Expanding the Dialogue: 
Exploring Contributions from Energy Medicine 
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Abstract
This paper presents a model and concepts from energy medicine and explores their relevance to body psychotherapy. The multidimensional model, a key model in energy medicine, is used as a starting point. Focusing on five principles of the etheric body—the power supply, the replica effect, the blueprint effect, the interface effect, and the internal senses—areas of overlap and application to body psychotherapy are discussed.

Keywords: energy medicine, multidimensional model, subtle energy bodies, homeodynamics, etheric body

According to Einstein’s famous formula, E=MC², energy and matter are interchangeable, different forms of the same thing. Matter can be converted into energy and energy into matter. Indeed, when physicists probed deeply into matter to find what we are made of, they discovered that matter is not solid. It consists of subatomic particles that are comprised of mostly empty space. In turn, when they looked into the “empty space”, physicists determined that it was not so empty after all. It was teeming, effervescing with energy, a quantum froth. This energy is omnipresent in everything that is in existence—including us.

Energy is the common denominator uniting all aspects of life. As such, it holds potential for creating a unified bridge from the spiritual and scientific to the physical and pragmatic. In his rigorous contributions toward establishing a new paradigm of energy medicine, Oschman stated, “All medicine is energy medicine” (2003, p. 14). Along these lines I would say that all psychotherapy is energy work. Body psychotherapy, in particular, reflects this. From foundations grounded in Reich's work with orgone energy (1942/1973, 1948/1973), to Lowen's Bioenergetics (1975) and Pierrakos' Core Energetics (1990), with others in between, the thread of human energy can be found woven into the fabric of body psychotherapy.

This paper introduces a model and key concepts from energy medicine that I believe may contribute to body psychotherapy and enhance the interface between the two. Since energy work in general tends to conjure up images of “healers” waving their hands over people's bodies, I want to mention that, as an energy medicine clinician with a background in somatics, I am primarily concerned with practical applications of energy medicine that empower clients through self-awareness, education and self-responsibility.

The Multidimensional Model
Energy-based models of human functioning that recognize various dimensions of reality have been around for thousands of years in Eastern philosophies. They hold that humans occupy multiple planes of existence simultaneously and that upon these planes are formed our vehicles of experience, our energy bodies (Bailey, 1922, 1951, 1953/1971; Jurriaanse, 1978/1985; Leadbeater, 1902/1969; Saraydarian, 1981; Yogananda, 1946/1998). According to these multidimensional models, energy is primary. Our thoughts, emotions and actions do not originate in the brain or elsewhere in our physicality; instead they originate at the level of energy and consciousness and play out through our physicality.

Our energy bodies constitute the “equipment” through which we experience the various dimensions of reality, while consciousness is the mediator that holds the bodies and our experiences together.

This ageless understanding of the human energy constitution is gaining scientific legitimacy (Oschman, 2000, 2003; Rubik, 2002; Swanson, 2010; Tiller, 1997; Tiller, Dibble & Fandel, 2005; Tiller, 2007). Tiller's contributions in particular are significant because of his background in conventional science and due to the depth and breadth of his contributions to energy medicine. After 34 years in academia, he is professor emeritus at Stanford University and former chair of the materials science department. Tiller’s stated mission is to build a reliable bridge that seamlessly joins conventional science with the various subtle domains of inner reality and the domain of spirit (Tiller, 2013). Through his approach, called *psychoenergetic science*, he has made significant strides in revealing how human consciousness interacts with physical reality.

