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A PHENOMENOLOGICAL STUDY OF REIKI PRACTITIONERS AND THEIR  
PERCEPTIONS OF REIKI AS IT RELATES TO THEIR PERSONAL HEALTH

By  
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Bachelor of Science, Montana State University, Bozeman, Montana 2005

Thesis  
Presented in partial fulfillment of the requirements  
for the degree of

Master of Science  
in Health and Human Performance, Health Promotion  
The University of Montana  
Missoula, MT

Spring 2008

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## Thesis Abstract

Hargrove, Tannis, M.S. May 2008

Health and Human Performance, Health Promotion

A Phenomenological Study of Reiki Practitioners and Their Perceptions of Reiki as it Relates to Their Personal Health.

Chairperson: Dr. Laura Dybdal

The purpose of this study was to understand the essence of becoming a Reiki practitioner and Reiki's relationship to an individual's personal health. The phenomenological research perspective utilized in this study allowed the data to speak for itself and represented the essence of Reiki and Reiki practitioners in Missoula, Montana. Ten Reiki practitioners were interviewed about their personal experience with Reiki. Interviewees were all volunteers, over the age of 18, who were trained in Reiki II or higher and had more than three years of experience practicing Reiki. Participants had practiced Reiki either on themselves or someone else regularly, which was defined as at least three times per week. Collection of the data was limited to participant disclosure of the phenomena to the researcher, and by memory recall of given events.

Analysis of the interview transcripts produced comprehensive data from which several themes emerged. The themes that emerged were as follows: 1) Reasons for becoming a Practitioner, 2) Balance as Health, 3) Personal Growth, 4) Facilitator & Conduit, 5) Trust & Intuition, 6) Self-care, 7) Addressing Doubts and Validation, 8) Attunements and, 9) Sensations during a Reiki Session. These themes provided a context for examining health and healing outside the biomedical model. Reiki is grounded in Chinese medicine and provides an Eastern perspective to view health and medicine.

Results of this study revealed that Reiki enhances the relationship between mind, body and spirit, and initiates a redefinition of health for practitioners. Results were consistent with previous research demonstrating a relationship between Reiki and decreased stress, anxiety, and increased coping skills. Consistent with the literature, results of this study illustrated that Reiki is an effective tool for self-care and primary prevention. Reiki is a health strategy that can be invoked by anyone, anywhere at any time. Reiki would be best modeled by Health Educators as a strategy for self-care and primary prevention in conjunction with Health Behavior theories such as the Health Belief Model. It is the hope of the researcher that through the application of Reiki, the shift in Western society from secondary and tertiary prevention to primary prevention and self-care will increase. Further research is suggested in the area of Reiki and self-care and healing practice.

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*Diseases of the soul are more dangerous  
and more numerous than those of the body.*

*~ Cicero*

# CHAPTER I

## INTRODUCTION

Between 1990 and 1997, the use of Complementary and Alternative Medicine (CAM) increased from 34% to 40% with a specific increase in touch or energy therapies (Engebretson, 2002).

According to a National Health Interview Survey published in 2002 and endorsed by the Center for Disease Control of Prevention (CDC), more than half of adults above the age of eighteen utilized some form of CAM within the last twelve months (CDC, 2002). This data suggests that over the last twenty-years, the use of CAM has been on the rise at a significant rate and popularity continues to grow. With more than half of adults in the United States utilizing some form of CAM and the increased use of energy therapies, the research behind these modalities should match the increased interest. As more individuals begin to utilize these alternatives, it will be important for a large breadth of information and research to be available.

Specifically by taking an in-depth look at Reiki, one can see a rise in popularity and application. For example, Reiki has been implemented in Columbia/HCA's Portsmouth Regional Hospital (PRH) as an adjunct to preoperative care. The assistant director of the surgical services at PRH has conducted over 1,500 hands on teaching sessions in the community and there is evidence to support that it is growing in other areas as well (Alandydy & Alandydy, 1999). Nield-Anderson & Ameling (2000) stated, "Reiki has grown in popularity over the past decade, but remains understudied" (p. 22).

Hospitals throughout the country have added Reiki therapy as a healing modality for patients. In 2002, the International Association of Reiki Professionals (IARP) began a long-term study to identify hospitals that were currently using Reiki and to gain information on how it is

applied. They also investigated other aspects of Reiki such as who was performing Reiki on patients, and in which settings it was used (IARP, 2002). Some of the hospitals that are currently using Reiki in their facilities include John Hopkins Hospital in Baltimore, The Mayo Clinic, UCLA Medical Center in Los Angeles, & the Cleveland Clinic (IARP, 2002). Members of the IARP believe that the use of Reiki will continue to increase as more medical centers and patients begin to see the benefit of this treatment. They state,

We envision the growth of Reiki in hospitals to continue to expand in the next few years as more hospitals see the benefits of the modality for their patients, and as more patients request Reiki to complement and enhance their medical treatments as well as to contribute to and enhance their overall hospital stay experience (IARP, 2002, p.1).

With CAM growing in popularity, and specifically Reiki increasing in use, there is a growing need for current research. The endorsement of energy work by the American Holistic Nurses Association has provided a conceptual framework for Reiki as a healing modality (Vitale, 2007). Research is needed in all areas to further investigate topics surrounding Reiki. The existing research involving Reiki has been conducted primarily within the last ten years, and does not establish sufficient baseline data. The research has provided some insight into the factors surrounding Reiki but these studies have not been duplicated. Many studies had a difficult time teasing out variables and several presented findings that had little more than recommendations for further research. The need for research and foundational data within this field is great. The growing popularity and implementation of Reiki needs to be met with supportive research.

### **Purpose of the Study**

The purpose of the study was to provide a foundational examination of Reiki practitioners. A phenomenological approach was used to collect rich data that allowed the researcher to document the lived experiences of individual Reiki practitioners.

The first aim of the study was to understand the essence of what motivates individuals to become Reiki practitioners. The second aim of this phenomenological approach was to gain a deeper understanding of how Reiki is tied to the health of the practitioner. Phenomenology “overturns many presuppositions ordinarily taken for granted and seeks to establish a new perspective from which to view things” (Ihde, 1986, p. 17). Bracketing also known as epoche will allows the researcher to “understand [the philosophical perspective] through the voices of the informants” (Creswell, 1998, p. 54). Bracketing allows the researcher to recognize biases and set them aside to let the emersion of the lived experience take a voice of its own (Ihde, 1986).

### **Need for the Research**

The need for research regarding all aspects of Reiki is vast. Understanding why individuals choose to become practitioners and how the life of a Reiki practitioner relates to his or her health is particularly understudied (Vitale, 2007; Brathovde, 2006; Vitale & O’Connor, 2006). The need for foundational data is great. No studies to date have examined the Reiki practitioner as an individual, and it seems superfluous to study Reiki as effective or ineffective without first understanding the method of delivery for Reiki as a whole. By gaining an in-depth understanding of Reiki practitioner’s experiences and their relationships with Reiki, the researcher gained an understanding of practitioner’s motivations, benefits, costs, and inspirations for performing Reiki (Brathovde, 2006; Whelan & Wishnia, 2003). Gaining access to the experience of a Reiki

practitioner provided insight into an entirely new perspective on CAM and energy healing as a whole (Nield-Anderson & Ameling, 2000).

### **Statement of the Problem**

The lack of research conducted in the area of Reiki results in minimal insight. Nearly every Reiki study conducted cited the need for more research before further conclusions could be drawn (Baldwin & Schwartz, 2006; Olson & Hanson, 1997; Witte & Dundes, 1988; Vitale, 2006). Reiki is being widely used and is significantly under-studied. A strong qualitative phenomenological approach provided a look at the experience of Reiki practitioners that has never been previously documented.

Examining Reiki training and the development of a Reiki practitioner's life provided in-depth data on one of the most important aspects of Reiki, the practitioner. Reiki cannot be channeled without a trained practitioner (Potter 2003; Olson & Hanson 1997). Understanding practitioners and their motivations for seeking Reiki training provided insight into the experience of Reiki and insight into Complementary and Alternative Medicine as it has never been studied. This study sought to understand Reiki from its very source; practitioners, and their lived experiences.

### **Research Questions**

1. What experiences or inspirations do individuals share in their decisions to become Reiki practitioners?
2. What commonalities exist in the lived experience of being a Reiki practitioner?

How are these commonalities related to their health?

## **Delimitations**

Delimitations of the study are as follows:

- 1) Residents of the Missoula area over 18 years of age.
- 2) Participants who were Reiki II practitioner or higher.
- 3) Participants who had three years of experience as Reiki practitioner or more.
- 4) Participants in the study were volunteers.
- 5) Data was collected via in-depth face-to-face interviews with the researcher

## **Limitations**

The study is limited by the following factors:

- 1) The study was limited to voluntary participation of individuals whom the researcher was able to contact through gatekeepers, Reiki groups, or word of mouth.
- 2) Data was limited to the participant's memories or recollections.
- 3) Data collection was limited by how much the individuals are able to share within the scope of the interview time.
- 4) The quality of the data was dependent upon accuracy, honesty, and quality of the data was dependent upon the respondent.
- 5) Data collection was limited by individuals' willingness to share their experience with a young female interviewer.

## **Definition of Terms**

**Attunement:** Sessions with Reiki Masters that teach the basic method of energy healing – they open the recipient’s energy channels to facilitate the flow of energy (Potter, 2003; Dupler & Frey, 2005)

**Axial Coding:** Axial coding is used for the second phase of data analysis. The researcher sifts through the data focusing on the initial coded themes and attempts to organize ideas or themes into groups. Themes may be divided into subgroups or combined into more general categories to fit the interpretation of the researcher (Neuman, 2004).

**Bracketing:** Bracketing or epoche allows the researcher to “set aside all prejudgments (p.52)” and setting aside all experiences relating to the phenomenon at hand (Creswell, 1998). The researcher seeks to identify predetermined ideas or theories held and set them aside in order to see the experience in its essence (Creswell, 1998 & Moustakas, 1994). See epoche (p.8)

**Clustering:** A portion of content analysis specific to a phenomenon, where the researcher groups statements according their expression of the psychological and phenomenological concepts (Creswell, 1998).

**Complementary and Alternative Medicine:** CAM is a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine. Conventional medicine is medicine as practiced by holders of M.D. (medical doctor) or D.O. (doctor of osteopathy) degrees and by their allied health

professionals, such as physical therapists, psychologists, and registered nurses (National Center for Complimentary and Alternative Medicine (NCCAM), 2007).

**Epoche:** “A Greek word meaning to refrain from judgment, to abstain from or stay away from the everyday, ordinary way of perceiving things” (Moustakas, 1994, p.33). Epoche requires looking at thing differently from a new fresh perspective, distinguishing, and describing beyond presuppositions (Moustakas, 1994). See bracketing (p.8)

**Gatekeeper:** “An individual who is a member of or has insider status with a cultural group” (Creswell, 1998, p.117).

**Horizontalization:** Horizontalization is large part of content analysis. It involves listing out all relevant statements made by participants and assigning them equal worth. This strategy “works to develop a list of non-repetitive, nonoverlapping statements” (Creswell, 1998, p.147).

**Missoula Area:** The geographical area within Missoula County, Montana.

**Open Coding:** “The researcher locates themes and assigns initial codes or labels in a first attempt to condense the mass of data into categories” (Neuman, 2004, p. 321).

**Reiki:** An energy based touch therapy gained through the passing of an *attunement* where the goal is to facilitate individual healing & balance the human energy field.

**Reiki Practitioner:** Individuals who have completed Reiki II training or higher (Reiki Master) who are actively engaging in Reiki treatments on a regular basis.

**Snowball Sampling:** “Snowball sampling (also called network, chain referral, or reputational sampling) is a method for identifying and sampling the cases in a network. Snowball



sampling is a multistage technique. It begins with one or few people or cases and spreads out on the basis of links to the initial cases” (Neuman, 2004, p. 140).

**Structural Description:** A report of the content analysis answering how participants experienced the particular phenomenon being examined (Creswell, 1998).

**Textural Description:** A report of the content analysis answering what was experienced by the participants concerning the phenomenon being examined (Creswell, 1998).

## **CHAPTER II**

### **LITERATURE REVIEW**

The purpose of this study was to understand the lived experience of a Reiki practitioner as it relates to their health, as well as to understand the experience of becoming a Reiki practitioner. The field of Reiki research has become more prominent over the last ten years, but remains insufficient. The information presented intends to provide an extensive overview of current research in the area of Reiki and Reiki practitioners. While the literature and research is current, there is a call for further research in nearly every topic area involving Reiki. The current literature was reviewed according to central topics, which include Reiki Explained, History of Reiki, and the Effects of Reiki. Chapter three concludes with a summary of the reviewed literature.

#### **Reiki Explained**

Reiki is the Japanese word for “universal life force”; “Rei” meaning “higher knowledge” or “spiritual consciousness” and “Ki” meaning “universal life energy” (Lipinski, 2006, p.6). Reiki is an ancient energy-based healing therapy that provides a means for energy (also known as chi or prana in other CAM modalities) to rebalance the human energy field creating optimal conditions for the body to heal itself (Vitale, 2007; Vitale, 2006; Dupler & Frey, 2005; & Decker, 2003). “The underlying philosophy of Reiki is that the body retains the wisdom to improve significantly its own physical, mental, emotional, and spiritual condition” (Alandydy & Alandydy, 1999, p. 89). A basic premise of Reiki is that it brings healing to the individual performing it as well as to others (Nield-Anderson & Ameling, 2000). Reiki is channeled from a

practitioner to another individual or to oneself. A hands-on protocol with twelve to fifteen specific hand positions may be used in a typical session; however, a Reiki session may also involve placing the hands on a specific body part for the entire treatment. The belief is that Reiki will go where needed (Decker, 2003; Alandydy & Alandydy, 1999; Nield-Anderson & Ameling, 2000; Rivera, 1999; & Dupler & Frey).

Reiki is not a diagnostic tool; the practitioner is merely a facilitator of the healing energy and is not a provider (Nield-Anderson & Ameling, 2000; Chu, 2004; Rivera, 1999). “The Reiki energy facilitated through the practitioner goes to the area in the recipient’s body where it is needed for self-healing” (Brathovde, 2006, p. 95). The practitioner recognizes that the wisdom of the life force is utilized by the body where it is needed. Since the practice is based on trust in the knowledge of the life force, each practitioner and recipient experiences Reiki differently (Nield-Anderson & Ameling, 2000). Treatment sessions may take place while the recipient is lying on a massage table or seated in a chair. Individuals remain fully clothed for Reiki session, it is noninvasive, and does not require any specific tools or technology. Sessions typically last 45 minutes to an hour, but can be delivered in smaller increments of time and still be effective. Effects of Reiki can last anywhere from three to five days, depending up on the individual (Brathovde, 2006). While a therapeutic table or chair may be preferable, Reiki can be practiced anywhere at any time (Nield-Anderson & Ameling, 2000; Rivera, 1999; LaTorre, 2005; & Brathovde, 2006). “Reiki is a simple gentle healing method that only requires a trained practitioner to lay on his or her hands” (Nield-Anderson & Ameling, 2000, p. 25).

Reiki Masters teach Reiki to students. Students begin at Level I and work their way through Level II. Individuals may then choose to become a Reiki Master (Level III). Students become Reiki practitioners through attunements. Attunements open a recipients energy channels

to facilitate the flow of Reiki. This allows the student to facilitate healing in themselves as well as others. At each practitioner level, an attunement is provided to students in order to further their healing ability and widen the scope of healing tools (Vitale, 2006; Nield-Anderson & Ameling, 2000; Potter, 2007). “Each level raises practitioners’ vibrations, thus allowing for the flow of higher healing frequencies” (Potter, 2003, p.1). The placing of hands taught in Level I serves as a guideline for treatment, but is not a standardized protocol. In addition to attunements and hand positions, Reiki symbols are taught at Level II and Level III (Master Level). Three symbols are passed on to the practitioner at Level II and two more symbols are passed to the practitioner at Level III (Master Level) (Potter, 2007; King, 2007). Symbols are an extremely important aspect of the training and Reiki healing. The purpose of the symbols is to initiate and facilitate energy from the universal life force (King, 2007). Level I Reiki practitioner training is typically completed in a weekend. Level II training can also be completed in a weekend or at minimum one day, and the Master level (Level III) training is set to fit the needs of the individual. Reiki Master training (Level III) also provides the student with tools for teaching Reiki, and lasts for a minimum of one day, but may be extended depending on the needs of the student (Potter, 2007 & Nield-Anderson & Ameling, 2000).

### *Anecdotal Benefits*

It is claimed Reiki provides a relaxation response that lowers blood pressure, heart rate, and pulse as well as reduces stress, provides immune system support and relieves pain related to an array of health conditions. There are also anecdotal claims that Reiki lowers dosages of pain medication used by patients (Dupler & Frey, 2005; Lipinski, 2006; Alandydy & Alandydy; 1999). In addition, Reiki has been used to reduce the symptoms of anxiety and is said to provide

a calming and positive outlook on life for both recipients and practitioners (Potter, 2003). As Reiki is practiced, the individual becomes more attuned to the positive energy it provides. As an individual continues to practice or receive Reiki, the positive energy gradually builds up providing the individual increased coping skills and ability to manage stress (Potter, 2007). Recovery room nurses have reported using Reiki over an incision sight and have perceived that patients who received Reiki have a shorter recovery time and less surgical trauma (Lipinski, 2006).

With the large number of benefits reported, individuals often become skeptical of possible side effects of Reiki therapy. Dupler and Frey (2005) point out that there is no side effect associated with Reiki treatment and it is a very low-impact and gentle therapy. Recipients of Reiki therapy have reported sensations of heat or cold, as well as sadness or anxiety during treatment, but no side effects are associated with Reiki treatment (Dupler & Frey, 2005)..

### **Reiki History**

“Reiki is an ancient Japanese healing modality developed by Dr. Mikao Usui in the early 1900s” (Brathovde, 2006, p.95). Reiki history is quite consistent regardless of the source. Reiki was an ancient healing technique used by Buddhist monks. Usui was a scholar of religion and a Tao Buddhist from Japan. Reiki draws on martial arts such as Tai Chi and energy cultivation techniques such as Japanese palm healing also known as teate (Potter, 2007). Reiki also has roots in Tandai Buddhism (a mythical form of Buddhism) and Shintoism the indigenous religion of Japan (Potter, 2007; & Nield-Anderson & Ameling, 2000). Reiki was said to be lost until Usui recultivated the symbols and the ability to activate the energy on a 21-day fast and meditation on Mount Kuriyama (Whelan & Wishnia, 2003). Following his fast, Usui began to share his

knowledge of healing with others. Dr. Mikao Usui officially formed Usui Reiki therapy in 1922. He laid out the five principles of Reiki (Whelan & Wishnia, 2003, Nield-Anderson & Ameling, 2000 & Chu, 2004):

- 1) Just for today do not worry
- 2) Just for today do not anger
- 3) Honor your parents, teachers, and elders
- 4) Earn your living honestly
- 5) Show gratitude to everything

Dr. Usui continued to teach Reiki to until his death in 1926.

Before his death in 1926, Usui imparted his Reiki knowledge and wisdom to 16 Reiki Masters; one of whom was Hawayo Takata. Madame Takata was the only women taught by Usui other than Usui's wife. She became a Reiki Master in 1938 in Hawaii, and continued to teach Reiki until her death in 1980. Madame Takata was credited with bringing Reiki to the western world. Takata taught 22 Reiki Masters who have spread Reiki throughout North and South America (King, 2007; Potter, 2003; Chu, 2004).

Reiki has continued to spread far beyond the teachings of Madame Takata. The Japanese versions and the western versions of Reiki differ to some degree, but both are based upon the Usui Reiki system (King, 2007). "The Usui system of Reiki is now practiced today worldwide and there are many versions of Reiki practiced today" (Whelan & Wishnia, 2003, p. 210). The different versions of Reiki vary in minor ways including variations in hand positions, the inclusion of crystals, music, or the inclusion of other healing modalities (Nield-Anderson & Ameling, 2000). Today groups such as the Reiki Alliance and the American Reiki Association work to educate practitioners and serve as a resources regarding Reiki. As of 2000, there were

seven major national and international Reiki organizations (Nield-Anderson and Ameling, 2000). It is believed that there are over 1,000 Reiki masters practicing Reiki who can trace their Reiki lineage back to Dr. Usui (Duple & Frey, 2005).

### **Effects of Reiki**

The current literature available regarding Reiki as a whole is small and leaves many questions unanswered. Nield-Anderson & Ameling (2000) believe the small body of research is directly related to the lack of a standardized protocol; the tendency for Reiki to be delivered by private Reiki practitioners and the tendency for users of Reiki to be Caucasian, affluent and highly educated individuals. Anecdotal reports reveal that Reiki has been widely used during childbirth, surgery, treatment for patients undergoing chemotherapy, and various other conditions (Mansour, Beuche, Laing, Leis, & Nurse, 1999). Vitale (2006, 2007) points out that Reiki was not embraced in the medical community until recently (it has been recognized within the last 10 years).

A lack of published material and empirically based data is also highlighted. Vitale (2007) states, “the field of energy does not readily lend itself to traditional scientific analysis or strictly linear research models” (p.168). This is a common theme throughout the reviewed research. Many point out the difficulty in quantitatively measuring a phenomenon such as Reiki, and few studies have been conducted to highlight qualitative aspects of the Reiki experience (Vitale, 2006; Vitale, 2007, & Nield-Anderson & Ameling, 2000). In addition, a great deal of the research tests the effects of Reiki, but combines it with other CAM modalities (DiNucci, 2005; Chu, 2004; Witte & Dundes, 1988). By combining modalities, the effects of Reiki are difficult to tease out and almost impossible to separate from the other interventions.

### *Animals*

Baldwin & Schwartz (2006) examined whether or not Reiki could significantly reduce microvascular leakage in rats caused by exposure to excessive noise. This study was in response to several anecdotal studies reporting accelerated recovery by patients receiving Reiki. Baldwin and Schwartz (2006) pointed out that Reiki use in hospitals is increasing and several anecdotal studies reported accelerated recovery. Patients exposed to excessive ambient noises can suffer from several nonauditory disorders. In rats, stress from excessive noise damages the blood vessels contained in the membranous folds surrounding the organs (mesenteric microvasculature) leading to the breakage of plasma in the surrounding tissue. Testing the effects of Reiki on rats provided the researchers with more experimental control. Four groups of four rats consisted of the sample for this study. One group of rats was exposed to daily noises and Reiki, two groups were exposed to noise, but received “sham” Reiki and the fourth group was not exposed to noise and received no treatment. Baldwin & Schwartz (2006) found that the application of Reiki to rats exposed to noise significantly reduced microvascular (openings of tiny blood vessels due to caused by trauma or overexposure) leakage. They also asserted that this was the most rigorous test of the efficacy of Reiki conducted to date. The “sham” Reiki control group and animal model increased the reliability of the study and eliminated variables such as attitude, diet, fatigue, and lifestyle that are present in human experimental groups. Conclusions drawn from this study indicated the application of Reiki significantly lowered noise-induced microvascular leakage in rats. Whether or not these effects were due purely to Reiki or possibly the calming effects of the Reiki practitioner was impossible to decipher. Baldwin & Schwartz (2006) concluded Reiki could be useful for minimizing environmental stress on research animals or possibly hospital patients.



