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Biofield therapy definitions and descriptions: Professional development of an emerging profession

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Abstract

Purpose:

Define and describe different types of energy practitioners and their scope of practice to advance the profession of biofield therapy and improve research quality.

Materials & Method:

In 2018 the leaders of the energy practitioner training community, associations and scientists met in Phoenix, AZ. Fourteen working groups were developed. One of the working groups developed meetings with training programs with the goal of defining commonalities and differences within the energy practitioner community. These meetings included groups as small as 4 individuals and as large as 27 individuals representing various segments of the community. 131 individual practitioners were involved in these discussions, where many represented organizations with hundreds of members. The results of those meetings and discussions were specific definitions of divisions within the energy practitioner community.

Results:

Upon completion of the training program group meetings, which took place over the following year, eleven divisions were defined based on styles of work. Within those eleven divisions, some communities defined sub-groups. These groups' choices have resulted in definitions that provide a foundation for legal and scientific definitions and categorization for various segments of the energy healing community, which they as members of the community see as distinct groupings.

Conclusion:

Descriptions and definitions of energy practitioners and their scope of practice are important first steps in the development of biofield therapy as a licensed profession. Distinctions in practitioner-defined groupings of energy practitioners may support and inform scientists in developing more accurate methodologies in research.

Keywords: Energy Healing, Energy Medicine, Biofield, Healing Touch, Therapeutic Touch, Qigong, Shaman, Reiki, Cognitive Somatic Energy Practices,

Introduction:

Over the past forty years scientists have been researching aspects of energy healing, mind-body therapies, medical intuition, and other forms of energetic care, with a goal of determining whether there is any validity to energy medicine and biofield therapies. Scientific research has focused on three areas: 1) the effects of healing on 'healees', with studies involving humans, animals and plants; 2) studying the healer's physiology; and 3) measuring bio-emissions of the human body. The evidence base for clinical effectiveness of biofield therapies is strongest in symptom management for pain and cancer, the two conditions that have received the most study¹. Studies with animals and plants show significant healing effects, compared to controls, which cannot be attributed to a placebo effect². Healer physiology varies with the type of biofield therapy used³. Ultra-weak photon emissions are the most studied of the human body bio-emissions⁴. While there are many good quality studies, particularly clinical

studies, there are also many with weak methodology, due to the early stage of research in this emerging science⁵.

While scientists are continuing to develop a better sense of this paradigm and to determine what information is necessary to collect so that they may understand the fundamental aspects, mechanisms of action, and best ways to test^{6,7,8,9}, the community of practitioners has jumped ahead and begun the process of defining themselves. Though there have been some attempts to define the complementary medicine and energy healing professions^{10, 11} with their legal and regulatory requirements,^{12,13,14} there has been limited action on the part of individual states to regulate this industry. One exception is the regulation of energetic practices as an adjunct to the massage community. This type of regulation presents a significant issue today as there is a hierarchy of medicine which does not allow individuals with what is considered a senior licensing status (MD or RN vs LMT) to be regulated or disciplined by a group that

is less comprehensively trained in health care¹⁰. Further, with many styles of alternative practitioner and many more styles of energy practitioner, sufficient representation on a board of registration in massage is not appropriate or possible¹⁶. Unfortunately there has been a lack of understanding of the breadth of energy practices involved^{9,16}.

Background:

Beginning with requests from President Obama's administration in 2010 and again from President Trump's administration in 2017, a need was recognized to develop some form of both state and national regulation of the energy practitioner community. This resulted in a series of meetings in 2018 with many of the leaders of the energy practitioner training community, energy associations and scientists doing research in energy practices at Arizona State University in Phoenix AZ. The goal of these meetings was to develop more cohesive organization within the energy healing community and determine areas of commonality so that the process of energy healing could be better understood. Several meetings were held over a series of weeks. From those meetings, fourteen working groups were developed. And from those working groups two organizations were developed with the goal of a third organization to be developed over the long term. In the process of development of the NCCOEP organization, it was determined that further working groups needed to be developed with the goal of defining more specifically the commonalities and differences within the energy practitioner community with a goal of appropriately defining minimum qualifications that a practitioner should meet to be

considered competent at a national level. The working groups developed similar standards to those used in medicine, nursing, physical therapy, acupuncture etc. in that after graduation from training, individuals take national level exams.