Rich in heuristic value, Tiller's multidimensional model was used by Richard Gerber, M.D., in his seminal contribution, *Vibrational Medicine* (1988/1996; 2000). Meticulously researched and backed by the science of the day, the book essentially comprised the first energy medicine textbook of its kind. Charles Krebs, Ph.D., (1998) also used the model in his groundbreaking work on energy kinesiology, and I made use of the model in my recent energy medicine textbook of its kind. Charles Krebs, Ph.D., (1998) also used the model in his groundbreaking work on energy kinesiology, and I made use of the model in my recent

Subtle Energy Bodies
According to the multidimensional model the human being consists of a spectrum of energy frequencies. Early depictions of the model describe seven dimensions, however, following Tiller’s lead (Tiller, 1997), I condense these to four: the physical/etheric, emotional, mental, and spiritual. These four planes of existence comprise distinct yet overlapping frequency domains, or channels of experience, upon which the layers of our being—our four main energy bodies—are formed.
The four major channels of experience, also sometimes called the planes of existence, and the four main energy bodies that are formed upon those channels.

The energy bodies range from low to high frequency, with the physical/etheric body at the lower end of the continuum and the spiritual body at the higher end. Although such designations may seem hierarchical, these terms are merely used to describe positions, such as high C and low C on a musical scale. They are not meant as a valued hierarchy and do not indicate that higher is more valuable than lower. The gradations in between the physical/etheric and spiritual bodies consist of the emotional and mental bodies respectively. The emotional body is responsible for our emotions and feelings while the domain of the mental body is thought and cognition. The spiritual body, which is the highest or fastest frequency, allows us to have spiritual experiences. We humans occupy these multiple planes of existence simultaneously, making us wonderfully complex.

According to the model, our inner, subjective states determine our overall health and interactions; the outer physical body reflects our inner thoughts and emotions. When our multidimensional system is aligned and coherent we experience radiant health and are able to live our lives to the fullest. When any aspect of our system is out of balance, the entire system is affected, as is the quality of life in general.

The slowest or lowest frequency domain of the human energy constitution is the physical plane and we occupy this channel of experience by virtue of the fact that we have a physical body. Bones, organs, tissues, blood, glands, nervous system and brain, all fall within the purview of the physical body. But the physical body needs a power supply in order to function. It needs a life-force to animate it or else it is nothing but a corpse. In energy medicine this energy body is called by various names, i.e., the vital body, the biofield, the conjugate physical. For the purposes of this paper I use the term etheric body.

According to the model, the physical body and the etheric body are understood as inseparably woven together, as two sides of the same coin, when dealing with a living person. Thus, the physical/etheric is typically referred to as one body instead of two. Without the etheric body the physical body is a cadaver. The fact that Western medical science developed primarily through the study of cadavers helps explain how the etheric body got missed in conventional Western medicine (Greene, 2009).

The etheric body is the inner substantial form, the invisible scaffolding, upon which the physical body is built (Lansdowne, 1986; Leadbeater 1927/1997; Powell, 1925/1997; Tansely, 1972). It consists of a vitality-rich energy that goes by several names, chi in China, ki in Japan, prana in India, or mana in Hawaii (Greene, 2009; Rubik, 2002). The ancients knew this energy well and developed their practices accordingly. The martial arts from a variety of cultures are based on this energy, as are the healing systems of Traditional Chinese Medicine, acupuncture, Ayurveda, Tibetan medicine, and kahuna healing, to name a few.
Homeodynamics

The multidimensional model recognizes the homeodynamic nature of human beings. This refers to our capacity to creatively respond to stressors by developing new progressive modes of functioning (Rubik, 2002). The concept of homeodynamics came out of contemporary sciences of complexity including open systems theory, self-organization, and chaos theory. Whereas homeostasis is based on classical physics and advocates a single or ultimate balance point, homeodynamics is based on modern biophysics and recognizes nonlinear dynamics of self-organization through strange attractors, nonlocality, and countless information flows (Rubik, 2002).

The term was coined by Yates (1994), a physiologist and biomedical engineer, and was first applied to energy medicine by Rubik (2002). In contrast to homeostasis, homeodynamics “emphasizes the ever-adjusting nature of the processes that maintain life functions. Once a new stressor is encountered, the organism never returns to its previous dynamic state, but establishes a new dynamic balance appropriate to this newly integrated experience” (p. 707). It appears humans are on an evolutionary path that includes the capacity to continuously recalibrate to higher levels of functioning. In homeodynamics, the organism integrates a massive number of information signals and life processes on multiple levels across various time scales to create dynamic stability.

