’s childhood. I might see them at a young age and get some sense. [...] It's not something that I will say to the client, but sometimes they will validate my sense. [...] They *(spirits)* communicate to me. It's not exactly verbal, you know... it's a form of telepathy. [...] And, where I suppose it integrates with psychotherapy is that the person will then talk to me about their *(shamanic)* journey and what they have experienced in it. And then it becomes more a therapy session to link that to what's happening in their life and their relationships and their issues and so on.

His increased receptivity for information which he sees not only as a gift but also as a burden seems to be a heavy weight on his shoulders. His delivery is slow and considerate as he opens up about a part of himself which he does not usually discuss with people. The researcher feels that what is being said deserves to be treated with an increased respect:

**Martin:** I have a gift that I can operate or not operate. And it’s the gift of insight. It allows me to get a sense of the person's past, what's happening in the present and their future… *(meaningful pause)* And this was something that troubled me quite a bit because I used to worry about, well what is my responsibility if I get this information... particularly about the future. You know, am I getting this information because I need to say it to them? But all my psychotherapeutic training would say no. So, it means I must be very careful now when I'm with people and that I don't inadvertently open that channel of information. So, I have to keep it closed.

### 4.3.3 Energetic Attunement and Felt-sense

Energetic sensations are different for every person. Oonagh described her own as a constant sensation of electricity through the fingers. Brigit names cold, heat, tingling, moving, laughing, burping, sneezing, itching that clients can feel. Also, energy can make them physically move:
Brigit: I had one person who used to dance, practically on the spot. Others doing yoga poses, I have others that just gently sway. Others say that it’s like an inward pendulum that swings inside them, they said it was moving all over the places while they wouldn’t have moved an inch.

A heartfelt account is recalled by Martin who speaks about his granddaughter who he had worked energetically with to support her recovery from a serious illness at the age of three. Her description is a powerful example of a possible way of the internal processing of energy healing.

Martin: She always knew when I was working with her. Even though I might be sitting behind her and she’d always say, “that’s enough granddad”. And some years later her mother asked her ‘what was the experience like, being healed?’ And her answer was: ‘It was like being full of warm milk’ which I thought was a lovely metaphor for what healing is (smiles).

Finally, Martin articulates his energetic and somatic awareness during the work:

Martin: I simply sense in. I don't see the energy, I feel it. And I get an intuitive sense. So, when I'm moving my hands over the body and over the energy I experience hot and cold. So, for instance it's a bit like, it's very common experience in healing, it's like a freezer door opens. It's intensely cold. And that's usually a sign of old, stuck energy, an old, stuck hurt. Heat can be the same but freezing is kind of typical of where the energy has been stuck for ages or something old is being released. It could be quite startling where you’re holding, say, over the heart centre and something begins to move, and you'll suddenly feel this intense cold and then it'll get warm again. So, something has been released. […] . So, the theory is this: if the energy is stuck and not moving for a long time, that allows physical illness to come into the body.”

4.3.4 Countertransference and Self-care

Participants take subtle energy dynamics for granted in every human encounter. They also understand it to be one of the underlying channels in the transferential dynamic between therapist and client. Martin describes his understanding of
countertransference and somatic countertransference with a slight annoyance in his voice as if he must state the obvious:

**Martin:** Well, how does countertransference work anyway? It is about two people connecting at an energetic level. So, somatic is just one aspect of countertransference in the traditional sense of countertransference. Except that it's bodily based. So, it's all energy (*laughs*).

His annoyance might stem from the challenge energy healers usually face when their energetic worldview is met with scepticism or ignorance:

**Martin:** I mean, there are a lot of people who think I'm nuts and a bit mad and they don't believe...particularly in the shamanic stuff or even in the energy stuff.

The same challenge was articulated by the other two participants also. Oonagh expresses it with some sadness:

**Oonagh:** [...] when you're talking to somebody about bioenergy, unless they experience it, it's quite hard to describe it. That's why I don't really talk about it that much, because I did at first, because I was enthusiastic as you know I was learning and then I got “I really don't believe in it” ... So, I suppose that's the challenge.

The conscious use of energetic and somatic countertransference stood out during the three interviews. They all named intention as an important element in directing the energies in a way that it guides their work and provide the necessary information, but it does not overwhelm them:

**Brigit:** It could be the client’s pain, so I know to work in that area. [...] I literally ask for the energy to work here up to my wrist so that I won’t take on any of their issues. [...] So, it’s just allowing information to come back up to this point in my hand.
**Martin:** The way I visualize it is that there’s a clear channel within me and I’m slightly separate from it. There is an enough of a gap so that my issues don't contaminate the flow of energy that's going through. Now, of course, I’m not immune from it and that’s how it brings up issues for me because it will highlight particularly with certain clients, where I need to do more work to stay open.

They also make a distinction between the therapist’s own bioenergy and the universal life force energy and make sure they mobilise the latter when working energetically:

**Brigit:** I know at the beginning I used to be very-very tired after doing bio energy session because I think I was using more of my energy than this universal life force energy that’s available to everybody. It’s like with everything, you have to practice it. It’s like a muscle; you've got to keep working it. The more you work with it, the more you’ll understand the more you learn the more you know.

