

*John Doe*



**1992 Journal**

*Gateway to New Frontiers*

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***Pass Thru the Gateway to New Frontiers***

for a week of sharing and renewal. We share our love and renew our friendships. We share what we are doing with touch healing and learn what others are doing. We look forward to the next challenge in bringing touch healing to more and more people with ever increasing effectiveness. We renew our pledge to work for the good of all humanity.

## Welcome to the Gateway to New Frontiers

This year's Journal represents the new direction of Touch For Health. The theme of the Annual Meeting is "Touch For Health, Gateway to New Frontiers".

St. Louis is called the Gateway City and its symbol is the famous Gateway Arch located on the Mississippi River. Touch For Health, for many people, has been a Gateway to better health for themselves and their families, and, to new careers in health and well-being.

Included in this Journal are a broad variety of articles which are stimulating and enlightening. Each article represents a distinct view or approach to many of the issues we in Touch For Health have encountered - muscles, energy, nutrition, emotional stress, and performance.

Take your time to discover the many treasures within these covers. Some of these treasures are short single page articles while others are very in-depth. You will find yourself coming back to these articles again and again using the techniques and information they impart.

Enjoy!

Richard Harnack,  
Annual Meeting Chairperson



## Bilateral Muscle Weakness Correction 92

by John F. Thie, D.C.

**Abstract:** A description is given for correction of bilaterally inhibited muscles

In chiropractic applied kinesiology circles the generally accepted method for correcting bilateral muscle weakness found in the muscle examination described by Goodheart, Walther, Stoner and others has been to correct a fixation subluxation. The reason for the bilateral weakness has been generally thought to be a fixation in a group of three vertebrae. The restoring of facilitation has been demonstrated to be a special chiropractic adjustment of the spine by hand. These chiropractic adjustments for the fixation subluxation did indeed correct the bilateral muscle weakness, in most cases. Conable showed in a paper presented to the ICAK that the description of the correction was not the same by different authors.

In Touch for Health circles the correction was made by use of the neurolymphatic, neurovascular, meridian tracing, origin/insertion, golgi cell, or spindle cell technics.

I have found that another method of correction which has been effective for me and others that have been shown this method.

The method is very simple and can be used safely by the patient/student/client at home having a member of the family or friend help him/her by testing the previously found inhibited muscles and applying the reflex correction methods. The bilateral weakness problems which I have found, tend to recur with fatigue of the patient regardless of the original method of correction and strengthening of the muscles, that is fixation adjustment or the method I will describe later in this paper.

The spinal fixation subluxations did not appear to follow the spinal nerve pathways to the muscles that were involved in the pattern of subluxations. The fixation of the upper cervicals were discovered by a bilateral weakness of the gluteus maximus muscle and bilateral hamstrings were associated with fixation of the occiput. My observation also

indicate some other pathway of communication seems to be involved in at least some of the situations where bilateral weakness are discovered by manual muscle testing.

When I was observing Bruce Dewe, M.D. making corrections for a bilateral psoas weakness, I observed that he did not use an osseus thrust but just moved the skin on the occiput with respiration in the direction of the indicated by evaluating the tongue stress procedures. I experienced this correction on myself and found that I had at least as much benefit from this correction as I had from rapid thrust adjustments of the occiput for the correction. In my own personal experience of the bilateral psoas muscle weakness and in patients I have examined this alternative correction is very more effective than the rapid thrust of the occiput. I have since advocated this method to others, and they also have found that the light pressure moving the skin is very effective and very safe.

I then attempted a similar correction of moving the skin over the spinous processes in a headward to a footward direction for other bilateral weaknesses when I found them in my patients. I have used this procedure now for four years and have found that is is very effective and much easier to correct the problems. The indicators for fixation subluxations are usually gone following the correction and retesting of the bilateral muscles and finding the weakness abolished.

Not every time did I find both muscles of the previously inhibited muscles strengthened by the movements of the skin in a repeated cephalad-caudal motions, sometimes a unilateral muscle weakness would remain and would be corrected by neurolymphatic reflex massage or other reflexes such as neurovascular, meridian tracing or golgi tendon/spindle cell methods. Occasionally I found it necessary to use more than one or

more of the other reflexes to complete the corrections.

I felt that my patients and others needed to know how to help themselves and test the muscles so I worked out a mapping procedure whereby I have been able to map all the muscles and their spinal areas that I have used in my book Touch for Health.

The procedure I found is that a lateral motion over the spinous tips of the appropriate vertebra(e) will inhibit bilateral muscle function and that vertical motion moving the skin will facilitate the same muscles if bilaterally weak. The lateral movement of the skill will not weaken muscles unilaterally in my experience.

I would be interested in any other findings that members of the college have regarding bilateral muscle weaknesses.

The accompanying chart taken from my manual Touch for Health gives the location of the vertebrae that I have found to be associated with the various muscles. These are also listed on the TFH reference chart and the TFH Folios that have been revised early in 1992. The spinal level for correction is found in the upper right hand corner of the picture of the muscle test.

This method can be used in the fix-as-you-go method or in using the five-element corrections, or the 24 hour clock methods, with good results.

### Conclusion:

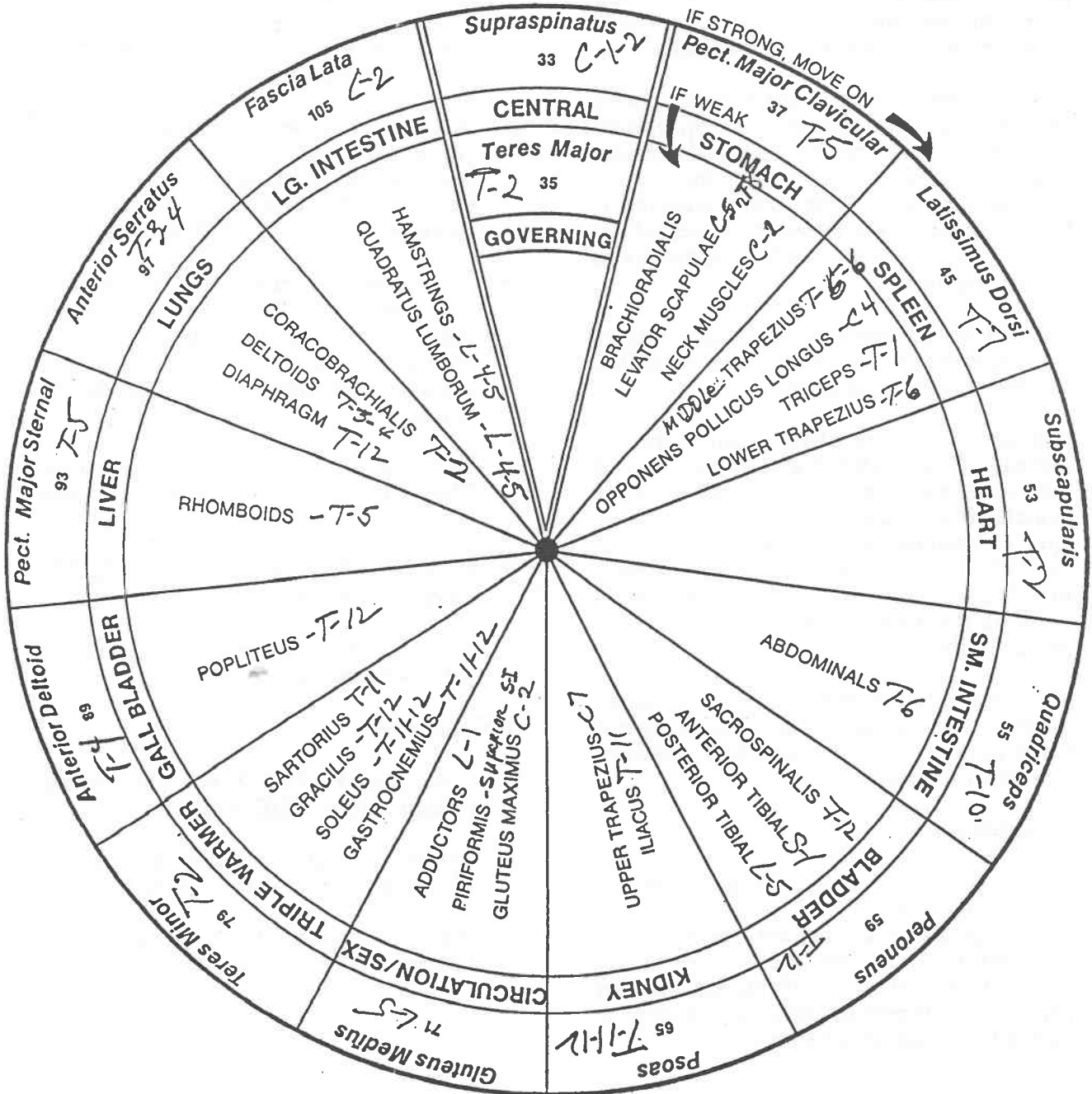
A method which corrects bilateral muscle inhibition, which can be utilized by paraprofessionals and lay persons as well as professionals in the course of their manipulation of family/friends/clients or patients is an important addition to Touch for Health Synthesis methodology.

### Procedure:

1. Make TFH muscle assessment.
2. Discover any muscles that are found weak on both sides of the body (both Pectoralis Claviculars, as example).
3. Look at Chart, Folio, or attached reference for Spinal level
4. Massage skin over the spinous process (the center portion of the bone in the spine) at the level indicated moving the skin over the bone in a headward to footward fashion for 10-20 seconds.
5. If not sure of exact location on spine, use two vertebrae above and below the indicated area on chart for the massage. Doing more levels does not affect the results. The correct level needs the massage.
6. Recheck the previously weak muscles. The bilateral weakness should be now eliminated.
7. If one muscle is still weak, use NL, NV, meridian methods for correction
8. Continue with assessment if necessary for procedure you are following.

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## The 5 Food Groups

by Robert A. Aboulaché, M.A.

**Abstract:** Life energy (Qi) permeates every living cell and tissue of our body. Qi is derived from our environment; first through our parents, then primarily through respiration and nutrition. This article utilizes the mappings of this life energy through the 5 Element system developed in the Orient. And, includes within its embodiment the nutritional components inherent in the 5 Element system. The purpose of this paper is to teach you how to nourish Qi so as to promote optimum functioning and the prevention of disease.

In *Touch For Health* we use the 5 Element balancing system to help us recognize energy imbalances and then to re-balance the blocked energy flows founded. This is done so as to prevent 'dis-ease' and gain a more optimum level of wellness. We have many different methodologies for helping us regain balance. The *Professional Health Provider* (PHP) balance epitomizes the 5 Element system in *The Touch For Health Synthesis*.

David Eisenberg, in his book, *Encounters With Qi; Exploring Chinese Medicine*, states: "The occurrence of disease is due to the struggle between Qi (vital energy) and 'pathogenic factors.' If the vital energy is insufficient to repulse these 'pathogenic factors,' then the body becomes dysfunctional, and unless treated, this imbalance will result in disease. If the body is imbalanced, even a minor 'pathogenic factor' can result in illness. Conversely, if one's body is in an excellent state of harmony, then there will be a strong 'positive vitality' and the most virulent of 'pathogenic factors' will not disturb the body."

With this ceaseless struggle between Qi and the environment, it is crucial that we strengthen our vital energy so as to prosper in health and wellness. To strengthen our Qi we need to continuously nourish it. This is done through the ecosystems found in our food, air and through energy/movement balancing (like what we do with TFH or prana yoga). Food and air rejuvenate our vital energy through the intricate ecosystem inherent within life. Energy/movement balancing assists vital energy flow.

Nourishment is a biological agreement between chemical structures in our bodies and those found in nature consumed in foods. Supplements such as vitamins, minerals, protein substitutes and carbohydrate drinks lack the subtle ecosystem life force found in food. Although supplements can give us some vital nutrients, there is no substitute for food.

The human and natural worlds are inter-related. The human being is a replica of nature. What is found in one is found in the other. We remake nature in the make-up of the human body. The 5 Elements is a mapping of the reflection between nature and humans. In the Orient, the 5 Element system signifies the intricacy inherent in the paradigm of Holism.

This paper will not delve into the full usage and understanding of the 5 Element system. In brief, however, the cycles in the 5 Elements (creative and regulative) are in constant flux. Illness is an impediment with the flow of these cycles and can be created through toxins in our: food; environment; and emotional, mental, and spiritual processes. In this article we will focus on the foods only.

Much can be written on food, eating and nutrients. In general, eating should be done only when hungry and *not* out of habit. We should eat foods by chewing them thoroughly, and never should we overeat. We should eat as natural a food as possible -- basic, real foods such as: naturally grown whole grains, legumes, vegetables, fruits, nuts and seeds; low fat dairy products and meats; and drink plenty of water. In addition,



we should deep breathe often. On the other hand, we should stay away from refined, processed and artificial foods that are inundating our marketplace. If we were to follow this regimen combined with the basic laws of: Variety, Moderation and Balance, we will successfully keep our Qi nourished.

Fruits, vegetables, legumes, whole grains, seeds and nuts have the highest amount of Qi energy. Milk and eggs followed by flesh foods give the next highest amount of Qi. When preparing foods for their Qi efficiency eating them raw is best followed by steamed, baked and fried -- respectively. The longer the food is cooked, the less Qi it sustains.