By 2021 ethics and standards of practice had been defined and developed as were exams suitable to all current members of the community. Eleven separate divisions were developed with standards for practitioners, basic standards for training and curriculum and research standards specific to that division. As part of that process of development, specific and unique definitions were developed so that scientists and practitioners could separate out unique aspects of each style of work. To this point, when research has been conducted a multiplicity of styles have been tested as if they functioned in the same way. These definitions allow the community to begin to distinguish between styles of work and philosophical differences. Further, these definitions are being used in state licensing bills to distinguish different groups of the community so that the standards that are established are appropriate for that segment of the community.

Purpose:

Define groupings of energy practitioners so that research and regulation can be done more accurately.

Materials and Methods:

Fourteen working groups from the AZ State University meetings formed two organizations, the National Alliance of Energy Practitioners (NAOEP, www.naoep.org) and the

National Certification Center of Energy Practitioners (NCCOEP, www.nccoep.org). Meetings were held over the next eighteen months in groups as small as 4 individuals and as large as 27 individuals representing various segments of the community. The result of those meetings and discussions were specific definitions and divisions within the energy practitioner community based on the styles of work involved. Some groups also defined training standards, scope of practice and descriptions of what their style of energy work included.

Results:

Upon completion of the division group meetings, eleven divisions were defined based on styles of work. Within those eleven divisions, some communities defined sub-groups. The group meeting choices resulted in definitions for various segments of the energy healing community, which they as members of the community see as distinct groupings. These definitions are being used as part of bills submitted to state legislatures for the purposes of licensing practitioners and providing consumer and practitioner protection.

The definitions developed by the community, including the divisions are as follows:

Client: An individual who pays for the services of an energy healing practitioner.

Clinical Intuitive Practitioner: Provides insight and information from a blending of clinical experience, wisdom and intuitive response. This may include some form of scanning of complex body systems.

Clinical Qigong Practitioner: A person trained as a Clinical Qigong, Traditional-Lineage Qigong, or Spiritual Qigong practitioner to provide Qi transmission through non-touch and/or light touch methods and prescription of Qigong exercises and meditations. Cupping, guasha, moxibustion, external application of medicinal plants, eastern lifestyle suggestions, and other techniques, practices and adjunct therapies may be used by properly trained practitioners.

Clinical Tai Chi Practitioner: A person trained to utilize Tai Chi, a Far Eastern model of care which is part of Qigong but is often in the west considered separate, which utilizes movement and breath patterns to promote balance within the body.

Cognitive Somatic Energy Practices Practitioner: A person trained to strategically and methodically intervene with human energy fields in elevating physical, mental, emotional and spiritual wellbeing, resulting in improved work, education, athletic, artistic, and health-related attitudes and behaviors.

Full Spectrum Practitioner: An energy healer trained to utilize visible light, near infrared, other wavelengths of light, and changes in vibration and voltage transmitted through harmonic induction, electro-dermal transmission, and other methods to support the client.

Laying On Of Hands Practitioner: A person trained to promote healing by

supporting the client's connection with their true self through energetic and spiritual techniques that incorporate body, mind, heart, and soul.

Natural Practitioner: A person who has experienced a natural opening to healing gifts/talents/techniques and some sort of increased sensing, who has developed one or more specific approaches or applications as a result of that opening, and is called by their heart, to share in the act of service, their individual methodology with others to utilize the body's own wisdom with their clients.

Radiesthesia Practitioner: A person utilizing specially calibrated instruments (including but not limited to rods and pendulums) to detect and decode energy fields around people and objects.

Reiki Practitioner: A person utilizing the Reiki system of care (the transfer of healing energy from the practitioner's palms to the client) in Traditional/Family practice or in Clinical/Hospital settings, to promote relaxation, stress reduction, and harmony of the body systems.

Shamanic Practitioner: A person who assists individuals with their physical, emotional, and spiritual complaints through shamanic healing methods (rhythmic percussion sounds, soul retrieval, identifying and connecting with power animals, divination, and other spiritual healing methods). This is limited to non-indigenous practitioners as indigenous practitioners are covered under federal law.

Spiritual Practitioner: A person who is an ordained, lay, or eclectic spiritual practitioner using prayer and their personal connection to the divine (in the form which they perceive it), to support their clients and help them to reframe personal experiences in a positive manner, to enable change in their sense of self and spiritual perception, and to aid in the promotion of their health and well-being. This includes direct prayer for the client, religious ritual and ceremony.