Asked about their self-management, all three participants described their own specific routines which first and foremost consist of channelling universal life force energy into themselves or swapping energy sessions with peers to keep their energetic field clear and re-balance their chakras. They also mentioned supervision, walking, washing hands, changing clothes and using a smudge stick. Martin’s extreme sensitivity prompts him to use energetic ‘shielding’ as a way of self-protection:

**Martin:** I need to take care because I'm quite sensitive, so if I'm in a shopping centre for instance where there’s loads of people around, sometimes I have to leave because I'm getting bombarded. Because it’s just too much energy I could pick up if I'm not careful. So, I have to shield myself.

Brigit also shares with the researcher that she has a number of psychotherapists who come to her for energy healing sessions as a way of self-care.

In relation to supervision, all three participants identified a gap and reported that they use different supervisors for the psychotherapy and energy healing aspect of their
work. Oonagh, who is hoping to fill the gap articulates her expectations. She talks about her need for integrative supervision which would essentially include energy healing to mirror her own integrative work:

**Oonagh:** I would like, with regard to bioenergy, as a supervision technique, to receive a session rather than to sit down and let's talk about it. You know, a 20-minute session and then about a 20-minute kind of exchange. I think that would be, you know, just so we can talk about our work. [...] Anyway, I hope to fill that gap at some stage next year or the year after.

### 4.4 Dissociation as Energetic Misalignment

The third emerging master theme revolves around the subtle energetic aspect of the phenomenon of dissociation. It must be noted, although dissociation is not explicitly named by participants, the researcher felt that the narratives were pointing at what psychotherapy literature names as such. The researcher took an advantage of the freedom of the double hermeneutics and used her own interpretative skills to make sense of the data.

The theme is outlined in two sub-ordinate themes:

- Temporary Energetic Misalignment - Dissociation
- Final Energetic Disconnection – The Process of Dying

#### 4.4.1 Temporary Energetic Misalignment – Dissociation

Besides the energetic disruptions such as blockages or stagnation in the energy flow, further features of the energy field were revealed. Oonagh equates bioenergy with ‘alignment’ which could mean the synchronising and organising capacity of the energy field which integrate the mental, emotional and physical aspects of the person:
**Oonagh:** I suppose, my understanding of the bioenergy being that it’s the alignment of a person. [...] once that energy has shifted it allows for alignment, you know. But the idea is that it's ongoing, as we are.

She also makes a reference to the size and the positioning of the energy field which she can see and has an innate sense of. The following vignette also demonstrates the struggle between her own perception and the judgement she anticipates:

**Oonagh:** I really feel it. I can nearly tell you if you're *in your boots* or not. I just feel it and, I can see it. I can see an aura. (…) I don't try to analyse it, I just know I see it. Sometimes it’s big, sometimes it’s small and I can tell if somebody is *too much out here*… You know, I just know. That sounds really... but a lot of the time I do just know...

Her expression ‘in your boots’ implies a link to the connection with the ground. In energetic terms a grounded person has a well-balanced energy system with a firm and solid connection to the Earth energies and the physical dimension. On the other hand, the ‘too much out here’ indicates a deficiency in the lower chakras and an excess amount of energies in the upper chakras resulting in the imbalance and misalignment between physical body and energy body. The following vignette demonstrates Brigit’s understanding of this type of misalignment:

**Brigit:** It’s like when people say after they had an operation, that they feel just like a little bit *outside of themselves*. They are still connected but they are not grounded as we would be. When you have your feet connected on the ground and on the Earth, you know when you *are in your body*, you can feel everything about your body. Some people aren’t even aware of their body pain.

From her clinical experience, the energetic misalignment between the body and the energy body results in a lessened receptivity of the somatic sensations which she associates with traumatic experiences:
**Brigit:** With trauma, we can actually shoot out, we can split. And it is through energy work that we can come back in where it’s safe. A lot of people who have been traumatized it’s not safe for them to be in the body and that’s why they can bump into walls, don’t see traffic coming on the road, they are not grounded, they are literally not in their physical body.

Martin talks about a similar phenomenon, the shaman's journey which is a self-induced projection of the consciousness into the non-physical realms of existence. The expression ‘go on a journey’ means the conscious shifting of the awareness of the shaman, a well-known spiritual practice. Martin warns about the risks of using spiritual practices as an escape from the physical rather than for personal growth and self-knowledge:

**Martin:** Some people get hooked on shamanism as a way of escaping difficulties and they won’t grow through that.

### 4.4.2 Final Energetic Disconnection - The Process of Dying

The second sub-theme is presented through an interview extract with one participant, Martin. His unexpected disclosure about a precious, important but rarely discussed part of his work as a shamanic healer prompted the researcher to include it. The researcher feels privileged for the trust Martin placed in her and her study in the belief that it will serve a greater good. Because of the personal nature of the account, the researcher decided to leave out some of the personal details so to protect the participant’s anonymity.