The etheric body may act as a regulator of the important, complex functions involved in homeodynamics (Rubik, 2002). The etheric body is a foundational component of energy medicine that is gaining scientific legitimacy. As such, understanding this body from the perspective of energy medicine can broaden and deepen our understanding of energy dynamics in body psychotherapy.

The Etheric Body

The etheric body—and the physical/etheric plane that it occupies—are reminiscent of Reich’s descriptions of the orgone and orgone energy. However, a complete science of energy anatomy is found in health systems from cultures that have devoted thousands of years to studying and working directly with these energies. It is beyond the scope of this paper to describe the etheric body in any detail. Suffice it to say that the discoveries of long ago, upon which entire successful medical systems were built, are being increasingly validated by Western scientific methods. Although medical professionals in the U.S. have been resistant to recognizing the etheric body, mainstream culture has embraced its ancient methods. We don’t have to look far today to see the popularity of yoga, acupuncture, meditation, and the martial arts. Many of these practices emerged from cultures dedicated to complex and systematic study of the etheric body. When combining their contributions a comprehensive and detailed picture of human energy anatomy is formed.

Five principles that I believe have relevance to body psychotherapy govern the etheric body: the power supply, the interface effect, the replica effect, the blueprint effect, and the internal senses. Let’s look at these one at a time.

The Power Supply

The etheric body is the power supply for the physical body (Lansdowne, 1986; Leadbeater, 1927/1997; Powell, 1925/1997). Without it, the physical body would be limp and lifeless. All movement is possible because of this energy body, a complex
The energy/information matrix that interpenetrates the physical body and extends several inches beyond it (Leadbeater, 1927/1997; Swanson, 2010). The etheric body consists of a vast energy distribution system that has three main components: chakras, meridians, and nadis (Gerber, 1988/1996, 2000).

The chakras are energy transformers that take ultra-high frequency energies and step them down into a more usable form (Gerber, 1998/1996, 2000; Lansdowne, 1986; Leadbeater, 1927/1997; Swanson, 2010; Tansley, 1972). *Chakra* is a Sanskrit word that means round or wheel. Those who are able to see these energies have described them as looking like spinning wheels or vortices that range in size from about two inches in diameter to several inches, depending on their stage of development (Leadbeater, 1927/1997; Swanson, 2010). It is likely the ancients had the capacity to see these wheel-like energy centers and named them accordingly.

There are seven major chakras (Lansdowne, 1986; Powell, 1925/1997; Swanson, 2010; Tansley, 1972). These align with the major nerve plexus of the physical body and have been scientifically verified with electrostatic measurements, sound frequencies, as well as electromyography (Gerber, 1988/1996; 2000; Hunt, 1995; Swanson, 2010; Tiller, 2007). The chakras, in turn, feed into energy/information channels, called *meridians*. There are 14 major meridians and several hundred minor meridians, depending on which healing system is used. Meridians have been validated by a number of scientific methods, including electromagnetic measurements, integrated polarization charge measurements, micro-photography, volt-ohm meters and magnetic resonance imaging (MRI) (Gerber, 1988/1996, 2000; Hunt, 1995; Swanson, 2010; Tiller, 2007). The meridians, in turn, send energy/information to the nadis, which act as tiny energy capillaries (Gerber, 1988/1996, 2000; Tansley, 1972).