### *Physiological Response*

Engebretson & Wardell (2001) sought to test the framework of relaxation or stress reduction as a mechanism of touch therapy. Conducted in 1996, their study examined the physiological and biochemical effects of a 30-minute Reiki session (Engebretson & Wardell, 2001). A single group repeated measure design involving 23 health subjects was used. Biological markers related to stress reduction and relaxation were measured including, state anxiety, salivary IgA, cortisol, blood pressure, galvanic skin response (GSR), muscle tension, and skin temperature. Measures of each were collected before and after the 30-minute Reiki session. Results of the study showed a significant reduction in anxiety ( $t=2.45$ ,  $P=0.02$ ), salivary IGA levels rose significantly ( $t=2.33$ ,  $P=0.03$ ) and salivary cortisol was not significant. There was a significant drop in systolic blood pressure, and skin temperature increased and electromyography (EMG) decreased during treatment. However, pre and post treatment showed no difference, implying differences only occurred during treatment. Engebretson and Wardell (2001) found both a biochemical and physiological response occurred as a result of Reiki that contributed to relaxation in subjects. They also concluded that further research was needed to explore the effects of Reiki or other forms of therapeutic touch.

Following their first study Engebretson & Wardell (2002) examined the experience of a Reiki session using descriptive quantitative and qualitative data. Interviews were conducted to inquire about participants' experience of Reiki. Quantitative data collected in the study included Spielberger's State-Trait Anxiety Inventory, biofeedback measures, intermittent blood pressure monitoring, and salivary samples for IgA and cortisol. These measures of quantitative data were selected to explore and examine an individual's physiological relaxation response to Reiki. Twenty-three participants (17 women and 5 men) ages 29-55 that were seemingly healthy and

had no previous experience with Reiki were selected for the study. Participants filled out questionnaires and salivary specimens were taken before and after a thirty-minute Reiki session with a Reiki Master. The Reiki Master used in the study had over 20 years of Reiki experience. Following the Reiki session another questionnaire was completed, salivary specimens were collected, and qualitative interviews were conducted. The results of Engebretson and Wardell's (2002) research showed a significant reduction in anxiety ( $t=2.34$ ,  $P=0.02$ ). Systolic blood pressure dropped significantly ( $F=6.60$ ,  $P=0.003$ ) and biofeedback measures revealed an increase in skin temperature and decrease in electromyography (EMG) readings during the treatment. Measures of skin temperature and EMG readings were not significant before or after the Reiki treatment. Salivary IgA levels rose significantly ( $t=2.33$ ,  $P=0.03$ ), and salivary cortisol levels showed a downward trend but were not statistically significant. It was noted in interviews that speech patterns slowed and most individuals had a difficult time describing their experience. The experiences were described as "paradoxical" as many participants described feeling heaviness and weightlessness at the same time. Participants described changes in their state of awareness, orientation to time altered, or their awareness of the environment was intensified. Some individuals also reported experiencing a loss of boundaries between the Reiki Master and themselves. Most participants reported feeling relaxed, having a feeling of clarity, or feeling safe. Engebretson & Wardell (2002) stated, "Touch therapies appear to engage the recipient in an integrated experience that links body, mind, and spirit in a unique manner that allows the recipient to experience paradox" (p. 52). Implications of the study indicated that the experience of a Reiki session was very dynamic. Because of variation in reported experience, Reiki was particularly difficult to study (Engebretson & Wardell, 2002). Engebretson & Wardell (2002) called for further research to explore all aspect of Reiki and energy therapies.

### *Health Conditions*

The largest amount of research exists in efficacy studies examining the effectiveness of Reiki for a specific ailment or health condition. Nearly all of the data available was based upon small pilot studies, which indicates a clear need for further research.

Olson (1997) conducted a pilot study on the use of Reiki to manage pain. The purpose of the study was to determine whether Reiki was a beneficial strategy for pain management among individuals who experience cancer pain. The pilot study involved 20 volunteers (18 women, 2 men) ages 23-62 not receiving chemotherapy or radiation treatment who were experiencing moderate pain related to cancer. Subjects had varying levels of pain and varying sites where the pain was located. Eighteen of the 20 participants had invoked their physicians help with pain and were currently using at least one pain management strategy other than Reiki. Pain was measured using a visual analogue scale (VAS) as well as a Likert scale pre and post Reiki treatment. Participants were treated with 1 Reiki session by a Level II Reiki practitioner. Both measurement scales showed a highly significant ( $p < 0.0001$ ) reduction in pain following the Reiki treatment. Olson (1997) concluded Reiki may provide cancer patients with an alternative for good pain control, but further research must be conducted on a much larger scale to provide more detailed empirical data.

Vitale & O'Connor (2006) conducted a pilot study examining the use of Reiki and the effect of Reiki on pain and anxiety in women who had hysterectomies. This study sought to compare reports of pain and levels of anxiety in two groups of women following an abdominal hysterectomy. A quasi-experimental research design was utilized. The experimental group consisting of 10 participants received traditional nursing care plus three 30-minute Reiki sessions, and the control, consisting of 12 participants, received only traditional nursing care.

Participant ages ranged from 40 to 73 years and diagnosis ranged from 2 months to 6 years in duration. Reiki Masters performed Reiki before surgery for 30 minutes in the patient's assigned room, and then 24 and 48 hours post surgery. Data collection instruments included the State-Trait Anxiety Inventory (STAI) designed to evaluate apprehension, tension, nervousness, worry and increased response to danger (Vitale & O'Connor, 2006). The STAI was used to evaluate stress after surgery and prior to discharge. The numeric pain rating scale was also utilized as an evaluation tool. The study results indicated that the experimental group reported less pain 24 hours following the surgery. The experimental group average pain was a 3.8 compared to the control group at 5.4 (based on a ten point scale). The t-value was 1.79 resulting in a p-value of 0.04. There was no statistical difference in pain between the two groups 48 or 72 hours post-surgery. The experimental group also reported lower levels of anxiety than the control group upon discharge, 72 hours post surgery. The t-value was 3.17 resulting in a p-value of 0.005 for state of anxiety (Vitale & O'Connor, 2006).

Shiflett, Nayak, Bid, Miles, & Agostinelli (2002) sought to evaluate the effectiveness of Reiki as an adjunctive treatment for subacute stroke. A double blind, placebo-controlled clinical trial with a historic control condition was conducted in the stroke unit of a major rehabilitation hospital. Three treatment arms including treatment by a Reiki Master, treatment with a Reiki practitioner (not a master), and treatment with a sham Reiki therapist were administered. A fourth group received no-treatment and served as the historic control arm of the research. A sample of 50 participants composed the sample. Thirty-eight inpatients at Kessler Institute for Rehabilitation admitted because of ischemic stroke were used for the study arms of the research. For various reasons including dropout, discharge, and withdrawal, only 30 in-patients completed the study. Twenty control subjects were identified through hospital records.

Treatment groups received the same protocol and were randomly assigned to groups, all involved placing of hands on 12 locations and sessions were conducted for 30 minutes. Each patient received up to 10 treatments over a two and a half week period. The minimum number of treatments for this research was six. Outcome measures included the functional independence measure (FIM) routinely administered to rehabilitation patients at hospital admission and upon discharge and data that measured physical and cognitive function. A Center for Epidemiologic Studies-Depression (CES-D) was also utilized. The CES-D is a two-item scale asking about depressive behaviors and feelings.

Results revealed no effects of Reiki were found on the CES-D or the FIM, and sham practitioners reported feeling heat in their hands more often than Reiki practitioners did. Post treatment analysis suggested that Reiki might have a limited effect upon mood and energy. Shiflett, et al. (2002) concluded that Reiki did not have any clinically useful effect on stroke recovery in subacute hospitalized patients.

Crawford, Leaver, & Mahoney (2006) explored the efficacy of using Reiki to improve memory and behavior deficiencies in patients with mild cognitive impairments or mild Alzheimer's disease. The study invoked a quasi-experimental design comparing pre and post-tests of the Annotated Mini-Mental State Examination (AMMSE) and Revised Memory and Behavior Problems Checklist (RMBPC) following four weekly treatments of Reiki to a control group and an experimental group. The sample included 24 participants who scored between 20 and 24 on the AMMSE, ages ranged from 60-80 with 67% female and 46% American Indian.

Two Reiki Masters exposed twelve participants to four weekly treatments of Reiki for 30 minutes. Twelve participants served as the control group and received no treatment. The two groups were compared pre and post-treatment based on their scores on the AMMSE and

RMBPC. “Results indicated statically significant increases in mental functioning (as demonstrated by improved scores of the AMMSE) and memory and behavior problems (as measured by the RMBPC) after Reiki treatment” (Crawford, Leaver, & Mahoney, 2006, p.1). The authors concluded that Reiki shows promise for improving certain behavior and memory problems in individuals with mild cognitive impairment or Alzheimer’s disease. They also point out that Reiki is relatively easy to administer, low cost, and caregivers could potentially provide treatment to individuals in need. Crawford, Leaver, & Mahoney (2006) concluded that Reiki has significant societal value and potential for reducing the need for medication and hospitalization.

Tsang, Carlson, & Olson (2007) compared the effects of Reiki to the effects of rest on cancer related fatigue. The research examined the effects of Reiki on fatigue, pain, anxiety, and overall quality of life of cancer patients. Sixteen patients (13 women) participated in the study, all with varying types of cancer, 67% with colorectal cancer. Eight participants were randomized to two groups. Group one, the “Reiki condition”, received Reiki for five consecutive daily session averaging 45 minutes in length followed by a 1 week rest period of no treatment, and then 2 additional Reiki treatments followed by a 2 week rest period. Group two, the “rest condition”, rested for approximately 1 hour for five consecutive days followed by a 1-week washout period with no scheduled resting, and an additional week of no treatment. All participants completed pre and post questionnaires assessing cancer-related fatigue known as the Functional Assessment of Cancer Therapy Fatigue subscale (FACT-F) and questionnaires related to overall quality of life know as the Functional Assessment of Cancer Therapy (FACT-G). They also completed a visual analog scale assessing daily tiredness, pain, and anxiety known as the Edmonton Symptom Assessment System (ESAS). Results showed a decrease of the FACT-F within the “Reiki condition” ( $P = 0.05$ ) and a significant improvement in quality of life, measured

by the FACT-G. Daily assessments of the “Reiki condition” revealed significant decreases in tiredness, pain, anxiety, which were not seen in the “resting condition” (Tsang, Carlson, & Olson, 2007).

### *Placebo-Controlled*

One of the largest criticisms within Reiki research is the absence of a placebo group or the presence of the placebo effect. The placebo effect is often credited with the change in an individual’s condition. Four studies tested the effects of Reiki versus a placebo. The first, discussed earlier as it applied to both placebo controlled and health conditions (p.21). Shiflett, Nayak, Bid, Miles, and Agostinelli (2002) evaluated the effectiveness of Reiki as a treatment for subacute stroke. They found that that Reiki had no measured effect according to their instruments and concluded Reiki had no clinically useful effect on stroke recovery in subacute hospitalized patients.

Mansour, Beuche, Laing, Leise, & Nurse (1999) sought to test standardization procedures for real and placebo Reiki. The purpose of the study was to test the standardization procedure devised by the research team prior to conducting a full-scale randomization trial. The study was a four round crossover experimental design with 20-blinded subjects. Participants were exposed to two of four interventions: Reiki plus Reiki, placebo plus placebo, Reiki plus placebo, and placebo plus Reiki. Participants were then asked to evaluate the intervention after 15-minute sessions, using a self-report questionnaire. The main objective of this study was to determine if placebo Reiki could be standardized and whether or not it was obvious to the participant that they were or were not receiving Reiki. The data collected revealed that experiences reported following true Reiki sessions were quite varied. It was found that it was possible to train placebo Reiki practitioners. One of the most surprising findings was that

participants indicated more intense sensations during the second treatment when both treatments were true Reiki applied by a Reiki practitioner. It has been suggested that Reiki has a cumulative effect from treatment to treatment, but more research was necessary before conclusions are drawn. This research established a baseline for a placebo arm in future research and demonstrated that it is possible to integrate a placebo practitioner into a research design without compromising the integrity of the treatment. Findings revealed that participants were not able to identify the placebo practitioners from the true Reiki practitioners and therefore a standardization procedure was established (Mansour, Beuche, Laing, Leise, & Nurse, 1999).

Mackay, Hansen & McFarlane (2004) sought to investigate Reiki and its effect on aspects of autonomic nervous system function. They conducted a preliminary study consisting of a blind trial of 45 participants randomly assigned to three separate groups. Treatment conditions included 30-minute sessions of one of the following: no treatment (rest only), Reiki treatments by experienced Reiki practitioners, and placebo treatments by a person with no knowledge of Reiki who was trained to mimic Reiki treatment. Measures of autonomic nervous system response included heart rate, cardiac vagal tone, blood pressure, cardiac sensitivity to baroreflex, and breathing activity. All measurements were recorded continuously beginning 15 minutes before the treatment, including the 30 minutes of treatment, and then after a 10-minute post-treatment rest period. Results showed a significant decrease in heart rate and diastolic blood pressure in the Reiki group compared to the placebo and control group. Mackay, Hansen and McFarlane (2004) concluded that Reiki has some effect on the autonomic nervous system. This was only a preliminary study with relatively few subjects, and changes were relatively small. Mackay, Hansen, and McFarlane (2004) suggested further research be conducted to study biological effects of Reiki treatment.



A placebo-controlled study conducted by Witte & Dundes (1988), is one of the oldest studies located regarding Reiki and other alternative healing modalities. Witte & Dundes (1988) attempted to measure the effects of Reiki on physical and mental relaxation. The research conducted at Mary College, Westminster, Maryland consisted of 100 undergraduate students. All of the data was collected during a 3-week non-traditional morning courses in January. During this time workloads were considered lighter and students had afternoons free to participate in the study. Participants were volunteers approached in dining halls by the researcher and asked to participate in a relaxation study. Treatments included Reiki treatment, placebo Reiki treatment, listening to a meditation tape, or listening to music from an audiocassette player (the music came from Enya's Watermark album). Students received \$5 for participating in the study and approximately 20 individuals received treatment at one of the four stations each day. Students were placed in each station in equal number. Twenty-five participants took part in each of the four interventions. Participants filled out a relaxation scale questionnaire designed to measure physical and mental relaxation before and after their designated intervention. Blood pressure and heart rate were also measured both pre and post intervention.

Overall, there was a significant drop in the number of students who rated himself or herself stressed physically or mentally following treatment and when examined closely, Reiki was the most effective treatment for lowering stress (Witte & Dundes, 1988). It was found that 64% of students who received Reiki felt more physically relaxed, compared to 24% of students in the placebo group, 36% in the meditation group, and 48% in the music group. There was almost no difference in the levels of mental relaxation between groups. Both systolic and diastolic blood pressure decreased and heart rate increased only in the Reiki group.

Witt & Dundes (1988) indicated that Reiki enhanced physical relaxation even when limited to only 20-minute sessions; however, the limitations are noted. All participants were students who were recruited to be part of a relaxation study. Students might have had expectations of relaxation that could have inflated results. In addition, the research was conducted during a time of low stress for students, which was not ideal. The research would have benefited if repeated when students had greater stress. In addition, 20 minutes may not have been long enough to induce relaxation with interventions such as meditation or music, and placebo practitioners may not have been confident in their ability to induce relaxation, which may have skewed results. Finally, the study included only healthy college age students, which did not allow for generalizability to other populations (Witte & Dundes, 1988).

### *Self-Care*

“Healing during a Reiki session is synchronic—both the practitioner and the recipient are mutually healed as the Life Force is channeled through the practitioner. Healing occurs on physical, emotional, mental and spiritual levels, evolving toward balance and harmony” (Nield-Anderson & Ameling, 2000, p.25). This quote by Nield-Anderson & Ameling (2000) demonstrates one of the most interesting and important aspects of Reiki. It not only produces healing for the recipient, but for both the recipient and the practitioner. This means that the practitioner can gain the benefits of self-care through performing Reiki on themselves or by performing Reiki on other individuals.

Whelan & Wishnia (2003) evaluated nurses who performed Reiki therapy and their perceptions of the benefits to themselves and clients. The purpose of the study was to provide an understanding of nurse/Reiki practitioner’s experiences. Whelan & Wishnia (2003) conducted a phenomenological study of the lived experience of being both a nurse and a Reiki practitioner.

Data was collected through in-depth interviews with eight female, Caucasian, Reiki Masters. They found seven themes through the research with four relating to self-care. The four related themes to self-care included: 1) benefits received by the practitioner (75% said they felt more calm and relaxed); 2) increased sensory perception by the nurse/Reiki practitioner (50% thought they could sense when the client had blocked energy pathways 3) increased satisfaction with being a nurse/Reiki Practitioner (time spent with the patient was increased); 4) advantage of being a nurse in conjunction with being a Reiki practitioner. The study found that half of the nurse/Reiki practitioners noted a reduction in pain during a Reiki session with a client. One of the most prevalent themes was that Reiki helped the healing process and increased the time the nurse spent with the client post Reiki. The increased time with the client may have helped to increase the meaningful relationship between nurse and patient. In summary, Whelan & Wishnia (2003) asserted that Reiki is as beneficial to the provider as it is to the recipient.

Brathovde (2006) conducted semi-structured interviews with nurses to determine whether their caring perceptions would change if they were taught Reiki I as a self-care practice. The conceptual framework for this study was based on Watson's Caring Theory, which is based on the premise that nursing is a subjective healing process, and each person has an effect on another. Methodological triangulations of descriptive design and participant semi-structured interviews as a qualitative approach were utilized. Nurses and healthcare providers within an integrated healthcare system attended a one and half hour educational presentation on Reiki as it relates to self-care. Teaching methods utilized included role modeling and experiential learning. Twelve mental health professional including register nurses, student nurses and health care providers (such as social workers) participated in the study. Ten participants completed the study.

Participants were evaluated pre-Reiki training and post-Reiki training using a Caring Efficacy Scale (CES). “A CES is an instrument of self-assurance in the ability of a caregiver to express and demonstrate a caring relationship, and have confidence in providing care without depleting the self” (Brathovde, 2006, p. 97). Three months post-Reiki training, participants completed a CES and a 10-question survey. The instruments were meant to identify perceptions of changes in care within the nurses themselves or changes in perceptions in caring for clients. Thirty-minute semi-structured telephone interviews followed the return of the questionnaire.

The pre and post CES demonstrated 70% of the participants indicated a positive change in their perceptions of caring post-Reiki. The content analysis of interviews revealed four themes: 1) Spirituality; 2) Increased self-care and caring behaviors; 3) Healing presence; 4) Increased personal awareness. Five of the participants reported that they practiced self-Reiki and most desired to do more self-care. One participant stated, “After giving Reiki, I feel fulfilled, satisfied, regarding gaining benefit by giving it to others. That feeling lasts, I feel good that I can do this” (Brathovde, 2006, p.100). Another stated, “I feel more empowered to help others” or “Reiki has been helpful for me –has made me aware of holistic healing and lifestyle. Reiki is part of the window that has been opening for me. It’s been a positive experience” (Brathovde, 2006, p.100). All participants expressed a desire to learn more and continue on to the next level of Reiki (Reiki II). They also felt comforted in knowing they could access Reiki at any time. All expressed ways in which they had incorporated Reiki in their life. Results indicated Reiki can be a beneficial self-care practice and at the same time, beneficial in helping nurses or other healthcare workers attend to the needs of others. Furthermore, there is a need to investigate how to integrate this healing modality into the nursing practice as well as repeating this study with a larger number of nurses (Brathovde, 2006).

Reiki can be helpful in situations outside of the hospital or strictly private setting. Reiki is making its way into a number of clinical settings including those of the psychotherapy and counseling. Latorre (2005) presented a case study of an individual who sought psychotherapy. Reiki was integrated into the therapy sessions, and then used at home. Formal Reiki training for the individual followed the therapy sessions. This case study provided an example of how powerful Reiki self-care can be. It also spoke to Reiki's effects on personal relationships. Latorre (2005) presented an example of a woman who was struggling in her marriage and had a verbally abusive husband. The use of Reiki allowed her to gain a clear view of herself and her place within her relationship. Both she and her husband attended Reiki trainings. They began to perform Reiki on each other, which provided them an avenue to grow energetically and actively share thoughts and feelings. While Reiki did not lead to complete resolutions of their problems, it helped them come to resolution with less heartache and frustration. Latorre (2005) stated, "using this approach [Reiki] expanded the scope of treatment and enhanced the healing opportunities both in and out of the therapeutic session" (p. 186).

### **Summary**

The literature demonstrates a clear need for a great deal of research in essentially every area of surrounding Reiki. An explanation of Reiki has been provided and the history and effects of Reiki have been examined.

Reiki is an ancient energy based health therapy that provides for the rebalancing of human energy fields allowing the body to heal itself (Vitale, 2007; Vitale, 2006; Dupler & Frey, 2005; & Decker, 2003). Reiki originated in Japan, and was founded by Dr. Mikao Usui. Usui officially formed Usui Reiki therapy in 1922 (Brathovde, 2006, Potter, 2007; King, 2007). Usui

spread his knowledge of Reiki to several Reiki Masters, one of whom was Madame Takata. Takata was credited with bringing Reiki to the Western world (Potter, 2007). Since Takata's death in 1980, Reiki has spread throughout the world. There are now more than 1,000 Reiki Masters practicing and teaching Reiki according to the Usui system (Whelan & Wishnia, 2003). There are also seven national and international Reiki organizations (Nield-Anderson & Ameling, 2000).

Research on the effectiveness of Reiki demonstrated effects on animal (specifically rats), and physiological response of individuals treated with Reiki (Baldwin & Schwartz, 2006; Engebretson & Wardell, 2001; & Engebretson & Wardell, 2002). Substantiated progress in treatment for specific health conditions such as pain management, subacute stroke, and cancer related fatigue were documented (Olson, 1997; Shiflett, Nayak, Bid, Miles, & Agostinelli, 2002; & Tsang, Carlson, & Olson, 2007). Placebo controlled studies have been examined and found that "sham" Reiki practitioners can serve as a control arm for Reiki studies effectively. When "sham" Reiki is used as a control arm of a study, true Reiki is still more effective in producing positive effects on the autonomic nervous system and inducing physical relaxation (Mansour, Beuche, Laing, Leise, & Nurse, 1999; Mackay, Hansen, & McFarlane, 2004; & Witte & Dundes, 1988).

The use of Reiki for self-care was also examined. Reiki has been found to be beneficial to both the individual and the client during a Reiki session (Nield-Anderson & Ameling, 2000). Whelan and Wishnia (2003) along with Brathovde (2006) both supported self-care as method for increasing healing benefits to the client and the Reiki practitioner. They also found Reiki self-care increased a healing presence within practitioners. Self-care data was the most helpful in

support of the proposed research study. This research study examined aspects of Reiki self-care and practitioner's experiences on an in-depth level.

The research reviewed was primarily quantitative. Two research studies reviewed were qualitative and both focused on Reiki's application to nursing. The literature demonstrates a clear lack of qualitative data, and a need for data that is collected qualitatively focusing on themes and experiences associated with Reiki. Qualitative data will provide a wealth of information in regards to the lived experience of Reiki practitioners.

The proposed research was necessary to provide baseline data regarding why individuals become Reiki practitioners and to identify emerging themes for how being a Reiki practitioner relates to personal health. Individuals who perform Reiki on themselves, as well as others have unique experiences and perspectives not yet documented by research or in previous literature. This study provided the opportunity to gain access to Reiki practitioners, as they have never been examined before. This study also provided rich data in the area of Reiki research that is long overdue.

## **CHAPTER III**

### **METHODOLOGY**

#### **Central Research Questions**

1. What experiences or inspirations do individuals share in their decisions to become Reiki practitioners?

2. What commonalities exist in the lived experience of being a Reiki practitioner?

How are these commonalities related to their health?