After talking about his client who passed away after a long battle with cancer, Martin pauses as if he is weighing up his situation.
Martin: [...] I had to get a lot of supervision after her. It's not easy being with someone who's dying…  (Long pause)

The researcher had a strong sense at that moment that he was taking his time to 'download' and 'read' her energetic information to see whether his story was safe with her. His delivery is slow and considered:

Martin: Okay.  (Pause) I'll tell you something else that's not really covered by your questions…  (Pause)

Researcher: That's ok

Martin: One of the gifts that I have is accompanying people at their time and taking them through death. And I did that with [...] So, I did a shamanic piece with him as he was dying, and all the fear and all the terror left him. And he, in spirit, crossed over. So, it's a kind of a way of facilitating that. What happens at the moment of death. What happens to people when they're dying is that - I don't know when it's an accident - but when they are dying of an illness, their energy centres shut down sequentially, starting with the base chakra. It closes down completely. All the energy leaves it (the physical body) and you have these periods that there's less and less of the person here and more and more of them elsewhere. And that's just picking up on what's happening energetically.

Researcher: As they are moving out?

Martin: As they are moving out, basically, yeah. And the last energy centre to go is the crown chakra. So, so that's a real privilege as well.

Researcher: Did you sense this with him?

Martin: Yeah. Yeah. I knew he was coming very close to death, so I had my shamanic drum with me and I did a ritual around his dying. Which was very healing for him and his partner.

Researcher: And did you have a sense of him when he passed?

Martin: I've got a picture of him after he passed of him sitting at the end of the bed, smiling. And his death wasn't easy. You know, it was very difficult.

Martin's perception of the energetic process occurring at the time of death bears a striking resemblance to that of the dissociative phenomena discussed by the
participants in the previous chapter. The expressions “all energy leaves it” and “less and less of the person here and more and more of them elsewhere” suggests that what we call death is only the deactivation of the physical body with the consciousness and its energy field moving on from its physical existence.
Chapter 5: Discussion

5.1 Introduction

The aim of this research was to explore in detail the humanistic - integrative psychotherapists’ individual experiences who integrate energy healing into their clinical practice. The objective was to examine the context and rationale for the inclusion of energy healing and to acquire insight into the participants’ perception and conceptualisation in relation to the impact this type of integration has on their own and on the client’s process. The investigation of participants’ understanding of their own experiences was supported by an Interpretative Phenomenological Analysis and its two-levelled interpretative activity which involved the researcher’s own reflexive commentary to derive a deeper insight.

This chapter outlines how the findings of this study can be placed in the wider context of the extant literature previously reviewed in Chapter 2. To facilitate the dialogue between the results and the literature the chapter is discussed under the headings of the three master themes set out in Chapter 4.

5.2 Energy Healing as Process

The first theme classifies energy healing as a ‘process’. The process orientation came across as an overarching master theme verifying the common ground and hence the theoretical rationale for the integration of energy healing and humanistic psychotherapy.
The participants’ utmost respect for the client’s process and their perceived role as a facilitator was evident throughout the study which reflects their humanistic stance and values as outlined by Rogers (2004). Participants consider energy healing supplemental to psychotherapeutic theories which does not replace the in-depth psychological work but enhances it, based on the same premise as outlined by Judith (2004) and Taylor (2009) who both advocate a multi-levelled approach to therapy in which the underlying energetic layer of the mental, emotional and physical aspect of the person is also addressed.

In contrast with the prevailing understanding of the word ‘healing’ in the medical field (M. H. Cohen, 2002), this current research echoes the views of authors (Brennan, 1990; Judith, 2004; Moodley & West, 2005; Nelson, 2007) in energy medicine who posit that the purpose and impact of energy healing is not reduced to physical healing. All three participants articulated their sense of healing as a process that allows the person to get in touch with their vulnerable side and which facilitates emotional expression, insight and acceptance. It was highlighted by Martin, that healing and cure are two distinct concepts and while clients can experience healing, physical cure is not always possible within one lifetime. Participants therefore see healing in its holistic sense which is consonant with ancient mystical observations and some of the modern integrative psychotherapeutic approaches embracing the multidimensional reality of a person (Moodley & West, 2005; L. Taylor, 2016).

Energetic interventions described by the participants are mostly non-touch as described by Taylor (2009). Therapists are trained to tune into the client’s subtle energy system and become a conduit for universal life force energies to aid with
clearing and balancing of the energy system of the individual. With a series of hand movements within the person’s energy field, the Therapist aids a shift in their energy allowing for an increased and balanced flow throughout the energy body. According to the authors in the wider literature in energy healing (Brennan, 1990; Eden & Feinstein, 2008; Nelson, 2007; O’Farrell, 2015; Wynne, 2015) the adjustment in the energy field activates and accelerates the person’s own healing processes. ‘Energetic blueprint’ and the person’s ‘own intuitive healing mechanism’ were highlighted by the participants of this study and which provides evidence for consistency with literature. These concepts also mirror the well-known humanistic concepts of ‘human potential’ and ‘self-actualisation process’ (Rogers, 2004) from a subtle-energetic perspective.

The therapist’s supporting stance and the central role of the process was also evident in the participants’ understating of how energy healing promotes change and transformation for the client. The participants’ belief in the intelligence of both the channelled energies and the person’s own intuitive healing mechanism indicate that they perceive the therapeutic outcome of energy work as something essentially outside of their control. As they are continuing to hold the space for the client when working energetically with them, they maintain their stance as facilitators of the client’s transformation which is consistent with the research findings of Moodley and West (2005) who conducted a similar qualitative research into talk therapy and healing integrative work.