Because of life events, environmental toxins and sometimes poor decisions we manage to create imbalances in our Qi. This is where our training as healers help us -- in bringing balance back to our lives. The chart at the end of this article lists the foods found in each of the 5 Elements. It is to be used as a guide when helping ourselves or others in regaining balance. In the Holistic paradigm it is agreed that whether you seek to balance a living system through its bio-chemical, psycho-emotional, or energetic natures; working with one will have an affect on the others. Therefore, whether you balance someone by massaging a point on their body, or by suggesting some food substances to them -- you are affecting the whole of them. Of course, the more avenues you use to assist one in regaining balance (with the body's consent), the greater and more powerful the healing (balancing) force.

Use the *Foods And The 5 Elements* chart to assist you in balancing yourself or your clients by following these procedures:

- Do preliminary clearing: switching, dehydration, ionization, central meridian clearing -- with IM.
- Do a 5 Element balance to asses the individuals needs (refer to the TFH manual page 113; or the TFH Midday - Midnight Law book).
- Muscle test Food categories and specific foods in relationship to specific Element

being balanced and in accordance to 5 Element balancing procedures. Check and confirm with IM.

- If you are doing a PHP balance, implement prior step as a reinforcement to finalized goal balance. Ask body if there is food supplement needed to strengthen and reinforce Qi efficiency, or use Personal Ecology mode #3. Proceed by checking appropriate Element and specific foods.

### Summary

In summary, the art of balancing and keeping healthy is gentle and profound. In order to experience a vital life energy and to stay healthy we must live a life of balance. Healing must be seen as a process of this vital energy flow and work in harmony with it. Food is central to our existence. Eating the right foods in the right amounts will assist us in living a vibrant life because it feeds our Qi. If, however, through our daily encounters we develop an imbalance or a dysfunction -- balance must be sought. We can do this on many levels: physical, emotional, psychological and spiritual -- all are beneficial and each will affect the other. Food as a nourishment to our Qi is an excellent and necessary means to regain balance and keep healthy. If dysfunction or disease does occur, using the 5 Element system for balancing combined with the food chart that follows -- balance can be realized.

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# Foods And The 5 Elements

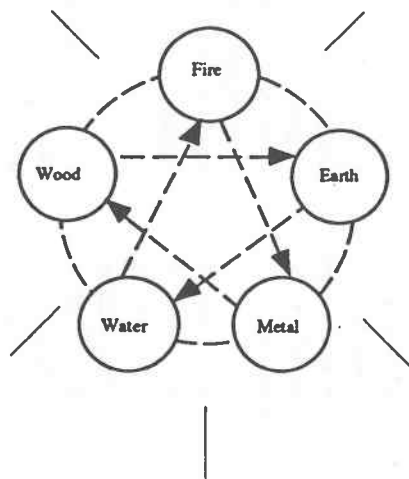
By Robert A. Aboulaché, M.A.

## Using The Chart:

1. Do Preliminary Clearing: switching, dehydration, ionization, central meridian clearing - with LM.
2. Do a 5 Element balance to asses needs.
3. Muscle test food categories and specific foods in relationship to specific Element being balanced and in accordance to 5 Element law balancing procedures.

Element: Wood	Organs: Gall Bladder	Liver
Foods:	Flavor: Sour	
Vegetables	Fruits	Grains
Green Pepper	Avocado	Oats
Broccoli	Sour Apple	Rye
Romaine Lettuce	Sour Citrus	Wheat
Parsley	Plum	Lima
Green Peas	Sour Cherry	Mung
Zucchini	Loquat	Wheat Grass
String Bean		Wheat Bran
Rhubarb		Wheat Germ
Carrot		Barley
		Peanut
		Alfalfa

Element: Fire	Organs: Small Intestine	Circulation Sex	Triple Warmer
Foods:	Flavor: Bitter		Heart
Vegetables	Fruits	Grains	Meats
Red Pepper	Apricot	Sunflower	Shrimp
Chicory	Raspberry	Com	Beef Heart
Endive	Strawberry	Amaranth	Lamb
Tomato		Red Lentils	Mutton
Brussel Sprouts		Sesame	
Asparagus			
Sweet Potato			



Element: Earth	Organs: Spleen	Stomach
Foods:	Flavor: Sweet	
Vegetables	Fruits	Grains
Collard Greens	Bananas	Millet
Squash	Melons	Chickpea
Eggplant	Coconut	
Pumpkin	Raisins	
Rutabaga	Dates	
Spinach	Figs	
Tapioca	Tropical Fruits	
Prunes	Cherries	
	Tangerine	
		Meats
		Anchovy
		Sturgeon
		Carp
		Miso/Teas
		Rosemary
		Licorice
		Peppermint
		Sarsaparilla
		Almonds
		Pecans
		Macademia
		Pine Nuts
		Ice Cream
		Cottage Cheese
		Sugar
		Honey
		Maple Syrup
		Carob
		Sherbert
		Sweet Milk

Element: Water	Organs: Bladder	Kidney
Foods:	Flavor: Salty	
Vegetables	Fruits	Grains
Sea Veggies	Blueberry	Buckwheat
Arame	Watermelon	
Hijiki	Concord Grape	
Kombu	Blackberry	
Wakami		
Mushroom		
Water Chestnut		
		Meats
		Kidney
		Pork
		Duck
		Abalone
		Scallop
		Sardine
		Oyster
		Lobster
		Catfish
		Miso/Teas
		Juniper Berry
		Nettle Leaves
		Ginger root
		Salt
		Miso
		Soy Sauce

Element: Metal	Organs: Lung	Large Intestine
Foods:	Flavor: Salty	
Vegetables	Fruits	Grains
Cabbage	Pear	Rice
Celery	Peach	Taro
Cauliflower		Soy
White Potato		Spirulina
Turnip		Tofu
Onion		Amazake
Daikon		Tempeh
Cucumber		
Radish		
		Meats
		Cod
		Flounder
		Haddock
		Halibut
		Perch
		Beef
		Turkey
		Miso/Teas
		Burdock Root
		Comfrey
		Ginger
		Garlic
		Pepper
		Cayenne
		Nutmeg
		Walnut
		Basil
		Dill

## Repetitive Muscle Stress

by Elizabeth Barhydt, BS, MT and Hap Barhydt, PhD

**Repetitive Muscle Stress** (or **RMS** for short) is turning out to be a major problem of the budding 1990's. This is being triggered by the rapidly increasing computer key board usage, causing such problems as numb fingers, painfully stiff wrists (often diagnosed as "carpal tunnel syndrome"), stiff and sore arms, shoulders, back, etc.

Actually **RMS** has been around for a long time. Ask the beauticians who can't hold their arms up at the end of the day or comb their own hair or brush their teeth. Or ask the grocery checkout clerk who can't put on a pullover sweater. Or ask the meat and poultry packers who find themselves in such pain that they are unable to continue working and find themselves on disability unemployment. Or ask the dentist who works limited or half days because his arms and wrists go weak when he works too long. The list goes on and on.

The increasing occurrence of **RMS** with its very debilitating symptoms is resulting in increasing legal action, employees suing employers, and increasing statutory regulation by the state and federal governments. This is resulting in an increasing morass for businesses large and small that mostly translates into more forms, more fines, and more bucks.

Most efforts to reduce the effects of **RMS** center around reducing the repetitive activity impact. These efforts include "optimal" workstation design, braces and splints, frequent rest periods, and job rotation. They all do help to reduce **RMS** but often at a cost of significant loss in productivity.

**However the bottom line** is restoring the loss in muscle balance and strength triggered by the repetitive activities. Major factors in **RMS** are **Reactive and Frozen Muscles**.

In a typical repetitive activity, certain muscles soon tire. As the activity is continued the muscle tone, or energy level, is altered to compensate. Gradually more and more reactive muscle interactions are set up. A

reactive muscle is a muscle that weakens, when another muscle is activated. Often the person has the feeling of getting weaker and weaker as they continue to attempt to perform an activity, while other parts of their body tighten up.

In the case of stiff or painful wrists, with the degradation of the muscle balance in the arms due to the repetitive activity, the wrist structure, including the carpal tunnel, is no longer properly supported by the musculature, and the integrity of the carpal tunnel collapses resulting in irritation of the nerves and tendons passing through it.

Correcting the reactive muscle imbalances and any frozen (hypertonic) muscle conditions, immediately relieves the stress on the wrist structure, allowing it to return to normal. Typically much of the pain and stiffness disappears almost immediately, and most of the rest disappears in 12 to 24 hours as the injured tissues quickly heal once the stress is removed.

We have been helping people with **RMS** for over 10 years balancing Reactive and Frozen Muscles. Until we discovered the **Reactive Muscle Basic Balance** and the **Frozen Muscle Basic Balance** in 1988, such balancing required considerable skill and time because the layers of specific reactive and frozen muscle combinations needed to be identified and balanced in priority order. Now the **Basic Balance** routines eliminate the need to identify the specific muscles involved, making it easier for the therapist to achieve effective results quickly and opening the door to simple **self-help** routines.

The **do-it-yourself** aspect of our **Basic Balance** exercises makes it possible for workers to do this balancing on the job without the assistance of a muscle balancing therapist. The exercises can be done beforehand, or on the job, or afterwards.

Also involved in some cases are **Muscle Knots** (localized muscle spasms) limited

**Range of Motion** (due to overly tight muscles fibers), and **Shock Absorbers** (tight joints). In some cases residual **Structural Imbalances**, deriving from the muscle imbalances, may also be an important factor. When present these factors must also be dealt with for complete relief.

Additional factors whose importance we have become aware of more recently include **Muscle Control Circuit Imbalance** (contralateral and homolateral muscles) and **Mixed Modes** (including Frozen Reactives, Structural Reactives, and Frozen Structure). These too can be corrected with simple do-it-yourself exercises.

**RMS** is also a factor in many athletic activities. We have seen these balancing exercises together with our **Five Finger Quick Fix** improve basket ball, golfing, hiking, and aerobic exercise performance and would expect significant improvement in most other athletic and dance activities.

All of the Balancing Exercises and Muscle Testing routines required to balance **RMS** and related imbalances are described in the 64-page version of our book, *Self-Help for Stress and Pain*, (Ref. 6).

The original version of the Five Finger Quick Fix can be found in Ref. 1. The updated version can be found in Ref. 2. The Basic Balance Exercises for reactive and frozen muscles are discussed in Refs. 3 and 4. Homolateral and contralateral muscles are discussed in Ref. 5.

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For information regarding RMS and our Self-Help exercises, please contact us at 22625 Ferretti Rd #15, Groveland, CA 95321 (209) 962-4847 (HUGS)

## The Wheel of Emotion

By Jessica Bear, ND

Edited by Pam Callaway

### Understanding the Cycle of Emotions

The Wheel of Emotion is based on Dr. Bach's Twelve Healers. These Twelve Healers are representative of all personalities found in human nature and which correlate the 12 Basic Personality types found in all walks of life. There are, of course, 38 Bach Flower Remedies in all, which are separated into three basic categories of applications: the 12 Basic Personality Types, as mentioned above; the 7 Helpers, which assist in determining the virtues of the 12 Personalities; and the 19 Assistants that are the sprays of emotions caused from a Personality being out of balance for too long. The integration of the Bach Remedies not only assists the client by offering a physical substance that they can take, as often as they want, toward easing emotional stress but also, the Wheel offers a pictorial overview to determine their true personality with a deeper understanding of the cause of the conflicts within their family and themselves.

### The Purposes of the Wheel:

1. The Wheel can be used as an insightful tool to recognize the interrelation of the 12 Basic Bach Flower Personality Types. For clarity, the Wheel is further divided into 3 sub-personality types: the Dominators; Mediators; and Enablers, (shown on the outside perimeters on the Wheel Chart). These categories explain how it is possible that one person could appear to be playing the role of all of these sub-personality types everyday, thereby losing sight of who they really are.
2. The Wheel is a visual tool designed to quickly reveal the true Personality; "who I really Am," not a pseudo-personality that is created by genetics, parental influences, or improper self-programming of the personality. Bach said, "The Remedies assist us to maintain our

personality. And the secret in life is to be true to our personality, not to suffer interference from outside influences."

3. The Wheel exposes negative and positive emotional characteristics by utilizing three "Key Words" designed to describe each particular sub-personality state: Virtue (+), Reaction (\*), and Fault (-): these "Key Words" are "red flags" which signal when the destructive process is "in motion" or, should I say, "E-motion." The "Key Words" assist in recognizing when the true, sovereign personality is being usurped.
4. The Wheel relates a simple method of unfolding the internal and external psychology of cause and effect.