#### **Research Design**

A phenomenological research design was utilized and data was collected through in-depth interviews with participants. Interviews focused on the individual's experiences regarding Reiki. A phenomenology is grounded in the concept of a lived experience. "A phenomenological study describes the meaning of the lived experience for several individuals about a concept or the phenomenon (Creswell, 1998, p.51)." In this case, the concept or phenomenon of focus was the experience of becoming and being a Reiki practitioner as it related to the individual's personal health. Results were analyzed using clustering, open coding, horizontalization, axial coding, and textural and structural descriptions. The various forms of data analysis brought the focus of the study to the essence of becoming & being a Reiki practitioner as it relates to health.



## **Population and Sample**

### *Population*

The population for this research consisted of community members from the Missoula, Montana area who are currently Reiki practitioners of any level and have gone through at least one series of the attunement process in order to become a Reiki practitioner. All participants within the population were recruited through gatekeepers within the Missoula area or via snowball sampling (Neuman, 2004).

### *Convenience Sample*

The sample consisted of volunteers from the Missoula Reiki community. Individuals were recruited through convenience sampling and all participants met the following criteria:

- Participants were at least 18 years of age
- Participants lived within the Missoula area (Missoula county)
- Participants were Reiki II practitioners or higher
- Participants actively practiced Reiki on someone other than themselves on a regular basis (at least three times per week)
- Participants had at least three years of experience or more as a practicing Reiki practitioner.

## Sample Selection

### *Recruitment*

Two recruiting techniques were utilized for this study.

#### 1. Gatekeepers

The researcher gained access to the target population of Reiki Practitioners through two gatekeepers, Cali and Pam. Newspaper and other public resources were used to identify gatekeepers. An advertisement in the *Missoula Independent* directed the researcher first to Cali. Cali identified herself in an advertisement in the *Independent*. She is a Reiki Master who offers Reiki training in her home, and conducts a massage and Reiki practice out of her home. She was an excellent resource for the networking of Reiki practitioners.

The second gatekeeper, Pam, also identified through public resources was interviewed for an article in the *Missoulian*. Pam was contacted to set up an interview. She was the first practitioner to be interviewed by the researcher. Following her interview, Pam provided the researcher with an extensive list of names and contact information of various Reiki practitioners in the Missoula area. She encouraged the researcher to call as many individuals as possible as was a great help in the recruitment of practitioners.

#### 2. Snowballing

Through the snowball technique (Neuman, 2004), Reiki practitioners within the Reiki community were contacted. Pam and Cali provided access to several practitioners. As the researcher continued to meet practitioners to schedule interviews they provided more names and contact information for potential interviewees. Snowball sampling is a method for identifying

and sampling individuals in a network (Neuman, 2004). Often individuals within a network are formally or informally linked through crucial features held by the individuals (Neuman, 2004). Snowball sampling is a multistage technique that begins with one or a few specific people and spreads through the individual's links to several other individuals (Neuman, 2004). In this case, Reiki practitioners linked by their interest in Reiki, and an informal network of Reiki practitioners were identified via snowball sampling. Snowball sampling revealed that a Reiki community was present and thriving within the Missoula area. Practitioners were asked to identify and share information they had regarding other practitioners. By gaining access to the informal Reiki network via gatekeepers and snowballing, the researcher gained access to several Reiki practitioners in the Missoula area.

#### *Reiki Research Packet*

Reiki practitioners who volunteered to participate in an interview were asked to complete the *Reiki Research Packet* with the researcher before the interview began. The packets had originally been a device for recruitment, but quickly turned into a great resource for demographic information and provided an excellent forum for discussion of the purpose and goals of the research. The *Reiki Research Packets* also provided the researcher an opportunity to fully discuss the *Informed Consent Form* (Appendix D, p. 117) and *Counselor Resource List* (Appendix G, p.125). The researcher brought the contents of the research packets to each interview and requested that the individual fill out the *Reiki Practitioner Demographic Sheet* (Appendix A, p.111) and the *Informed Consent Form* (Appendix D, p.117) and return them to her immediately. Questions regarding either were encouraged and fully answered before proceeding. Upon completion of the initial forms, the researcher reviewed the *Brief Description of the Study*

(Appendix C, p.115) and the *Counselor Resource List* (Appendix G, p.125) with the practitioners. Practitioners kept the *Brief Description of the Study*, the *Counselor Resource List*, and a copy of the *Informed Consent Form* if they chose to. The research packets included:

- 1) *Informed Consent Form* (Appendix D, p.117)
- 2) *Reiki Practitioner Demographic* sheet (Appendix A, p.111)
- 3) *Counselor Resource List* (Appendix G, p.125)
- 4) *Brief Description of the Study* (Appendix C, p.115)

### *Protection of Human Subjects*

All participants and interviewees were provided *Informed Consent Forms* (Appendix D, p.117) and the consent forms were reviewed with individuals verbally by the researcher. The researcher addressed any questions or concerns that arose prior to the interview. Participation in this study complies with the Institutional Review Board at the University of Montana. The information included in the research is confidential. All interviewee's names have been kept confidential and are known solely by the researcher. Digital recordings of the interviews were coded immediately to protect confidentiality of practitioners. Following transcription of the interviews, digital recorded files were destroyed to protect the confidentiality of participants.

### **Data Collection**

A phenomenological study seeks to find the essence of a lived experience. In seeking the essence of any lived experience, a great deal of rich and very meaningful data emerges. In order to narrow down the essence of a phenomenon it was important to closely analyze and look deeply at the body of data gathered. The researcher invoked bracketing for the purpose of this research.

Bracketing involves putting aside all learned feeling and thoughts about the phenomenon at hand (Creswell, 1998). Bracketing allowed the researcher to focus on the participant and their recollections only. This insured the authenticity of the participant's recollections. The researcher did not share personal experiences, opinions, or her personal knowledge about Reiki with the interviewees when avoidable. The focus of the study and the interviews was to be solely on the participants' experience.

Open-ended starter questions allowed the researcher to probe each participant's memory of what led them to become a Reiki practitioner. Upon exhaustion of what led them to become a practitioner the interview shifted into questions regarding their personal health and the role Reiki played in the individual's personal health. By digitally recording all interviews, taking notes during interviews and completing the *Post-Interview Debriefing Form* (Appendix E, p.121) the researcher was able to collect a large body of data utilized for analysis.

### **Interviews**

Interviews were scheduled for approximately one to two hours. This seemed to give practitioners ample time to answer all questions and allowed for exhaustion of the topic. Practitioners were contacted via email or phone to ask if they would be interested in participating in the research and then sitting for an interview. Nearly every individual contacted was excited and very pleased to be able to take part in the study. Interviews were scheduled in accordance with the practitioner's schedule. Practitioners were informed that they would be volunteering to participate, that the study would be recorded, and that they should plan for at least one to two hours to complete the interview. Practitioners were more than willing to participate, and had no problem with the length, recording, or volunteering for the interview process.

“The role of the interviewer is difficult. They obtain cooperation and build rapport, yet remain neutral and objective” according to Neuman (2004, p.183). The interviews were structured to gain the greatest amount of information possible in the allotted time. Following the review of the *Reiki Research Packet*, the interview session began. The digital recorder was turned on and a series of questions was asked of the interviewees to gain information about their experience. The interview questions were meant to guide the individual through the interview process. The use of probing questions was invoked to insure each topic was exhausted before the next question was asked. According to Neuman (2004) “a probe is a neutral request to clarify an ambiguous answer, to complete an incomplete answer, or to obtain a relevant response” (p.185). Probes insured that the topic was fully explored and exhausted before the interviewer moved on to any further questions or topics.

Following the interview, interviewees were thanked for their time and generosity, and typically the researcher would leave the interview setting. Upon arriving home from completion of the interviews, the researcher would then upload the interview from the digital recorder and code it to protect the participant’s confidentiality. The researcher then filled out a *Post-Interview Debriefing Form* (Appendix E, p.121) based on the conducted interview and filed the information with other research documents.

### **Setting**

The researcher conducted interviews at various locations throughout Missoula. The researcher wanted to make the interview process as convenient for volunteers as possible. Most practitioners practice Reiki out of a professional office space or out of their home. The practitioners were very willing to host the researcher in their personal offices or in their homes.

One interview was conducted at the Missoula Public Library in a meeting room. The researcher scheduled the conference room in advance with the reference librarian on staff. One interview was also scheduled and conducted at a local coffee shop. The coffee shop provided a convenient location, but was not ideal for interviewing. Transcription of the interview conducted in the coffee shop was more difficult because of the increased background noise and music playing in the background. The Missoula Public Library, and practitioner homes and offices provided a convenient and quiet, peaceful location for the researcher and participants to engage in the interview and provided a safe and comfortable atmosphere for both parties.

### **Interviewer**

The interviewer was a female graduate student in the Health Promotion emphasis in the Health and Human Performance Department at the University of Montana. She was responsible for acknowledging biases, conducting interviews, analyzing data, and composing the findings. The interviewer was a Reiki I practitioner, and had training in both Cranial Sacral, and Health Kinesiology. She had a strong interest in Complementary and Alternative Medicine (CAM), and had utilized several forms of CAM including acupuncture, Reiki, Cranial Sacral, naturopathy, meditation, visualization, yoga, Bodytalk, herbalism, reflexology, and massage. In addition, to her strong interest in CAM the interviewer was an advocate for primary prevention as well as CAM. The interviewer did not accept biomedicine as the only paradigm for health and healing. It was acknowledged by the interviewer that her perceptions, beliefs, and biases about Reiki and health and healing contributed to the interpretation of the data presented in this study.

## **Pilot Study**

The researcher conducted a pilot study in order to increase the success of the research process. The first interview was considered the pilot study. The pilot study provided the researcher an opportunity to pilot the interview questions, and gain the experience of conducting an in-depth interview within the topic area of Reiki. The pilot study allowed the researcher an opportunity to work through any unforeseen problems or challenges within the interview setting before the actual data was collected.

The pilot study went very smoothly. Pam was the first practitioner to be interviewed and her interview was considered the pilot study. The interview went smoothly. The questions were easy to answer and provided enough detail so that a great deal of probing was not necessary. The pilot study put the researcher at ease in terms of conducting an in-depth interview and utilizing probing questions as needed. The pilot study data was included in analysis because the interview questions or interview format was not changed at all after the pilot study. All practitioners were asked the same interview questions.

## **Interview Questions**

Exploration of Becoming a Reiki Practitioner:

- Why did you to become a Reiki practitioner?
- Are there any specific life events that directed you to Reiki?
- Describe your experience of becoming a practitioner. What was it like for you? Did anything during the classes strike you as interesting or powerful?



- What was your experience of the attunement?
- How has your approach to Reiki changed over time?

#### Exploration of Reiki's Relationship to Personal Health:

- What is the meaning of health to you?
- How has becoming or being a Reiki practitioner affected your health?
- Are you currently managing any health issues or problems using Reiki?
- Can you describe any other modalities of healing you might be using in addition to Reiki?
- How has Reiki affected your life in ways other than your personal health?

### **Content Analysis**

#### *Transcription*

Following each interview, the researcher transcribed the dialogue of the interviews from the digital recorded file into a word processing document. Transcripts were typed word for word, following the interview. Upon entry into the word processing document, the transcribed interviews were reviewed for any errors, misspellings, or misrepresentations. The researcher then reviewed all transcripts for authenticity and accuracy. Each digital file was titled with the individual's coded name to insure confidentiality. Following transcription and authentication of the transcript by the researcher, the data was then be ready to manipulated and entered into the qualitative analysis computer program Nvivo 7. The researcher analyzed the content of the final transcripts for themes.

### *Horizontalization and Open Coding*

Horizontalization is the first step in the data analysis procedures of a phenomenon.

Horizontalization is the process of dividing the transcribed data into meaningful statements and then equalizing those statements regardless of the speaker or the order in which the statement was spoken (Creswell, 1998). This process allows the researcher to organize the raw data into conceptual categories from which themes or concepts begin to emerge (Neuman, 2004). These themes and concepts are further analyzed to fully understand the “lived experience” of the individual. In addition to horizontalization, open coding was used to understand and identify emerging themes. Open Coding takes place in the first assessment of the gathered data. It allowed the researcher to locate themes and assign initial codes in an attempt to condense the data into general categories (Neuman, 2004). According to Neuman (2004), open coding brings themes to the surface from deep inside the data.

This research invoked horizontalization and open coding as an initial resource for organizing and condensing the vast body of data collected. The qualitative analysis software program Nvivo 7, was utilized to aid in the horizontalization and open coding process. Technology provides an unbiased view of words and phrases, keeping interpretation and subjectivity entered by the researcher to a minimum. Bias in evaluation of the data was decreased using the computer software. Transcripts of the interviews were uploaded into the computer software and phrases were grouped into general theme categories.

### *Clustering and Axial Coding*

Following horizontalization and open coding, the researcher examined the statements about the lived experience of becoming/being a Reiki practitioner and health trends related to Reiki.

Clustering and axial coding were utilized for the second phase of grouping the data. Data was clustered according to theme. The researcher focused on the initial identification of themes and organization of themes toward concepts that could be clustered together (Neuman, 2004).

Clustering and axial coding involves creating subcategories of a particular theme or combining (clustering) themes with similarities. In Nvivo 7, this process involved combining nodes into tree nodes, essentially grouping smaller subgroups into larger group and descriptive categories and ultimately major themes. “Axial coding not only stimulates thinking about linkages between concepts or themes but also raises new questions -- It can suggest dropping some themes or examining others” (Neuman, 2004, p. 323). During this phase of analysis, the frequency of concepts mentioned also played a role in the prominence of a theme. Themes were clustered based on similarities or split apart according to differences in the expression of the theme-based concepts, Reiki concepts and principles. This process helped the researcher identify the phenomenological concepts that lead to the next step of data analysis.

### *Textured & Structural Experience*

As themes emerge, the researcher looked over the data again and coded it according to textural and structural descriptions. Textural descriptions refer to “what was experienced” and structural descriptions refer to “how it was experienced” (Creswell, 1998). Considering each group of themes as they apply to “what was experienced”, and “how it was experienced provided an in depth look at the lived experience of becoming/being a Reiki practitioner and its relationship to

health. The last phase of analysis allowed the true essence of the research to come forth. Coding the data into these two groups provided insight into the essence of the Reiki practitioner and their relationship to health (Creswell, 1998).

## CHAPTER IV

### RESULTS OF THE STUDY

The purpose of this phenomenological study was to understand Reiki from the perspective of the practitioner. Specifically this study sought to understand what leads the individuals to become Reiki practitioners, as well as how their experience as a Reiki practitioner has affected their personal health. The aim of this study is to provide a foundation for Reiki research from a qualitative perspective. The results of this study were derived from the phenomenological analysis described in detail in Chapter III. Clustered statements from ten transcripts were reviewed and organized to identify and exemplify nine prominent themes. All names and descriptors found in the interviews were replaced with pseudonyms to preserve the confidentiality of the participants and those around them.

#### Demographics

Demographic information was gathered from the *Reiki Practitioner Demographic Sheet* (Appendix A, p.111). All interviewees filled out the demographic sheet at the interview and then returned the form to the researcher. Demographics of participants were collected. Delimitations for this study were as follows:

- 1) Residents of the Missoula area over 18 years of age.
- 2) Participants who were Reiki II practitioner or higher.
- 3) Participants who had at least three years of experience as a Reiki practitioner or more.
- 4) Participants in the study were volunteers.
- 5) Data was collected via in-depth face-to-face interviews with the researcher.

Participants in this study included two male interviewees, and eight female interviewees. Two practitioners were Reiki II and the following eight were Reiki Masters. The group was predominantly Caucasian, with an average age of 57 years of age. Participants averaged eight

years of experience with four years being the least amount of experience, and nineteen years being the greatest number of years experience. Seven of the ten participants had a Bachelors degree or higher, one participant had a Masters degree, two members of the group had a J.D. and two members had a Ph.D.

All ten participants in the study used other forms of alternative healing in addition to Reiki. The different modalities varied greatly from practitioner to practitioner. The different modalities included, but were not limited to the following: Polarity, Cranial Sacral, Bodytalk, use of a Naturopathic Doctor, Yoga, Meditation, Homoeopathy, Herbalism, Acupuncture, Calmeeso, Massage Therapy, Psychic abilities, Medium work, Laser Reiki, Visualization, Imagery, Muscle Testing, Shamanism, Thai Massage, Reflexology, Chanting, Use of Symbols (other than Reiki symbols), Self-hypnosis, Hypnosis, Guided Meditation, Toning, Pipe Ceremonies, Aromatherapy, Infant Massage, Indian Head Massage, Pilates, Meridians, Chiropractic, Chinese Medicine, Exercise, Lifestyle, Nutrition, Acupressure, and Hands On Energy Healing (Barbara Brennan School of Healing). Practitioners were asked during the interviews to list the other modalities of healing they used in addition to Reiki and many listed modalities they use personally and are trained to perform, and others also listed modalities of healing they were not necessarily trained in but chose to participate in to enhance their personal health. The list of integrated and utilized modalities for this group of practitioners is great. It demonstrates the vast array of modalities that are available to members within the Missoula community, and also provides insight into the modalities potentially being integrated into a Reiki session by a given practitioner. There was no common theme that occurred between practitioners on how they used the various modalities.

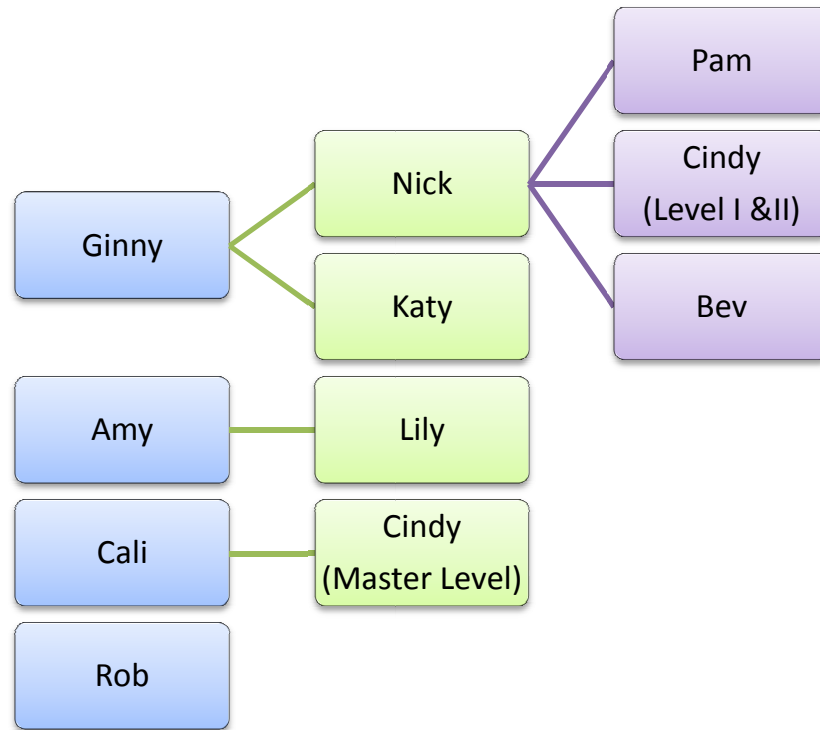
## **Recruitment**

All participants were recruited via snowballing and through gatekeepers. Participants were very willing to help and excited to be contacted about their experiences regarding Reiki. Their enthusiasm and excitement made recruiting and interviewing a much simpler process than anticipated. The researcher was able to recruit ten subjects and interview all of them within two weeks.

## **Practitioners Relationships**

Because practitioners were recruited via snowballing and through gatekeepers, many of the practitioners had relationships with one another. Several practitioners had a teacher student relationship, they practiced Reiki together from the same Reiki center, or they knew each other from various community activities taking place in Missoula. The diagrams represent the teacher-student relationships of the interviewed practitioners and also demonstrate the web of connectedness the practitioners represent. Both diagrams are included in the pages to follow.

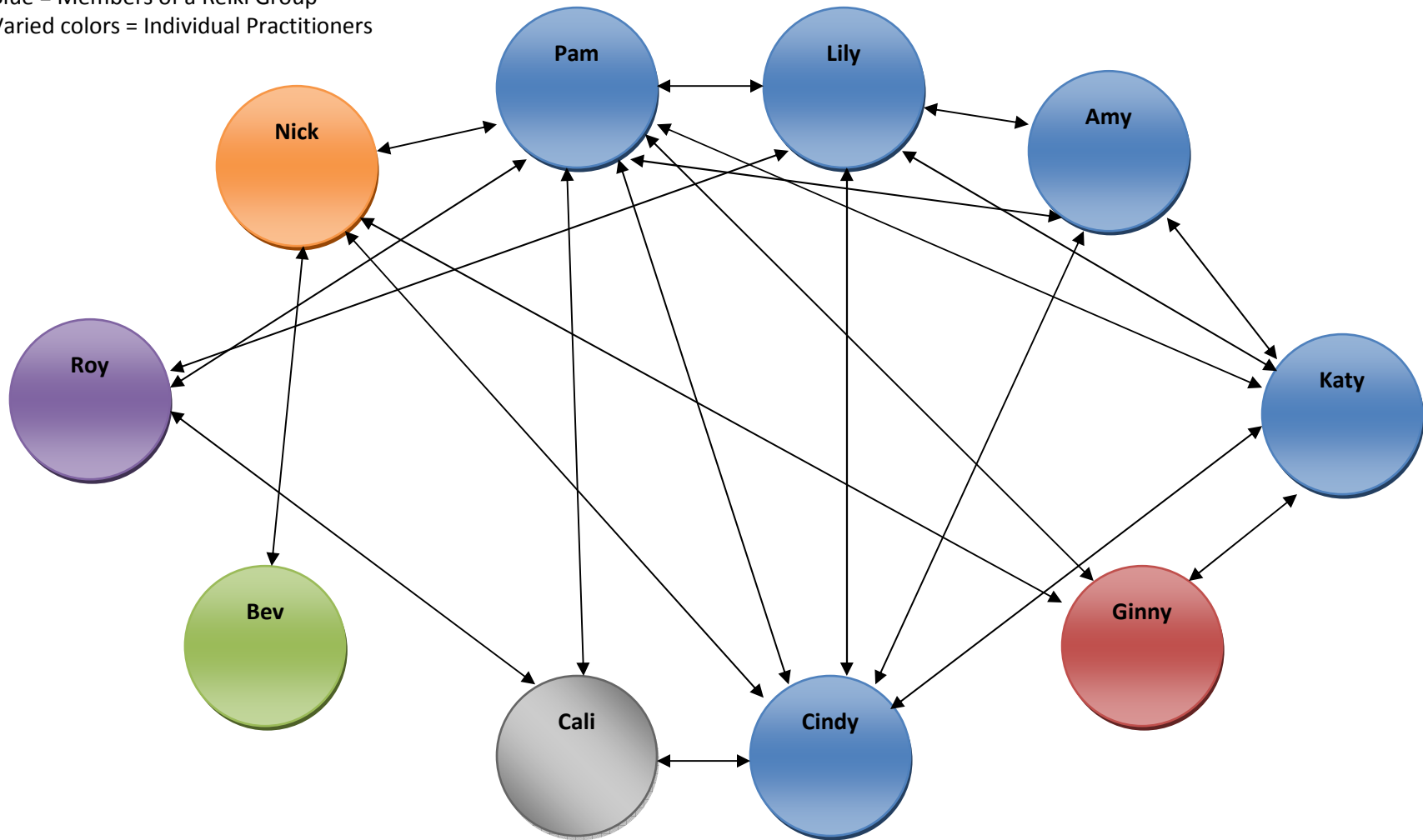
## Relationships of Reiki Practitioners





# Relationships of Reiki Practitioners

Blue = Members of a Reiki Group  
Varied colors = Individual Practitioners



## **Interviews**

Interviews varied in length from the shortest interview, which was thirty-three minutes, to the longest interview that was 104 minutes. The average length of the interviews was 73 minutes. During the interviews, practitioners were all asked the same interview questions from the *Interview Questions Form* (Appendix F, p.123). Probes used during the interviews varied depending on the pace of the interview and determined use of necessary probes by the researcher. Practitioners were able to answer the interview questions with ease and most needed few probes or interventions by the researchers. Practitioners were forthcoming and very willing to share their experiences, ideas, and thoughts surrounding Reiki, which contributed to the rich data collected. Practitioners had varied experiences, which resulted in exhaustion of the topic after varied amounts of time.