Energy medicine literature (Brennan, 2011; Curtin, 2015; Eden & Feinstein, 2008; Nelson, 2007; Trivellato, 2017) considers subtle energies the representation of an intelligent universal organising force. Participants emphasised that while they channel
and direct the energy, the person’s energy field is ‘drawing it’ and so ‘it will go where it needs to go’ rather than where they think it should go. The conscious use of intention, a powerful form of thought-energy (Minero, 2012; Nelson, 2007; Trivellato, 2017) was reported by all three participants of this study as an important tool in directing the energies. The premise that energy has the ability to cooperate also links in with quantum theory which postulates that subatomic particles respond to the observer’s expectation and intention (Nelson, 2007; O’Farrell, 2015).

The study participants explained how trauma and unprocessed emotions leave an energetic footprint and overwhelm the client’s energy system which can have psychological and physical repercussions. This view reflects not only every literature reviewed in the field of energy healing but also in psychotherapy literature embracing the energy concept (Levine, 2008; Lowen, 1994). Nelson (2007, p. 11) contends that trapped emotions consist of well-defined subtle energies. The frequency of the vibration of these emotions causes the surrounding tissues to vibrate at the same frequency. This in turn lowers the immune function and can interfere with the optimal function of the body’s tissues. Because these are not visible to the ordinary eyes, they remain undiagnosed by conventional medicine as the major causative factor of many physical illnesses. The connection between trapped emotions, stuck energies and physical ailments was specifically pinpointed by Martin who talked about the connection between his late client’s cancer diagnosis and her unrecognised and unprocessed grief which she carried from her childhood. In the context of modern physics, the research findings also coincide with Einsteinian conclusion of interconvertibility of energy and physical matter.
Martin closely related energy healing with spiritual healing which through experiential learning offers a multidimensional and cosmic perspective on the clients' human existence and as Moodley and West (2005) indicated it has the potential to “re-establish a conscious relationship with spiritual life” (p. 273). Martin reported, his clients are often inspired to further explore spiritual practices such as meditation or shamanic training for the purpose of personal development. The association with spirituality was an expected outcome of the research based on the reviewed literature (Brennan, 2011; Curtin, 2015; Judith, 2004; Moodley & West, 2005; Nelson, 2007).

Participants reported that both the introduction to energy healing and the subsequent psychotherapeutic integration of healing sessions are essentially client led. They maintained, the client must demonstrate an understanding and interest in subtle energies before they are offered energy healing which is reflective of their humanistic stance. Martin also reported relying on his own intuition and ability to sense energetically whether or not the client was open and fit to this type of work. The interest in energy work is usually coupled with an openness to spiritual matters and authors (Brennan, 1990; Judith, 2004; Myss, 1996) relate it to the openness of the Brow and the Crown chakras.

On the other hand, Judith (2004) and Brennan (1990) state that excess energy in these upper chakras can cause the person to be bombarded with too much psychic input from the spiritual dimension which, when not grounded, can engender mild confusion and in extreme cases, full blown psychosis. The same understanding is reflected in two of the participants’ accounts when talking about contraindications; when they identified clients with psychosis and split personality disorder as not fit for energy
healing due to their lack of ego strength that was also reflected in the energetic condition of person. The participants’ sense of the energy body of these clients is described as ‘too light and too fragile’ and translated as ‘open to outside influences’. Considering the above literature many of these clients may be simply suffering from the burden of their extreme openness to the influences from the non-physical dimension while unable to rationally ground it in the physical reality and reconcile it with the socially accepted materialistic worldview. As Grof (1985) points out, without the consideration of the energetic and spiritual framework and the modern understanding of non-ordinary states of consciousness these clients are still left in the grip of psychiatry. Mate (2014) expresses similar views in that as long as Western culture cuts humanity off from spirituality, it constructs pathology.

### 5.3 Intersubjectivity as Energetic Assimilation

The second master theme highlights the underlying subtle energy dynamics in the intersubjective space between therapist and client and, the participants ability for a conscious utilisation of this aspect of human relating.

Intersubjectivity theory describes a “psychological field constituted by the intersection of two subjectivities” (Wallin, 2007, p. 57). While psychotherapy literature is moving towards the paradigm shift which accepts energetic interconnectedness as a scientific fact (Gaffney & O’Neill, 2013; Schore, 2003; Wallin, 2007), the means of the information transfer such as energy, resonance and frequency are not yet fully integrated in the field. This is also evidenced by the challenges encountered by the participants in talking about their work. Using Brigit’s expression, energy still appears to be seen as ‘alien’ to many, oftentimes even to those identifying as spiritual which
highlights the difference between spirituality acquired through religious indoctrination and spirituality that is realised by the person through experiential learning.

A specific contribution and advantage which participants of this study attributed to energy therapy is that without the risk of intrusion of touch, the direct treatment of energy congestion, depletion and imbalance in the client’s energy body can open up the doorways to the inaccessible areas of the unconscious and facilitate a deeper non-verbal processing and integration which are then further integrated through traditional psychotherapeutic work. Working with the ‘bodily unconscious’ has a pivotal role in body psychotherapy and neuroscience (Ogden et al., 2006; Rothschild, 2000; Schore, 2003; Totton, 2003) and while neo-Reichian approaches (Levine, 2008; Lowen, 1994) have some understanding of how it relates to the energetic component in the body there is very little awareness in psychotherapy literature in general of the abundance of the energetic dimension which could be worked with. Energy healers work in a non-invasive way with the pre-physical and pre-manifested unconscious material bound in the energetic layer (Curtin, 2015; Moodley & West, 2005; L. Taylor, 2016; Wynne, 2015).