As stated above in Purpose #1, The Wheel is divided into three sub-categories of emotional expression:

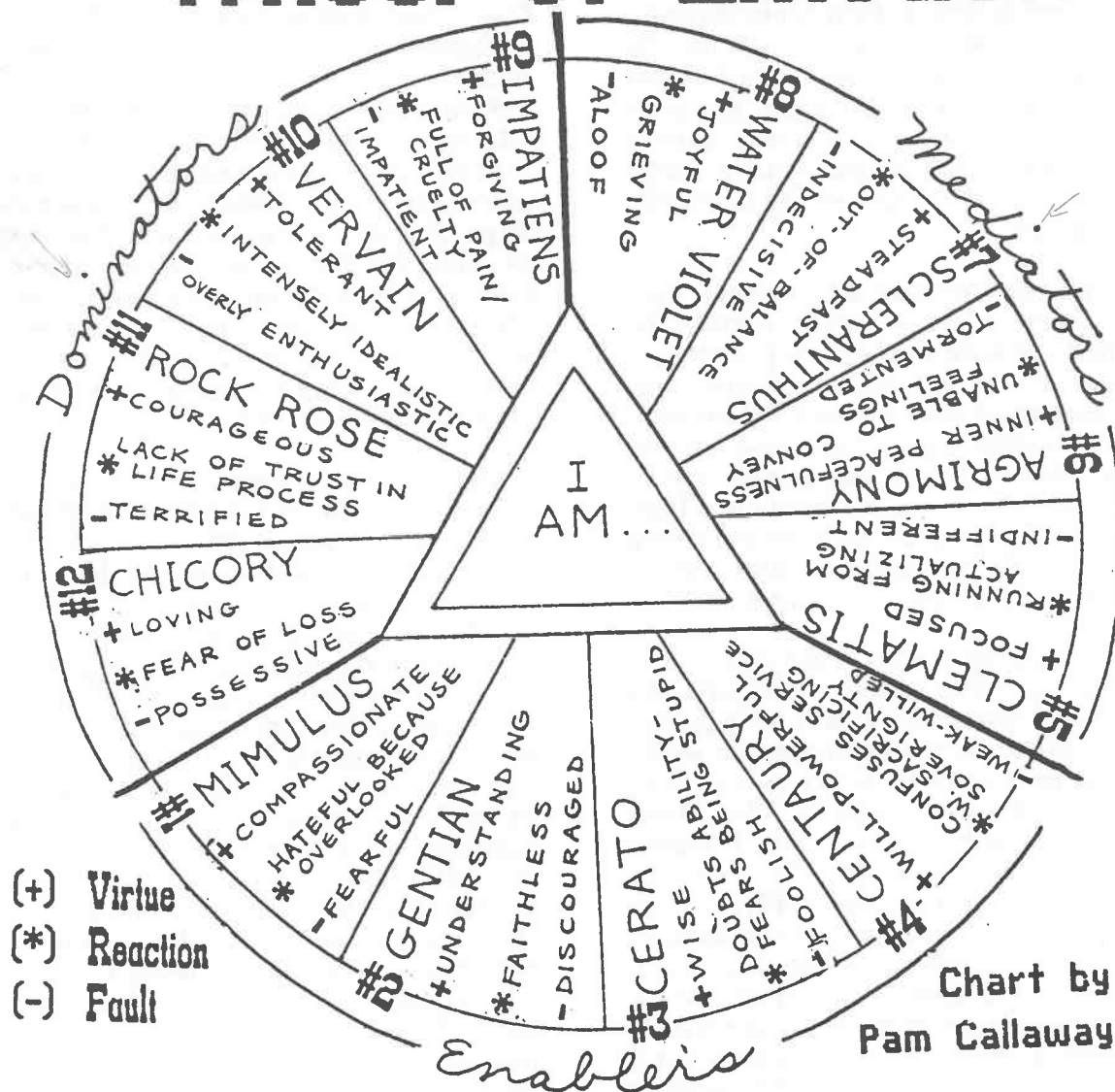
**The Dominators:** Those who are often the authority figure; in control; the "shakers and movers" and, most often, the abusers.

**The Mediators:** the ones "stuck" in the middle; the natural at public relations; the peace makers who are able to see both sides and are often hard to recognize because they become easily lost, therefore, unnoticed due to the conflict between the Dominators and the Enablers.

**The Enablers:** often referred to as the "victim", appearing to be the weaker individuals who find it difficult to protect themselves from outside influences in life; they appear to be fragile, therefore, less able to cope with the demands of the world. At any given time during the day we are capable of exhibiting any of these three sub-categories of emotional expression in our state of being.



# Wheel of Emotion



## Example #1

Let's say at work you are the manager. This fact would naturally place you in the Dominator category because the role of manager assumes the authority position. The dominator-authority figure is expected to handle unexpected situations that arise and to maintain control of the employees and company in general.

This same person, whom we will call Sally, upon arriving at the home-front, may turn into the Enabler. For example, Sally may be the controller-dominator-manager at work,

but as soon as she walks into her front door she receives demands from her children and spouse. She immediately becomes a slave to her family's demands which transforms her into the Enabler type, frantically running about trying to please or fix everyone. The husband and children order her about like she is the family dog and they do nothing to help her with the dinner or household chores. She maintains no control over her family or herself.

Sally may also retreat into the role of the Mediator when she goes to visit her parents and siblings. She is expected to be the



peacemaker during family reunions such as; keeping peace between the parents or being the elected communicator for the parents who cannot seem to talk to their other children. The Mediators often retreat inwardly into the silence, to avoid the emotional war between the Dominators and Enablers; or, even worse, they become unnoticed, quietly slipping into the role of the "middle child." (These levels of the Wheel will be more fully described later.)

As stated in Purpose #2, another very important use of the Wheel is to assist the personality toward **recognizing destructive cycles** in their life. For example, was Sally being manipulated from the Dominator into the Enabler type to accommodate her family? Remember, a destructive cycle, according to Bach is any interference from the outside that hinders one from remaining true to THEIR personality without being distorted by the influences of others.

Let's continue by exploring the course of a typical session with someone like Sally. An overview of this person's story reveals that she appears to be the Dominator at work. Let's now refer to the Wheel Chart and locate the **Dominator-Category**. The Bach Flower Personalities listed are: **Chicory (#12)**, **Rock Rose (#11)**, **Vervain (#10)** and **Impatiens (#9)**. After discussing the differences of the personality types she would probably agree that she is very intense; and believes that things "should be" a certain way. A workaholic type who is intolerant of others who she feels are not productive enough. We would quickly determine that she was a **Vervain Personality Type (#10)** within the Dominator category.

Sally's case history, as we had determined earlier, revealed that she was the Enabler type at home. If we, again, refer to the Wheel, we will notice that within the **Enabler Category** the Bach Flower Personalities are: **Mimulus (#1)**, **Gentian (#2)**, **Cerato (#3)**, and **Centaury (#4)**. We would discover that she is a **Centaury Personality Type** because she admitted being the "people-pleaser", submitting easily to her family's demands, and that it was very difficult for her to say "no" to them.

She, further cycled into the Mediator Category after involvement involved with her parents and family. Again, refer to the Wheel Chart, and notice within the **Mediator Category** that the Bach Flower Personalities listed are: **Water Violet (#8)**, **Scleranthus (#7)**, **Agrimony (#6)**, and **Clematis (#5)**. We would discover, further, that her behavior in this Category most typifies the **Clematis Personality Type**. She admits that she was a daydreamer as a child and that she was the one required to keep things in order around the house. When life became too stressful she would retreat into silence to get away, if she could. She now avoids seeing her parents at all or only does so when necessary.

Pursuant to the goals of Purpose #2, according to the information revealed in Sally's story so far, we have discovered that **her true personality could be either Vervain (Dominator), Centaury (Enabler), or Clematis (Mediator)**. Where does the process of disintegration of her True Personality begin? Will the real Sally please stand up! Bach believed that if we could determine our true goals in life that this would be an indication of our purpose, as well as, the key to our health and happiness. Therefore, at this point, I might ask Sally where she is most happy and comfortable. Does she love being a mother? Does she love doing her job? Does it make her happiest when she is being creative or contemplative being alone within her own mind? She admits that she likes her job but that she works because the family needs the second income. If Sally admits that she really works because the family needs the second income why, then, does she add the additional stress of also being the manager. Next, I might ask Sally if her father was an intense individual who thought that everyone should think and act like him, or be deemed "wrong." If she further stated that her father was the workaholic type and was intolerant of lazy, unproductive people who liked their time-off or vacations, I could conclude that her father was truly the Vervain type who planted the thought in Sally that she had to be like him or be "wrong" and unworthy according to his judgement.

Next, I would ask Sally how she likes being a mother. If she said, "I like being a mother, but the reality is that family life really stresses me," I would ask her if her mother was the "good mother" type? If Sally were to answer, "Yes" and add that her mother waited on her father hand-and-foot, I would conclude that the Centaury type was not innately Sally, but her mother's personality. This would indicate that Sally "bought-into" her mother's personality, or "bought-into" her mother's need to be the "good, sacrificial mother" type, thereby owning her mother's life expectations in order to win her approval.

When Sally stated earlier that she was a day-dreamy child, I suspected that she was the Clematis Personality type. To confirm that she was the Clematis type I asked her if she was creative; for example, did she like to paint or write? And how did that make her feel? She enthusiastically replied that she loved being creative; that she soars with the eagles and feels at home when she is immersed in her own thoughts, writing her poetry. Remember Dr. Bach's words, "And this work, whatever it may be, if we love it above all else, is the definite command of our soul, the work to do in this world, and in which alone we can be our true selves interpreting in an ordinary materialistic way the message of that true self."

Now that we have located Clematis as Sally's true personality, how do we maintain it? Her work life and home life are very demanding. When does Sally have a chance to be Sally? Let's refer back to Purpose #3 which mentions the three "Key Words" which describes the state of the personality and further reveals the power of the destructive cycle that overwhelms the true Self, causing it to lose sight of "Who I Am." This sub-section of the Wheel is delineated in three additional categories on the Wheel entitled: Virtue; Reaction; and Fault.

**The Virtue (+):** This "Key Word" is normally considered the positive trait that reveals the highest and most Sovereign state of being and could be called the spiritual expression of the personality. The closer the personality comes to expressing this state of being, the more able it is to remain true to Itself and therefore remain in union with its

sole (soul), or higher, purpose. Keep in mind, however, that even a Virtue can be over-positive; that is, the personality may be overly-tolerant or overly-sympathetic and in this excess again give away Sovereign power.

**The Reaction (\*):** This "Key Word" reveals how a personality type would "act-out" their mental state of being. If the person is wise enough to recognize and halt the potentially negative process at this stage, it might save them the pain of experiencing the ill effects and destruction of sabotaging the True Self.

**The Fault (-):** This "Key Word" indicates the physical result of the spiritual and mental levels being out-of-balance due to not remaining true to Themselves. Therefore, the cycle degenerates into a negative state of being.

To Continue by applying Sally's case to these principles, you will remember that Vervain was the personality that Sally expressed in the **Dominator Category**, Centaury in the **Enabler Category**, and Clematis in the **Mediator Category**.

#### According to the Wheel Chart:

The Personality states of the Vervain type are:

- (Virtue +) Tolerance
- (Reaction \*) Intensely Idealistic
- (Fault -) Overly Enthusiastic

The Personality states of the Centaury type are:

- (Virtue +) Will-Powerfull
- (Reaction \*) Confuses service with sacrificing sovereignty
- (Fault -) Becomes the door-mat

The Personality states of Clematis type are:

- (Virtue +) Gentle - the creative nature
- (Reaction \*) Running from actualizing
- (Fault -) indifference

As we discovered earlier, Sally is imitating her father's Vervain personality. By understanding these "Key Words" we are able to explain to Sally the necessity of remaining cognizant when these "Red Flags" appear which signal when she is becoming a



victim of another's personality encroaching upon her True Self. For example, a "Red Flag" should go up when Sally realizes that she is playing the part of her father by being too intolerant of her staff and having the expectation that they "should" respond idealistically, as well as enthusiastically. A different set of "Red Flags" appear when Sally is playing the part of the Centaury Personality type of her mother. For example, because Sally now recognizes when she is playing the part of the family "door mat." ("Red Flag" time) she no longer needs to feel guilty when she does not attend to her family's every demand and can now delegate the responsibility to meet the family's needs to other members of the household. **Sally must now study the "Key Words" to help her maintain integrity, remain true her Real Self, in her case, the Clematis Personality type.** Positive indicators would be to take time and be creative and to no longer absorb the negativity resulting from her family's judgement that she is "wasting time" by writing poetry or doing her art that she loves. Sally can realize that her family means well, but that they are ignorant of the demands of her own Personality. **She must break the destructive cycle of being belittled for expressing her True Self.** She no longer needs to crawl into a dark place to escape the cruelty of her family's insensitivities. She is now able to allow her family to express their opinion without taking it personally or succumbing to their expectations. Now her recreation is in reality Re-Creation. Oh, happy days are here again!! (Purpose #4).

To follow this session with Sally to completion, I would **formulate a Bach Flower Remedy for her that would assist in maintaining the integrity of her True Personality.** Based on the information gathered during this consultation, I could suggest that her Remedy include:

Clematis: to maintain her True Personality, as well as to assist her in actualizing her creative ideas in the material world.

Wild Oat: to stimulate her soul purpose in life, as well as opening doors of opportunity to her creative talents by giving her a channel to express her work.

Chestnut Bud: to help her change her old habit patterns and to lift her out of the rut she finds herself in with her job and home life.

Walnut: to create an extra insulating protection from the influence of her family; to assist her to maintain her True Self when the family thinks she is wrong to follow her own sovereign path.