Metaphorically speaking, the chakras are like power stations where high voltage energy is transduced and distributed through a divergence of power lines—the meridians and nadis. The etheric body interfaces with the physical body through the chakra/meridian/nadi system, which corresponds to the physical nervous system (Gerber, 1988/1996; Lansdowne, 1986; Leadbeater, 1927/1997; Powell, 1925/1997; Tansley, 1972). "Anatomically, each major chakra is associated with a major nerve plexus and a major endocrine gland" (Gerber, 1988/1996, p.128). Ultimately, the stepped-down energy from the chakras is translated into hormonal, physiologic and cellular changes (Gerber, 1988/1996).
The Interface Effect

The chakras and meridians have been empirically linked to physical, emotional, and mental health (Eden, 1998; Gerber, 1988/1996, 2000; Krebs, 1998; Oshman, 2000). One explanation for this is the interface effect. It is believed that the etheric body acts as an interface between the physical body and the other energy bodies—emotional, mental, and spiritual (Gerber, 1988/1996; Landsdowne, 1986; Leadbeater, 1927/1997; Tansley, 1972). In the clothing world, an interface performs important functions. It is most commonly used in the collar of a men’s dress shirt to make the collar stiff so it can stand up. The purpose of an interface is to reinforce or add substance to whatever it is sewn into. It is usually stitched onto the inside of an out-facing piece of fabric. When the garment is completed the interface is concealed between layers of fabric.

So it is with the etheric body. It reinforces the physical layer, adding form and substance to it. The etheric body is primarily “woven” onto the inside of the physical body (via the chakra/meridian/nadi system). As an interface, the etheric body reinforces the physical body, providing the energetic substance that holds the physical body together. Like a collar without an interface, if the physical body were without its etheric body “backing”, it would be limp and inanimate, unable to stand up or move.

An interface goes between layers of fabric. Similarly, the etheric body “goes between” the physical and the three remaining energy bodies—the emotional, mental and spiritual—creating reciprocity among them. Any of the bodies can be accessed through the etheric body; the etheric body acts as a portal. This gateway works both ways as the higher frequency energies of the emotional, mental, and spiritual bodies heavily influence the etheric body, which, in turn, impacts the physical body (Gerber, 1988/1996, 2000; Landsdowne, 1986; Leadbeater, 1927/1997; Swanson, 2010; Tansley, 1972). In essence, the etheric body is the “go-between” allowing for two-way communication of energy/information among the bodies.

The interface effect is supported by research that demonstrates how individual cells register emotions even when the cells are removed from the body (Backster, 2002; Backster & White, 1985; O’Leary, 1989). In this procedure, a few loose cells are collected from a person by swabbing the inside of the mouth with a sterile swab, or by rinsing the mouth in a salt solution. Then the cells are hooked up to a voltmeter that measures and amplifies the weak electrical signal normally produced by the cells. The voltmeter is only a monitoring device; no current is passed through the cells.

Then the cell donor is taken away, usually far away. When the donor experiences a strong emotion (pleasurable or painful) the donated cells back in the lab respond by generating a spike in voltage (Backster, 2002; Backster & White 1985; O’Leary, 1989). This experiment has been shown to work with distances spanning from a few feet to thousands of miles. It has been repeated hundreds of times by various researchers using cells from a vast array of people (Swanson, 2010).

Again, conventional science has no explanation for this: why would physical cells far removed from the body register the real-time emotions of their previous host? The interface effect of the etheric body helps explain how cells can receive energy/information in the form of emotional stimuli from their previous host across distance and over time. Interestingly, the experiment also works effectively using cells from plants and animals (Backster, 1968, 1973, 2002; Tompkins, 1972; Vogel, 1976), verifying what the ancients have said for millennia: all living things have an etheric body.

The blueprint effect also helps explain why body psychotherapies are so effective on multiple levels simultaneously. In somatic modalities the physical/etheric body is the entry point into the therapeutic process. As such, the etheric body acts as a gateway allowing access to the other bodies (physical, emotional, mental, spiritual) in the process.

The interface effect also explains why energy modalities that directly access the etheric body (such as acupuncture, homeopathy, Healing Touch, Emotional Freedom Technique, and Touch for Health, to name a few) help with physical ailments as well as emotional, psychological, and spiritual issues.