It is important to note that shorter interviews were not necessarily less data rich. Shorter interviews contained a great deal of rich usable data and the themes emerged through the interviews with all ten participants. Longer interviews were also data rich, but may have lent to more time spend off the topic of Reiki or possibly longer more drawn out anecdotal stories. Overall, it was the view of the researcher that the data collected from the face-to-face in depth interviews was rich and exhaustion of the topic was reached.

## **Themes**

The comprised data revealed nine major themes relating to why individuals became Reiki practitioners and how it has affected their personal health. Themes also emerged demonstrating practitioners definition's of personal health and health's relationship with others. The themes that emerged are as follows:

1. Reasons for Becoming a Reiki Practitioner
2. Balance as Health
3. Personal Growth
4. Facilitator & Conduit
5. Trust & Intuition
6. Self-Care
7. Addressing Doubts & Validation
8. Attunements
9. Sensations During a Session

Themes will be presented to describe the essence of what it means to become a Reiki practitioner and how it affects the practitioners' health and the health of others around them.

#### Reason for Becoming a Practitioner

Research revealed that practitioners began practicing Reiki for one of three reasons: 1) they experienced a Reiki session, 2) they had a friend who encouraged them to take a class or introduced them to Reiki, or 3) they saw massage as a vehicle to Reiki. Practitioners spoke about experiencing Reiki and how this experience led them to curiosity about Reiki and ultimately a decision to become practitioners themselves.

Let's see, I was interested in Reiki upon receiving it. I liked how it felt. ~ Cali

I had heard about Reiki just a little bit and I was curious. I called and made an appointment and I went to this place. The coolest most beautiful old lady answered the door. She was at that time in her seventies. When she opened the door my first inclination was I want to be just like her when I grow up.....we talked about it and I started thinking I really want to explore this, I want to do this. ~ Amy

And uh you know always being open to ideas and alternative really anything healing, sure and so he worked on me once and I thought wow that's pretty phenomenal. Then he

had a class that he was teaching in a couple months so I took that class and then the interest is more spurred by having this experience, being affected, being curious, and then just kind of taking the next step and deciding I wanted to incorporate it into my life. ~Bev

At any rate I was game to try to work with her and had three treatments by her [a Reiki practitioner]. It was very it went very deep for me. .... Then she said you know you could learn to do this too. ~Ginny

Practitioners spoke about their experience with massage as it related to their experience of becoming a Reiki practitioner:

I was convinced. I then spent another two years trying to figure out how I could get to massage school because I knew that chiropractic was not my path. Massage was really the way to get into this and that I was always going to have massage and Reiki or energy work as a combination that was available to people. ~ Pam

Well, I guess I became one because I went through massage school in 1982, in Atlanta and I learned mainly western types of work and so forth. Then I was licensed in Florida for years because Georgia didn't have licensing and I had to take a course every year. I got used to taking courses. A year before I took Reiki, I was working on a student of mine doing some bodywork type massage and so forth. All of sudden for the first time ever my hands started to vibrate and I felt energy or something. I had never felt that before. ~Nick

Practitioners spoke of friends who introduced them to Reiki:

A woman that was a Reiki Master said to me, "Gee you really should have Reiki with what is going on. I should have taught you Reiki." I think that was in the back of my mind when my girlfriend said there was a Reiki class. So I went to check it out. ~ Lily

It kind of happened by chance. A Reiki Master in town needed a suitable space to hold a class and I was renting a home that had a pretty good-sized living area. She was a friend and she said, "Would you be ok if I used your space?" and I said, "Certainly." Her class was going to be held over a weekend and rather than remove myself from the home which I would have done out of respect for what was occurring there I just asked more about Reiki. I really wasn't familiar with it back then and that was nine years ago. I felt it was something I should probably attend. I would certainly learn something and so I did. I took the Reiki I class and then certainly through that experience was hooked. ~Roy

Um, it was introduced to me about well going on two years ago, but where I really first learned about Reiki, I didn't know that's what it was called, was through the Barbara Brennan workshops and through working with a friend here in Missoula. ~Cindy

## Balance as Health

In order to assess the practitioners' individual view of health and gain a better understanding of the essence of health from the perspective of a Reiki practitioner, practitioners were asked to describe what health meant to them (see *Interview Questions* Appendix F, p.123). The theme health as balance was representative of the practitioners who used balance in their definition of health. Practitioners were unable to share their definition of health without using the term balance. Practitioners spoke of the absence of pain, being grounded, balancing out the various frequencies within the body, and moving into an appropriate place at an appropriate time. They also mentioned health as an understanding of one's body and none of the practitioners spoke of health as the absence of physical problems or the absence of disease. This theme is represented in very holistic terms in health of the physical, mental, spiritual, and emotional bodies. Balance is health in all aspects according to the interviewed practitioners.

Health to me is about being able to smile a lot and laugh a lot. When you are in pain, you cannot do that. Health is also about being able to be open with somebody else who is in pain and who does need some support, so that you are able to listen and possibly offer them some ideas or some opportunities to change that. For me I often tell people if you had seen me thirty years ago why I did not become an alcoholic is kind of odd, because I was in so much pain that would have been an easy way out actually. It is about balance you know; you cannot use the word health without balance. ~Pam

Balance. In balance. Every organ in your body vibrates at a different frequency. If everything is vibrating at its correct frequency, you are going to be healthy. You want to keep yourself in balance. ~ Lily

Everything in balance. To me the health part has to do with being well grounded and being well balanced. It is a system and they all work together. If one thing goes down then it puts more stress on another organ or another body part to make up the difference. When I give energy to myself or receive Reiki, it is like a Petri dish. There is fluid in the Petri dish that is the Reiki energy. Take the dry sponge and put it in there and the water goes where the sponge needs it, where it is dry. The Reiki goes where it needs it in the body to balance it out. To make it healthy so all the parts are doing just their job. ~Lily

Ok, it means to return a situation and/or a body back to the balancing principle. It does not mean that we move back to when we are twenty you know. It means that whatever is

appropriate at the time. Sometimes illness is appropriate. Sometimes dying is appropriate.  
~Amy

I can tell when I move into a position in myself that is out of balance because some the old issues will pop up physically. I have been diagnosed with fibromyalgia, arthritis, and you know I've had some liver stuff. I can see it immediately. Balance is the point. Balance is the dance. It's a dance. I don't believe anybody can fix anybody else. I heal myself, my body when I have a scratch it heals itself. It's a balance, coming into balance.  
~Amy

For me health, my own mantra when I hike and I do like hiking meditation is happy am I, health am I, wealthy am I. Wealth in all aspects; wealth in joy, in abundance, in love, in family, in friendships. Health is not so much being one hundred percent physically healthy. I think as I age I have come to understand that health doesn't mean that you don't have a little ache here or there or that you are not going to have a bad day or that the universe is not going to throw some issue or obstacle at you that maybe at the moment seems like an overwhelming hurdle. Those things come and that is part of life and that's part of our soul development. Health to me means maintain a state of balance through that process. ~Roy

For me and a long answer to your question Tannis, the meaning of health is maintaining the sense of balance and fluidity of like an old oak that is deeply rooted in the ground all wise and all powerful. The ability to bend to be flexible and to understand that we are fully loved, supported, guided, and that everything that we need to heal ourselves is within us and certainly immediately available to use through all the cosmic and divine guidance that we have. So balance is to me what health means. Being able to ride those waves as they come. To know we will get through every one and be stronger from our experience. ~Roy

### Personal Growth and Change

Throughout the interviews, the idea of personal growth and change became present. Several times throughout the interviews, practitioners would tell stories or point out that Reiki had allowed them to grow as a person. Many found that it permeated several areas of their life as well as provided them some sort of mental, emotional, or spiritual support they had not expected initially. Practitioners spoke of change in all areas of their life from the professional realm, to family, friends or even pets.

The inclusivity of Reiki in all aspects of practitioner's lives was present. Reiki for many practitioners has instilled a level of trust in the universe and change that they did not have prior to their Reiki training. Reiki helped practitioners deal with stress, connect with their own personal health, become grounded, release damaging experiences, and adapted their relationship with the world. Reiki helped many practitioners find their place in the world and in society, tying them to their environment and helping them find meaning. This theme demonstrates how Reiki helped facilitate personal change and growth in each practitioner's life.

It's deeper in every aspect of my life. It feels deeper in my body; it feels deeper in my mental-emotional state, and definitely in my spiritual practice. It feels like I can get quiet quicker, things don't upset me as easy as they might of. There seems to be an inner strength that has definitely grown over time with the massage work in general but definitely is deeper from the Reiki. That definitely was a pivotal experience for me. ~Pam

People say they like being around me. Reiki definitely has contributed to that. I grew up in a really difficult childhood, had a very difficult first marriage and I was pretty angry about it for a long time. I feel Reiki has softened some of that anger, and that I know that I know can protect myself and take care of myself and that I am not going to experience that kind of negative and damaging energy that I did for the first thirty-five years of my life. ~Pam

More than anything it just takes you giving yourself the space to allow it to do it's thing, rather than trying to control it. I think it's just for me it's really paralleled this evolution in my own life looking at um, you know through my yoga classes, through meditation, through self-awareness and self-health things just realizing that really at the core of it is just letting go and just letting life energy flow through you. That's what Reiki is so it's a nice analogy for my own I guess spiritual growth my own growth as a person. It's just very timely as things seem to be like that. I think I don't know I think initially it was very random and didn't use it all that often. Now all the time friends, myself, my husband, I have worked on a few pregnant friends and that has been really interesting. I just you know I'm not shy to offer it and that's something that's been an evolution yeah. It's just something that I think about all the time as a remedy. ~Bev

It's a huge lifestyle change. It changes how you conduct your life and how you see yourself in its reality. It affects relationships. It affects how you relate to the world. I'm an attorney so it's a huge advantage. The more quiet and centered I am inside the more I can really see what's going on, instead of being reactive and being really inside of a dispute. If you get some distance from the dispute, it helps. ~Lily

It also helps deal with stress again I'm an attorney, a mother, a wife, stress is there. It very much helps you deal with stress so much better. You are able to be more in control so that people aren't able to stampede you, and when they relate to you. It's huge. It's huge and people don't think that. When you start in you think, Oh I'm just learning this little technique, but the more you study and the more you apply the precepts and apply it to your life it's like living on a different level. It wasn't easy for me because I'm an attorney and I think linear..... It's an immersion into your whole life. How you are eating, how you are living, where you are, your physical surroundings as well as you, your relationships with others. ~Lily

I became probably ninety-five percent less judgmental with people. Just accepting that they are fine the way they are and they are doing the best they can do. That happened very fast and I think it was because of the Reiki. ~Nick

Things started changing a lot with the way I felt and the way I treated people..... I also think I really do believe that we could all live to be old and healthy, but to do so we really need to take care of ourselves in certain ways. I really believe that strongly. I think Reiki makes a big difference in helping us open up so we know our wisdom. If we know our wisdom then we've got to take care of ourselves because our wisdom is so much strong. Part of it is opening up and seeing what we can do to take care of ourselves and so forth... The more I do the more I understand why I'm here, why we're here, and why this happens and all that happens. ~Nick

It brought my awareness in a very fast succession, weird behavior that I was having, like oh gosh I'm hungry it would be nice to just stop and grab a burger here or something and oh no I'll go home and just it sounds like a silly example but I think I was doing a lot of those sort of a things. I could feel that I had a desire for something and a want for something even as small as a hamburger and I was withholding that within myself. You know I'll just go home and eat bread or whatever. It's like punishment for I don't know what. I just started noticing these little patterns like that and it wasn't like a why are you being so mean to yourself? It was just like that a weird thing to do and why are you doing that? It opened up an awareness in myself that I could make some small changes, which I think eventually lead to me being able to make a lot larger changes... It was definitely more of a spiritual journey and for emotional, mental health for me. Stress management, big, big, big, stress management would be the way to phrase that. ~Cali

So yeah, I have definitely been able to use it in my work in a lot of different ways no matter what the work is. It's good stuff. I love it. It's very integrated into my life so it takes a long time for me to come up with different ways. I use it this way, this way, this way, and the other because it is so normal to call on it like constantly... I think to a large extent I had put my own life and journey on hold in order to be this super social worker and got to a point right around the time I got into Reiki. First I need to figure out my own



life and take care of my own self and then I can see how I can interact with others. I think lots of time people will use their job, especially folks that get into psych/social work as a way to distract from your own stuff. I think the Reiki stopped the distraction. I have volumes of journals written from those years. There was a lot of self reflecting in that.  
~Cali

I think Reiki is a piece of that journey for me. Of just kind of letting go of some of those old and more dysfunctional patterns and I'm sure that there are plenty more dysfunctional patterns that I have in my little head. ~Cali

You commit, you are saying I commit to myself I commit to my growth, I commit to change, to say the least. I committed three times hard. I went into a major healing crisis for several years. Sometimes I think I am still just coming out of it. It hit me to a place that it was like ok. It was like on an emotional, mental physical level. All levels it wasn't just the one. Each level actually works on different parts of your psyche. ~ Amy

When you have a weird life and it gets even more so you start wondering. I was thinking maybe I don't even want to be here. I got a reason to be here I guess... It does make your life change. ~Amy

I have had kind of a dramatic life I think sometimes. It's been exciting it's been an adventure. Reiki helps look at things differently. There again taking that responsibility... My life is really really great. It's still very exciting very exciting sometimes. It's not the outside things that have changed so much as here [points to herself in the center of her chest]. This is what's important to me [points to herself again] anyway because it does affect the outside but it's the inside and how to handle and how to make those choices and awareness's. I absolutely credit Reiki for that. ~Amy

Reiki is my life. It... I could get emotional on this [beings to tear up and cry]. It gave me back myself [through tears] and the truth of who I am and who we all are. ~Amy

It's the best thing that ever came into my life. I guess I have done lots of things but I has just like integrated it all and pulled it together. ~Amy

Reiki has shown me over the last nine years that again if you approach someone who is seeking your assistance, who is reaching out to you from a state of despair or a state of dis-ease of imbalance and in that spirit of trust and healing with your intent you work with one another in a very spiritual and powerful tradition that you can manifest great things. That healings do occur. ~Roy

Healings aren't limited to the person you are working on, but the healings come in your own life. Most people feel when they hear "healings" they say, "You mean physical

healings?” and I say, “No.” it’s healing within my own family, healing for those that I love and care for, healings with this practice. ~Roy

I thought this is it, I want to do this, I want to learn this now. So, I signed up and did it anyway and felt very strongly also, you see it influences your whole kind of your total personality and outlook on life. You feel more connected to other people because you have feel connected on the energetic and the “subtle” level. It opens you up in terms of interests in others, dialoguing with others, being, and listening a little better to that which is not to explicitly said to something more, that’s in the back of people’s minds but they may not articulate. I was very happy and felt great you know. ~Ginny

To recognize, Reiki has helped me to recognize who I am much better. For instance, I don’t travel anymore because it’s too much and I don’t like the airports and all this. But I’m fine with it I’m not sobbing. I’m just fine with where I am and who I am. ~Ginny

In the fact that I am part of the universe, I am not responsible for the individual aspects of the universe. So, the continuing education of Reiki has, I hate to use the term mind expansion, I am more inclined to say it’s more relaxing. It’s easier to be in the world. Even with all of the havoc that’s going on. I mean the world has always had havoc. You know those up surges of energy is what causes change to develop. It’s just easier to be in the world. ~Cindy

What I have found is that nothing seemed to be personalized anymore. If someone else is having a bad day and they blow up and it doesn’t have anything to do with me. I don’t take it on, I don’t feel a level of injury that I might have felt, that also might be because I’m getting older and kind of what the hell, Kathy Bates I’ve got more insurance kind of deal. I do think that maturity has a big difference for me. Plus, I’m retiring so I have a very different perspective..... One of the things that the Reiki Master level did for me was the part about the application of not being judgmental about things, but not being judgmental about yourself. That self-awareness of you know, you do what you do, and that’s all you can do. ~ Cindy

There is no, the tension level is very different, it’s very different. I don’ t have that particular impediment anymore which is for me an enormous issue. That had nothing to do with age, nothing because that didn’t show up until after I started doing Reiki. ~ Cindy

I think that Reiki in fifty-seven years of life Reiki is probably the single most predominant change that I have been through. ~Cindy

It makes me aware of the universe. Not so human. Not so earthy. It has just opened me up to the universe, why we are here, what we can do to serve other you know. ~Katy

I am just this little fleck you know with the universe and how wonderful and how perfect it is. That has changed my life. I think what the Reiki by doing it has changed it immensely. Not just knowing how, but doing it has just, it's wonderful. It really think it's made me open to other things even something, somebody's belief first I listen and maybe I will take a few of the things, maybe I'll take the whole thing, but I take a gem of whatever they are studying or their beliefs. I think Reiki has really opened me up. ~ Katy

### The Practitioner as a Facilitator or Conduit

Practitioners talked about their relationship with the energy that comes into their body from the universe. This theme will be addressed in three aspects 1) how practitioners hold themselves out as a conduit for the Reiki energy to travel through, 2) how serving as the conduit produces effects within the practitioners own body, and 3) the utilization of Distance Reiki as a variation of the conduit.

Through Reiki the practitioners is not healing the individual, but instead allowing the individual to take what they need from the universe and in doing so heal themselves.

Practitioners described themselves as conduit, and they were explicit that they are not healers, that individuals heal themselves. Practitioners addressed misperceptions that they were healing others, or that they have a special gift. Practitioners see themselves as a conduit for healing from the universe. Their training in Reiki allows them to be a facilitator or conduit but nothing more.

This theme expressed by the practitioners in many ways, came back to the practitioner as a facilitator or conduit for the Reiki energy. This theme highlights the Reiki practitioner as a conduit for the Reiki energy.

There is kind of a misperception and you may hear this in a different way from other people. I do not put my energy into your body. The energy that comes into your body comes from the universe and most of it is already there. What I am doing is helping you access the energy, make it available to you so you do your own healing. I do not call myself a healer. You are your own healer. I act as a facilitator by either using pressure, or

words, or touch, or Reiki whatever we are doing that I am showing you a way that you can heal yourself. I am not channeling my energy into your body that is inappropriate and would not be a good idea for either one of us. You have your own energy that is perfect for you and I should not interfere in that process in any way, but to get you to open to your own energy absolutely. ~Pam

When I am feeling or working on someone, I visualize my whole body being a conduit for this energy. A vehicle for this healing until it is not like you can draw a line between your own body and this energy. I think it is just like its very soothing for me and I do feel like very supported. I love working on other people just as much as I like to receive it. It is the same thing in a lot of ways. ~Bev

People's experiences when I work on them are as astounding to me as it is to them because it's not coming from me it's coming through. ~Lily

I get bored. You do want them to have a wonderful experience where it's restful and so you shouldn't be chatting over them. I tend to want to do that because I'm just letting it happen I'm detached.....It's not that it's boring but in a way it is. All I'm doing is holding my hands. They are enjoying it. ~Lily

People when I work on them will go "oh I hope I didn't drain you". I'm thinking I didn't give you anything of mine so you can't drain me. Usually I feel really good. You feel good because you are getting some of the effects because it is running through you. ~Lily

I always tell my students that we don't claim that Reiki does anything except make people feel comfortable and so forth. Because of the fact because you can't say that it cure cancer, you can't say it does this, you can't say it does this, some people I'm sure do, but I don't think you should. It does do unbelievable amounts of things. ~Nick

We are not supposed to use our energy and that's number one. One of the hardest things for us to learn, to remove ourselves. We are not the ones doing it, we are channeling it. It has taken me nine years to get to that point and really get to that point..... I find that it seems to be better and especially because I always tell people it's like I'm a battery charger. I can plug in and I can plug into you and I can recharge your battery so that you can heal yourself. It's you that's the healer. I'm just the conduit. ~Amy

Today thankfully, I am not invested in the outcome, I do not hold myself out as a healer. I hold myself out as a conduit. For me the Reiki session is very spiritual in nature and very much an hour of prayer. During the Reiki session I am humbly asking God or Spirit to use me as a hollow bone or a hollow channel to use me on the physical realm to bring the energy through and through my hands and into the body and spirit of the person I am working on. ~Roy

When you learn that you can change people's lives or be a conduit for change in another person's life simply by putting your hands upon them in the spirit of pure intent and healing you also learn that with that comes a great deal of responsibility. ~Roy

I think what's key is that the person be open and receptive that I am working on and that I be clear enough conduit that I can welcome the energy through. ~Roy

When I was taking the Reiki classes how my hands vibrated by doing it and they are doing it right now. I realize it isn't me, I'm a channel and that's why..... I am channeled I truly feel that. ~Katy

For one thing you never make a diagnosis. I can say I feel a turmoil there and of course a turmoil is a kind of inflammation that is going on but I don't say you have such a such a disease. You never make a diagnosis. You can also sometimes feel that the energy is blocked somewhere or goes through you know but I think a massage therapist can tell the same thing so it's not peculiar to Reiki to have this kind of sensation when you touch somebody. ~Ginny

One of the best things about Reiki is you can impart a level of trust to the individual because you are experiencing it not on their level but as a support system and as a conduit to their level..... Reiki is about helping them feel the energetic flow. It's like you are not going to get the light to turn on just by hitting the switch you've got to plug it into the wall. The Reiki practitioner is the wall plug and the cord comes on and light comes on. ~Cindy

As a practitioner you get into a state of 'ki', that's what that's about, so you are already trying to balance yourself so you are doing self-Reiki at the time that you are the conduit. You are the PVC pipe between the Reiki energy and where the energy is going and the other person that you are working on. So as the PVC pipe as the conduit just like water flows through a hose, if it's hot water the hose gets warm, if it's cold water the hose gets cold. So you get that benefit just because you are the channel that it's going through. You are the conduit. ~Cindy

The client takes what they need, whatever it is. They are not taking it from you. You are just, you're the PVC pipe, your just the channel for the water to come through. ~Cindy

### *Benefits to the Practitioner when Serving as a Conduit*

The second aspect of this theme addresses the benefits the practitioners receives when serving as the conduit for the Reiki energy. The practitioner acts as a conduit for the energy as it travels

from the universe to the recipient. Practitioners spoke of benefits they experienced from serving as the conduit and benefits to their personal health. Practitioners found they felt more filled up after doing Reiki, more at peace. They felt tensions within their own body release while performing Reiki on others, and they felt nourished while performing Reiki. In serving as the conduit for Reiki, practitioners are able to benefit equally from giving Reiki as they would from receiving Reiki. The benefits to the practitioner are showcased in this theme, the practitioner benefits directly in performing Reiki and serving as the conduit.