**Another case study** in the integration of the Bach Flower Wheel of Emotion into a self-discovery process can be found by exploring the tendencies of the natural-born **Mimulus (#1) Personality type.** They are normally non-assuming individuals; compassionate, in their highest aspect, as noted on the Wheel. This type would do well in an understanding, gentle society, but when subjected to the outside harshness and cruelty of the human world, they become the most likely victims. If the Mimulus type is abused at an early age and, therefore, never allowed to mature into their natural capacity for compassion (Virtue +) (i.e. compassionate mothers, natural healers, nurses, clergy, etc.), they may be forced to remain in the lowest aspect of the **Mimulus type, which is fear ( Fault-).** The fear, cruelty, and neglect that stunted the maturation of their emotional Self could then force them to retreat within, possibly into the negative aspect of the **Agrimony (#6) Personality type, better known as the "master of denial!"** Typical of the Agrimony, the pain of the past is too unbearable to face (**Fault {-} silently tormented**) and, therefore, it is never confronted or released. Further, the suppression of anger, fear, and torment often causes the negative Agrimony type to retaliate by resorting to the behavior of the negative **Chicory (#12) Personality Type (Fault{-} Possessive or possessive natures)** and which is to lash-out by either harming themselves (through the use of drugs, alcohol or even suicide) or abusing others who are not as powerful as they are (children, women, animals, etc.) And so, the cycle of abuse continues as the once-innocent child who was abused, now a frustrated and angry adult, resorts to the negative, destructive behavior of the out-of-balance, abusive Dominator (Chicory #12).

Hopefully, with the insights that the Bach Flower Wheel of Emotion offers us, we can expose the "cause and effect" of the vicious, destructive, cycle of abuse before it can harm another child.

In conclusion, the Wheel of Emotion offers an overview of the basic 12 Personalities in existence and how all personalities interrelate. **The most powerful tool at the disposal of our Higher Self is the awareness of the sovereignty of our True Personality.** With the assistance of the Bach Flower Remedies it is possible to maintain that Personality, once found, by staying aligned with the realization of one's true destiny while remaining unhampered by unconscious attachments to pseudo-

personalities. In the last analysis the wisdom of the ages affirmed, "Remember, to thine own self be true. Twill follow is the night and day, thou cans't not then be false to any man." Shakespeare

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## Is Wheat a Heavy Metal?

By Clovis Horta Correa

### Introduction

As soon as we came home from IKC/I-ASK Conferences of 1991, we started to work with the new techniques that were developed by the various specialists and presented during the congresses.

Among these techniques, the one presented by Sheldon Deal, DC, at the 1991 TFH and I-ASK Annual Meetings, about the detoxification of heavy metals, was used almost daily.

At the same time, we started to study two books, *Allergies and Candida* by Steven Rochlitz (ref. 1), and *Tired or Toxic* by Sherry Rogers, MD, (ref. 2). These two books have something in common: **they say that we should be extremely careful with the allergies derived from food and environmental components.** As among the foods, **wheat, corn, and sugar**, are major components of our dairy diet., we decided to check our clients on them, in our institute in Rio de Janeiro - Brazil (Instituto Brasileiro do Balanceamento Muscularo). To our surprise, and astonishment, **all the clients checked had wheat, corn, and sugar allergies!**

And, more than that, **the wheat allergy had greater priority to their bodies than even a heavy metals intoxication!**

On the other hand, in our point of view, almost all our effort had been done into the defusion of the **neurotransmitters**. (Note: for **all** we are meaning **all of us**, people that work with the techniques known as TFH Synthesis) Almost all of us have been working strongly on the emotional part of the toxic system. But, for us - due to the results that we have obtained until now - what is really happening is that the emotional part of the toxic system is not the most important part of the "problem". As a consequence, our experience until now is that, **if we defuse wheat allergy, the process of auto-**

**healing is extremely faster than if we stay working on the emotional level only.**

### Techniques Used and Persons Checked

We based this work on a total of 171 (one hundred and seventy-one) persons that we checked on wheat/corn/sugar/heavy metals, 64 (sixty-four) men and 107 (one hundred and seven) women. As we are taking new clients constantly, these numbers refer to the persons checked until February 29, 1992.

The procedure that we used to check wheat, sugar and corn is as follows:

1. We took one Indicator Muscle (IM) clear -- that means, checked to be used as described in TFH I,II and III and in Three in One Concepts techniques (clear circuit, polarity, etc.):
2. Then we placed some wheat/corn/sugar in turn on the navel of the testee, and if the IM tested "weak", then we had one "allergy";
3. We double checked this "allergy" by placing the hand of the testee on the skull over the base of the brain -- if the IM stayed "weak", then we had one "allergy" in the moment.

For the heavy metals, we used the technique presented by Sheldon Deal, DC, at the 1991 TFH and I-ASK Annual Meetings.

As we already said, a wheat/corn/sugar "allergy" was found in all the people we checked.

A heavy metals intoxication was found in 84% (eighty-four)) of the clients we checked (men or women, indifferently).

The statistical distribution of the men and women with heavy metals intoxication are shown in figure 1 and 2. For the men there is



one almost even distribution of occurrences of heavy metals intoxication between 1 to 49 years; for women, there is a strong concentration of almost 70% (seventy) of the cases between 30 to 59 years. Figure 3 shows the statistical distribution of men and women together.

Figure 1. MALE

AGE	HM	%	NHM	%	QTY	%
1-9	10	19	2	20	12	19
10-19	6	11	3	30	9	14
20-29	12	22	12	19		
30-39	9	17	1	10	10	15
50-59	4	7	1	10	5	8
60-69	4	7	1	10	5	8
70-79						
TOTAL	54		10		64	

Figure 2. FEMALE

AGE	HM	%	NHM	%	QTY	%
1-9	7	8	1	6	8	7
10-19	5	6	1	6	6	6
20-29	9	10	2	12	11	10
30-39	18	20	8	46	26	24
40-49	22	25	3	18	25	23
50-59	21	23	1	6	22	21
60-69	4	4	1	6	5	5
70-79	4	4			4	4
TOTAL	107		90		17	

Figure 3. MALE & FEMALE

AGE	HM	%	NHM	%	QTY	%
1-9	17	12	3	11	20	12
10-19	11	7	4	14	15	9
20-29	21	15	2	7	23	13
30-39	27	19	9	33	36	21
40-49	31	22	5	19	36	21
50-59	25	17	2	8	27	27
60-69	8	5	2	8	10	6
70-79	4	3			4	4
TOTAL	144		27		171	

NOTE:

HM means people that do have heavy metals intoxication

NHM means people that do not have heavy metals intoxication.

## The Body Priority

When we started to check this "food allergy", we were thinking that, may be some of our clients would have it. But they all did. And we were thinking, too that probably, refined sugar should be the priority. And they did have sugar "allergy", but not as a priority. And they did have corn allergy, too, but not as a priority. **Wheat** was the priority.

As a great part of the persons checked had "wheat allergy" **and** heavy metals intoxication, we decided to check which was the priority of the body: to defuse the wheat allergy or to defuse the heavy metals intoxication - and, to our astonishment, in 100% (one hundred) of the cases, the priority was "wheat allergy".

As this point we came to one question that was: **To the human body: is wheat a heavy metal?** That means, is it so toxic to the human beings?

In *Tired or Toxic* (ref 2) we have [sic]:

"Furthermore there's a population of people who are gluten sensitive. When they have grains containing gluten (wheat, rye, barley and triticale) it causes a reaction in the intestinal wall (villous atrophy) where it becomes incapable of absorbing nutrients well and causes a host of gastrointestinal complaints. This gluten enteropathy is called celiac disease and can be likened to a severe form of wheat allergy. Sometimes even the slightest amount of wheat can set off a chain of events causing such severe malabsorption that these people look like they just come from concentration camps. Even a trace of wheat flour in a food can damage the intestinal lining for months!"

In *Allergies and Candida* (ref. 1) we have [sic]:

"It can be shocking to find out your favorite foods are your worst allergies. But this is one of the causes of allergy. It's no coincidence that the most frequently eaten foods in our society are also the most common allergies. This includes wheat, corn, sugar, coffee, mile, peanuts, chocolate, eggs, oranges, tobacco, tomatoes, beef and yeast."

And [sic]:

"Another food, only recently eat by man is wheat. Some say it is unnatural hybrid: cultivated and eaten only in the last 5000 years. Anthropologists cite cave drawings depicting arthritis and schizophrenia at times coinciding with the first ingestion of wheat."

**Then, may be, wheat is really toxic to the human beings?**

So, for these reasons, we started to consider that, may be, we all have wheat allergy, although we can't just recognize it due to the different reactions we get from "wheat allergy".

### **One Strange Discovery**

At the same time we checked wheat, we checked sugar and corn. One day, by hazard, we placed sugar and wheat together over the navel of one testee. And to our astonishment, the wheat allergy just disappeared! We checked that again and the answer was clear: **The wheat allergy disappeared with refined sugar!**

For some reasons that we could not understand yet, refined sugar counteracts "wheat allergy" for about 70% (seventy) of the people we checked.

**And, although refined sugar counteracts wheat allergy, it does not counteract corn allergy! Nor do wheat and corn counteract each other.**

Then, bearing in mind all this information, we came to some questions.:

- A. How does refined sugar counteract "wheat allergy"?
- B. Why doesn't refined sugar counteract corn allergy?
- C. Is there any other food that will counteract "wheat allergy"?

### **"Wheat Allergy" Defusion and Results Obtained**

We started to defuse this "allergy" using TFH and Three in One Concepts techniques. As a first result, the persons that were being balanced in spaces of 4 to 6 weeks increased the space between one balancing to the other to 10 to 15 weeks, only due to the "wheat allergy" defusion. That means, they got a lot better!

But there is another question extremely important too: **What else happened to those people whose "wheat allergies" we defused?**

And that's another strange part on this matter! **We had very different results than what we would have expected!**

These results ranged from getting better, from depression or migraines, to getting better of stomach problems (aches, sourness, bad digestion), facial flushing, skin problems and pains in general.

### **The Body Stressors**

With all these results we got on our hands, results completely different in a wide range, we started to ask to ourselves:

- Why?
- What was happening?
- How could wheat depress the body functioning to a point in which it would produce so many different results?
- And how/why did this reverse when we defused "wheat allergy"?

We could come to some conclusions based on the two books referenced at the beginning. The answer is: **explosion of the detoxification system.** It is indicated in these books that the brain is extremely attacked by the chemicals produced during the allergic process, causing several different results.

From *Tired or Toxic* (ref. 2) [sic]:

"These self-made brain chemicals also vie for aldehyde pathways for metabolism. That is

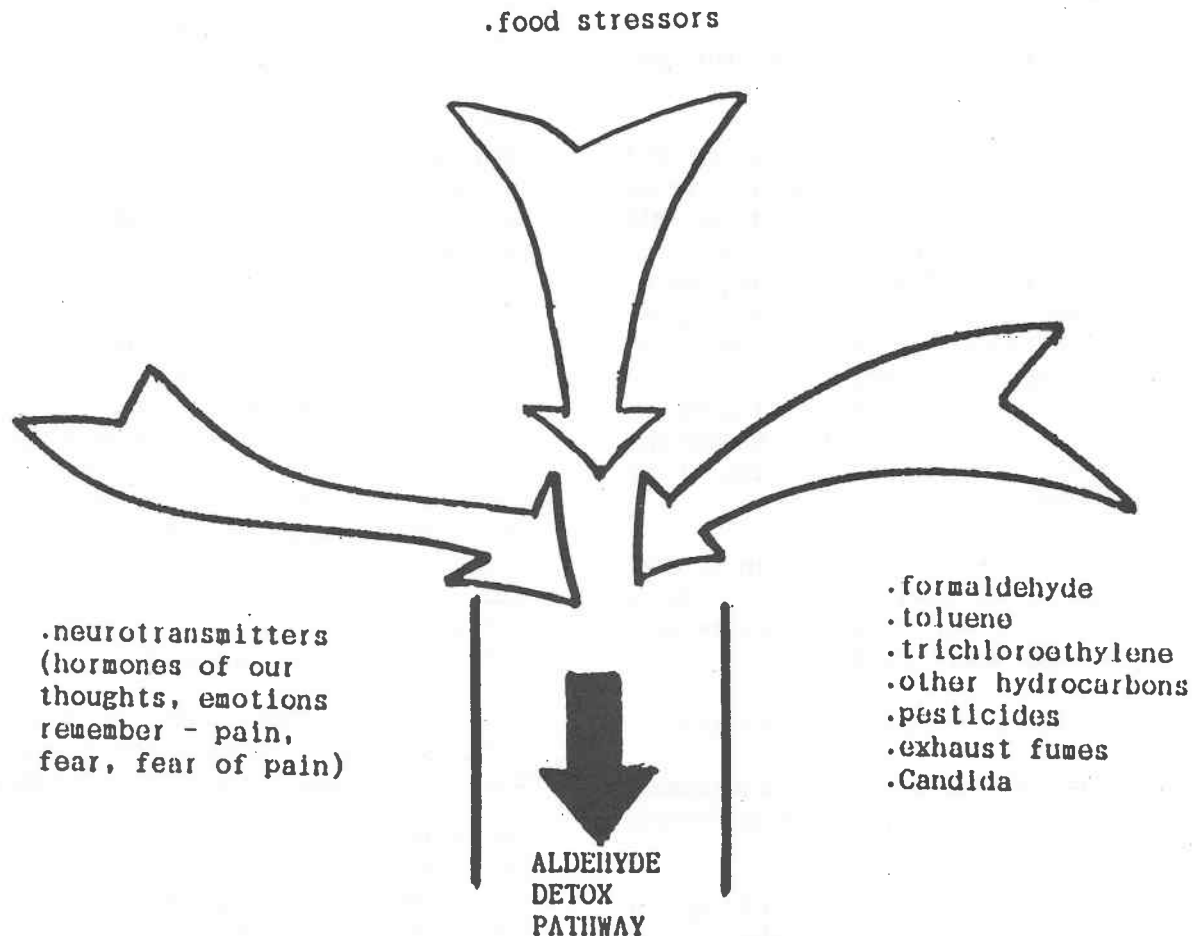


Figure 4

why stress makes a person more chemically sensitive.