The Blueprint Effect

In addition to being an interface, the etheric body serves another important function—that of a blueprint (Gerber, 1988/1996, 2000; Landsdowne, 1986; Leadbeater 1927/1997; Powell, 1925/1997; Tansley, 1972). The conventional wisdom is that genes provide the blueprint for the physical body. However, groundbreaking research in molecular biology over the last couple of decades suggests otherwise. Although genes play a fundamental role in determining our physicality, the new field of epigenetics (epigenetic means above or beyond the gene) has revealed an influence beyond the physical level that determines whether or not a gene is activated (Church, 2007, Lipton, 2005).

According to epigenetics, our genes are more like building materials than blueprints. They are lined up, waiting to be given the order to be implemented. Metaphorically speaking, they are like the lumber, nails, sheetrock, and fixture choices that may or may not end up being included in the physical structure. Something outside of the gene can determine whether a particular gene becomes part of the building, or rebuilding, process. In these instances the command is not given at the physical level. It comes from the level of energy/information. Epigenetics reveals the mechanisms that influence gene activation can be nonphysical factors such as emotions, thoughts, perceptions, and states of consciousness (Church, 2007, Lipton, 2005). In light of the interface effect, this is the domain of the etheric body.

It appears that the true blueprint for the physical body is the etheric body. It may contain the energy/information instructions that determine what goes into the structure of the physical body. As well, it may be that all aspects of the physical body, including illness and disease, pre-exist in the etheric body (Gerber, 1988/1996, 2000; Landsdowne, 1986; Tansley, 1972). The blueprint effect of the etheric body helps explain why body psychotherapies are able to produce physical effects often without ever touching the physical body. It also helps explain why energy therapies are able to do the same.

The Replica Effect

The etheric body is sometimes referred to as the etheric twin or double in that the physical body is a replica—the etheric body is the “original” (Gerber, 1988/1996, 2000; Landsdowne, 1986; Powell, 1925/1997). The replica effect means that all glands, bones, muscles, organs and cells have etheric counterparts. In other words, our etheric bodies are comprised of a matrix of etheric tissues and etheric limbs. This helps explain two well-documented phenomena that conventional Western science has no viable explanation for: phantom pain and cellular memory.

About eighty percent of amputees report some kind of discomfort in their missing limbs—everything from pain and electrical shocks to itching and sensations of heat and cold. This phenomenon, documented in medical books since the 1700s, is referred to as phantom pain. To this day, modern medicine is hard-pressed to explain it. However, when the etheric body is taken into account, this mysterious phenomenon can be understood. In the instance of
amputation, even though a physical appendage had been removed, the etheric limb would still be intact and connected with the rest of the etheric body. If an amputee lost an arm the etheric arm would continue functioning and, as an energy/information matrix, it would carry on transmitting messages to the rest of the system.

The phenomenon of cellular memory, familiar to many body psychotherapists, is quite evident in instances when organ transplant recipients mysteriously take on the personality and behavior traits of their organ donors without ever having met them. In documented case studies, organ donor recipients have been shown to experience strange and sometimes drastic changes in personality (shifting from extroverted to introverted), or to take on the donor’s qualities and habits (drinking, smoking, swearing, praying) and preferences (in terms of food, clothing, music, cars, and sexual behaviors) (Pearsall, 1999). They also experience memories and information from the donor’s life that appear to have no other explanation except, perhaps, through recognition of the etheric body.

Probably the most profound example of cellular memory is a case documented by Paul Pearsall, Ph.D., in his book *The Heart’s Code* (1999). An eight-year old girl received the heart of a ten-year old who had been murdered. The donor information was completely unknown to the girl or her family, yet soon after her transplant she began having disturbing nightmares about a man murdering a young girl. The dreams were so vivid and persistent that the mother finally brought the girl to a psychiatrist for help. The girl was able to describe the victim, the scene of the murder and the killer in such minute detail that the psychiatrist was compelled to contact the police. Using her descriptions alone they were able to locate and convict the killer. What she reported about the crime turned out to be accurate even though she had no prior knowledge of it.

Materialist science has no explanation for the phenomena of cellular memory. But when the etheric body is highly responsive to input from the internal senses. As such, they are valuable inner resources that impact our health and wellbeing. Although the internal senses constitute familiar terrain for body psychotherapists, I will describe them briefly below within the context of energy therapies.