With Reiki even if you do other forms of work, my work is some kind of bodywork, I am getting filled up as I am doing the work, which is an extraordinarily wonderful process. That is definitely something that I noticed when I took that first Reiki class. I was never as tired as I was before, it was like I am giving energy, but I'm receiving it from the universe at the same time. At the end of the day I am not nearly as tired as I once was.  
~Pam

I never feel drained. I feel nice, relaxed. ~Bev

Yes, because that energy is running through you. You are going to get some of the effects of it. It's always a high. People when I work on them will go "oh I hope I didn't drain you". I'm thinking I didn't give you anything of mine so you can't drain me. Usually I feel really good. You feel good because you are getting some of the effects because it is running through you. Also as much as I need this I do have to quiet my mind to work on somebody. I am hearing the soft music, I'm sharing that experience, and that's good for me. ~Lily

When we have that much energy run through and we do we run a lot of energy through us, it affects us. It just does, it runs through all our channels, it runs through our body.  
~Lily

Our bodies are crystalline and energy so that energy frequency moves that. It's great! It's amazing and it also links us. It reminds us that we are not really separate or duality. We are that wholeness and that's comforting. ~Amy

I work on more on other people to help them than I do for me. I figure just giving Reiki does it for me. I like giving it as much as receiving it, but I figure when I'm doing it, I know when I'm doing a lot of Reiki and in the last two weeks I have because when I'm teaching a class I'll work on a lot of people. Especially new people I haven't worked on because I love feeling the new energy. Everybody's energy is different and you get to

pick up things, and it is always fun to pick up stuff on people now that I can do it sometimes. A lot of that is the self-help. The self-help thing is very important. I think it's great. I think it is wonderful. ~Nick

When I work on someone, something does come back to me when I'm just working on them. When exchanging sometimes it's as much the giving as it is the receiving. They work on me and I get a whole lot back from them. Sometimes it's what they do with me. ~Nick

Lots of times I will feel like oh I just don't have the energy today but this person is coming, I'll just do the best I can. I will start working and suddenly I feel pretty good. My energy might be up, maybe I'm having allergies and I've just been a snotty sneezy face all morning and someone comes and gets a treatment and here I'm thinking oh I hope I'm not sneezing and having to leave the room and wash my hands a bunch and blowing my nose that's going to be gross. I want to be able to work on this person. Suddenly I'm breathing through my nose and I'm not sneezing once and so I feel immediate things in my own health especially if there are things in my health that would prevent me from working on somebody. ~Cali

The more that we get to interact with people in this type of a context the more we are clearing out our own stuff and really becoming healthier ourselves. I like being that blatantly honest about it and being like yeah this aids me you know. It can be as physical as oh yeah that took away my allergies better than anything else would. ~Cali

When you are running the energy through your own body, it just would make sense that that energy is having an effect on your own energy field. It would only make sense that in the Dr. Usui tradition of Reiki that that would occur, because if we as Reiki practitioners have to first heal ourselves before we heal our family and heal the world. It is so important that we maintain ourselves in a healthy state and an unblocked state so that we can better channel the energies and not permit any of our stuff to mix with the patients. ~Roy

If I am channeling the energies clearly then yes I do feel that I do benefit from that and I'm blessed to receive those energies as a practitioner and that healings can come from me as well as for the patients. ~Roy

The thing is you have an experience as if you were receiving and you do not know if the giving or the receiving is the more nourishing thing, both are. ~Ginny

I often feel a sensation in the same part of the body that I am treating on someone else. I feel myself, my stomach growling or I feel, I also when I start putting my hands on them, I feel that the tight spots in my own body are relaxing. My knee, my right feet, my lower back whatever it is it starts relaxing. The thorough relaxation it is a state in which you are

supposed to be..... I feel responses in my own body. I feel relaxation in terms of tingling or relaxing of muscles. I sometimes also get the sense of the other person in a very general sense you know of his or her problems. I am kind of sort of drawn into his or her intimate world without talking about it. ~Ginny

People say you are supposed feel always better and energized and I do feel. I feel invariably much more relaxed and in a way integrated. I feel calm and invigorated. Sometimes I feel like now I want to sleep and rest. Sometimes I feel energized and not I want to do this and want to do that. There is a whole palate of different reactions. I never feel, I never had a negative feeling, except yeah. I would say that the ideal is if two people work on one. It is it's kind of a ritual which is very nice, one is at the top and the bottom you have a current going all the way through. ~ Ginny

You are back to that ceremony again of putting yourself into a state you know so that you can be a support for this other person. Allows you to be rebalanced. You are back on the balance a beam. ~Cindy

Not invigorated I feel calm. I feel peaceful. I have never had any adverse affects from working on someone because that's the point of being a Reiki practitioner is that you are outside of the experience. The experience is about them. It is not about you. So there is nothing you are not robbing something from them because that is a real different level of intention. You know if you are trying to clear something out. I don't see Reiki I don't use Reiki as a diagnostic tool, but I do allow those energetic to dictate where I begin or how long I need to be some place. ~Cindy

### *Facilitation of Distance Reiki*

Another noted aspect of being a Reiki practitioner is the ability to perform Distance Reiki starting at Level II. Distance Reiki refers to the exchange of energy from a distance, when connection between the recipient and the practitioner is not hands on, but much more intention based. Frequently with distance Reiki, a picture of the recipient is utilized to facilitate healing, or the practitioner visualizes the recipient as they practice distance Reiki. Through distance Reiki, practitioners are able to continue to act as conduit for Reiki energy without actually being in the presence of the individual who is receiving Reiki. Practitioners spoke of being very comforted in knowing they had access to distance Reiki. Being able to check in with friends or



family from a distance, or check in with their home, or aid sick grandchildren was comforting and soothing for practitioners. Practitioners spoke of individuals knowing when the practitioner had sent the Reiki or feeling the comfort of the Reiki energy from a distance. This theme demonstrates the comfort felt by the practitioner just in knowing they have the ability to perform Distance Reiki.

You know one thing that I really enjoy and have become more or I use a lot is distance Reiki. Healing like people who are sick or struggling especially because my family is so far away. I grew up on the east coast, my sister just had a baby and all this kind of stuff and I feel so far away from them. It's nice to feel that there's something that can connect us even if they are not really aware of it, but it makes me feel more connected just to send them Reiki. You know in a broader sense just to know that we are all connected all the time whether we formalize it through Reiki or not. Yeah. Yeah. Well, hopefully that was helpful. ~Bev

Sending distance Reiki is also Reiki II. I send distance Reiki all the time. I really believe it works. I mean it works because I have had too many experiences where it obviously was working. The people knew exactly the time I sent it in the middle of the night, or something like that. All that made a difference. ~Nick

I do more and more distance work for people..... The distance stuff is just fun! It's so much fun! ~Cali

One of my regular folks was really concerned about her daughter who has lupus and is living in another state. So we had verbal permission from the daughter that her mom and I would do some work and she of course had her daughter's name and a little picture of her. So the mother and I worked on the daughter distance and one of the problems the daughter had been having was stress with her kidneys. She had been having really really frequent urination to the point that it was interrupting her rest. The daughter's feedback was that that frequency of the urination and just the general feeling of her kidneys improved a lot after we did the distance healing. Her mom and I worked a lot around fear pictures and kidney's have a lot to do with fear so that made sense. It didn't make the lupus go away in one treatment or something but it helped mediate the symptoms that she was having that were being so disruptive for her well-being. ~Cali

I do a lot of distance work too. I do long distance healing and that's interesting. Sometimes I use my hands and sometimes I'll just sit there and do it from a distance..... I have people who call me for all sorts of reasons for distance healing. You don't have to have the hands on. We can affect everything. ~Amy

I find I do Reiki not just on people but certainly on pets. I do Reiki on my home. I use Reiki for distantly checking in on my home when I'm traveling to surround it with a curtain or envelope of protection. I do Reiki on sacred places outside of my home on the wild areas along the creek. ~Roy

The three of them [her daughters abroad in Europe] I do distance Reiki all the time. They will call me or email and they will tell me what's wrong. The granddaughter who was in the process of delivering the baby she felt it, the comfort. They feel it immediately.....Distance Reiki is very powerful.. Sometimes I think it is more powerful. ~Katy

I do this very frequently [sending Reiki] and it has given me, being able to do this, has given me a great deal of comfort and relief that I can do something for people who are far away who are not here. I had a sister in Germany, she died meanwhile, was blind and paralyzed and I was grateful that I could communicate with her in that way. ~Ginny

Often when you have, sometime when there's a bad situation or somebody, my son-in-law is driving through the snow storm from Virginia to New York or something then I feel I can accompany them in a very subtle way. Now it is so when my daughters, when one of their kids are sick they call me to send Reiki to their sick kid and so forth. It has not melted away, in that to the contrary it actually strengthens that this is effective. ~Ginny

### Trust and Intuition

Presented in the data is the trust and intuition a practitioner develops through their experiences with Reiki. This theme will be presented in two parts, 1) Intuition and trust that the practitioner develops within their practice and 2) The evolution of hand positions to intuition as the practitioners skills developed. Practitioners spoke of learning to trust the energy they felt, and trust themselves in what they felt while practicing Reiki.

This theme is best represented by a slow evolution of a practitioners Reiki practice. Practitioners began to trust their own intuition and in doing so gained both confidence and the ability to connect with the individuals on a new and deeper level. Practitioners spoke of learning to trust what they felt and trust that all of Reiki is for the good and can do no harm.

Yeah, um, you know it was a slow evolution I think in that when you learn any skills initially it is just it's a curve of confidence. I was probably not as secure with the hand positions and again like wrapping my brain around what this is enough to really feel like I could put myself out there and offer it. It's just you know the more and more I worked on people and the more I realized that it doesn't take special talent. ~Bev

It's just you know for it's just, it stands for like as I mentioned before it's just this working analogy. Just too kind of trust something and let it, just kind of let it be, rather than being feeling like I need to control it or be controlled by it. Just let it be what it is and just feel gratitude for it in my life. ~Bev

I mean I think a lot of it is gaining confidence in that what you are experiencing isn't totally your imagination because here's somebody else that can give you a similar story line and starting to trust those feelings at an energy level that you are experiencing. ~ Cali

I think the Reiki is going to work because it's the energy coming through the person. It's going to work no matter what. I think that we can't expect everyone to do it a certain way because that wouldn't be right. I think it's going to work no matter what. ~Nick

When I need it, and I believe, that Reiki helps me with that because it has taught me to trust that information. I can reach in that bag and pull out the tool I need and use it to take care of myself or somebody else. It's a big bag. The universe is in there. ~Amy

I just have to trust that if my heart is in the right place that it is for the good of the patients and for me as well as part of my own learning and understanding. I have been at this for nine years and there are certainly some things that are the same from when I started the basics of doing Reiki and the principles of Reiki but it changes all the time. ~Roy

I think that once you become willing to have that trust and it's one thing to trust someone in your family you know because you have history and when you are trusting yourself to just be. I mean that is literally, what it is. You are just being there, you are being, you know you're an active participant in the event at that time. ~Cindy

### *Hand Positions Meld into Intuition*

As part of Reiki I training practitioners are taught a series of 13 hand positions that addresses both the front and back of the body. This theme addresses the development of hand positions as they evolve over time. Practitioner spoke about learning the hand positions and using them initially, but many then began to develop their system for addressing the body and evaluating the

body's energy. Hand positions have been molded and shaped by the intuition of the individual within the individual's Reiki practice.

Practitioners found they no longer used the hand positions because they used their intuition to assess an individual's energy field and their intuition guides where they place their hands throughout the session. They may find themselves drawn to a certain area of the body, or a temperature shift may cue them to focus on a particular joint or body part. Practitioners trust their intuition and trust that Reiki guides them to where the body needs Reiki energy the most. This theme exemplifies the use of intuition and the evolution of hands positions into the practitioner's intuition.

To a certain extent but I don't really follow the protocol necessarily of the hand positions you know just whatever feels intuitive to me I would like to honor and again rather than trying to wrap my brain around what's going on every moment during a session. ~Bev

You are supposed to start out at the head and work through the positions. I don't do those unless I don't get a sense of what to do. Then I will start at the head. Usually I am drawn to an area of the body and I know that's where I need to go and then I know where I need to go next. That's the whole intuitive thing that I apply to the Reiki practice. So much so that when I started teaching it, I could not remember what the hand positions were. ~Lily

I always start with someone in the massage chair and I always start with my hand in this position [places his hands on my shoulders again] and what I do is just and this is just before I even start the massage. I don't try to pick up things I just sit there and feel if there is anything that makes sense. What it does is it begins to guide me, where are you going to go for this person? When I am doing the work and so of course well I might think I don't need to go here as much, but I need to go here maybe. ~Nick

I don't really stick with the protocol. I will every once and again and I definitely try to keep in mind that I touch base with each of the chakras and talk to them and see how they are doing. It's a very intuitive process.....Those positions are really nice and if I want to in a way just kind of tune out and let Reiki be I can go through those. But if I want to actively be involved and listening to my intuition or their guide or my guides or whatever it is I feel like it can be a lot more dynamic of session. It just all depends on what's needed. ~Cali

Those hand positions hit every part of the body. I mean you put your hand on one position and that position all those areas that are affected by those, nerve area, and endocrine glands and the chakra because it's all right there. You work with everything. You can use just, just, only the hand positions you are taught and do it. I follow wherever I am supposed to. I mean I am always guided where to begin and sometimes I will combine the laser Reiki and I'll do a few minutes of that and then put them on the table. The body, the physical body needs that touch. It doesn't matter you can just hold onto their arm and affect the whole body. It's yeah, I guess intuition. ~Amy

I still use many of the hand positions. Sometimes that's not always possible because the patients aren't flexible enough to lay flat on the table..... I would also say that over the nine years through intuition I have learned to place my hands where they are directed. ~Roy

I am going to allow my hands to go where they should go.... You should do what your intuition says. You have a basic place on the hands, but if the energy is wrong, here you stay here longer or you only do that. So intuition I think, ask. ~ Katy

I personally work from the original hand positions and the original sequence. So you work from there to there [gestures head to toe]. Sometimes I stay there or I add arms and wrists because I have studied the meridians, the energy meridians in Chinese medicine. ~Ginny

Then I will start then I usually do one circuit to see if there's, if I feel like temperature differences in their body. ....What I do feel is I can tell the literal pulses in the circulatory system by holding my hands in certain areas. If something feels very strong, like your left side has a very strong pulse on your foot and your right side doesn't, something is impeding that blood flow. I might be more inclined to direct more Reiki to try to balance those two by hold them together you know so that they will self regulate. ~Cindy

## Self-Care

Practitioners practice Reiki on themselves on a regular basis as part of their morning or daily routine or before they go to sleep at night. The theme self-care is divided into two parts, 1) practitioners using self-care for general health and wellness and 2) practitioners who utilize self-care to manage a specific health problem in addition to general health and wellness.

All practitioner practice Reiki on themselves. Practitioners spoke about performing Reiki on themselves for a more general well-being. Practitioners mentioned utilizing self-Reiki to aid in dealing with stress, to calm the body during a difficult situation, to check in with their body, or address the pains of a headache. Practitioners also mentioned the manifestation of a physical ailment as symptom of an emotional imbalance. Practitioners use Reiki and self-Reiki to check in emotionally, spiritually, and mentally to understand and address emotional stresses.

Practitioners also spoke about integrating self-Reiki into their personal routines. For example, some practitioner perform Reiki on themselves before they get up in the morning, or after they brush their teeth and settle into bed at night. They might check-in within themselves throughout the day, or after each client. This theme demonstrates the versatility of self-care and how practitioners use self-care physically, mentally, emotionally, and spiritually to maintain a balance within them and keep themselves healthy.

At any point if I feel like something is off in my body I can immediately go to the self healing place. Whether I can actually put my hands on my body or not. It's a state of experience in me that can be called up at any moment. I don't let things escalate. This summer I let myself get really drained. We did something that was really fun with a friend and it left me exhausted and I didn't even think anything about because the energy was back the next morning and I didn't think anything of it, but I got viral bronchial pneumonia. I was really really sick. I went to a homeopath in town who is also a Reiki practitioner. I literally laid in bed for two days with my hands on my body and just channeled energy as fast as I could through my body and on Sunday morning I was fine. Something that should take weeks to pass through your body passed through in less than two days. ~Pam

I work on myself often. I wouldn't say every day, but very often. I don't just work on myself like today I was putting something out in the mail that I really wanted to have the person who's opening it just I want it to be a positive thing. So, I did the Reiki symbols over it and just had a visual of infusing that whole package with love and I don't know

it's just kind of a nice concrete thing to do that you may just do anyway, but it just brings a little ritual to it and a little formalizing of that sort of thing. ~Bev

But then I take Reiki and you get kind of more and more put together and it's a healing and you start working with yourself and you start working with energy.....The health issues 90% of the time is a result of stress so the way I will deal with it is not necessarily on that particular body part which is feeling it. For example a lot of back aches are stress, headaches are stress. Instead I will look at where was I today, what was I doing, what am I thinking about? I deal with it on not a physical level but maybe an emotional mental level and clear that, work on healing that. Then the physical manifestation will go away. ~Lily

I do I do work on myself. I do work at night when I go to bed. I always sleep on my stomach. If I am giving a talk the next day. I always go to sleep on my stomach. I teach a lot. So if I go to sleep at night if I'm going to talk the next day I will go to sleep with my hand at my throat. I'm giving myself fifth chakra Reiki for at least an hour I'm sure. So actually that's not true I work on myself a whole lot. I never thought about that until you asked me, because I tell the class the class I don't give myself that much self-Reiki. I really do it every night when I go to sleep, so I really do. ~Nick

My habit now is I work on myself before I go to sleep, and I think that's how I started out for the most part too, though I'm sure I was playing around with it throughout the day..... Yeah it's kind of you brush your teeth and get the pillows just right and maybe just do one or two hand positions and yeah. It feels good. I am sure there is times that I forget, and I can't fall asleep well I haven't tried Reiki yet. Sometimes throughout the day if there's something that I want to bring a lot of focus to I definitely will use some Reiki to do that. ~Cali

In my life, I use Reiki techniques and meditation techniques every day. I do it sometimes constantly. It's not just a practice. It's a life practice for me. That is how I see it.... I am a morning person. I usually do a meditation, breathing, I do the precepts. I have some other things. Sometimes I will do just areas, or sometimes I'll go through the whole body with the hand positions. When I am resting I will do something, I am sitting someplace and I get a pain I put my hand on it, I breath into it. It's so much and everything has become so much in my life. I just work with my body a lot. ~Amy

I do run energy through my body without putting my hands on my body. I am going to back up and say yes I do do Reiki every day, but it doesn't necessarily mean that I lay down and I put my hands on my knees or some area of my body and I direct Reiki to a particular area of my body. I channel energy primarily through my crown. I bring that energy down through all my chakras just like colored waterfalls, and let it flow out

through my feet. I will also channel energy from both direction where I am bringing energy from the cosmos through my crown from the entire environment through my crown and then I will also channel energy up through my feet through the earth and maintain my connection with the earth. ~Roy

You should do Reiki. I don't do enough on myself. Some Reiki practitioners do it every day on themselves. Morning or night or something and it keeps them balanced. ~Katy

I was enjoined in my class to do daily the self Reiki, which I have done all my life since. Which does not mean that I never forget and there was never a day where I didn't do it, but you know how this is it's your general way of doing this when you can. I do it fifteen minutes or so before I get up and it is very helpful. When you get older you tend to be a little stiff coming out of bed from not moving and it relaxes your muscles so you can immediately move. ~Ginny

One of the things that I have found is that by doing self-Reiki I have never been the person who has been flat on my back in bed as all of these other people have. Do I get the nagging cough yet, but I'm out bucking bails, feeding cows every day. So I am out in the elements but I have not the debilitating levels that other people have..... It's a great feeling I mean why wouldn't you? [do self-Reiki] Some people have coffee and I have Reiki you know. It clear it out so your blood can flow. ~Cindy

### *Self-Care for Specific Health Problems*

While all the Reiki practitioners talked about using Reiki for some kind of self-care from a general health perspective, there were also individuals who spoke about using Reiki for specific health problems. Practitioners viewed Reiki as a specific tool in management of specific health problems and took comfort in knowing they had Reiki available at any time. Practitioners spoke of specific health condition they have managed such as arthritis, fibromyalgia, a lung condition, allergies, heart problems, insomnia, digestion, and aiding the toll of age. This theme demonstrates how Reiki is used to successfully manage a specific health problem.

Well, I try to help myself sleep. That's my health issue right now is I don't sleep very well. So I give Reiki to myself in the middle of the night or right before bed and it is really effective. It really just calms my breath, lengthens my breath, slows my heart rate down, and generally soothes me. That's really nice. ~Bev



My immune system was knocked down. I would get bladder infections all the time. I had allergies; I had gone through the whole ream. I remember this doctor gave me a brown sack full of different samples Claritin, Allegra find which one work for you and I was on allergy pills all the time. Now I take no allergy pills. I don't remember the last time, it was years since I have had a urinary tract infection. I am just a lot healthier. ~Lily

The doctor's say and I'm not owning it so I'm putting it that way. The test indicated that there is a valve in my heart that is supposed to have three flaps and it has two. My mother has this condition and she went and had heart surgery to correct it because it created an aneurism which gave her only three years to live..... I have two good things going for me. One is the Reiki. Two is there is scientific western conventional world techniques that they are developing.... I think I have options to avoid surgery. ~Lily

He [the doctor] found out that I had a very serious lung condition called scardesosis or something I forgot what it's called. There is all kinds of thing you can take for it, but it doesn't make it get better it can make it worse. I have never taken anything for it because of the fact that I never bothered to look it up. I don't want to know. I always take good care of myself, and I figure if I take as good of care of myself as I can, I can't do anything more. In the last eight years since I found out I had it, it's never gotten worse. Which it often times does. I went to a new lung doctor because he retired this old friend of mine, and the new lung doctor looked at my x-rays and chart and everything and he said you can walk around normal and everything? I said yeah. He said you shouldn't be, I shouldn't say that to you. He said I don't know what you are doing, but whatever you are doing don't stop. I think the Reiki and taking care of myself is what's made the difference. I think for that health condition I think Reiki makes all the difference in the world. Certain people that work on me that know about it, who I know purposely work on that with me. Nothing hurts, I can walk 20 miles straight but when I'm going uphill it's a whole different thing. It's made a giant difference in my health I think. ~Nick

A magic of what it does is just about kicking in the para-sympathetic nervous system. You can say oh my gut is just having the hardest time with all this bloating and pain and gas and then I did Reiki and I felt so much better. Part of it is that when you do Reiki you are calming yourself down enough to get out of the sympathetic into the para-sympathetic, which is when you can actually digest well. I think that's a lot of what it does. Help is way to get into that para-sympathetic system as many times a day as I want to use it. Often times that leads to me falling asleep. ~Cali

The fibromyalgia, sometimes I have problems with the arthritis but there again it's usually connected to some emotional mental thing that comes up. Anxiety. it's full of that one. No, I don't do any treatment, but Reiki. ~Amy

I'm losing my teeth you know. I will warn you your teeth usually don't last more than 75 years and I'm 85 now and so they start the tissue becomes soft and they erupt and you have to do something so I have had issues. I had always digestive problems and I would say again I have had a recognition recently and some high blood pressure. Reiki has helped me to be a little bit more creative in the managing of my own problems of my own decline. ~Ginny

### Addressing Doubts

Practitioners mentioned the doubts they had initially surrounding Reiki. Some practitioners had a hard time understanding how it fit into their life and their identity as a professional, others were skeptical of various aspects of Reiki including energy itself. One woman spoke of actually undergoing the attunement doubting Reiki and thinking it was interesting but not for her. It was not until she started practicing Reiki that she found herself understanding its power.