"Furthermore, constant stress, (or anger or fear) can increase noradrenalin synthesis that increases histamine release from master cells. Translation: stress also adds to the total load of the detoxification system, accentuating chemical intolerances, as well as regular dust or mold allergies."

In our point of view, what has been written before can be synthesized by figure 4. This figure means that we have three major types of toxic inputs -- food, chemicals, and emotional -- that go to the same aldehyde detoxification pathway. And part of these chemicals, like aldehydes, and formalde-

hydes, are produced during digestion if we have one allergic process.

As a consequence, whenever we take wheat, and if we have **wheat allergy**, our body detoxification system is automatically attacked by chemicals derived from the allergic process itself.

If we consider that we usually take wheat everyday, we will understand that, the ones that have "wheat allergy" have constant level of allergy.

**This constant level of allergy is a real problem!** Anything that backlogs the detoxification system automatically starts from a high level of blockade in it: thus

creating all the consequences we have already mentioned in this text.

### **Then, Why Does It Work on the Emotional Level?**

Our defusion system (TFH I, II, III and Three in One Concepts techniques) work on the emotional level primarily, and **people get better!** We have thousands of cases that prove it. Why does it work? In our point of view, strongly, because we are reducing the quantity of toxics, (i.e - neurotransmitters) that are going to the aldehyde detoxification pathway (see figure 4). For this reason the body develops a better way to handle the other toxics, increasing the capacity of the system to detoxify them.

**The problem with this solution is that the toxic level derived from "wheat allergy" stays on! (And is extremely high, please don't forget!)**

Why? Because people take wheat everyday!

That means: we are working like Sisiphus! We defuse the neurotransmitters, but people take wheat and build it up again!

Can we win this battle working on neurotransmitters only? Yes, probably, in a long range view, but at which cost? How many appointments our clients will have to take until they stabilize their detoxification system in order that it can handle wheat without exploding?

And, in a long term basis, can the detoxification system handle this wheat allergy all the way? We should not forget that people get older and the body get's more tired, thus making it more difficult to the body to detoxify itself.

As a consequence of this long term attack of "wheat allergy", won't the detoxification system explode one day? **We think that it will for sure!**

### **Conclusions**

Food allergy, primarily due to wheat, corn, and sugar, with a full priority on wheat defusion, is the real problem.

That happens because this allergy is so big that we are under one constant, and extremely high level of "allergy" derived primarily from wheat! A process much more important than anything else because, unfortunately, this constant process **does not have one constant result!** For some people, migraines, for other ones, depression or stomach aches, for other ones, **anything that is happening!**

For that reason, we are not aware of the wheat allergy - **There is not a single "allergic" answer to wheat!** So, when we say that we have allergy on one issue, we are looking to the result of a backlog of a constant level of allergy we normally have. More stressors in the system, emotional or chemical, gives us one result due to the "explosion" of the detoxification system. This happens not because of the single stressor, but because the system can't stand "more" stressors than it already has.

And, more than that, almost all of us take wheat/corn/sugar everyday. But, usually, no one of us stay angry or fearful all day long.

Due to the results we got till now, our goal has changed to, normally, defuse wheat/corn/sugar "allergy" first then start on the emotional part of the system.

There are some people that say: "Wheat should not be taken in tropical countries because it has a natural glue that glues it to the small and large intestines". Till now we could not confirm if this is real or not, but as this research was done in Brazil - a tropical country - we strongly suggest that other ones do the same tests on wheat/corn/sugar/heavy metals to establish one comparison for the results we have got till now.

### **Summary**

1. Until now, all the persons checked by us had wheat/corn/sugar allergy.
2. For the same persons the percentage of heavy metals of intoxication was 84% (eighty-four).
3. "Wheat allergy" is much more important to the body than the other "allergies", and



even more important than heavy metals intoxication.

4. For the same reasons, sugar counteracts wheat allergy in one amount of round 70% (seventy), although sugar itself is one "allergy" stressor.
5. Then we come to one question: "Is refined sugar one antidote to wheat allergy?"
6. Due to the results obtained until now, we think that we should change our emotional defusion target oriented system to a wheat/corn/sugar defusion target oriented system, as a priority, and then work on the emotional level.

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15, 16, 39. Bake Flour -  
for Wheat  
Defuse 1 3-1  
Use all senses to see wheat  
to be used - f Defuse to wheat in other  
or TRH 14-42 muscle to defuse



## Balancing with Relaxation

by Margriet DeWild

Last year at the meeting in San Diego, I met John McMullin, and this is where my story starts.

We talked about our work, he as a hypnotherapist - kinesiologist - herbalist, and me as a physical therapist and kinesiologist. As you see, two very different persons with a very different kind of work. But we have something in common, we both are helping people, supporting them part of their way, we both want to do this in a holistic way.

The other thing we have in common is that we both work with kinesiology.

Taking together, we learned a lot from each other, and what I wanted to find out, was what and how can we combine all these different things. I asked John if he would like to figure this out with me. After many phone calls he agreed and we came together again, watching how each of us was working and combining the different methods, wherever it was possible.

I am very happy and grateful that John gave me the opportunity to be in his office and to accompany his clients for a while on their way through their problems using the tools I had found through my work as a physical therapist and kinesiologist. He also gave me the possibility to sit in room, to listen, to look, but most of all to feel the way he accompanied his clients. It was then that I saw and felt the **power** of relaxation.

As a physical therapists we learned how to work with joints and muscles, but we often forgot that this joint or muscle was a part of a human being, with feelings and emotions. Because I was aware of this, I knew I had to find a way to accompany my patients as a whole person and not just pay

attention to a part of their body.

I did this by listening and relaxing them and letting them feel comfortable. I realized however that this only helped for a while and

then invariably they came back with the original complaint.

One day one of my patients told me about Touch for Health. She said to me, this is something for you, it suits your way of working.

This is how I got started on my way to kinesiology; in this method I found tools which helped me to get to the bottom of the physical problems and I found tools which helped my patients to solve them.

One of the tools is the muscle testing, for me a very good and interesting tool, which you all know, because it is the basic tool for Touch for Health, so I won't talk about this.

I want to talk about relaxation.

Relaxation has always been important in my work. In my praxis in Switzerland, I give gymnastic lessons. My clients need to learn how to sit down, how to lay, to walk the right way. I show them the right exercises so that they become aware of the right posture of their bodies in all those different situations.

I show them what happens to your posture, when there is a lack of energy.

Let us think about some examples like: what is your posture when you are depressed, how do you walk when your lover is waiting for you.

We all know there are a lot of different reasons for blocked energy and we also know that our body language reveals it.

I show them how to bring their energy in flow again, using exercises and meridian work. Here I am using the relaxation as well. I believe that when I am relaxed, I can feel my body and I can develop my awareness for my body.

When I am aware of how my body feels in a relaxed situation, "this is a good feeling" I

will be able to learn to understand better what my body is telling me when I am not in good shape.

So, at the end of every lesson I let my clients relax and with this relaxation we make a body-balance. I use different subjects for this relaxation such as yin/yang, the five elements, the chakras, or subjects like 'looking for your inner child' or 'looking for your inner guide'.

I found out that this way of relaxation made them feel in absolute harmony. Usually this feeling of harmony stays with them for more than a day. Normally I did this in group lessons only, but when I saw the good results, I started to do this work in single sessions as well.

So what did I do?

I did normal muscle testing to find out with my client what kind of problem there was, what priority there was and how we had to work on it, - **including relaxation** -.

This is where it happened, there were clients who wanted to be balanced with relaxation, who wanted to look at their problems in a new and different way.

Because there are so many different ways to make a body-balance, it is important to find out what a body wants to do, taking care to find the right goal for this balance.

After talking and testing to find the problem we have to look at, - with the right goal and the right age to work with, - . We put the goal in the pause lock and start the relaxation with an induction.

When the person is in a deep relaxation, she can meet herself at a specific age of her childhood and with the wisdom which she has now, she can help the child to solve the problem. You can do this at any age you need to.

After the relaxation we did all the pre-tests again and we saw that they all had changed in a positive way. And the goal was reached as well.

I also use this kind of balancing in every gymnastic lesson with a common theme like yin/yang etc, as I told you.

I brought a paper for you to keep, where I have written down how an induction works. At the same time you will find a paper where I wrote down two kinds of relaxation.

Knowing that it is impossible to do the same work on different people, I just wrote down some rules, some ideas to work with.

I think that everyone who takes a look at these rules will see that he may use his own imagination to handle them.

An important discovery for me was to find out that clients with whom I have done this kind of balancing, became interested in their own body and their body language, they started trusting their own feelings and became more secure about them.

Almost all of them started to talk in a different way out their body.

Before they became aware of their body, I always had the feeling they were talking about something they knew but were not familiar with.

They wanted to use me as a tool to change something for them, but then they realized that they had to do this themselves.

I think these were reasons enough for me to continue this kind of balancing and trying to apply it to different people with different problems.

I know that I am still at the beginning of the experience with this kind of work and that I need more time to use this tool. At the same time it would be very valuable to be able to exchange experiences with other kinesiologists and it would be fantastic if next year some of you would be able to talk about their experiences in this field.

## Will - Choice

by Grethe Fremming and Rolf Hausbøl

The following balance is taken from one of our Transformational Kinesiology (TK) Workshops. The philosophy behind this balance is ageless wisdom as presented in the books by Alice Baily and Torkom Saraydarian. The purpose of TK is to help people understand their own constitution and the energies influencing them.

We all have 'will-power', some more than others; but how do we use it? The personal will is our driving force to have as good a life as possible - often for selfish purposes. This 'will-power' is an expression of our emotional longing. If we cultivated our will to also include a good life for other people, the animals, the nature and the Earth, our world would include more Love, Truth, Goodness and Beauty for the benefit of all.

Sometimes we have a goal but our limiting beliefs or negative emotions cut us off from reaching it. Many times we know what is right to do and yet we cannot help acting differently. We do not listen to "the little voice within". WE have a conflict among our thoughts, our emotions, our body and our conscience. The conflict can be so overwhelming that we do not feel we can reach the goal. This balance integrates our different bodies - physical body and mental body - to be in harmony with our Essence. It helps to change our attitude and automatic response patterns.

### Procedure

1. Clearing.
2. Goal, pre-check, permission.
3. Hand mode: Thumb-ring finger first joint (from top) left hand. Test IM switches off.
4. Dissolve hand mode. Verbal check/talk and note all relevant regarding prevalent feeling or belief troubling person. We can especially gain information from the energy center emotions.

5. Check left and right arm for the following statements. Note results:

I feel.....

I am.....

I want to be .....

I can choose to be .....

I choose to be .....

6. Permission to balance.

7. Educate about personality. Person chooses colors and draws the 3 lower bodies

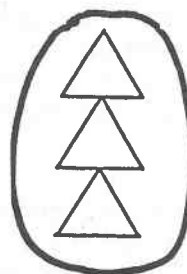


mental body

emotional body

physical body

8. Person looks at one body at a time. Test. The body switching off the IM is the "unwilling" body. Educate about it.
9. Person chooses a color and draws a circle around the 3 bodies, while stating " We choose to be .....positive feeling".



personality

10. Re-check #8, #5, hand mode, post-check goal.
11. Usually no home play. Let the person keep his beautiful drawing to remind him of his choice.



## Awaken The Dance Within™

by David Fuerstenau and Patti Steurer

This information accompanies a workshop being presented at the conference. The workshop offers a lively and inviting class/presentation format which can be used by any teacher or practitioner of any TFHS method for the purpose of introducing muscle testing, balancing, and themselves as practitioner/teacher to the general public, with the purpose of gaining exposure and clients/students eager to learn more about what muscle testing and TFHS have to offer.

The format being presented, the Somatic Integration Process, is movement based, fun and simple. It allows the exploration of belief systems, physical movement, or nearly any issue through the metaphor of movement, with the use of TFHS techniques and muscle testing to create breakthroughs. Participants all get a personal experience of the changes possible through TFHS, have a great time, and they end up with curiosity, excitement and eagerness to learn more about TFHS, muscle testing and themselves. At the end of a one-and-a-half or two hour experience, the teacher or practitioner can make the invitation to participants to explore TFHS possibilities by coming to them for sessions or attending classes.