The Internal Senses

A final principle that merits inclusion involves the internal senses. Just as we have external senses that orient us to the external world, we have internal senses that orient us to the internal, subjective world of subtle energies. The energy bodies, in general, and the etheric body, in particular, can be accessed and worked with through the internal senses. These include attention, self-sensing, self-talk, intention, visualization, and self-observation (Greene, 2009). The etheric body is highly responsive to input from the internal senses. As such, they are valuable inner resources that impact our health and wellbeing. Although the internal senses constitute familiar territory for body psychotherapists, I will describe them briefly below within the context of energy therapies.

Attention

Attention is focused awareness. When we pay attention to something, we focus our external and internal senses on it. Attention is like a spotlight that illuminates and brings to life that which it is directed on. A well-known axiom in energy medicine is: *where attention goes energy flows*. Attention in and of itself has potency (Radin, 2002, 2002a; Radin & Nelson, 2003). What we focus our awareness on receives our energy/information and is changed at a fundamental level. Sometimes called the *observer effect*, the very act of observing something alters it in some way.

This surprising aspect of reality was first touched on by Nobel Prize-winning physicist Werner Heisenberg when he published the mathematics of the uncertainty principle around 1926 (Wheeler & Zurek, 1984). The notion was further supported by the Copenhagen interpretation in which an unobserved object is said to exist only as potential until an observer chooses what to observe (Heisenberg, 1979). This is one of the most commonly taught interpretations of quantum mechanics. It holds that the mere act of observation, of bringing awareness to something, inevitably changes it. Human attention (i.e., awareness) is a transformative energy tool that is foundational to energy therapies and body psychotherapies alike.

Self-Sensing

Self-sensing is the capacity to turn inward and focus attention on bodily experience. It is an inner-focused, subjective stance of experiencing from the “inside out”. Self-sensing occurs by shifting attention away from an external focus and directing attention toward an internal focus, at times broadening that focus to include the entire body. Self-sensing allows for experiencing a vast array of internal functioning including bodily sensations, feelings, thoughts, intentions, insights, imaginings, and so forth. It is a mode of internal listening that puts us in touch with primary experience (Greene, 1995, 1997, 1997-98). Self-sensing is a channel of internal receptivity that opens us up to a variety of proprioceptive inputs.

Self-sensing can be focused on a selected organ or area of the body, or more expanded to sense how the body moves in general. It can also be used to sense pain or to apprehend more subtle internal cues (Hanna, 1988; Feldenkrais, 1990, 1997). Self-sensing is foundational to body psychotherapy. Bringing attention inside the body via self-sensing has proven therapeutic effects (Feldenkrais, 1990, 1997), as is evident in the consistent outcomes from a spectrum of somatic modalities and body psychotherapies. In energy medicine, self-sensing is used to experience subtle energy flows and to access and express the energy bodies.

Self-Talk

Self-talk constitutes the messages we tell ourselves about what we experience. None of us perceives sensory input in its pure form; it is always subject to personal interpretation. The meaning we give to what we perceive, how we view it, what we feel about it, the pictures we envision, the words and stories we tell ourselves constitute self-talk.

Some of us orient through an auditory channel and think in words. Some who are more visual conjure up clear, vivid mental images or movies. Others, more kinesthetic, will experience bodily sensations and feelings, a felt-sense about things (Dunn, Griggs, Gorman et al., 1995). Additional orientations include mathematical, spatial and musical. Ideally, we would want to employ as many channels as possible. Still, the three primary processes are visual, auditory and kinesthetic, with one of the three typically more predominant (Dunn, Griggs, Gorman, et al., 1995). Self-talk includes these modes of internal communication that form a perceptual layer over our “raw” experience.