The unconscious communication is attributed by participants and literature (Brennan, 2011; Minero, 2012; Nelson, 2007) to the all-knowing energetic field penetrating and surrounding everything in nature including animals and humans. Minero (2012) states, “energy is always exchanged between individuals when they enter into contact” even through thinking or a simple look (2012, p. 70). Brigit articulated her understanding of the constantly interacting human energy fields by describing them as “merging” and “hitting off” each other. She explained, regardless of whether people are consciously
aware of it or not they get the information on an unconscious level which substantiate the link between the writings of Minero and Shore. Shore (2003) describes the right brain as a receptive organ that is required from the therapist to be turned on to receive the unconscious and preconscious communication, the ‘transfer of affect’ from the client. While resonance phenomena are usually applied to understand the synchronisation between the various parts of the brain, he suggests that it may also occur between the right brains of two individuals. Brain scientist, Taylor (2009) notes, although medical science and our left brain is still baffled by the mystery, “I believe our right minds are perfectly clear about how they intuitively perceive and interpret energy dynamics” (2009, p. 169).

Their numerous references to their intuition, insight, sixth sense, innate sense and telepathic communication described the participants’ meaning making process of the subtle feedback from the clients while working energetically with them. While these are also mentioned in psychotherapy literature as the gateways to the ‘analytic third’ (T.Ogden as cited in Wallin, 2007) this present study found that energy healers have an increased ability to consciously ‘sense in’, ‘tune in’ and ‘read’ the field of the client in order to receive their subtle information which then leads them in the work. Martin’s description ‘it’s like a whole file downloads’ correlates with conscious energetic attunement used as a diagnostic tool by Brennan (1990, 2011) and Curtin (2015) and which is termed as ‘conscious sensitivity’ by Peirce (2009).

The research study found that even though they might consciously read or naturally receive unconscious information about their clients, participants remain respectful to their clients’ process and thus to ethical and humanistic values. Their ethical
awareness is most likely to stem from their psychotherapeutic background and adherence to code of ethics of the IACP which mitigates the risks of intruding on vulnerable clients. This finding supports the proposal of Cohen (2002) who suggests using the professional codes and standards as an example for CAM regulation.

The various energetic sensations participants observed in themselves and in their clients are consistent with the texts on energy work (Bruce, 2011; Minero, 2012; Nelson, 2007). In talking about his energetic and somatic awareness while working energetically Martin described his felt sense of emotional trauma lodged into the person’s energy field as an intense cold when he said: ‘it's like a freezer door opens’. As observed by him, intense cold is a sign of stuck energy caused by old hurt which is also reflected by Curtin (2015), who also associates areas of coldness in the energy field as areas of stored trauma energy. This is also consistent with the state bound energies described in the Trauma/Discharge model of body psychotherapy (Levine & Frederick, 1997; Totton, 2003).

Transferential dynamics are seen as part of the unconscious discourse between therapist and client which participants understand to have its own underlying energetic mechanisms as described earlier. In terms of countertransference, participants named the role of intention in directing the energies in a way that allows them to understand clients on a deeper level while maintaining their capacity for holding and containing the client’s process without being overwhelmed by it. They also described the conscious channelling of universal life force energy consistently with various other energy healing modalities (K. S. Cohen, 2000; Curtin, 2015; Judith, 2004; O’Farrell, 2015) as opposed to their own bioenergy. Conscious energetic shielding is also a well-
known self-defence strategy in the field (Brennan, 1990; Bruce, 2011; Eden & Feinstein, 2008; O’Farrell, 2015; Wynne, 2015).

Moodley and West (2005) note that healing often involves the healer’s successful resolution of certain personal issues that arise in the healing relationship which was also evidenced by one of the participants of the current study, Martin. This brings forth another link between a healer and a psychotherapist, namely their ‘use of self’ in the work.

5.4 Dissociation as Energetic Misalignment

The third theme emerging from the data was the participants perception of a phenomenon commonly known in psychotherapy as “Dissociation”. They observed it to be a process accompanied by the temporary misalignment between the person’s physical body and energy body resulting in a psychological and mental shift within the person. Furthermore, the energetic process of dissociation was not only observed in traumatized clients but also in the process of dying, as observed by one of the participants who described his energetic perception of the process as ‘there is less and less of the person here and more and more of them elsewhere’.

Drawing on the literature (Buhlman, 2001; Grof, 1985; Judith, 2004; Minero, 2012; Nelson, 2007; Trivellato, 2017), when people are ‘not in their physical body’ their conscious awareness shifts from the physical body to the subtle energy body which in turn lessens their awareness in their bodily sensations and evokes an apparent independence of their mental and psychological processes from the body. The shift in the attention during the temporary misalignment might offer an explanation to the
underlying process in trauma survivors’ descriptions of being outside of their bodies and having an awareness of the traumatic events from a different perspective.