Practitioners found that at first they had a hard time understanding how their role as a Reiki practitioner fit into their roles as professionals, family members, or community members. They mentioned that Reiki has such a large impact on the lives of practitioners it was often difficult to accept. Over time practitioners found, they learned to accept Reiki and the life changes it facilitates. They also found a way to integrate their role as a Reiki practitioner into the other roles within society.

This section will be segmented into two sections. The first section will address the doubts the practitioners had when learning about Reiki, and the second will provide anecdotal proof from the practitioners that validated Reiki, and provides some wonderful insight into the lived experience of practitioners.

When I started to do the Reiki it was sort of like going through adolescents again or going through puberty I couldn't figure out, how does this, who am I, how does that fit in with who I am over here. There is this awkwardness, self-consciousness; do I want to let anybody know that I do this? It is an internal struggle trying to fit it. It's a whole

different way of thinking and looking at things, and looking at your yourself. Over the year you sort of start to process it and it comes together, but it was very difficult to accept, to accept that difference at looking at and conducting your life. ~Lily

So I take and sometimes I would think this is too weird, this is too crazy. I live in this world, but if you say it's bunk then I am saying that I am bunk because I am the source of it. I would have to deny myself. I would tell my husband, because I want him to have every opportunity to reject me too. Then I started telling my children about it, because I want them to know what mother they have. This was my experience, this is what happened. The children are great because they are so open. My husband is like, "I didn't marry this woman but I'm sticking with her". I don't know he just kind of says ok, that's your experience, ok. So then I would work on things at home. ~Lily

I could tell something was happening but I didn't have any experience with this kind of work, in fact honestly I thought it was voodoo. I laughed at this woman because I thought well, before I go and have this surgically done and have my arm lay at my side for the rest of my life maybe I should try this..... It is sort of hard to believe when I listen to myself, it's like gosh is she going to believe that? ~Pam

Now my task is to maybe watch and observe that urge to intellectualize everything, but then let it go. It's just knowing and trusting, it's a little more trust based because it's really interesting. You can still it's like I have seen how wonderful this has affected me and other people, but it's still I just need on some level to just know does this work? How does this work? So, um I don't know I just really try to not address that voice. ~Bev

You know it's funny when I was first doing it, lots of the sending Reiki and stuff didn't really make sense. I still tried to believe it because I taught it. Even in this class that was in here Sunday I even said to them 99% of the time I know Reiki is wonderful and works and the other 1% it could all be coincidence and maybe it's nothing but my mind. If it works it works and if you call it Reiki and it works who cares. You probably shouldn't say that in front of your students that you are not even sure it works, but I did anyway. ~Nick

It's like oh this is what this experience is that I have. It gives you words and a story for it rather than it just being kind of this bizarre thing in you and you always think of yourself as little kooky....That's a lot of things that we talk about at the master level is this is not something you are supposed to accept just on faith and just because of the story you have been told. You accept it because you have tried it out and it works. There is you have anecdotal evidence but evidence nonetheless that this is effective. ~Cali

Just in continuing to work on people and get feedback was very validating. ~Roy

I was not totally, let's put it that way, I don't surrender myself or give myself up to it totally I just went through it, but I found it impressive and so forth. Later on I had some trouble in saying what are you doing there this is a little bit voodoo or whatever. I just thought, it did not deter me from going on and when I was then giving the attunement and doing them myself I was, I didn't just kind of wow people with it, but I talked with them about it. I also talked about the doubts that they might have because like I said I had these doubts myself. I cannot totally explain how this works, like some of the book well this goes in here and comes out there, it is a false scientification of something. ~Ginny

### Anecdotal Proof

The Anecdotal Proof provided by the practitioners was immense. There were many stories of experiences held dear by the practitioners that exemplify the power of Reiki. The practitioners offered the anecdotal stories as a way of validating Reiki for themselves and validating Reiki for others. Often Reiki is met with skepticism, so personal experiences are offered to counter that skepticism further instilling the validation for the practitioner. They may share these experiences with skeptical clients or inquisitors asking about Reiki. Through their doubts and experiences, practitioners were able to find validation. In finding validation many practitioner had a specific experience that lead them to feel validated, others told stories from their experiences.

Practitioners found validation in their Reiki practice through performing Reiki and gaining experiences they would have otherwise never experienced or believed. In doing Reiki, they found validation and a reason to continue practicing Reiki. The anecdotal experiences demonstrate Reiki's essence in a way nothing else could. Practitioners shared stories from their practice to present as validation and anecdotal proof.

Three years ago I went to Costa Rica and we were coming back from visiting a Shaman in Costa Rica and we are in this bus that is falling apart on this dirt road with all this gas and stuff and there is a man standing on the road with a child frantically waving his arms. He get on the bus and he says to the bus driver, "I don't have any money but my daughter

has to go to the clinic”, which we were headed towards. She was playing with a machete and she gashed her thigh open from one side to the other. It was bleeding profusely and she was screaming her head off. The woman sitting next to me, before I could open my mouth said she would pay his fees. So she pays the bus driver and they get on the bus. The little girl, there is 5 or 6 places to sit, she came and sat right next to me and I thought maybe I should offer her some Reiki. I couldn't speak their language. The interpreter our guide could speak in English and his language and I say to him would you ask the father and the little girl if I could just put my hand over her wound and I might be able to help ease some of her pain until she can get to the clinic. You can't say to them, “Oh I can heal this wound up”. So he explains to the father and to the daughter and they both sort of look at me kind of funny and the little girl picks up my hand and puts it on her leg. It was like oh, ok. In about ten minutes she was not crying, not bleeding anymore, and when she got off the bus she threw me a kiss. It was like now isn't that really special. This little girl does not know my language but somehow senses that I might be able to help her and she picks my hand up and sticks it on her leg. The bleeding stopped and she calmed down, which was a really big plus, because she was going to have to have it stitched together because it was cut to the bone. It was interesting. If I had been in another county I probably would have pulled it together, but I thought I probably shouldn't do that. I am just going to put my hand over it and see if I can get her to calm down because I knew she was going to have to have it stitched. ~Pam

Then I went on to Reiki II. During this time period my son had to have his, he needed braces and so to get the braces they had to remove some teeth so they decided to dig down and pull out his wisdom teeth. So they had a couple of them they had to get out of the bone so it was very very painful. I believe I had Reiki II by then and more things like I described had happened. When Paul, he was in high school, had that surgery I put my hand on his jaw. Now, high school guys don't want their mommy and their whole thing is that they are macho and laid back and can handle everything. He was swollen terribly and I just put my hand next to his jaw to give him Reiki and then I was leaned over so it was kind of awkward and something was going on so I moved to go to the kitchen, and he said, “Mom, don't go. It take the pain away”. I thought, wow this is big because he wouldn't say that. He would have no reason to want his mom sitting there holding her hand on his side of his face. That he found that relief. ~Lily

Her [a friend and client] mom got cancer and she loves her mom she is close to her mom. I gently wrote to her and said I would love to work on her and her mom at no cost. She emailed me back about four days later saying I don't think my mom would want something like that. Then about two weeks later, I got an email saying my mom wants the Reiki. She obviously talked to her mom. I worked on her in my office down the hall and then I was working on her mom. I knew something was happening and I looked at her

who's very shy and I said, I kind of motioned for her hands to go to the solar plexus position opposite my hands. I know she is full of strength. I could tell she wasn't excited about it, we had our hands opposite of each other working for about five minutes. Of course when we were done her mom was going crazy with things, that was so wonderful, that was so good. It was kind of neat. Then about a week later I got a thing from the daughter saying my mom went to the doctor two days later and there is absolutely no sign of her cancer. She said it's completely gone. My mom thinks that your Reiki had a whole lot to do with it. I think the Reiki had something to do with it. ~Nick

There is, you have anecdotal evidence, but evidence nonetheless that this is effective. I think a lot of those things have changed. I have had some wacky experiences with my car, like my car alarm and not being able to turn it off and just being totally at wits end and trying reiki on the car. I was at wits end and it worked, which kind of scared me. I have definitely or been working on someone or wow that stereo is too loud and then the stereo turns down and those sort of, that type of concrete hasn't happened for awhile that happened more so my first year or two. I think that was in time that I needed to get that feedback and be like ok this is real it's kind of weird but it's real. I haven't been asking for that dramatic of evidence for awhile I am happy just with the evidence that people are doing better and feeling better and removing blocks. ~Cali

The curiosity it's like ok what is this going to bring to me. The main thing is that emotional, all that stuff. Usually I could work myself up into a real out there thing over this [losing her job]. Just realizing that I had set something in motion and that it's ok. I do relate that to this whole process of getting ready for the class and my own personal growth with it because I asked to be shown. Watch what you ask for you get it. I am being shown that I have come quite a ways in my process and that I am more stable than I used to be. That information is there. I am seeing that with doing the symbols and working with the energy again. My whole desire is just to do this. I don't want to do anything else, but you do have to pay the rent. Sometimes you don't make it yet. ~Amy

It's interesting that you asked that question because a few weeks ago I was working on a patient here and I had a very deep sense that as I was working on her during her first session that she was really going to feel it in her hands. At the end of the session she said oh my god my hands are on fire, they were electrified, I can't explain it, it was the weirdest sensation. I shared with her that I had had this sense that she was really channeling the energy through her hands. Because of that and because of the fact that it's a bit uncommon for anyone to feel it at that level of volume in their hands I suggested that she may want to take a book about Reiki with her and learn more about it. Clearly she had the ability to channel healing energy through her own palm chakras. ~Roy

I was called to the ICU this 38-year-old man almost drowned and he was comatose and they asked me to do Reiki. So, I quietly went in and I was doing reiki, he was comatose

and I did him and I was quietly going out the door and he said, "Thank you, Sweetie!"  
~Katy

Right after that [the Masters level attunement and class] I went with my husband who was kind of a he's a botanist and was exploring the flora of the Bitterroot and I went out with him many times and we went out on a Sunday in the Mountains there and it was rainy and we lost the way. We did not quite know whether this was the road after we found a road or actually we had been on a road where was north or where was south and where we were. I had a compass in the car, and I took the compass and I said no I think this is south and this is north and the compass showed it exactly and my husband said I don't believe that and he took the compass and it was exactly 180 degrees differently and I took the compass again. Five times, we did this and every time it was a 180 degree difference between him and me. I thought what is going on and I said oh I am, and then it turned out that he was right and I was wrong. I was simply so charged that this poor compass was helpless it said ok if you say so. In other words, my energy kind of over road this little instrument where as my husband had kind of the normal energy. But just to show how the electromagnetic energy that you carry in your body mind system can be accelerated through these attunements and things because it was just a day after I had received the Master's attunement. ~Ginny

My husband got sick who has not been sick in 23 years of marriage and I did Reiki on him for an entire hour and was doing hot towels on his feet and on his back and then doing Reiki. Hot towels and then Reiki, hot towels and then Reiki and he was up and ready to rock and roll the next day. So, I think it allows, like I say it's very much about release and releasing those impediments. Things want to hang on to you. It is kind of a barnacle you know. ~ Cindy

### Attunements

Attunements are an integral portion of a Reiki practice. They serve as an initiation of sorts into the Reiki world. There is some amount of secrecy and ceremony involved in the attunements, and as a result it is difficult to fully understand all that is encompassed within the attunement. During the interviews practitioners were asked to describe their experience of an attunement and they were also asked a further probing question as to how they would define an attunement or explain the attunement to someone who was interested in Reiki. These two questions provided a

foundation for understanding the attunement experience and definition. This section is also divided into parts the 1) defining the attunement and 2) personal experiences of the attunements.

Practitioners defined the attunement as an initiation, or baptism. It involves sitting in a quiet place with one's eyes closed and the Reiki Master spending some time in front of them and behind possibly blowing on them or tracing symbols on the palms of their hands. Attunements were described as a resetting of one's grid or a power ceremony expanding one's abilities. The theme held within the definition of the attunements is that they are an initiation of sorts providing the individual with the ability to access energy.

It's an initiation to the craft if you can call it the craft or the practice. Yeah it's just a nice ritual. There's it's just a part of that culture to have the tradition so it's a way of like formalizing the fact that you're here and you are going to be learning these skills and you are part of this group now so it's kind of like a connection to a more global consciousness and also just like a lineage of what that tradition may be. ~Bev

I would say it's like in the Christian church it's kind of like Baptism. In the Christian church it's the way that someone becomes awakened to Christianity or something like that it depend on which branch and religion it is. In Reiki it's the way that you become enlightened so that the knowledge will come from the teacher to the student. That's the way you pass on Reiki is teacher student, teacher student. ~Nick

I explain that I'll have them sitting in a chair in that, we want them to find a quiet space and make sure they are grounded and we have gone through some exercises on how to do that. Make sure that their feet are touching the floor, and I put pillow between the feet and floor if they are not just because we really want to emphasize that grounding. I explain that I will be spending some time in front of them some time behind them. I'm getting my words tangled up, I've been talking for too long. That I'll be moving their hands a little bit, that I'll be blowing on them. I kind of let them know what my behavior is going to be and that this is a quiet time for them that they can invite in their guides or if there is a special grandmother that supported their healing work or whoever it might be to ask them to join in spirit. I have them keep their eyes closed and I ring a bell when we are done and let people slowly come to and talk about the experience. Sometimes people are really fired up after an attunement and they like need a ok, where can I put this? So sometimes we'll go right into some training at that point because they are feeling so full of energy and they want to put it somewhere. ~Cali



An attunement is like something you would get in Egypt or something, this powerful thing. Words are so funny that way and how we have grown to understand things. It is it's a blessing attunement and I tell people that this is healing. You are starting your personal journey in healing and yourself. ~Amy

The attunements are very powerful. I often explain attunements as resetting one's grid or template. We all have a bit of geometry intertwined with our bodies on a celestial and cosmic level and that when we are out of balance or out of tune that getting an attunement really realigns every aspect of ourselves. By that, I mean spiritually, mentally, physically, emotionally. The attunement became very empowering. It was almost as if you had collected bits and pieces of yourself that perhaps had fragmented away over time through whatever traumas or emotional issues one had experienced up to that time in your life. The attunement brings all those fragments back together and makes you feel very whole, they made me feel very whole and empowered and grounded and protected. ~Roy

There is also an understanding or philosophy in Reiki that the attunement really are continually expanding your ability and that the attunement and the energy work the changes that come within the Reiki practitioner themselves happen over extended periods of time, weeks at a time. ~Roy

I often go from what kind of questions they have and who they are and I can say that one strand is that it comes from Japanese culture, which is embedded in Buddhist culture in Chinese medicine in notions of a symbolic thinking about body and medicine and healing. Therefore, it is more formal and systematized than if it were invented in the west. I simply say I went through this because it came through me, to me through this channel the Japanese practice of this and the people who were following it and I followed in it and it was effective. I tell them that I cannot analyze or quite define the affect, but it does help you to yeah to open up your channels. There is no question about it in my mind. That's about that's as far as I go. ~Ginny

### *Receiving Attunements*

All the practitioners interviewed had received more than one attunement and shared their experience regarding the attunement. Practitioners had a more difficult time describing the attunements they received because a great deal of time had passed since their attunements or they had performed so many attunements on others since their own personal experience. The

practitioner's descriptions of the attunements were individual. Practitioners saw colors during the attunement, had visions, found that their dreams became very vivid following the attunement, or felt nothing. The commonality and theme presented through the experiences is that whether they saw colors, or felt nothing they all described a shift in their way of looking at the world and society, and their perspective of life shifted in some way. This theme represented receiving attunements and their facilitation of a shift in the individual.

It's not never been a very profound thing it's really relaxing and nice, and depending upon the energy of the classes it's typically really nice. It's just a time to be quiet and just kind of bask in this communal intention of peace and health. It's never been anything profound. Reiki is never been anything profound to me. I mean besides that in it's subtle charm and power. It's never been that experience of like Oh my God you know. Certainly some people I have worked on have had oh my God that was crazy, that kooky, that was wonderful ,and I felt wow that was really nice and great, but not like levitating, health on the spot, healing type of things, which in my experience isn't what happens. But you know profound is a relative term and it's certainly profound in that is brings you to a quiet place in your own body and in a great way to connect to other people. ~Bev

When I get an attunement for the first two years, because you get the attunement through Reiki I and Reiki II. I wouldn't feel a cotton picking thing. So they gave me an attunement that's nice. What did happen is then when I would go home after attunements my dreams would become vivid. I could remember my dreams. Now I can actually be conscious through an entire meditation and I am more active in it. ~Lily

No. I don't remember much about when I got attuned. I think part of it was because I jumped into Reiki and didn't really quite know what I was getting into and the attunement wasn't explained. So I explain the attunement earlier in the day when I talk about what Reiki and when I talk about what Reiki is I give out the handout from William Rand and I go over it with students. When I actually do the attunement once they have seen the hand positions then at that time and they are all sitting in chairs facing forward I explain it in detail then what it actually is. ~ Nick

I remember I really saw there were this three colors that I used to see very strongly like when people were giving me massages. I had relayed that to the people giving me massage and they were like oh that's St. Michael's blue light or those or really common colors to see during healing. I just remember seeing a ton of those colors while I was receiving my attunement. That definitely communicated to me oh yeah something important is going on. So that I remember with the first one. ~Cali

The first three were awesome. That's the thing, because I could feel them. I knew there was a difference. They were done in a way that was sacred. There again I am sure I have spent many lifetimes doing things that were ritualistic and that ceremony type thing. That really resonated with me. ~Amy

If you were asking me this some years ago I would probably say I feel a lot better, I feel rejuvenated, I feel refreshed, I feel energized, because that was my experience then. Attunements I would describe now more as a shift. They bring one more into alignment with the universe. ~Roy

I will have to tell you, I don't tell many people this but when she was doing the attunement in front of me I saw a red stone relief on a building like you would have in India, you know that, and she said "Get Started". It was so she's just like this and so it was the first thing that was unusual after I got Reiki. The first thing and there are a lot of stories afterwards. ~Katy

I had confidence I just let myself be carried along and nobody told me you have to believe this in order to do it. You just do it and then you start to feel whether or not it is helpful to you. It was helpful to me. Particularly when you learn this in a group of several there is the energy and the expectations and the questions of several people together which is very helpful.... I felt pretty, I felt somewhat more charged with this energy after having done this and also have practiced sending Reiki at a distance. ~Ginny

Because where that balance, I guess what I can liken it to is a dental visit. Where part of your mouth is numb for a really long time and you get home and you don't think about it. Well, part of your brain knows it activates a very very differential in that parietal area of creativity and getting that to integrate you know correctly and well so that you feel back in balance you know it's like ok, this really isn't numb anymore this is now invigorated and lively and I didn't know I was able to have those kinds of accesses. ~Cindy

They actually put their hands on me and helped open all my access to my energy. It's not a deep secret. I'm sure if you went to 100 practitioners you would have 100 different, what actually happens in the attunement. Some people touch the practitioners, some draw symbols over them, some people blow the symbols into their chakras, sometimes they write them on their hands depending on what it is that the person has learned. The important thing is that you are in a relationship and that you two are, you become one in that ceremony. The fact that the Master has full access to his or her energy that allows you to have access to yours. I didn't have access to it 100% of the time like I do now when I did polarity. I think the attunement process is very important. ~Pam

## Sensations During a Reiki Session

The last theme presented by the data involved sensations felt by the practitioners as well as the recipients of Reiki during a Reiki session. Practitioners spoke about their personal experiences as well the experiences of their clients during sessions. The descriptions provide excellent insight into the experience of a Reiki session, and the sensations involved. Practitioners report feeling differences in temperature, sensations of heat in their own body and also reported by the recipient, a shaking in their hands when they perform Reiki, a tingling or tickling sensation, or an overall calmness. The most frequent sensation being heat or temperature differences in the body.

When you work on somebody they will feel heat, the most often feeling is heat from the recipient. Sometimes it's cold sometimes it's kind of a tingly thing. I'll start to feel a pulling that will start to ache even. I'm thinking oh boy. Sometimes I'll get like when you get static electricity that kind of a sharp. When I get really really hot working on somebody sometimes I will take their other hand, I don't feel the heat. I will take their hand and put it on top of my hand, no heat. It's the energy coming through it's not me. When I do work on somebody who is taking a lot of the Reiki energy so a lot of it is running through me though I will actually start to break out in a sweat because it does start to heat my body. It's fun. It's makes you look at the world very differently. ~Lily

My hands started moving. My hands don't move at all when I'm sitting here, but when I'm giving Reiki my hands. Just be quiet for a minute and watch they won't do it now. [He stands behind me and places his hand on my shoulders, I can feel his hands vibrating or shaking a bit on my shoulders as we sit quietly enjoying the moment]. Find the calmness in side yourself. Find the quietness. Many times it's like finding a balanced inside yourself, you know a balanced position. What I'm saying it that my hands when I am sitting normal don't move. ~Nick

I think around that time working on my mom she said I take medicine not to have hot flashes why are you giving them to me? The energy felt like heat for her it was like ohhhh. I was definitely able to work on my family and my grandparents....I think that same trip out one of the neighbor kids was over he's either six or eight right around in there and we I think we kind of checked with his parents to make sure it was ok because I just set up the table and anyone who wanted work I was willing to do. He was funny, he giggled, he said oh it's tickling he just thought it was the funniest thing ever.....I had another woman that had a little 3 year old who definitely wanted to be involved so I was kind of working on both of them. She just loved it she also said it tickled kind of like the

6 year old boy. She lifted up her hands and put her hands on her mom and wondered if that was tickly for her mom. It was just really fun interactions. ~Cali

I'm just doing it and um... if there is something really going on someplace sometimes my whole body will get so hot and I will break out in a sweat. I have had sweat literally dripping off me and I was like hmm this is really interesting. Then I can ask if something has happened. It's normally always validated. There is times when I'm not feeling nothing. That's when learning to trust that it just is... There has been time where my hands have felt ice cold and the person on the table that I am working on says how hot they are. ~Amy

No session is every the same. I went through a period in the last six months where there was a lot of geometric connecting going on during the session. It was almost like I would see dots within the major organs or joints of the individual I was working on. The Reiki session was about connecting dots on linear lines between the dots. That dissipated a couple of months ago. More recently the sessions are about let me see I am going to try to take myself back. Again I don't get too heavily involved in the sessions, but they tend to take on patterns during periods of time and they develop and change. More recently its about even though I may have my hands for instance on the feet of the individual or perhaps the shoulders in my mind's eye I am actually directing the Reiki to a specific organ or area of the body. ~Roy

That is powerful to me when I was taking the Reiki classes how my hands vibrated by doing it and they are doing it right now. I realize it isn't me, I'm a channel and that's why. ~ Katy

You kind of lose a sense of time, you go into another state of consciousness I think that is quite true. It's not a trance or something it's almost like an over-awareness not an under-awareness of what is going on. You feel the other, more things about the other person's body. ~Ginny

For instance, once there was a little girl a mother who didn't want to leave the girls at home when she came, and she had some books, but I said lets include her in some way instead of having her sit in another room and read a book. So I instructed them and we want to do this beaming which means you use your hands in order to exude energy in a direction. When the girl was not there I said I want her to stand or sit I forgot which and we want to go first all together and direct the energy towards the feet to the chakras, then towards the knees, then towards the belly, then towards the heart, then towards the throat, then towards the head. I kind of directed them with my eyes and when she came they did this and the little girl said, "Oh my feet, my feet, are tingling." Then said, "Oh my knees are tingling," and it was so fun that she felt. I hadn't said anything we just did it, that it

worked that way. That the sending and I also did it in order to show them that the group energy is very strong. ~Ginny

I don't shake. Some people shake, sometimes my legs shake you know they will quiver. I have felt temperature differences and I have had people say wow your hands feel really hot. I don't feel it, but they feel because that's what they are needing to draw. ~ Cindy

### **Summary of Findings**

Throughout the nine themes presented, there was a large overarching theme that weaved throughout the interviews and the data collected. Practitioners saw Reiki as a tool for health in primary prevention. Practitioners do not just utilize Reiki after they have developed the symptoms of a cold or illness, they use Reiki as a tool for preventing disease and illness before it starts. Reiki is a tool for self-care that focused on maintaining balance and health to prevent disease and illness from ever entering the body. In addition, Reiki was seen as a medical model, for self-healing and prevention that is unlike the model of disease and illness biomedicine utilizes. Reiki presents a paradigm for looking at health integrating the mental, physical, spiritual, and emotional aspects of the body. Reiki provides a model for health and healing that is unique to the individual that can evolve and grow over time, that provides for self-care, and primary prevention.