Some researchers refer to self-talk as *explanatory style*, but most of us know it as the “tapes” playing inside our heads, the noisy mind, or the inner critic. In the paradigm of energy medicine, in which everything is energy, thoughts (Hawkins, 1995; Lipton, 2005; Scheldrake, 2003; Swanson, 2010), intentions, (Radin & Nelson, 2003), words (Emoto, 2004), and other aspects of consciousness are understood to impact physical matter (Swanson, 2010; Tiller, 1997, 2005,
I use the term sensualization (Greene, 2009). When suggestss, visualization is not limited to the visual realm. It includes other channels such as auditory and kinesthetic. Probably a better term would be sensualization.

In Sao Paulo, Brazil, on June 3, 1998, three healers were directing healing intention to five volunteers who were over 6000 miles away in a research lab in Las Vegas, Nevada. The five volunteers were hooked up to various monitoring devices to measure their heart rates, blood volume, breathing, and skin activity. At the exact timed intervals that the healers were sending their healing intent, the volunteers’ bodies were registering the effects as recorded by the monitoring devices (Radin, Machado & Zangari, 2000). During intervals when there was no intent, there were no effects—a clear demonstration of the precise power of intent.

Experiments such as this and hundreds of others confirm the effects of human intent on everything from fellow humans (Radin, Machado & Zangari, 2000), to animals, insects, plants, bacteria, DNA (Radin & Nelson, 2003), yeasts (Radin, Taft & Yount 2004), water (Radin, Hayssen, Emoto & Kizu, 2006), cancer cells (Radin, Stone & Levine, et al. 2008), computers (Nelson & Radin, 2001), electronic devices (Tiller, Dibble & Kohane, 1999; Tiller, Kohane & Dibble, 2000), and chocolate (!) (Radin, Hayssen & Walsh, 2007).

Visualization

As an internal sense, visualization refers to our capacity to form concepts in an intentional way. We all have this ability but some have developed it more than others. Unlike the name suggests, visualization is not limited to the visual realm. It includes other channels such as auditory and kinesthetic. Probably a better term would be sensualization (Greene, 2009). When I use the term visualization the other orientations are included as well, not just the visual.

Visualization, or guided imagery, is a potent tool for mobilizing energies and is used for this purpose in energy therapies. Like self-talk, visualization has profound effects on the structure of the brain and on our health (Doige, 2007; Hansen & Mendius, 2009). It is often used successfully by athletes to improve performance. In one simple study participants were divided into three groups. One group was asked to go to a nearby gym every day for 20 minutes and practice making basketball free throws. A second group was asked to stay home and simply visualize completing successful free throws for 20 minutes each day. The third group, the control group, did nothing. After a month there was only one percent difference in the achievement level of those who actually practiced free throws at the gym (24% improvement) versus those who stayed home and visualized (23% improvement). The control group showed no change (Martin, Moritz & Hall, 1999). This experiment and others like it have been repeated with consistent results.

Visualization is imagination coupled with intent. It is not daydreaming, brainstorming, or stream-of-consciousness thinking, nor does it involve expanding the mind to see what floats in. Visualization is purposeful imagining, holding a specific focus through the power of concentration. The more focused the concentration, the stronger the results. This is why the vast majority of research conducted on intention is done using trained meditators, as meditators have developed the ability to hold a focus, which allows for more robust results.

Self-Observation

Self-observation refers to the ability to observe and become aware of what is going on inside of us. It includes access to the array of internal functioning mentioned above (thoughts, feelings, bodily sensations) and may sound similar to self-sensing. However, there is a fundamental difference. With self-sensing, we are experiencing the multitude, or specifically selected, internal functioning that we are focused on; we are actively engaged with the inner landscape. In contrast, with self-observation we are observing it in a more detached way. We are witnessing or watching what is going on inside, spectating, as it were, instead of actively participating (Greene, 2009).

Sometimes this practice is called mindfulness and it has documented therapeutic effects (Farb, Segal, Mayberg et al, 2007; Williams & Kabat-Zinn, 2011; Segal, Williams, & Teasdale, 2012). Self-observation is a foundational component of body-oriented psychotherapies. In energy medicine, self-observation is used to track subtle energies, to assess energy medicine interventions, and to achieve higher states of consciousness.