Brigit’s conceptualisation also suggests that the dissociative defence mechanism of splitting documented in various psychotherapy literature (Chu, 2011; Ogden et al., 2006; Rothschild, 2000; Wallin, 2007) is not just a physiological and psychological event but the retreat of the consciousness to the non-physical dimension to respite from the physical and emotional suffering within the human form. Lowen (as cited in Judith, 2004) states, without the internal and external alignment the person will “split into a disembodied spirit and a disenchanted body” (p. 137).

Barušs (2006) argues, the idea that the human mind is a result of some macroscopic neural activity is “based on outdated ideas about the nature of matter” and without the inclusion of contemporary quantum physics neuroscientific theories are bound to fail. The research finding appears to substantiate the claim (Barušs, 2006; Grof, 1985; Minero, 2012; Rama et al., 2014; Trivellato, 2017) that human consciousness is not the production of the physical brain and dissociation is not a primarily neurobiological phenomenon (Rothschild, 2000) although physiological changes can be observed during that state.

In their paper, Cardena et al. (2017) note, “these experiences […] are more common than usually believed and extend the realm of human experience well beyond the domain of abnormal psychology” and “they offer alternative perspectives to the ordinary mainstream western secular conception of reality”. Indeed, the misalignment and separation of the energy body from the physical body is commonly discussed both

Many of the near-death experiences that have been recorded reveal that people who have “died” have actually just left their bodies for a time. Sometimes they don’t realize that they have died until they look down and see their physical body lying there as they hover above it. Individuals such as these have come to know by their own experience that they are not their physical body. Instead, their body is more like a temple that houses their spirit-self. (Nelson, 2007, p. 90)

Martin’s sense of what is happening energetically at the time of death seems to correspond with the literature which describes death as the ‘liberation process’ (Brennan, 1990; Judith, 2004) and is consistent with all spiritual and religious teachings. As discussed by the participants, temporary separation in the dissociative experiences can also be detected energetically which therefore suggests that the phenomenon is simply an unrecognised part of the human condition.

The researcher feels that the empirical knowledge clients of these therapists acquire about themselves through the increase in their subtle energetic and extrasensory perceptions has the potential to safely explore and integrate the extra-physical reality. In turn, it can bring healing to clients whose traumatic or non-ordinary experiences cannot be sufficiently resolved without the consideration of the spiritual and its capacity of providing a wider context and framework through which healing may become possible.
Chapter 6: Conclusion

The research reveals that energy healing and humanistic psychotherapy are seen as part of a continuum of the therapeutic process, complementing one another. When working energetically with clients, therapists play a facilitative role respecting the client’s unconscious healing mechanisms which they support through the mobilisation of subtle energies guided by their countertransferential experiences; their increased extrasensory perception and ability for conscious energetic attunement into the intersubjective therapeutic space. The study participants conclude, their clients’ own increasing energetic intelligence and intuitive insights acquired through direct personal experience in the energy healing space promote transpersonal awakening and allow them to gain an expanded, multidimensional understanding of themselves and their presenting issues.

The study finds that dissociation is more than a neurobiological and psychological phenomenon. According to the participants’ observation, it coincides with a misalignment between the person’s energy body and physical body while a shift occurs in the person’s conscious awareness. The process reflects modern consciousness research findings on OBE and resonates with ancient holistic views of a person as an embodied spirit. The finding is further substantiated by an account describing the final separation process of the energy body and consciousness from the physical body at the time of death. Energy healers are therefore capable of integrating human experiences that are often diminished or pathologized by mainstream psychiatry, psychology, psychotherapy and organised religion which are
slow to embrace the new scientific paradigm about the nature of reality and human consciousness.

Finally, the findings shed light on the rationale and value of the integration of energy healing and potentially other CAM modalities with psychotherapeutic and medical practices and highlight their capacity to bring awareness to the long-forgotten mind-body-spirit connection. The subtle energy concept to interconnectivity, health, illness, life and death offers a not so new holistic framework for modern society to tackle issues of social and health matters, a crisis stemming from fragmentation and disconnection. And perhaps, society, now more than ever, needs less of the expert–specialists and more of the therapist–healer archetype who has the capacity to embrace all there is and support the individual on their journey towards integration.

### 6.1 Strength and Limitations

**Strengths**

The idiographic and hermeneutic commitment of the qualitative research study offers an opportunity to acquire abundant data and deep insight into the participants’ phenomenological view of the integration of energy healing and psychotherapy. The evidence collected via in-depth exploration and reflexive analysis on the lived experience of these therapists reflects the basic tenets of energy healing and vibrational medicine as outlined in the existing literature addressing and incorporating the energetic and thus non-physical reality of human existence in an experiential way. It also highlights a gap in literature in relation to the incorporation of the findings of modern consciousness research and science into contemporary psychotherapy theory.
and practice which delays the liberation of many clients with experiences linked to the transpersonal regions.

**Limitations**

Reflexivity, through which data of this study was analysed and interpreted, deploys the subjective filter of both the participants and the researcher which can give rise to bias in relation to the results of the study. In order to minimalise this bias, beside her own internal supervisory process and distancing ability the researcher also used the supervisory process to maintain objectivity. Nevertheless, quantum theories inform us that detached observer and objectivity is a myth and therefore all research must essentially make allowance for the subjective element. The small research sample can also be considered as a limitation upon which general laws cannot be established.