The Somatic Integration Process is not focussed on a unique system of balance formats or corrections, but is an open framework in which many simple techniques from various TFHS systems can be used. Practitioners or teachers wishing to use this process can use most of their skills and tools within it. The only limiting factor is that participants do the Somatic Integration Process as a group, therefore those TFHS corrections or procedures that a group can do, such as Cook's posture, work well, and those which require time, hand modes, or being on a table for one-on-one work are less suitable.

The workshop will offer background information about and teach the Somatic Integration Process, which everyone will experience; give each participant the

opportunity to design their own format for a group exploration using the process; and be coached in their format design and understanding of the group process. One participant will have the opportunity to actually practice their format with the entire group, and receive feedback.

This workshop is appropriate for anyone with a skill level of Basic or higher, and it is helpful but not necessary to know how to teach someone to do a muscle test. We will not focus on how to teach muscle testing in this workshop.

### The Somatic Integration Process

For Groups of People

A StarFire Method of Body Centered Self Development, ©1992, StarFire Institute
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#### Step #1 Create an Integration Menu.

Include any TFHS integrating technique you want the group to learn. Also ask the group to contribute the techniques they use to integrate themselves that can be easily taught and done by everyone.

#### Step #2 Set The Stage.

Have each person take a drink of water. Put on some energetic music and cross crawl all around the room. Have each person massage their K-27 points (Brain Buttons) and the switching points (the beginning and end of Central and Governing meridians).

#### Step #3 Show the group the specific movement you are inviting them to explore.

You can create all kinds of movement explorations. The exploration can be designed to fit the group dynamics. You can create a movement exploration that opens awareness to a certain part of the body, a belief system, a desired outcome, etc. Be CREATIVE!



**Step #4 Have the group do the movement exploration.**

Have each person notice and express how they experienced the movement exploration.

"Does this movement feel effortless, or do you notice some stress in your body somewhere?"

"Does this movement feel like a warm comfortable running suit or like itchy wool?"

Do a paired sharing and/or a group sharing. Whatever they notice and express is acceptable.

**Step #5 Integrate for the movement.**

Form a circle and muscle check a representative for the group.

a. "All parts of your being are ready, willing and able to be a representative for this group."

b. "All parts of all our beings are ready, willing and able to be represented by \_\_\_\_\_."

c. Do the Movement for 5 seconds. (Muscle test switched-off.)

d. Menu — Muscle test which activities from the Integration Menu will integrate the group for the movement.

Continue to do the activities until the group muscle checks switched-on for the movement.

e. Do the Movement for 5 seconds. (Muscle test switched-on.)

**Step #6 Have the group do the movement exploration again.**

Notice the changes in each person. Encourage them to feel the difference in themselves and explore even deeper into the movement. Playfully have each person celebrate the shifts they feel in their body and mind.

Do a paired sharing having each person take 2 minutes to express what they have experienced.

**Step #7 Closure: End with a circle in which everyone shares in some way.**

## Body Memory

by Richard Harnack, M.Rel.

### Overview

We have all passed through similar developmental stages in terms of movement and body memory. Each of us remembers and interprets these phases idiosyncratically. What follows in this paper is a synopsis of the major life stages from a movement perspective. The basic assumption is that all persons can move easily and freely acquiring physical skills as they choose. This is also the goal of the process developed to help free our body memory.

### Body Memory

Body memory comes in different varieties. The ones most familiar to us are those early childhood activities and skills we look back on -- bicycle riding, throwing a ball, roller skating (or skate boarding, depending on your era), running and swimming. We also are aware of pain memories, old injuries and insults to our body which may still cause us to pause or inhibit ourselves.

Current research (ref. 1) in phantom limb pain suggests that our body memory is much more diverse than previously thought. The main trend holds that body memory resides in the somato-sensory areas of the brain. However, new research suggests that phantom limb pain not only resides in the somato-sensory cortex, but also the limbic system and broad areas of cortical networks involved in cognition and experience.

This new research impacts our understanding of movement and how we understand our body, as the following quote illustrates.

"The phenomenon of phantom limbs is more than a challenge to medical management. It raises doubts about some fundamental assumptions in psychology. One such assumption is that sensations are produced only by stimuli and that perceptions in the absence of stimuli are psychologically abnormal. Yet phantom limbs, as well as phantom seeing and hearing, indicate this

notion is wrong. The brain does more than analyze inputs; it generates perceptual experience even when no external inputs occur. We do not need a body to feel a body."

"...the existence of phantoms in people born without a limb or who have lost a limb at an early age suggests that the neural networks for perceiving the body and its parts are built into the brain. The absence of inputs does not stop the networks from generating messages about missing body parts; they continue to produce such messages throughout life."

"...the brain generates the experience of the body. Sensory inputs merely modulate that experience; they do not cause it." (ref. 2)

Our whole body is functionally located within the neural networks of the brain. Movement then is "hard wired" into our brain. The implication of this line of research goes beyond phantom limb pain -- it leads us to realms of possibility in terms of helping those persons who have had spinal injuries or other peripheral injuries which have inhibited their movement. It also implies that we can improve our performance in athletics and other areas much more than we had thought previously.

The next section is a summary of the major areas of movement development along with the specific principles of movement addressed at each stage.

### Stages of Movement Development

What follows is a summary of the various stages of movement development all go through. Each stage overlaps the others and seldom is as distinct from the others as described here.

#### Birth to Six Months

Basic Movement Development: Outward to Inward

Principle involved: Connecting to one's body.

In this early stage, the infant develops the tonic neck reflex, hand-eye and foot-eye coordination, and turning over. The tonic neck reflex is the earliest of these three movements and involves the infant's ability to lift her head herself. Hand-eye and foot-eye coordination are in the early stages, primarily with the infant learning to put her hands and feet in her mouth.

The primary "educational" task involved here is learning what "belongs to me". The majority of the movements made at this time are outward to inward. The infant begins to distinguish those movements and quality of movements which bring things to them. In this early phase the infant is most likely to scratch themselves on the face. This latter activity occurs because the infant has yet to develop the motor coordination necessary to bring her hands to her face using only the amount of force necessary to complete the movement smoothly.

As the tonic neck reflex develops and the infant acquires more finely tuned motor skills, they begin to turn over. These are major accomplishments as the infant now begins to be able to modify their own environment. They are the pre-cursors to the early crawling stage.

### **Six Months to One Year**

Basic Movement Development: Crawling.

Principle Involved: Inward to Outward.

During this stage the infant begins to establish a sense of connectedness from inward to outward. The infant now has achieved some measure of control and coordination and is now ready to begin to explore beyond the immediate environment. We begin to go to where we want.

The complete crawling stage involve two phases. The first involves same sided arm-leg coordination. The second involves opposite arm-leg coordination. Each is necessary for as complete as possible neurological development of the infant. The same sided movement phase allows the brain to develop the neural pathways to each side of the body in turn. The opposite side movement phase allows the brain to organize the simultaneous coordination of both sides of the body.

As the infant completes the crawling stage, they then begin to be able to stand on their own with little or no assistance. This latter point is important because of the desire as parents and grandparents to have the child start walking early. If we hold the child upright to train them to walk, they acquire their sense of balance as being dependent on external factors. Balance and coordinated walking needs to develop from the infant's inner sensory apparatus, not its' external proprioception.

The primary "educational" issue for this phase is the infant's inward development of self and self-reliance. This sense of self-reliance is at a very fundamental level. It involves the inward ability to trust our perceptions in relation to ourselves and the environment. This is primarily a physical sense at this stage which affects later cognitive development. The infant learns to move around in his environment by choice and ability, rather than relying upon his parents to move him.

### **One Year To Four Years**

Basic Movement Development: Walking, Running, and refining Hand-Eye.

Principle Involved: Exploration of movement, Movement for the "Fun" of it

The child completes the crawling and acquires walking/running during this three year period. Some children continue crawling into the second or third year as their preferred mode of getting around. Unless there is apparent neurological damage, this is not a cause for concern, for the child is being thorough in completing the neurological task for the crawling phase. During this time, the child begins to talk to convey information to her parents and others. At first she will speak in short bursts or phrases, then later in complete sentences.

As the child begins to acquire other physical skills, she begins to "pay attention" to the "how" of the movement/skill. She is learning to focus her hand-eye abilities and fine tune them as she goes. Movement shifts from learning through spontaneity to deliberate skill acquisition.



The child begins to further define herself and establish her identity. The child acquires the word "No" and begins to ask questions. Each of is important for the child's growth of self. "No" gives the child a measure of control over her state of being which she lacked previously. Her parents now must begin to account for her wishes and wants. Questions are also asked by the child to further gain knowledge about the world and her place in it.

#### **Four Years To Six Years**

**Basic Movement Development:** Active Outward Movement.

**Principle Involved:** Deliberation & Learning in movement - "Serious Play"

The child begins to move from spontaneous play to judging and being judged in regard to physical activity. It is during this stage most children also begin more social play activities, either in structured settings or in the neighborhood.

The major movement and educational tasks children acquire in this phase are more finely tuned hand-foot-eye coordination and basic reading/writing skills. Emotionally/Socially the child begins to draw distinctions between himself and babies. This is generally the period in which the child begins to perceive himself as a "big kid".

All of the above results in the child acquiring "inhibitions" or "natural athletic ability". If the child is judged too harshly (either by himself or adults), or is forced into competitive structured sports, he may develop emotional-physical inhibitions. These inhibitions generally remain into adulthood as they tend to become part of our self-image.

#### **Seven to Fourteen Years**

**Basic Movement Development:** Integration of Outward & Inward Movement

**Principle Involved:** "Doing it right."

Social and competitive play become extremely important in this phase. Those children doing well in these types of activities tend to remain in them longer than children who do not. Children not as good in team

activities as others, tend to decide they have little or no physical ability. This choice is as much a physical choice as it is an emotional one.

This period of life finds the child refining basic skills and developing confidence in movement. While it may seem strange to think of walking and running as becoming more refined, this is exactly one of the major tasks of this period. The fine tuning of all eye-hand-foot coordination occurs at several levels. The first of these levels is the gross body movement. The second is in more finely tuned activities such as catching or throwing a ball and writing.

The gross body movements addressed in this period are those involving running, jumping, skipping, climbing, etc. These movements require the child to maintain balance and utilize opposing arm-leg action. As children become more adept at these movements, they are able to acquire more finely tuned motor skills. The child who does not move much or whose movements are frenetic and uncoordinated (as in the case of "hyperactive" children), finds it more difficult to acquire fine motor skills.

The fine motor skills the child acquires include writing, catching and throwing, kicking, drawing, etc. How well the child acquires each, is greatly dependent on how well they do in gross motor movement. The exceptions here seem to be in writing and drawing. Some children, who are fairly uncoordinated otherwise, exhibit excellent writing and drawing skills. The reason behind their writing and drawing "success" is that they initially work much harder at doing these "perfectly". Consequently, such children tend to exhibit a fairly "tight" writing or drawing capability, rather than a smooth and easily flowing capability.

The child also goes through two periods of "awkwardness" in this stage. The first period occurs at the beginning of the stage as the child begins to fine tune his throwing and catching abilities. The second period occurs around puberty when the child begins their next major growth "spurt" and must adapt to the changes occurring in their body. Both periods of "awkwardness" are crucial for the



continuing development of coordinated body movement. If the child is made to feel "clumsy" during either one of these periods, they are more likely to retain this image of themselves. If the child is assured they will "grow out" of this, and they are also allowed to acquire skills at their own pace, they are likely to have a much easier time maintaining and acquiring new motor skills afterwards.

### **Fifteen to Eighteen Years**

**Basic Movement Development: Locking-In Of Physical Abilities**

**Principle Involved: Refining movement.**

In this three year period, a final locking in and/or break through occurs in physical abilities/inhibitions. We have made most of our choices in terms of how we choose to perceive ourselves physically. These choices are both conscious and unconscious and tend to remain with us the rest of our lives. Thus, the child perceiving herself as physically graceful, powerful and able throughout this phase will most likely retain this image. Whereas the child viewing herself as physically awkward and inept, will most likely hold on to this image.

We also make conscious choices as to be the "way we are". These choices involve rationalizations and justifications at both the mental and physical levels. These justifications become internalized physically.

### **Nineteen to Twenty-Five Years**

**Basic Movement Development: Routine & Organization**

**Principle Involved: Repetition, Consolidation and Confidence of movement.**

Physical activities, if still engaged in, tend to become routine. Organized sports and games become the main focus for many in the age group. By this time, the choices made in the previous stage are now completely locked in. Comfort and repetition become the hallmarks of adult physical activity.

Confidence is with the *routine* of physical movement and exercise. By this age, our attitudes towards exercise, movement and our body are set. Those believing in the "no pain no gain" principle will have a different

"comfort zone" from those believing otherwise.

Repetition of physical movement encompasses the establishment of a routine and the reinforcement of specific types of exercise and movement. This routine may involve active participation in an organized team sport, individual sport, exercise program, martial art, dance, aerobics, etc. The routine may be a more individual effort such as weight training, running, swimming, stretching, walking, etc. In both cases, it is the routine which is important to the individual's performance levels.

During this stage of physical activity consolidation of physical prowess becomes paramount. Individuals excelling in youth tend to seek to maintain a level of personal excellence. Those whose performance was "average" or "lower" generally seek to more finely tune their physical prowess in hopes of achieving a higher level of competence. Unfortunately the largest group in this age bracket simply give up on any form of physical endeavor due to poor experiences in youth.