The internal senses of attention, self-sensing, self-talk, intention, visualization, and self-observation are means by which the energy bodies can be accessed and worked with. Presenting issues are understood as imbalances within and among the energy bodies. Although different labels may be used, many of the internal senses constitute familiar terrain for body psychotherapists. I have found that introducing them as internal senses to clients helps empower clients to realize these are not foreign or difficult skills they must struggle to attain. Instead, they are natural qualities that we intrinsically possess, similar to seeing, hearing, tasting, and so forth. Like our external senses, the internal senses can be refined and honed.

Top Down or Bottom Up?

The question then arises: would the multidimensional model be considered a top-down or bottom up approach? The answer is: it depends. The model is such that it recognizes multiple points of entry into the body-mind-spirit system. It is a holistic model in which the energy bodies are seen as distinct yet overlapping. In a bottom-up approach, we can enter the system through the physical/etheric body and gain access to all the other bodies. As I have suggested above, the multidimensional model and the interface effect of the etheric body offer an elegant description of how body psychotherapies work to effect change on all levels (physical/etheric, emotional, mental, and spiritual). In a top-down approach, we can enter the system through the spiritual body and effect change at that level which, in turn, would precipitate out to affect all the other bodies.

Using a framework other than top-down/bottom-up, one that is less hierarchical and more appropriate to energy work, we could think in terms of field effects or radiatory effects. For example, we can enter the system through the physical/etheric body and impact the emotional and mental bodies due to the close proximity of their frequency domains. Similarly, we can enter through the mental body and effect change in the emotional and spiritual bodies. These types of interventions, in turn, would radiate out to effect changes in the other bodies as well. In keeping with the principle of homeodynamics addressed above, the entire system would dynamically recalibrate to a higher level of functioning.
Inside-Out, and In Is Up

Ultimately, the multidimensional model is neither top-down nor bottom-up. It is nonhierarchical. More accurately, it is an inside-out approach. It privileges the inner world of subjective reality and first-person experience over objective reality and third-person experience. For this reason, it is also in alignment with body psychotherapy. Further, whether entering the system through the physical/etheric, emotional, mental or spiritual body, it recognizes the primacy of consciousness and its subset—personal awareness. It values self-observation and encourages our capacity to probe deeply into ourselves because “in is up dimensionally” (Comings, 2004). The deeper into our being we go, the higher up in frequency, allowing access to higher states of consciousness including, but not limited to, the spiritual body. As somaticist Thomas Hanna aptly put it: “God-consciousness has evolved to a par with self-consciousness” (1991, p. 47). These higher states of consciousness catalyze dynamic integration processes affecting each body on all levels as we continue on our evolutionary path.

If anything, we could say the multidimensional model is trans-directional, meaning, it transcends directionality. As such, it more accurately applies to what is now known about the true nature of human functioning, I believe the model is aligned with and contributes to the philosophy, theory and practice of body psychotherapies.

Conclusion

The multidimensional model of energy medicine and the etheric body, in particular, have relevance to somatic psychology in terms of explanatory value, clinical application, and pedagogy. The five principles of the etheric body—the power supply, the interface effect, the blueprint effect, the replica effect and the internal senses—contribute to our understanding of fundamental aspects of body psychotherapy practices. By taking a key model and concepts of energy medicine, and highlighting their relevance to body psychotherapy, I hope I have inspired an energetic bridge between the two and opened a dialogue that is mutually beneficial.

BIography

Debra Greene, PhD, is an innovator in the field of energy medicine and mind-body integration. She has worked with thousands of clients and taught hundreds of workshops. Debra holds a Ph.D., from Ohio State University in communication and somatics. She is the creator of Inner Clarity (IC), an energy kinesiology modality, and Energy Mastery, a distance learning program; and author of the acclaimed book Inside-Out, and In Is Up.

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INTERNATIONAL BODY PSYCHOTHERAPY JOURNAL
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