### 6.2 Suggestions for Further Research

Although findings of this research are in line with metaphysical assumptions of modern science with regard to the nature of reality, consciousness and its relationship to matter, there is very little consideration of same in mainstream psychotherapy theory and practice which highlights the need for further research and discussion in the field. In order to accelerate the revision of the currently prevailing assumptions of psychopathology, additional qualitative and quantitative research could cover, from an updated scientific perspective, extrasensory perception, psychic experiences, OBE and altered states of consciousness as they manifest in the psychotherapy space.

The current research points to the difference between belief-based spirituality and spirituality as realised through direct personal experience. It could be beneficial for the
psychotherapy profession to further explore this area and their impact on both the psychotherapist’s and the client’s process and re-establish the place of the transpersonal.

Finally, the holistic and subtle energetic concept of health and illness, namely the correlation between physical illness, emotional distress and the person’s subtle energetic constitution could be further explored from a psychotherapeutic viewpoint to contribute to the Department of Health’s initiatives in relation to chronic illness prevention.

6.3 Implications for Psychotherapy Practice

Due to its process orientation, non-invasive energy healing practices prove to fit in a humanistic and integrative framework provided clinicians adhere to professional and ethical code of conduct. Psychotherapists who are interested in learning about and exploring the subtle energetic dimension of human beings and human relating can enhance their personal and professional capacity and gain a new, deeper understanding of their own and their clients’ issues. Energy work offers a gateway and an experiential avenue to life beyond the physical world and in turn can promote new insights, meaning and purpose in a wider, universal context.
References


Appendices

Appendix I: Participant Information Sheet

INFORMATION FORM

RESEARCH: An Exploration of Psychotherapists’ Experiences of Integrating Energy Healing into their Clinical Practice

My name is Judit Kürti and I am currently undertaking an MA in Psychotherapy at Dublin Business School. I am inviting you to take part in my research project which is concerned with the experience of psychotherapists who integrate energy healing into their clinical practice. I will be exploring the views of psychotherapists like yourself who work with subtle energies.

What is Involved?

You are invited to participate in this research along with a number of other people because you have been identified as being suitable. If you agree to participate in this research, you will be invited to attend an interview with myself in a setting of your convenience, which should take no longer than 60 minutes to complete. During this I will ask you a series of questions relating to the research question and your own work. After completion of the interview, I may request to contact you by telephone or email if I have any follow-up questions.

Confidentiality

All information obtained from you during the research will be kept confidential. Notes about the research and any form you may fill in will be coded and stored in a locked file. The key to the code numbers will be kept in a separate locked file. This means that all data kept on you will be de-identified. All data that has been collected will be kept in this confidential manner and in the event that it is used for future research, will be handled in the same way. Audio recordings and transcripts will be made of the interview but again these will be coded by number and kept in a secure location. Your participation in this research is voluntary. You are free to withdraw at any point of the study without any disadvantage.

DECLARATION

I have read this consent form and have had time to consider whether to take part in this study. I understand that my participation is voluntary (it is my choice) and that I am free to withdraw from the research at any time without disadvantage. I agree to take part in this research.

I understand that, as part of this research project, notes of my participation in the research will be made. I understand that my name will not be identified in any use of these records. I am voluntarily agreeing that any notes may be studied by the researcher for use in the research project and used in scientific publications.

Name of Participant (in block letters) _______________________________________

Signature __________________________________________________________________

Date    /   /
Appendix II: Semi-Structured Interview – Questions

Background

1. Can you tell me what brought you into the field of psychotherapy?
2. How did you become interested in energy healing practices?
3. What is your understanding of human energy and how does that translate to your work as a psychotherapist and your life as a person?

Client’s readiness

4. How do you market yourself?
5. How do you introduce energy healing to clients?
6. What’s the basis for the clinical decision to include energy healing in your practice? What signs you look out for?
7. Can you please tell me about the context energy healing is used in (e.g. presenting issues, types of clients)?

Practice and meaning making process

8. Can you please talk me through how you as a psychotherapist work with clients using energy healing?
9. How do you experience the connection on an energetic level?
10. Can you tell me how do you make sense of your own and the client’s process?
11. Can you tell me ways you make use of your attunement of the client’s energetic state in your work with your client?
12. What is your sense of how the integration of energy healing impacts on the client’s process?
13. Can you please share an example where combining energy healing and psychotherapy with a client was particularly memorable?
14. As a psychotherapist, how do you manage the transferential dynamic that can arise with energetic attunement?
15. Have you had any memorable experience of somatic-countertransference when working with energies that you’d like to share with me?
16. Is there a different way of managing yourself in this type of work (self-care, supervision)?

Reflection on the integration

17. Can you comment on the differences for clients in their experiences of psychotherapy with energy healing, and without energy healing?