And scope of practice definitions:

Scope of Practice: Energy modalities shall include, but not be limited to, techniques that support the joints, the hands, the face, the feet, the head, any other section of the body, or the full body, by use of (1) manual stimulation which may include stimulation by an instrument or mechanical device that does not pierce the skin, tapping techniques, techniques performed off the body, or by traditional movement patterns; (2) magnets, acupatches, and photobiomodulation; (3) affirmations, breathing techniques, therapeutic exercises, and lifestyle counseling; (4) prayer; meditation, journeying, and visualization; (5) chakra rebuilding techniques, frequency/resonance modulation techniques, cell triggering techniques, DNA manipulation techniques, connection to ley lines, elemental waves (big earth, small earth, water, fire, air, big wood, small wood, and metal), and wave aspects (power, information, harmonics, shearing/tensile strength,

density, viscosity, consistency, flow); and (6) nutritional, herbal, life and health coaching advice, but only if additional training and certification are provided. These techniques may be done on or off the physical body and may be done in physical proximity or at a distance.

Diagnostic Techniques: Energy modalities diagnostic techniques may include, but shall not be limited to, observation, dialogue, input by other health care professionals, results of standard health care testing, commonly used biofield imaging and measuring devices approved by the FDA or 510(k) exempt (provided that the practitioner presents documentation to the Board confirming appropriate training on the device employed and that the device is used only for the purpose for which the FDA has granted approval).

Limitations: Energy modalities are not to be construed as the practice of medicine, psychotherapy, or any other currently licensed healthcare practice, and as such are not to be considered a replacement for medical care, diagnosis, therapy, counseling or treatment of any kind.

Western medical diagnoses shall only be allowed if the practitioner is licensed to practice medicine, osteopathy, naturopathy, dentistry, chiropractic, veterinary medicine, nursing or similar profession, when and if it is within the providers approved scope of practice.

Chinese medical diagnoses shall only be allowed if the practitioner is either dually licensed to practice Acupuncture and Oriental Medicine

or is a Clinical Qigong practitioner who has completed a course of study which includes a minimum of 500 hours of training and courses including 110 hours of supervised training in theory, Chinese medical diagnosis and didactic support of clients for whom the applicant is primarily responsible.

Psychological diagnoses shall only be allowed if the practitioner is appropriately licensed to provide a psychological diagnosis.

Nursing diagnoses shall only be allowed if the practitioner is an appropriately licensed practitioner.

Chiropractic diagnoses shall only be allowed if the practitioner is an appropriately licensed practitioner.

Physical Therapy diagnoses shall only be allowed if the practitioner is an appropriately licensed health care practitioner.

Massage Therapy diagnoses shall only be allowed if the practitioner is an appropriately licensed practitioner.

Discussion:

Biofield therapies and in particular Energy Practices are an emerging profession¹⁷. The first step in formation of a new discipline or profession is defining and describing the profession¹⁸. In the present study, fourteen working groups, composed of 131 individuals from over 70 energy practitioner training organizations and associations, were able to define eleven types or divisions of energy practitioners, as well as their scope of practice. This is a significant first step, a landmark, in the development of the new health profession of biofield therapies.

These divisions have also been used to develop certification and will be used in the application of licensing requirements of energy practitioners throughout the U.S.

While the working groups did not include the scientists (with the exception of a limited number of scientists who were also practitioners), the community of scientists doing research in this area may find it valuable to understand the distinctions between groups, as the community has defined themselves. Some researchers have recognized the potential differences among biofield therapies, and the need to study these differences^{1,3}. Other scientists have noted that input from the biofield practitioners is critical to improving the experimental design and outcomes¹⁹. A major concern is that including multiple types of energy practitioners in a research study can cloud the research results through lack of uniformity of beliefs, skills and training. Thus, the healer community-developed divisions may aid in the development of better research methodology. Further work needs to be done to distinguish these healer types by physiology and their healing effectiveness⁸. For example, the different practitioner divisions may emit or utilize different frequencies, wave forms, and conscious placement of thought in the brain or body, as well as interact with specific energetic structures in the client's body. Standardization of energy practitioners through certification and licensing will enable more rigorous scientific study of biofield healing and help integrate this novel complementary therapy into mainstream medicine.

Conclusions:

Descriptions and definitions of eleven divisions of energy practitioners and their scope of practice are important first steps in the development of biofield therapy as a profession. These community-defined groupings of energy practitioners may support and inform scientists in developing more accurate research methodology.

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