### **Twenty-five To Forty Years**

**Basic Movement Development: Experience & Skillfulness**

**Principle Involved: Comfort and familiarity of movement.**

If a person is still engaged in physical activity during this stage, they begin to shift to greater reliance upon experience and skill and away from strength and power. Initially this realization occurs at the body level, only later does the individual become conscious that they have been changing. This occurs when the individual begins to seek understanding of underlying principles in order to increase their skill.

People who begin a physical exercise and movement activity in this stage of life tend to go through all of the previous stages in a compressed format. Thus they tend to acquire the activity on one side of their body more easily than the other. After a while they are able to bring the other side of the body into more active play. From this point on they tend to consolidate skill levels in parallel

steps to the developmental phases described thus far. They usually accomplish this shift within the first three to five years of engaging in the activity.

### **Forty To Seventy Years**

Basic Movement Development: Inward to Outward

Principle Involved: Inner Conditioning & Movement

In this stage of life, inner understanding of becomes paramount. Efficiency and effectiveness in movement are more likely to be practiced and sought by those engaging in an activity for more than ten years. Strength begins to give way to conditioning as the desired body state. Raw power is not utilized as much as is generating an effective use of that power. Skill comes to be understood in terms of efficiency and economy of movement. Power is now understood as effectiveness more than strength.

Inward understanding of the movements becomes the primary method of acquiring new skills, then repetition. This is particularly true of people beginning a physical activity in this stage of life. They are more likely to look for a "reason" first before starting the activity. As they become more involved in the activity, they may seek other justifications for maintaining interest in the activity.

### **Seventy Plus**

Basic Movement Development: Congruence

Principle Involved: Unification of Inner and Outer

People who have been physically active in the same activity their whole life, when they reach this stage, generally are able to perform feats which seem extraordinary. These "extraordinary" feats are fairly commonplace for such persons. What occurs is the most efficient movement possible. Strength is seldom used in the same way as is by younger persons. Relaxation and almost complete congruence become the effective agents of movement.

Persons beginning physical activity in this stage do so to honor both physical and inner needs. The physical needs are represented by keeping flexibility and reducing pain. Inner needs include the desire to be "healthy". The reason for the exercise and the exercise itself become identified with each other.

For all in this stage of life, the quality of movement is more important than the variety. The focus is on moving with ease and grace rather than with strength. Even a simple activity as walking can provide such a focus.

The above "stages" are not distinct, rather they blend with each other. The tendency in the later stages to compress all of the earlier stages, especially in new skill acquisition. Experience and repetition of skills, combined with inner development and understanding, leads to greater efficiency and effectiveness in movement. In other words, there is no substitute for actual movement.

### **Movement Integration / Enhancement Procedure**

In this concluding section, I have outlined a procedure which is designed to help create the optimal levels possible for new skill acquisition and refinement of current skills. It draws in part on the research cited at the beginning of this paper and combines this with techniques currently in use in Touch For Health.

1. Decide upon the specific movement you wish to improve upon or acquire.
2. Locate the Life Movement stage(s) involved. If more than one stage set the priority. Repeat the full procedure for each stage.
3. Once you have located the priority Life Movement stage, look at the issues involved. State in your own words how you wish to embody these issues. Check for Muscle Stress Response on each issue and statement.
4. Perform the movement you chose in Step 1. Note and rate the ease, levels of inhibition, discomfort, etc., involved.

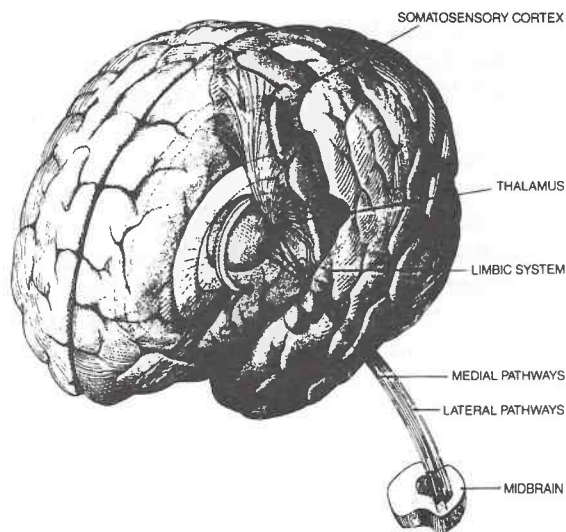
5. Locate an overall emotion for the movement.
6. Locate which part(s) of the brain is (are) involved in the movement - Somato-Sensory, Limbic System, Visual Cortex, Corpus Callosum, Reticular Formation, and, the Cerebral Cortex in general. Establish which is the priority area.
7. Test the individual muscles involved in the movement. Test the opposing muscles and diagonal contralateral muscles as well. (Note: If you are using a large movement, you may want to test all 42 muscle groups.) Note any patterns of inhibition in response to the movement.
8. Correct any muscles found inhibited by the movement using Neuro-Lymphatics, Neuro-Vasculars and Origin-Insertion. Do all three. *(Please note: in this step I have kept the correction procedures fairly basic. In practice, I have found that I may have to use Cross Crawl Repatterning, Homolateral Muscle Correction, Muscle Spindle stimulation, Reactive Muscles, or Postural Stress Release. It is not that these are "better" than the basic corrections given, but rather they may be needed in addition to them. My guiding principle here is to start with the simplest corrections first and only proceed to the more complex if needed.)*
9. Repeat the movement and retest the muscles which were previously inhibited by the movement. Note if any remain inhibited. Do not do any more corrections at this point.
10. Locate the specific age(s) involved. Determine the overall emotion for this age, and, locate the area of the brain involved. Also determine if there are other ages from this stage involved, if so set the priority.
11. Do the movement as if you were acquiring it for the first time. Test the muscles involved. (Cf. above step 7.). Correct any which were inhibited. (Cf. step 8.) Repeat the movement and retest the previously inhibited muscles. (Cf. step 9.)
13. Repeat step 10 for any other ages which are also involved in the Life Movement stage. Modify the movement to reflect the level of skill for each additional age.
14. Once all of the ages in a given Life Movement stage have been checked and cleared, check for any other Life Movement stages and issues involved.

### Conclusion

The goal of the above procedure is to help you improve your ability to move and acquire movement skills. It is not intended to substitute for actual practice. Use this procedure from a sense of play and discovery. Enjoy!

### References

1. Melzack, Ronald, *Phantom Limbs*, Scientific American, April 1992, pp. 120 - 126.
2. Melzack, Ronald, *ibid.*, p.126. See illustration below for more detail.





## Circle of Excellence

by John Varun Maguire

This technique helps you access a peak state of body/mind to enhance the quality of your performance. It can be extremely valuable for athletes, musicians, dancers, actors, entertainers, public speakers and those who wish to improve their performance in any activity. It also gives a person greater awareness of physiological and psychological cues which they can use to put themselves in the state they want to be in at any time.

### The Procedure:

1. Ask your partner which performance activity they want to enhance. As the facilitator, designate an imaginary circle that your partner will be stepping into. You have three approaches you can use to get them to achieve their peak performance state. Use any that are appropriate. Have them:
  - A. Recall a specific time when they had their best performance.
  - B. Think of a time unrelated to this activity where they experienced great confidence, success, power and any other feelings they want to be able to recreate. This is particularly helpful if this is an area they have not yet had success in.
  - C. Think of a person they want to emulate. Imagine how that other person feels when they are performing this activity.
2. Have your partner stand in the circle and experience the feelings of this resourceful state. They may want to shift their posture or move their body as they get more in touch with their state of excellence. Visualizing being bathed in colored light, as if standing in a spotlight, is often empowering. Your partner can also imagine inspiring music or people cheering them on to give them further access to this state.
3. Observe and write down all the physiological signs your partner displays while they stand in their circle of excellence. How are they breathing? How are they holding their facial muscles? How are they standing? What is the focus of their eyes? What is the color of their face?
4. Have them notice and report any images they see or feel. One runner felt like a gazelle - light and quick. A woman who had been an accomplished dancer transferred her presence on the stage to her performing as a pianist. She was amazed at the improvement in her piano performing skills.
5. Your partner may discover new attitudes towards their performance which they previously had not considered. Using this technique, one man about to compete in the 140 mile Ironman Triathlon, replaced his attitude of dread and fear with one of joy and enthusiasm. After the race he said he never had so much fun in his life. His race results were also quite astonishing.
6. Test an indicator muscle when they are in their peak state and it will be switched on. This further anchors or associates the performance activity with the state of excellence.
7. Now have your partner step back from the circle and recall a state of low resourcefulness, where they feel lack of confidence. Notice the physiological signs of this state. Test the indicator muscle and it will be switched off.
8. Have your partner disassociate from the unresourceful state by stepping forward into the circle of excellence and key in to their empowering feelings. Anchor this in with a switched on muscle test. Ask them to notice what they are aware of, as illustrated in step 3.
9. If your partner is having difficulty getting back into their state of excellence,



repeat the process until she or he finds it easy to do so.

10. When the process is successfully completed, share observations with your partner so they can recreate their state of excellence any time they desire. Switch roles and create your own circle of excellence.

Before a performance activity, or any time you are not in a state you want to be in, you can enter your circle of excellence. Recall the sensory and motor responses that are expressions of your empowered state. Maintain your "power posture" and breathing pattern. The more you practice accessing this state, the easier it will be to put yourself in control and be in your peak state. Use this with clients, family and friends who want to get winning results in any performance.

## Shielding, Anyone?

by Frank Mahony

Huh? What? Shielding? Most of the time when I present this concept in my HYPERTON-X workshops only a few people have even a concept of shielding and the ones that do usually are not. So let's go to it!

Shielding means protecting yourself in some way from being affected by negative energies, i.e., thoughts and feelings of others. Does the source of this energy need to be in your presence? No! You can have your energies affected even at a great distance. Do we have scientific proof of this? If you are talking about the classical double blind study scientific, not that I know of, by experiments by Cleve Backster lean in that direction.

Backster's experiments has been referred to in several books, such as *The Secret Life of Plants* and *The Secret Life of Your Cells*. Backster is an expert in the use of the Polygraph (aka Lie Detector) which he connected to a plant to measure osmosis but was surprised to find the plant showed human responses to negative and harmful thoughts directed at the plant.

The next logical step was to involve humans at some level. Donor cells were placed in a saline solution and connected to the polygraph. The donor cells registered emotional responses of the donor at distances of twelve kilometers, which indicates that we are affected by thoughts at cellular level at great distances. I have discussed setting up an experiment involving shielding with Backster, but time and details need to be work out, so stay tuned.

Besides Backster's works there are many anecdotal experiences of people connecting telepathically. Many times a person will come to mind and shortly after contact in some form takes place. Many have experienced anxiety about a loved one to find they have been hurt or jeopardized at that time. Every one has probably experienced specific feelings in the presence of others such as feeling good, safe, anxious, tense, excited, fearful, uneasy, etc. And some people are

natural born energy suckers! Some times you have had someone you like visit you but can't wait until he/she leaves, and/or experience a sudden feeling of calm and relaxation after the party has left. A shift in energy has taken place.

AKers are familiar with surrogate balancing where a third party is used to interface between the facilitator and the client, sometimes done without physical contact with the client, and a great distance. Also, facilitators often experience negative feelings either during or as an after affect of performing a balancing. Many belief system routinely perform a form of pre and post session self cleansing to release any negative "stuff" they might encounter.

In my own experience before I was aware of these possibilities, I attended to a teen age girl in an auto accident. Ironically this happened in front of the TFH Foundation in Pasadena when I was taking an Instructor update. The girl was seated in front next to the driver. The windshield indicated that she has struck it with her head, but there was no cut. She was in shock, body rigid, and making funny noises. I put one hand on the back of her head and one across her forehead for stress release. Within two minutes she was out of shock, and able to converse with me, and able to move her limbs. I held her head for a few more minutes until the paramedics arrived. A short while later when class resumed I suddenly experienced minor whiplash symptoms lasting several days.

### Workshop Syndrome

Learning new things creates stress. In a workshop there is a multitude of little stress emitters crashing about trying to figure out if they are getting it right. There is often a call for help because, "it didn't correct!" I advise both persons to reshield and retest, which, in workshops, usually results in correction being achieved. Under stress we have a tendency to lose our shield, just when we need it most, and we are inadvertently surrogating either ourselves or someone else

in the vicinity. The energies got scrambled. So there are many indicators that the thoughts of one affect a second party either here or way over there.

### What to Do!

Be aware that the inner language of the body (self) is symbolic and the need is ritual. If we honor this we can achieve results quickly and at a very deep level. A shield should be the choice of the owner. Anything appears to work providing that THE INTENT AND PURPOSE OF THE SHIELD IS ABSOLUTELY CLEAR! Some people are used to working with the concept of being in white light, but in my experience, if the intent is not specific shielding doesn't happen. They visualize or think of being in white light, period, as if that is enough. It's not!

### Demonstration

This process incorporates the use of an Indicator Muscle (IM). My choice is the tried and true deltoid. Be sure it is strong in the clear, and will show an indicator change, either by asking for an indicator change or asking yes or no while testing.