## **CHAPTER V**

### **DISCUSSION**

The discussion of the results will be triangulated based on the themes that emerged from the interviews, the literature and observations of the researcher while conducting this research. The discussion will address the following areas: 1) the textural description of the data; 2) the structural description of the data; 3) a review of the literature in context of the themes presented; 4) Reiki's grounding in Chinese medicine; 5) bringing Eastern philosophy to the Western world; 6) implications for Health Promotion; 7) areas of current use for Reiki; 8) conclusions; 9) suggestions for further research.

#### **Textural Description of the Data**

Textural description is defined as a report of the content analysis reflecting “what” was experienced by the participants concerning the phenomenon (Creswell, 1998). The textural description demonstrates the essence of the phenomenon as it relates to the events experienced by practitioners. The textural description is a summary of the data that emerged in the themes. Overall, Reiki practitioners generally became interested in Reiki because they were curious after receiving Reiki, they were encouraged to take a Reiki class by a friend, or they learned Reiki as a tool in their massage practice. Practitioners did not expect Reiki to have a profound effect on their lives or their healing practices. However, the practitioner's experiences demonstrated that they experienced healing in all aspects of their life; mental, physical, emotional and spiritual. They also found it easier to be in the world, in that they were more relaxed, more open to change, and accepting and aware of personal growth and change. Practitioners experienced Reiki as a very positive influence in their life and the lives of others around them. As a result, their

definitions of health shifted and evolved. Practitioner's views of health evolved to encompass mental, physical, emotional, and spiritual aspects of the body and world.

### **Structural Description of the Data**

Structural description is defined as report of the content analysis reflecting “how” participants experienced the particular phenomenon (Creswell, 1998). The structural description demonstrates the essence of a phenomenon by examining practitioners interpretations of specific events. The structural description is also designed to provide an summary of the participants experiences, which emerged through the themes. Overall, participants experienced Reiki through Reiki sessions, events in their own life, and experiences of others relayed back to them. Practitioners experienced being a conduit or facilitator for the life force energy as it worked through them into the recipient. They experienced healing within themselves both physically, mentally, spiritually, and emotionally. They also experienced healing in others. Practitioners frequently experienced Reiki as heat, temperature differences, or a sense of balance or imbalance within the body. Participants experienced a heightened sense of intuition as they gathered experience with Reiki. Reiki heightened practitioner's intuitions, which lead to increased awareness of themselves and others.

### **Results and Literature**

It has been noted that the literature available regarding Reiki is insufficient. Although a great amount of research is still needed, the data that exists does reveal some important findings. The current literature is predominantly quantitative, which makes it more difficult to compare considering the qualitative nature of this study. Vitale (2007) points out that “the field of energy



does not readily lend itself to traditional scientific analysis or strictly linear research models” (p.168). Although Reiki is difficult to study some similarities between the current research literature and this study can be seen.

The literature and the results of this study were similar in several areas. Both found Reiki helpful in the reduction of anxiety and stress for individuals. Both also found that Reiki was useful in increasing an individual’s sense of awareness, relaxation, and Reiki was integral in fostering the relationship between mind, body and spirit. Past research also reported practitioners felt more calm and at ease while practicing Reiki or during a Reiki session. This was found to be true in this study as well. Practitioners reported feeling, calm, and relaxed after conducting a Reiki session, and noted that giving Reiki was a very positive experience for practitioners as well as recipients. In addition, spirituality, increased self-care, healing presence, and increased personal awareness were all outcomes of Reiki and performing Reiki that were shared by this study and past research. The commonalities between this study and the Reiki literature are discussed further in the paragraphs below.

Engebretson and Wardell (2001) & Witte and Dundes (1988) reported Reiki contributed to a significant reduction of anxiety and stress. Practitioners in this study also mentioned this. Lily spoke specifically about Reiki’s contribution to her ability to deal with stress.

It also helps deal with stress. Again, I am an attorney, a mother, a wife, stress is there. It very much helps you deal with stress so much better. You are able to be more in control so that people aren’t able to stampede you, and when they relate to you.”

Practitioners spoke about increased relaxation and decreased stress throughout the interviews.

This phenomena was represented most in the theme “Personal Growth and Change”.

Practitioners found that they were able to get quiet quicker, and they seem more relaxed about life and how they approached stressful situations in their life. Pam spoke directly about stress

reduction and quieting herself, “It feels like I can get quiet quicker, things don’t upset me as easy as they might of.”

In their second study, Engebretson and Wardell (2002) found that Reiki was related to an increased sense of awareness, lead to increased relaxation and clarity and lead to an integration of mind, body and spirit. These were all aspects of Reiki that were represented in the interviews conducted by this study. The theme “Personal Growth and Change” directly support Engebretson and Wardell’s (2002) findings. Practitioners felt more integrated as a whole, and had more clarity as they proceeded through their life. In addition, practitioners mentioned they had increased awareness of their own intuition. They allowed intuition to guide them through a Reiki session, and had an increased awareness of the person they were performing Reiki on. Ginny spoke of the increased awareness she experienced through performing Reiki,

You feel more connected to other people because you feel connected on the energetic and the “subtle” level. It opens you up in terms of interests in others, dialoguing with others, being, and listening a little better to that which is not to explicitly said to something more, that’s in the back of people’s minds but they may not articulate.

In addition, the integration of the mind, body and spirit was ever-present throughout the interviews with Reiki practitioners in this study. Practitioners mentioned mind, body and spirit in several different contexts, but it was highlighted particularly well when practitioners shared their definitions of health. Health defined by practitioners was not simply the absence of disease or lack of ailments. The definition of health went well beyond that of just one aspect of the body. The increased awareness of and integration of mind, body, and spirit was present throughout the interviews. Balance became a representation of the balance between mind, body, and spirit. Practitioners used balance to facilitate their definitions of health, and in doing so they described

the integration of mind, body, and spirit in that balance. Roy said this about health and balance and the relationship between mind, body, and spirit,

Health is not so much being one hundred percent physically healthy. I think as I age I have come to understand that health doesn't mean that you don't have a little ache here or there or that you are not going to have a bad day or that the universe is not going to throw some issue or obstacle at you that maybe at the moment seems like an overwhelming hurdle. Those things come and that is part of life and that's part of our soul development. Health to me means maintain a state of balance through that process.

Whelan and Wishnia (2003) conducted a phenomenological study of nurses who were also Reiki practitioners. This study was the most similar to the study at hand, and also presented some similar results. Whelan and Wishnia (2003) interviewed eight nurses who were also Reiki practitioners and then analyzed themes from the qualitative data. One of their predominant themes was the benefits received by the practitioner. Practitioners in the Whelan and Wishnia (2003) study reported they felt more calm and relaxed after practicing Reiki. This was also a theme presented by Reiki practitioners in this study. Practitioners found that after performing Reiki they often felt more calm, relaxed or at peace with themselves and the world. This was clearly represented in the "Benefits to the Practitioner" sub-theme of the "Practitioner as a Facilitator Conduit" theme. Practitioners commented directly about how they felt after giving a Reiki session. Bev said, "I never feel drained. I feel nice, relaxed". The increased sense of awareness and feeling calm and relaxation after a session may be related. Ginny stated, "I feel relaxation in terms of tingling or relaxing of muscles. I sometimes also get the sense of the other person in a very general sense; you know of his or her problems. I am kind of sort of drawn into his or her intimate world without talking about it."

The similarities between Brathovde's (2006) study and the interviews with practitioners in this study are important to note. Brathovde conducted a study involving ten health care

providers including nurses, social workers, and students studying to be nurses' pre and post Reiki training. Participants completed a survey pre; post Reiki training designed to evaluate their self-assurance in care giving, and then participated in 30-minute in-depth interviews three months after the Reiki training. The themes presented in Brathovde's research were as follows: 1) spirituality; 2) increased self-care and caring for others; 3) healing presence; 4) increased personal awareness. These themes highlight several aspects of the themes presented in this research. Although spirituality was not presented as a theme in this research, it was included in the concept of health. Reiki practitioners see health and balance as inclusive of the mental body, physical body, spiritual body, and emotional body. The concept of health is not limited. Trust and faith in Reiki that it will go where it is needed is integral. In addition, Reiki helped practitioners create a construct for looking at the world that involves spirituality. Bev described her relationship with Reiki and her trust in its power,

It's just you know for it's just, it stands for like as I mentioned before it's just this working analogy. Just too kind of trust something and let it, just kind of let it be, rather than being feeling like I need to control it or be controlled by it. Just let it be what it is and just feel gratitude for it in my life.

Reiki provides an avenue for looking at the world in a different way. Through that different approach, an element of spirituality is integrated. Amy described this relationship, "Reiki is my life. It... I could get emotional on this [beings to tear up and cry]. It gave me back myself [through tears] and the truth of who I am and who we all are." Spirituality's relationship with Reiki is an integral part of Reiki and the practice of Reiki.

Increased self-care was also presented through the interviews. Practitioners use Reiki as a tool for self-care. They would not have this tool had they not gone through the Reiki training. Reiki becomes a method for caring for themselves and family members that is outside of

traditional biomedicine, but is effective for Reiki practitioners. Practitioners used Reiki to help facilitate healing of specific personal health conditions such as insomnia, arthritis, fibromyalgia, heart conditions, or lung conditions. The sub-theme “Self-Care for Specific Health Conditions” demonstrates this extensively. In addition, practitioners utilized Reiki as preventative care, to keep themselves in balance, and prevent themselves from getting to the point of a serious health condition. Pam explained how she utilized Reiki for preventative care, “at any point if I feel like something is off in my body I can immediately go to the self healing place. Whether I can actually put my hands on my body or not. It is a state of experience in me that can be called up at any moment. I don’t let things escalate.”

The spiritual aspect and the prevention aspect of Reiki are then combined to comprise the life practice that Reiki was for many. Reiki was engrained in the lives of practitioners. So much so practitioners were sometimes unaware of when they are or are not using Reiki. Reiki became a way of looking at the world, of way of living in the world, and a tool for health. Amy demonstrated the blending of Reiki in the practitioner’s life. Amy said, “I do it sometimes constantly. It’s not just a practice. It’s a life practice for me.” Results of this study and the literature indicate that Reiki was a life practice for several practitioners. Practitioners in both the interview conducted in this study and Brathovde’s (2006) study mention their awareness of Reiki as a holistic lifestyle. Brathovde’s participant commented, “Reiki has been helpful for me –has made me aware of holistic healing and lifestyle. Reiki is part of the window that has been opening for me. It’s been a positive experience” (Brathovde, 2006, p.100). These both demonstrate similarities that Reiki is an evolving life practice for practitioners that meld all aspects of health into balance.

Finally, Brathovde (2006) also found healing presence and increased personal awareness was present among practitioners. These characteristics were also present in the current study on practitioners in the Missoula area. Practitioners spoke of immense personal growth and healing presence they felt in their own lives and noticed in the lives of others. Pam had this to say, “it’s deeper in every aspect of my life. It feels deeper in my body, it feels deeper in my mental-emotional state, and definitely in my spiritual practice. It feels like I can get quiet quicker, things don’t upset me as easy as they might of.” The healing presence of Reiki was deep within all elements of a practitioner’s life, and their awareness of that healing presence grew as their Reiki practice evolved. Bev expressed her personal growth that occurred through Reiki, “that’s what Reiki is so it’s a nice analogy for my own I guess spiritual growth my own growth as a person. It’s just very timely as things seem to be like that.” Nick spoke about the relationship between healing and taking care of oneself, and being aware of the healing one needs. His comment integrates the four themes presented by Brathovde (2006) that Reiki is way of looking at the world and taking care of oneself that everyone has access to, but awareness must be brought to healing and personal awareness before chance can occur. Nick had this to say,

Things started changing a lot with the way I felt and the way I treated people..... I also think I really do believe that we could all live to be old and healthy, but to do so we really need to take care of ourselves in certain ways. I really believe that strongly. I think Reiki makes a big difference in helping us open up so we know our wisdom. If we know our wisdom then we’ve got to take care of ourselves because our wisdom is so much strong. Part of it is opening up and seeing what we can do to take care of ourselves and so forth... The more I do the more I understand why I’m here, why we’re here, and why this happens and all that happens.

## Chinese Medicine

Reiki is a different approach to looking at health and healing. Reiki is not only a healing paradigm, but also a life practice that includes all elements of health; mental, physical, emotional and spiritual. Reiki can be used as a healing tool to reduce anxiety, stress, and increase awareness of one's own body and others. In addition, Reiki provides a way of looking at the world that is more peaceful, trusting, and faith based. Reiki is a personal journey as well as a paradigm grounded in Chinese Medicine. The Eastern philosophies of Chinese Medicine melds with the precepts and philosophy behind Reiki. According to Scott (1985) the developer of health kinesiology, Eastern teaching strives to teach individuals to gain personal, and spiritual mastery. This was reflected in the experiences of Reiki practitioners. Reiki practitioners interviewed for this study believed that practicing Reiki incited a great deal of personal healing and growth. They spoke of healing themselves before they began to work on others. Practitioners also noted that Reiki allowed them to see and have control over their own personal journey, evolution, and health. Amy spoke to the infusion of Reiki in her life,

It's not the outside things that have changed so much as here [points to herself in the center of her chest]. This is what's important to me [points to herself again] anyway because it does affect the outside but it's the inside and how to handle and how to make those choices and awareness's. I absolutely credit Reiki for that.

Scott (1985) also examined the differences in viewpoints between the Eastern world and the Western world. Scott (1985) suggested that the difference between East and West exists in their view of the physical body. Scott (1985) writes, "In the East, mastering the environment begins with mastering one's own body and mind. In the West, master the environment begins with the world outside out own skin" (p.2). Participants in this research study expressed their

experiences in shifting from a Western perspective having grown up in the United States, to an Eastern perspective. This could explain why Reiki became a different way of looking at the world for many practitioners, or provided them with a new context for looking at the world and universe. Scott (1985) also suggested that as an individual continues their own personal spiritual journey and begins to develop and transform their spiritual self, they are capable of great healing and even miracles. In addition, as individuals become more open minded, and tolerant of varying beliefs they are able to be disrupted less and are less stressed or upset by daily events. This concept and the idea of Reiki as it applies to healing was discussed by Rick,

Reiki has shown me over the last nine years that again if you approach someone who is seeking your assistance, who is reaching out to you from a state of despair or a state of dis-ease of imbalance and in that spirit of trust and healing with your intent you work with one another in a very spiritual and powerful tradition that you can manifest great things. That healings do occur.

Placing oneself inside the framework and philosophy of Reiki allowed individuals to be comfortable with themselves and their place in the world as well. Daily events were less bothersome and as a result they spend less time worrying about stressful events. Ginny spoke about being comfortable in her life where she was and how Reiki helped her to accept that.

Ginny said,

To recognize Reiki has helped me to recognize who I am much better. For instance, I don't travel anymore because it's too much and I don't like the airports and all this. But I'm fine with it I'm not sobbing. I'm just fine with where I am and who I am.



## **Bringing Eastern Philosophy to the Western World**

Streefland (2001) suggested, “Biomedicine has established and increased in global dominance” (p. 161). The dominance of biomedicine and its medicalized paradigm has been well established since the nineteenth century. As biomedicine has begun to dominate the Western world it has also begun to influence individual perceptions of other health related sphere such as nutrition, living environment, spending leisure time, and general hygiene (Streefland, 2001). The biomedical model has been criticized recently for its negative definition of health, which is known to be the absence of physiologically defined disease (Klimenko, Julliard, Lu, & Song, 2006).

As a result of the biomedical emphasis on physiological disease, there is an emphasis on laboratory results, technical solutions, and specific diseases. “Because of this definition, the biomedical model does not call sufficient attention to mental, social, spiritual, and environmental factors and lacks an emphasis on health promotion” (Klimenko, et al., 2006, p.259). As the biomedical paradigm became more and more prevalent, other medical systems such as Reiki, homeopathy, and other medical models began to be experienced not as contesting explanations, but as additional possibilities for coping with danger and risk (Streefland, 2001). “Positive definitions of health are important to some of the major systems of Complementary and Alternative Healthcare (CAH). These definitions combine the physical, mental, and spiritual aspects of the human being” (Julliard, Klimenko, & Jacob, 2006, p.265). According to this study Reiki provides a definition of health and healing that encompasses all aspects of the human being.

Although several different paradigms for health and healing exist, most health practitioners and providers focus their view of health according to a single model (Klimenko, et

al., 2006). With increased use of Complementary and Alternative Medicine and the increased rate at which information is shared, it is important that practitioners are knowledgeable, or have some background in several different paradigms of health. This allows providers to provide the highest standard of care, and gain understanding for their patient's medical model(s). Because individuals are beginning to expand their view of health, and their medical models are beginning to expand, biomedicine may need to expand its view as well.

Slowly complementary and alternative medicine has worked its way back into the eye of the Western world. Complementary and Alternative Medicine use is on the rise. Use increased between 30 and 40 percent in the 1990's and its alternatives continue to be utilized (Engebretson, 2002). If individuals are already using Complementary and Alternative Medicine while utilizing biomedicine, an important question facing the nation at this time is how can the United States utilize both medical paradigms to the fullest? Would the biomedical paradigm benefit from Reiki if it were integrated? Is it possible to integrate Reiki into the biomedical paradigm? How could this be done? How can we utilize health promotion to integrate the Eastern paradigm and include Reiki within with the biomedical model?

### **Implication for Health Promotion**

Health Promotion focuses on primary prevention. Primary prevention emphasizes interventions to avert disease, illness, injury or deterioration of health (McKenzie, Neiger, Smeltzer, 2005). Reiki, and other Complementary and Alternative Medicines focus both on primary and secondary prevention (Klimenko, et al., 2006). Reiki can be used for both primary and secondary prevention, but is best served by its model of healing when it focuses on primary

prevention. One of the greatest aspects of Reiki revealed by research and the results of this study is Reiki's limitless use for self-care and healing. Reiki can be utilized by the individual at any time and in any location to check in with the body, mind and spirit and correct imbalances. This unique feature makes Reiki an effective strategy for Health Promotion. Reiki seeks to heal individuals before disease or illness can escalate, particularly healing the self.

The experiences of Reiki practitioners and research demonstrate that Reiki is effective, and can be used to promote primary prevention, including mental, physical, spiritual, and emotional growth. The key is to utilize Reiki and educate individuals about Reiki as a primary prevention tool. Research has shown that Reiki is a tool for healing and primary prevention, but this knowledge should be shared with members of society.

The assumptions of Health Promotion can be utilized to implement the use of Reiki as primary prevention in various populations. These assumptions will be a great asset in shifting the currently dominant paradigm of biomedicine held by the citizens of the United States to a more holistic prevention based paradigm including Reiki and other Complementary and Alternative Medicines. Health Promotion should be utilized to shift the dominant ideals currently held by individuals based on the concepts of biomedicine. Biomedicine is based primarily on secondary and tertiary prevention. Alternatively, Reiki utilizes primary prevention. Reiki embraces an Eastern philosophy that is grounded in knowing oneself, and this primary approach would prevent a large amount of disease and illness before it became a medical concern. Reiki also provides a holistic view of mental, physical, emotional, and spiritual elements as they apply to health. The assumptions of Health Promotion include:

- Health status can be changed (McKenzie, Neiger, & Smeltzer, 2005).

- “Health and disease are determined by dynamic interactions among biological, psychological, behavioral, and social factors” (Pellmar, Brant, Baird 2002, p.217)
- Disease occurrence theories and principles can be understood (Bates & Winder, 1984)
- Appropriate prevention strategies can be developed to deal with unidentified health problems (Bates & Winder, 1984)
- “Behavior can be changed and those changes can influence health” (Pellmar et al., 2002, p13).
- “Individual behavior, family interactions, community and workplace relationships and resources, and public policy all contribute to health and influence behavior change” (Pellmar, et al., 2002, 217).
- “Initiating and maintaining a behavior change is difficult” (Pellmar et al., 2002, p. 217).
- Individual responsibility should not be viewed as victim blaming (McKenzie, Neiger, & Smeltzer, 2005).
- For health behavior change to be permanent, an individual must be motivated and ready to change (McKenzie, Neiger, & Smeltzer, 2005).

These principles are useful when taking on paradigm shifts and evaluating medical models.

Medical models should not only be examined, but individuals should be educated and empowered to take responsibility for their own health. Currently the biomedical model places the skills and knowledge of the body and health in the hands of health practitioners. Reiki allows individuals to gain awareness of their own body and personal health, and gives the individual themselves the knowledge and skills to be an active participants in their own health and personal growth. This is the goal of health promotion to place health as the individual’s responsibility and empower individuals to take charge of their own health.

The Health Belief Model would be an efficient model for executing Reiki as a strategy for health. The shift from secondary prevention in the United States to primary prevention in the United States begins with Health Behavior Theory such as the Health Belief Model. This model relies on the premise that an individual’s beliefs about engaging in a behavior are the most important determinant of his or her behavior (Nutbeam & Harris, 1999). Essentially individuals must believe that they are able to be active participants in their own health and healthcare

process. They must move from passive participants in secondary prevention to active participants in primary prevention.

The Health Belief Model addresses four main elements. The four elements are as follows (Nutbeam & Harris, 1999):

1. Perceived Susceptibility
2. Perceived Severity
3. Perceived Benefits of Preventative Action
4. Perceived Barriers to Taking Preventative Action

Perceived susceptibility addresses an individual's belief that they are susceptible to a given health problem. Perceived severity refers to a given individual's belief that a given health problem will have serious health consequences in their life. Perceived Benefits refers to an individual's belief that if they engage in the recommended health behavior they will benefit. The perceived barriers to taking preventative action are the barriers in place that prohibit the individual from engaging in the preventative behavior. It is crucial that individuals believe that the benefits of engaging in the given health behavior outweigh the barriers to engaging in the given health behavior. There are also several modifying factors intrinsic to the model that influences the individual's choice to engage in a given behavior. These modifying factors include cues to action, demographics, socio-psychological variables, and educational attainment (Nutbeam & Harris, 1999).

With Reiki as the strategy and the Health Belief Model as the model for educating the public, it is likely that Reiki could become a very recognized and widespread tool for healing and self-care. For example, a health educator could attend a health fair and educate individuals about

their risks of developing disease and illness and the severity of their risk given their age, environment, stress level, current health problems, etc. This would address both the perceived susceptibility and perceived severity elements of the model. Subsequently the educator could introduce individuals to strategies for reducing their risks for developing disease including Reiki. Reiki is a low cost, highly effective strategy for reduction of stress, and anxiety that provides for personal growth and change, and allows individuals to take control of their own health. Through Reiki, individuals are able to take charge of their health and engage in self-Reiki whenever they deem it necessary. This would address the benefits to taking action portion of the model. Then the educator could address barriers specific to the individual that may prevent the individual from engaging in Reiki or participating in Reiki training. Barriers to utilizing this model as a strategy for Reiki care are addressed in the following paragraphs.