18. Can you give me a sense of what energy healing brings to your practice that you may feel other interventions don't?

19. Can you describe any impacts that using energy healing has had on you as a person and practitioner?

20. Are there any challenges outside the therapeutic space that you may find difficult?

Risks

21. Are there any issues or clients that you wouldn't work energetically with?

22. How do you feel when you don't?

23. Is there anything else you would like to add?
Appendix III: Summary of Emerging Themes

<table>
<thead>
<tr>
<th>Count of Emerging themes</th>
<th>Column Labels</th>
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<tbody>
<tr>
<td>Row Labels</td>
<td>Brigit</td>
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<tr>
<td>DISSOCIATION</td>
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<tr>
<td>Dying process</td>
<td>9</td>
</tr>
<tr>
<td>Energetic misalignment</td>
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<tr>
<td>HEALING AS PROCESS</td>
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<tr>
<td>Benefits</td>
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<tr>
<td>Clearing, releasing, shifting</td>
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<td>Client's process</td>
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<tr>
<td>Contraindications</td>
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<td>Healing vs cure</td>
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<tr>
<td>Intention</td>
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<tr>
<td>Introduction</td>
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</tr>
<tr>
<td>Non-touch</td>
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</tr>
<tr>
<td>Spirituality</td>
<td>2</td>
</tr>
<tr>
<td>Supervision</td>
<td>1</td>
</tr>
<tr>
<td>Technique</td>
<td>12</td>
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<tr>
<td>Therapist</td>
<td>41</td>
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<td>INTERSUBJECTIVITY</td>
<td>47</td>
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<td>Countertransference and Self-care</td>
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<tr>
<td>Energetic assimilation</td>
<td>5</td>
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<td>Energetic sensations and Felt sense</td>
<td>14</td>
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<tr>
<td>Energetic understanding</td>
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<tr>
<td>Innate sense</td>
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<tr>
<td>Shaman's journey</td>
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<tr>
<td>Transference</td>
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<tr>
<td>Universal energy</td>
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<td>Grand Total</td>
<td>181</td>
</tr>
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Appendix IV: IPA Analysis Template

<table>
<thead>
<tr>
<th>Emergent Themes</th>
<th>Original Transcript of Participant</th>
<th>Exploratory Comments</th>
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<tr>
<td></td>
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</tbody>
</table>
## Appendix V: Psychology of the Chakras

<table>
<thead>
<tr>
<th>Chakra</th>
<th>Root chakra</th>
<th>Sacral chakra</th>
<th>Solar Plexus</th>
<th>Heart chakra</th>
<th>Throat chakra</th>
<th>Third Eye or Brow chakra</th>
<th>Crown chakra</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central issue</td>
<td>Survival Safety Trust</td>
<td>Sexuality Emotions</td>
<td>Power Will</td>
<td>Love, Relationship</td>
<td>Communic ation</td>
<td>Intuition Imagination</td>
<td>Awareness</td>
</tr>
<tr>
<td>Developmental stage</td>
<td>Womb to 12 months</td>
<td>6 months to 2 years</td>
<td>18 months to 4 years</td>
<td>4 to 7 years</td>
<td>7 to 12 years</td>
<td>Adolescence</td>
<td>Throughout life</td>
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<td>Saboteur</td>
<td>Fear</td>
<td>Guilt</td>
<td>Shame</td>
<td>Grief</td>
<td>Lies</td>
<td>Illusion</td>
<td>Attachment</td>
</tr>
<tr>
<td>Identity</td>
<td>Physical</td>
<td>Emotional</td>
<td>Ego</td>
<td>Social</td>
<td>Creative</td>
<td>Archetypal</td>
<td>Universal</td>
</tr>
<tr>
<td>Mental, emotional issues</td>
<td>Birth trauma, abandonment, poor physical bonding with mother, feeding difficulties, physical abuse</td>
<td>Blame, guilt, money and sex, power and control, creativity, ethics and honour</td>
<td>Trust, fear and intimidation, self-esteem, self-confidence,</td>
<td>Love and hatred, resentment, grief and anger, loneliness and commitment, forgiveness, compassion, hope and trust</td>
<td>Choice and will, personal expression, dreams, creativity, addiction, judgement, knowledge, decisions</td>
<td>Self-evaluation, truth, intellectual abilities, adequacy, openness to ideas, learning from experience, emotional intelligence</td>
<td>Ability to trust life, values, ethics, courage, humanitari nism, selflessness, to see larger patterns, inspiration, spirituality</td>
</tr>
<tr>
<td>Physical Dysfunction</td>
<td>Chronic lower back pain, Sciatica, Cancer, Depression, Immune related disorders, Eating disorders, Blood disorders,</td>
<td>Chronic lower back pain, Sciatica, Ob/Gyn problems, Sexual potency, Urinary problems</td>
<td>Arthritis, Intestinal problems, Pancreatitis, diabetes, indigestion, anaemia, bulimia, liver dysfunction, hepatitis, adrenal dysfunction</td>
<td>Congestive heart failure, heart attack, asthma, allergies, lung cancer, breast cancer, upper back, shoulder, bronchitis</td>
<td>Chronic sore throat, mouth ulcers, gum difficulties, laryngitis, swollen glands, thyroid problems</td>
<td>Brain tumour, mouth, stroke, neurologica l disturbance, blindness, deafness, seizures</td>
<td>Energetic disorders, chronic exhaustion, extreme sensitivities to environmen tal factors</td>
</tr>
</tbody>
</table>