With new paradigms and models for examining health and healing there is bound to be resistance and barriers. Limiting and minimizing barriers is the goal of the health educator. Reiki practitioners currently serve as their own informal educational network. They pass on healing attunements, and the history and background of Reiki in small weekend classes. Because of the informal network that exists there is a number of Reiki practitioners throughout the United States. Reiki is affordable, can be used to maintain overall general health, as well as reduce anxiety, stress, and reduce pain. The many benefits of Reiki are still unknown as research is yet to be done on the endless possibilities for the use of Reiki.

Based on current research it is likely that individuals are likely to believe that they are susceptible to common diseases and illness. This study indicates that individuals believed they were susceptible to disease and illness, which is why they continued to pursue Reiki and other forms of Complementary and Alternative Health. The increased use of Complementary and

Alternative Medicine suggests that individuals in the United States are searching for and utilizing many different avenues to supplement the use of biomedicine, and alleviate disease and illness in a more holistic way (Klimenko, Julliar, & Song, 2006). The belief that individuals are susceptible to disease and illness is an integral part of American culture. The presence of institutions like the Center for Disease Control, the World Health Organization, and the American Medical Association suggest that the United States is concerned about disease and that Americans believe they are susceptible.

The perceived severity of disease and illness is a more difficult issue. The perceived severity of disease and illness varies with each individual depending on family history, experience, and their own personal beliefs. Although, severity is individual the “Journal of the American Medical Association” (JAMA) revealed that the majority of patients choosing alternative medicine do so largely because these approaches are more aligned with “their own values, beliefs, and philosophical orientation toward health and life” (Gaudet, 1998). There is evidence that individuals are searching for a medical model that is in alignment with their personal beliefs. Meaning they must perceive the severity of disease and illness to be reasonably high.

The benefits of Reiki as a mainstream “medical” practice would be numerous. Individuals would be capable of performing Reiki on themselves and others. This would provide parents with an immediate tool to help a child in pain, calm a nervous or hysterical child, reduce pain, and have increased coping skills for dealing with family problems and situations. Individuals would be able to work on themselves reducing stress and anxiety, providing an direct outlet from work, family or situational stresses. In addition, the cost of learning Reiki is approximately the cost of two visits to a health care provider. Individuals may be able to prevent

illness and disease before it starts; allowing them to visit hospitals and health care centers less. Reiki can be learned by anyone of any age or demographic. It is not limited to adults or members of a particular social class. Reiki can be learned by children, and adults, men and women and members of all racial groups, and socioeconomic status. Reiki trainings are short and can usually be completed in a weekend and do not require a large amount of knowledge about health or other related topics. Most Reiki learning is experiential, and does not require an affinity for academics.

The main hindrance would be helping individuals to believe that practicing Reiki is beneficial. This may be one of the largest obstacles that exist within the Health Belief Model in terms of acceptance of Reiki as a primary prevention tool. Helping individuals to understand what Reiki is, how it works, and that it can be beneficial in a number of areas will be difficult. The greatest way to achieve awareness is to increase access to Reiki for individuals. Reiki practitioners could host introductory Reiki sessions or classes, and would be an integral part of creating Reiki awareness and belief in Reiki. Experiencing Reiki is the best way to understand the power and impact Reiki has. Reiki practitioners could offer free Reiki demonstrations at health fairs in conjunction with the health educator, or the health educator could be a Reiki practitioner and allow individuals to participate in mini-sessions while assessing their risks.

Awareness is the key to belief in Reiki. Individuals within the general population should be exposed to Reiki through media, health fairs, and other means of communication. Exposure would create curiosity, and may lead more individuals to try a Reiki session. Experiencing Reiki may lead to increased understanding and ultimately belief in Reiki as a healing practice.



The barriers to utilizing Reiki as a powerful health tool may include skepticism, lack of belief, lack of inferential research or funding. Many individuals are skeptical that Reiki is effective or may be slightly confused by how it works. “There is no agreed upon theory for how Reiki might work, and its mechanism of action is still unknown” (Miles & Gala, 2003, p.65). This fuels skepticism by those who say it cannot be effective because it lacks a biological mechanism of action. The concepts underlying Reiki is grounded in the study of physics, and is also grounded in the explanation and philosophy of Chinese medicine (Miles & Gala, 2003). The lack of belief is a large barrier, which is why health education via the Health Belief Model is of the utmost importance. In this study, practitioners experienced their own levels of disbelief and then through experiences in practicing Reiki were able to accept Reiki and its effectiveness without question. Fostering a medical model that is inclusive all of all parts of the body and includes a spiritual element may help to overcome the barrier of doubt and disbelief.

### **Areas of Current Use for Reiki**

Although Reiki was first used by individuals at home as a tool for healing it is now increasing in use in medical settings throughout the nation. Reiki is being has been integrated with hospice care, emergency rooms, psychiatric settings, operating rooms, nursing homes, pediatrics, rehabilitation, family practice centers, obstetrics, gynecology, and neonatal care (Miles & Gala, 2003). It has also been used for treatment and care of various diseases and illnesses including, HIV/AIDS, cancer, autism, fatigue syndrome, and organ transplantation (Miles & Gala, 2003). The context in which Reiki can be used for a healing tool is vast. Various centers throughout the nation utilize Reiki in their health care facilities including Wilcox Memorial Hospital in Lihue, Kauai, Hawaii, Mid-Columbia Medical Center in The Dalles Oregon, Portsmouth Regional

Hospital in Portsmouth New Hampshire, and George Washington University Hospital in Washington D.C. (Miles & Gala, 2003). Several other hospitals provide Reiki treatments as an integrated therapy throughout the United States.

Although the methods for integration of Reiki or offering Reiki are not standardized, and there is little information was found about the effectiveness of Reiki in medical settings, or how successful the integration of Reiki has been for the medical centers. According to Miles & Gala (2003), there are currently three tiers of Reiki practice, which include:

- Individuals who practice Reiki on themselves friends, and family
- Licensed or unlicensed health care professionals who either offer a full Reiki treatment or integrate Reiki with another modality such as massage, or a physician using Reiki to relax a patient before an exam
- Hospital affiliated and community based programs offering Reiki treatment and Reiki training.

The lack of a large standardized body of research and literature make it difficult to integrate Reiki into clinical care. Reiki is currently being incorporated into clinical care in three ways according to Miles & Gala (2003):

- Medical personnel and health care providers are learning Reiki I and utilizing it for self-care, and integrating Reiki as comforting touch within routine medical care.
- Reiki practitioners are working within clinical settings offering Reiki treatments to patients and staff
- Hospital-based education programs are training patients, family members, and caregivers in Reiki I for use on patients and self-care.

The integration of Reiki into a clinical setting is difficult. There is a lack of standardized training procedures, and professional standards for Reiki practitioners. Additionally the different levels create confusion because Reiki I and II practitioners can perform Reiki in a clinical setting, but are unable to teach patients, or staff (Miles & Gala, 2003). Only Reiki Masters are qualified to teach Reiki and Master's with a great amount of experience are preferred for

trainings. This makes trainings more difficult, and makes for further confusion in the clinical setting (Miles & Gala, 2003).

Reiki is on the forefront of integration for clinical settings, and various other health arenas. The key is to integrate Reiki using a standardized method, or a standard of care that both Reiki practitioners and medical professionals and administrators can agree upon. Health educators could also play a role here in educating patients, practitioners, and medical professionals about Reiki and its possible benefits. At this time Reiki remains an inexpensive therapy that can reduce the pain and suffering of patients in many instances.

### **Conclusions**

Reiki was found to be a positive influence in the lives of Reiki practitioners that resulted in positive personal growth and change. Practitioners experienced healing mentally, physically, spiritually and emotionally within themselves and by recipients.. This resulted in an increased awareness of the health and its meaning as well as the strive for balance within all parts of the body. Practitioners experienced increased intuition, and reported feeling heat, temperature differences, and an increased sense of relaxation and awareness during and after a Reiki session. Decreased stress and anxiety as well as an increased sense of mind, body and spirit were consistent with findings in the literature. Most present was the impact self-care had on practitioners. Self-care allowed practitioners to experience personal growth, which lead to the adoption of new models of healing and perspectives for looking at the world.

Reiki and self-care is grounded in the ideology of Chinese medicine. Reiki provides a tool for Eastern philosophies to meet the Western biomedical model. One avenue for presenting

Reiki as a strategy for self-care is through Health Behavior Theory such as the Health Belief Model. Health Promotion should utilize the Health Belief Model, to educate society about the benefits of Reiki and its role in primary prevention. Through Reiki, healing in the United States could shift from a model of secondary and tertiary care based in biomedicine to a model including primary prevention and integrative healing.

### **Suggestions for Further Research**

The need for further research is great. Further qualitative and quantitative research should be conducted to establish a foundation for Reiki research. It's important to understand Reiki from all aspects of its purpose, intent, effects, and multiple uses. Research is needed in nearly every area of Reiki. Research is needed to develop a theory behind the mechanism of action in terms of what makes Reiki work, and how it can be grounded in the physical sciences (Miles & Gala, 2003). In addition, more research should be conducted on the element of mind, body, spirit connections, to see how that relationship develops over time, is viewed by individuals, and also how it may enhance a person's growth or change.

With this study as a foundation, further research should be conducted on Reiki practitioners. Larger scale research should be conducted at the state and national levels to identify themes and gain a broad scope of understanding for Reiki throughout the nation. In addition, further research on self-care and its impact upon Reiki practitioners should be conducted. Research on integration of Reiki into primary prevention programs, and secondary prevention programs should be conducted. How are medical models affecting patient care? With more individuals utilizing complementary and alternative medicine are patients putting themselves at risk by not disclosing alternative healing methods?

Research should also focus on health practitioner's definitions of health and medical models. How do Reiki practitioners ideas of health compare to health ideals of other practitioners such as medical doctors, cranial sacral therapist, acupuncturist, etc. Are there similarities or differences that could be influential in each model? How do individuals construct their ideas of health? Does balance play a part in health for all types of individuals including Reiki practitioners? This study also found that Reiki resulted in decreased stress and anxiety. Research could be conducted on other stress reduction factors and how they can be utilized. This bring up the question, do practitioners with lower stress levels have a more holistic view of health? Or do they experience more extreme healing reactions?

There is a great deal of research that can be conducted in the field of Reiki both quantitatively and qualitatively. Both are important for further development and understanding of Reiki and the elements that surround it. Practitioners are just one branch of a very large tree of potential research in this area. Research is needed essentially in all areas of Reiki to provide a deep understanding. It is important to have thorough knowledge of the philosophy behind Reiki in order to fully capture the true essence and power, of this "hands on" healing practice.

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**Appendix A**

**Reiki Practitioner Demographic Sheet**

## Reiki Practitioner Demographics Sheet

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Education: \_\_\_\_\_

Ethnicity: \_\_\_\_\_

Are you **over** 18 years of Age? (circle one)                      YES                      NO

Age: \_\_\_\_\_

Do you live within Missoula County? (circle one)                      YES                      NO

Telephone Number (if available): \_\_\_\_\_

Email Address (if available): \_\_\_\_\_

Level of Reiki Practitioner: (Please circle one)                      Level I    Level II                      Reiki Master

Number of Years you have been practicing Reiki: \_\_\_\_\_

Do you perform Reiki on someone other than yourself? (circle one)                      YES                      NO

Do you practice Reiki on others on a regular basis? (circle one)                      YES                      NO

Would you be willing to be interviewed about Reiki?                      YES                      NO

If yes, when is the best time to reach you? \_\_\_\_\_

May the researcher contact you to set up an interview? (circle one)                      YES                      NO

**Please return this form to:**

Tannis Hargrove  
1624 S 14<sup>th</sup> St W  
Missoula, MT 59801  
Email: [hargrovet@gmail.com](mailto:hargrovet@gmail.com)  
Phone: 406-539-3645  
McGill Hall Room 101  
University of Montana

(Green)

**Appendix B**  
**Participant Letter**  
**(Description of Study)**

### Brief Description of the Study

A phenomenology is designed to uncover the essence of a "lived experience." In other words, the goal of this type of research is to truly understand how the group, in this case Reiki practitioners, experience Reiki. The purpose of this research is to understand what motivates individuals to become Reiki practitioners and if the individual's



motivations have commonalities or are completely separate from each other. This research also seeks to understand the health benefits of Reiki for the individual who performs Reiki and the health trends that may emerge. The information about the phenomenon of becoming a Reiki practitioner and the health benefits associated with being a practitioner will be collected through in-depth interviews with Reiki practitioners who are willing to donate their time and experiences for the good of the Reiki

community. All findings of the research will be available to participants and members of the Reiki community. It is the hope of the researcher that the information collected will provide a baseline for future research in Reiki, and eventually contribute the even wider spread use of Reiki as a healing modality.



Thank you,  
Tannis Hargrove  
Phone: 406-539-3645  
Email: [hargrovet@gmail.com](mailto:hargrovet@gmail.com)

McGill Hall, University of Montana 405-243-4811

YOUR TIME AND EFFORTS ARE GREATLY APPRECIATED!!!

(Blue)

靈氣

**Appendix C**  
**Description of Study**

## **Description of the Study**

This research study is a phenomenological study examining seven to ten individual's motivations and experiences in becoming a Reiki practitioner and Reiki's relationship to their health. "A phenomenological study describes the meaning of the lived experience for several individuals about a concept or the phenomenon" (Creswell, 1998, p. 51). In this type of research everything known, learned, understood, or thought to be true is ignored and all that is acknowledged is the information gathered from the participants by the researcher (Creswell, 1998).

This research study is focused on the experience of becoming a Reiki practitioner and Reiki's relationship to the individual's health. The information will be collected from participants through in-depth interviews revolving around the questions: "Why did you become a Reiki practitioner?" and "How is your health related to being a Reiki practitioner?"

### **Participant Criteria**

- Participants complete the Reiki Practitioner Demographic Sheet and Interview Availability
- The participants are Level II Reiki Practitioners or Higher
- Participants have more than five years of experience as a Reiki Practitioner
- Participants are at least 18 years of age.
- Participant is able to articulate his or her experiences of becoming a practitioner and Reiki's relationship to his or her health

### **Interview Format**

One interview with each practitioner will be conducted. During the interview as much information as possible will be gathered from each candidate. The interview will be audio taped then transcribed based on the recording from the audiotape, and then analyzed by the research for emerging themes and commonalities.

### **Topics of Discussion**

The topic of discussion is the participant's experience of becoming a Reiki practitioner and Reiki's relationship to the individual's health.

### **Credibility of the Interviewer**

The researcher/interviewer earned a Bachelor's Degree in Sociology from Montana State University in 2005 and is currently pursuing her Masters of Science in Health and Human Performance with an emphasis in Health Promotion. She is a Level I Reiki practitioner. This thesis project will fulfill one of the requirements of the program she has prepared and trained to conduct.

### **Respondent Confidentiality**

All of the information collected will be kept anonymous. Neither the participants name nor any other identifying information will be included in reports or other materials related to this study.

### **Participants may withdraw from the study at any time without repercussions.**

(Blue)

**Appendix D**  
**Informed Consent Form**

## INFORMED CONSENT FORM

**TITLE:** Phenomenological Study of Reiki Practitioner's Motivations and Relationship with Health

**PROJECT DIRECTORS:**

- Tannis Hargrove, *Principal Investigator*, 1624 S 14<sup>TH</sup> St W Missoula, MT: 406-539-3645
- Laura Dybdal, *Faculty Supervisor*, McGill Hall RM 134, 32 Campus Dr. Missoula, MT 59812: 406-243-6988

**PLEASE READ THIS INFORMATION CAREFULLY BEFORE YOU MAKE A DECISION ABOUT WHETHER TO PARTICIPATE IN THE INTERVIEW. IF THIS INFORMATION SHEET CONTAINS ANY WORDS THAT ARE NEW TO YOU, PLEASE ASK THE PERSON WHO GAVE YOU THIS FORM TO EXPLAIN THEM TO YOU.**

This is a research study conducted through the Health and Human Performance Department at the University of Montana meant to fulfill one of the requirements of a Master of Science Degree.

**PURPOSE**

The purpose of the study is to understand the experience of becoming a Reiki practitioner and what it is like to be a practicing practitioner. The study also seeks to understand the Reiki practitioner's perspective of health and its relationship to Reiki. Both of these perspectives will be gathered from the memory and interpretations of the participating individuals.

**PROCEDURES**

Participation in this research study is VOLUNTARY. If you agree to participate, you will be asked to take part in one audio-taped interview with the researcher, which is expected to last approximately 1-2 hours. The interview will include a discussion of your experience of becoming a Reiki practitioner, your experiences as a practicing practitioner, and your perspective of Reiki's effects on your personal health. All data from the interviews will be held in confidence.

**RISK/DISCOMFORTS**

You may find some of the interview very personal and this may make you uncomfortable. You may find that participation in this interview brings up personal questions related to your experience with Reiki, or your health. You may be concerned about your privacy and confidentiality. Although your name will not be associated with the information collected for this project or with any reports, you may have concerns that your identity as a participant in this study will become known.



### **METHODS FOR REDUCING RISK**

You can withdraw from this project at any time if you feel personal discomfort. If a question makes you uncomfortable, you do not have to answer.

Your name and identity will not be connected to data or the project.

### **BENEFITS**

Your participation in this study will provide valuable information to build the foundation of Reiki research and knowledge. This may not benefit you directly.

### **CONFIDENTIALITY**

All the information collected will be held in confidence. Neither your name nor any other identifying information will be included in reports or other materials related to this study. None of the participants will be publically identified. To ensure confidentiality, the following precautions will be followed:

1. Participant identities will remain confidential and will not be associated with the information in any way.
2. At the conclusion of the study, any information pertaining to participants' identities will be destroyed.
3. The audiotape will be transcribed without any information that could identify you. The tape will then be erased.
4. Data will be stored by the researcher. Only the researcher will have access to it.
5. Only the researcher and her faculty supervisor will have access to the files.

### **COMPENSATION FOR INJURY**

Although the risk of taking part in this study is minimal, the following liability statement is required in all University of Montana consent forms:

*In the event that you are injured as a result of this research you should individually seek appropriate medical treatment. If the injury is caused by the negligence of the University or any of its employees, you may be entitled to reimbursement or compensation pursuant the Comprehensive State Insurance Plan established by the department of Administration under the authority of MCA, Title 2, Chapter 9. In the event of a claim of injury, further information may be obtained from the University's claims Representative or the University Legal Counsel.*

### **VOLUNTEER PARTICIPATION/WITHDRAWAL**

Your decision to take part in this project is entirely voluntary. You may withdraw from this project for any reason and at any time. This includes declining to answer or discuss an aspect of the experience.

**QUESTIONS**

If you have any questions about this project, now or later you may contact:

*Tannis Hargrove at 406-539-3645 or Laura Dybdal, Professor at 406-243-6988*

*If you have any questions regarding your rights as a research subject, you may contact the Chair of the Institutional Review Board (IRB) through the University of Montana Research Office at 406-243-6670.*

**SUBJECT'S STATEMENT OF CONSENT**

**I have read the above description of this project. I have been informed of the risks and benefits involved, and all of my questions have been answered to my satisfaction. Furthermore, I have been assured that any future questions I may have will be answered. I understand that interview in its entirety will be audio-taped. I voluntarily agree to take part in this project. I am at least 18 years of age. I understand that I will receive a copy of the consent form.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(White)

**Appendix E**  
**Post-Interview Debriefing Form**

## **Debriefing Form**

Post-Interview  
(Researcher Use Only)

1. Observations made about the interviewee:
2. Interesting aspects of this interview
3. Intriguing Statements:
4. What possible themes may exist?
5. How was this interview similar to previous interviews?
6. How was this interview different from previous interviews?
7. Additional Comments:

(Beige)

**Appendix F**  
**Interview Questions**

## Interview Questions

### Exploration of Becoming a Reiki Practitioner:

- Why did you to become a Reiki practitioner?
- Are there any specific life events that directed you to Reiki?
- Describe your experience of becoming a practitioner. What was it like for you? Did anything during the classes strike you as interesting or powerful?
- What was your experience of the attunement?
- How has your approach to Reiki changed over time?

### Exploration of Reiki's Relationship to Personal Health:

- What is the meaning of health to you?
- How has becoming or being a Reiki practitioner affected your health?
- Are you currently managing any health issues or problems using Reiki?
- Can you describe any other modalities of healing you might be using in addition to Reiki?
- How has Reiki affected your life in ways other than your personal health?

(Beige)

**Appendix G**  
**Counselor Resource List**

## Missoula Area Counselor Resource List

The following resources provide mental health services to the Missoula community:

Bernie Balleweg Bernard, PhD  
125 Bank Street  
Missoula, MT 59801  
406-549-7325

Marcy Bornstein, PhD  
125 Bank Street  
Missoula, MT 59801  
406-549-7325

Frances Buck, PhD  
1018 Burlington, Suite 101  
Missoula, MT 59801  
406-549-9404

Leslie Burgess  
815 E Front St Suite 1  
Missoula, MT 59801  
406-549-4088

Petra de Groot, LCPC  
210 N. Higgins, Suite 207  
Missoula, MT 59801  
406-728-7584

Ellen DeWolfe, MSN, APRN, CNS  
1001 SW Higgins Suite 103  
Missoula, MT 59801  
406-541-8820

Lois Double Day, M, MA, LCPC  
Blue Mountain Clinic  
Missoula, MT 59801  
406-721-1646

Shan Guisinger, PhD  
210 N. Higgins, Suite 310  
Missoula, MT 59801  
406-543-8138

(White Multi)

Diane Haddon, MSW, LCSW  
210 N.Higgins, Suite 324  
Missoula, MT 59801  
406-721-6144

Ann Harris, RLCPC  
210 N. Higgins  
Missoula, MT 59801  
406-721-4610

Quinton "Q" R. Hehn, DR LCPC  
725 W Central #209  
Missoula, MT 59801  
406-542-0900

Bev Jackson, LCPC  
210 N. Higgins, Suite 316  
Missoula, MT 59801  
406-542-1313

Nancy Seldin, EDD, LCP  
210 N Higgins Ave  
406-721-4356

Gracia Schall, MSLCPC  
1640 South Ave W  
Missoula, MT 59801  
406-721-1774

Victor Stampley, LCSW  
126 E. Broadway, #11  
Missoula, MT 59801  
406-728-4791

Danette Wollersheim, PhD  
1805 Bancroft Suite 1  
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**Appendix H**  
**Institutional Review Board Approval**



The University of  
**Montana**

Legal Counsel  
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Missoula MT 59812  
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#19-08

**Date:** January 23, 2008  
**To:** Tannis Hargrove & Laura Dybdal, Health & Human Performance  
**From:** Claudia Denker, IRB Chair  
**RE:** IRB approval of your proposal: "A Phenomenological Study of Reiki Practitioners"

This study has been approved on the date that the "checklist" was signed. If the study requires an Informed Consent Form, please use the "signed and dated" ICF and Assent Form as "masters" for preparing copies for your study. **Approval continues for one year.** If the study runs more than one year, a continuation form must be approved by **January 23, 2009** or it will need to be resubmitted.

Also, you are required to notify the IRB if there are any significant changes or if unanticipated or adverse events occur during the study. Finally, when you terminate the study, please notify our office in writing so that we can close the file.

  
Claudia D. Denker

[attachment(s)]