Then test the IM as you change your thoughts silently from positive to negative. If the IM tests weak on the negative thought and stays strong on the positive shielding is not taking place. Actually, if the indicator test becomes erratic during the process accept that as an intermittent shield and complete the process. Intermittent usually is a result of the person trying to shield but not clear about it. We'll discuss other possibilities later.

After several cycles of the IM going on and off, stop and ask the person for their perceptions. Some people are not aware of the differences in the IM response, so repeat the process until they do. Or they will raise questions and doubts about what took place, perhaps with the usual newcomer's accusation, "You pushed harder!" Once you are both in agreement as to what took place, repeat the process while speaking the positive/negative thoughts aloud.

Explain that the person appears to be vulnerable to thoughts by others and to

mentally create a protective shield about the body with the understanding and purpose that NO HARMFUL ENERGIES OR THOUGHTS CAN ENTER, THAT I AM SAFE AND PROTECTED AT ALL TIMES!



A shield can be anything of the person's choice, such as, circle of white light, suit of armor, God's hands, mother's arms, any color, house, call, a warrior's shield, etc.

When this is complete, repeat the positive/negative tests as before. The IM should stay strong on both.

IF THE IM STILL UNLOCKS ON THE NEGATIVE OR IS STILL ERRATIC, HAVE THE PERSON DESCRIBE THE SHIELD AND THE PURPOSE THE PERSON MAY HAVE HAD BEEN TOO ABSTRACT AND USED ONLY THE THOUGHT WITHOUT THE SYMBOL. If so, have the person take corrective steps and repeat the challenge again.

Also, sometimes the body needs time to process and accept the concept. Ask:

"Is the body processing?"

If "Yes", then ask how much time and if anything is needed to be done by either of you, such as ESR, Life Issue, or Emotional defusing, etc.

### **Other Possibilities of Shield Breakdown**

The person may not feel worthy or deserving of shield. Test the IM on statements related to this, such as:

"I deserve to shield and protect myself!"

"I don't!"

"I am worthy of shielding myself!"

"I'm not!"

"Is there a life issue we need to clear before shielding?"

"An emotion to be cleared?"

Ask the body what is needed to accept shielding and respond within your area of expertise. Also, ask the person what they feel needs to be done. Quite often they will give you the right answer.

**And stay shielded!**

For information regarding Hyperton-X Workshops, please contact me at 531 Main St. #876, El Segundo, CA 90245, (310) 322-3425.
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## Self Help Cranial Integration Tools

by Mary Louise Muller, M.Ed, RPP, LMT

In this article we are going to discuss some of the interfaces between kinesiology and cranial work. We will also learn simple self-help techniques to enhance cranial function.

Integrating cranial touches and understandings with kinesiology can transform your work. The gentle "five gram" touch empowers practitioners to be present with each individual client's process. The ability to feel release pulses and stillpoints gives immediate feedback and improves the efficiency and effectiveness of the session. Understanding the cranial movement, its significance and how to work with it enables you to directly work with the core energies of the being. Simple self-help exercises can be given to clients to enhance cranial function, thereby boosting thinking abilities, general energy level and overall alertness and body function.

The cranial rhythm has been called the "primary respiration". It is essential to life. It is a core energy system without whose function we would die. When it is dampened and distorted, we may experience symptoms varying from cloudy thinking abilities to a multitude of physical malfunctions.

### Cranial Sutures and Neurovascular Holding Points

Learn to tune in and feel what the cranial system is doing as you hold neurovascular holding points (NV's). Six of the thirteen cranial NV's are located on sutures. Sutures are landmark transition areas of the skull where things come together and where things also have the potential to shift. They are like the geographic cracks of the plates of the earth along which movement can occur. It is believed that the sutures can respond to long term structural distortion by remodeling themselves through small islands of bone called Wormian bones.

For many years, British oriented anatomists and physiologists taught that the sutures become solid and rigid by adolescence. This

belief was challenged in the United States by DeJarnette of Chiropractic tradition and Sutherland of Osteopathy who both offered their own teachings based on personal research and experience that worked with realigning the cranial structures.

In the 1970's, Osteopathy decided to either verify or negate their own teachings about cranial work through scientific methods. A research team headed by Dr. John Upledger proved that sutures are filled with vital living tissues. The team also scientifically measured the cranial movement of people and monkeys.

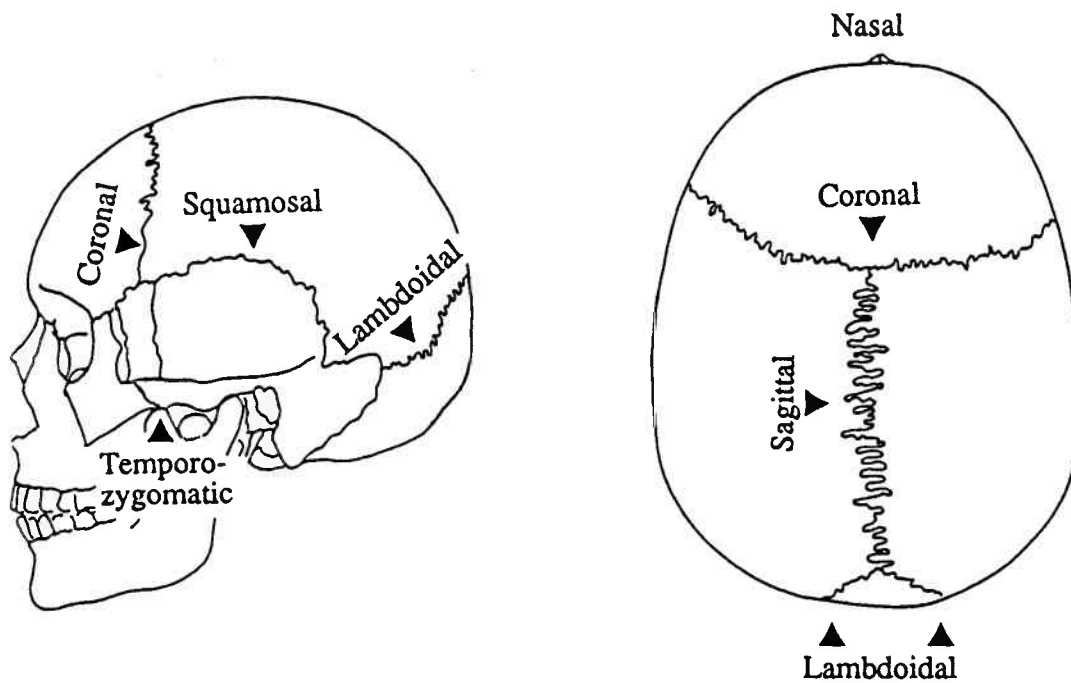
A normal Cranial Rhythmic Impulse (CRI) moves at the rate of 6 to 12 cycles per minute. This corresponds to the filling and emptying of cerebrospinal fluid. It can be felt as an expansion and contraction with hands cradling the skull. The touch used to feel the CRI is a non-intrusive 5 grams, about the weight of a nickel. When the sutures are properly aligned and free to move, the CRI is symmetrical and fluid. When the sutures are jammed or misaligned, there are distortions and sluggishness in the movement.

As we look at the neurovascular holding points drawn on skulls on page 25 of the *Touch for Health* book, we note the following NV's are located on sutures.

NV #2 is located at the posterior fontanel, the soft spot in the back of a baby's head. This is where the lambdoidal and sagittal sutures come together. The bones that meet here are the occiput and the two halves of the parietal.

NV #3 is slightly higher on the sagittal suture. It is between the two halves of the parietal.

NV #4 is located at the anterior fontanel, the soft spot on a baby's head in the front where the sagittal and coronal sutures come together. The bones that come together here are the frontal and the two halves of the parietal.



Cranial Sutures

NV #8 is located on the zygomatic arch where the temporal bone and zygomatic bone come together. This is called the temporozygomatic suture.

NV #9 is located on the squamosal suture where the parietal and temporal bones come together.

NV #13 is located on the lambdoidal suture.

As you lightly hold these NV's feel for shifts and stillpoints as well as pulses. Even when you are holding NV's that are not located on sutures, lighten up your touch and feel for stillpoints and shifting of the tissues beneath your hands. The membranes, connective tissues and bones move as the body self-corrects and realigns.

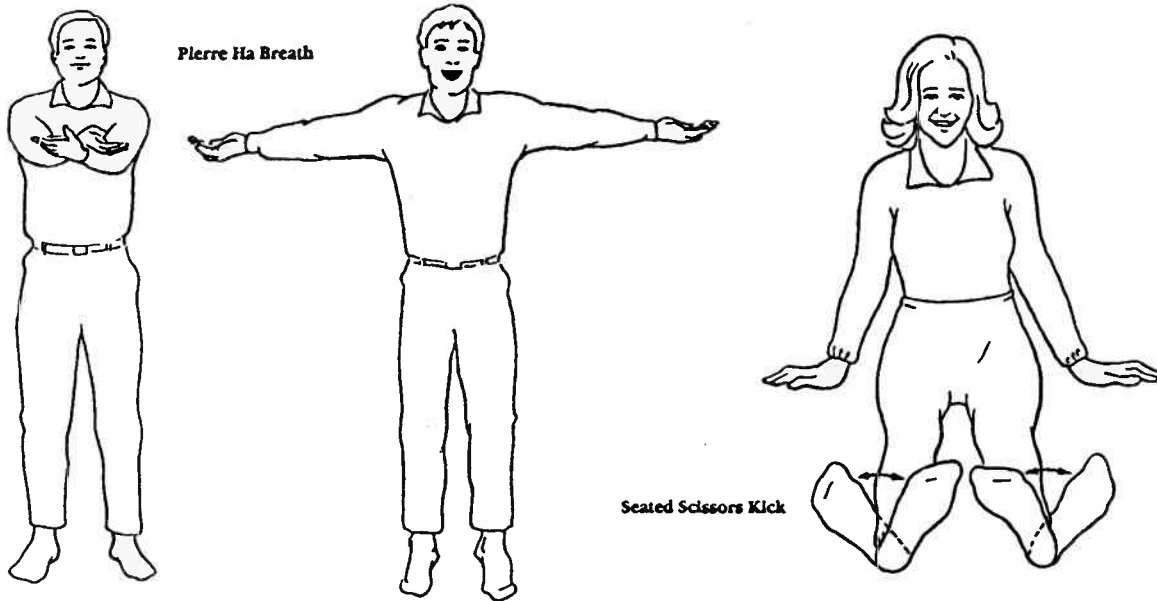
#### Enhancing the Flow with Self-Help Exercises

The CRI undulates throughout the entire body. In the arms and legs there is a subtle inward and outward rotation. We can use certain exercises to enhance this inward and outward movement. Two of my favorites are "Pierre Ha Breath" and "Seated Scissors".

These self-help exercises are commonly used in Polarity Therapy.

**Pierre Ha Breath** was developed by Pierre Pannetier. It is an amazingly simple and powerful exercise. Stand in a stable position with feet slightly apart. First practice making a deep and effortless "Ha" sound that comes from the belly. It projects through the throat with a forcefulness that frees the diaphragm muscle. Now place your arms outstretched with palms up. Bring them to cross each other, alternating ways for the count of three. On the fourth count, let them come out and also let out a "Ha". Repeat this 1-2-3-"Ha" cycle over and over. This inward and outward arm movement enhances the vibrancy of the cranial flow. You may also add coming onto the balls of your feet as you do the "Ha". This frees the diaphragm reflex in the foot and works with releasing the tendon guard reflex that may have dampened cranial movement.

**Seated Scissors** is more quiet and gentle, yet also deeply effective. Sit with your legs reaching out in front of you. Support yourself with your hands behind or lean



against something firm. Allow your feet to rotate inward and outward in a steady rhythm, somewhat like 'windshield wipers'. (This is an alternative name for this exercise which children seem to like.) This mimics the internal and external rotation pattern of the cranial rhythm and it enhances flow. Children often do this naturally while seated on the floor with legs outstretched. Older children and adults often do a variation seated in a chair. They cross one leg over the other and then swing the upper leg. This pumping motion enhances the pumping within the craniosacral system. It helps bring energy to the brain for integration and clear thinking.

### Creating Stillpoints for Self-Correction

The cranial rhythm has a way of balancing itself and other body issues by "stillpointing". This means that the rhythm stops for a moment as if to build up pressure and then uses the extra force to balance. When it is done, the movement resumes. Stillpoints do happen naturally. However, we can also create them.

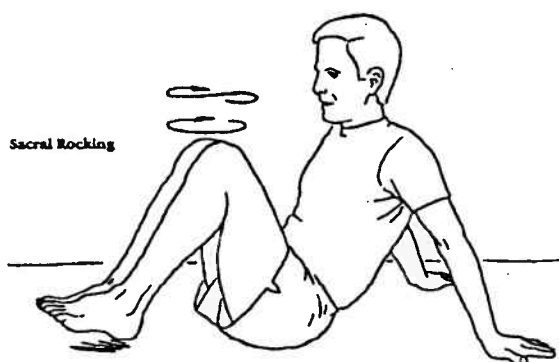
One way is to use two tennis balls in a sock. Tie the sock so the tennis balls are snugly resting against each other. Now lie down and place the two tennis balls at the back of your head midway up the skull, about an inch above the occipital base. One ball is under each brain hemisphere. Rest your head on the balls. As you do this, they create a natural

barrier to the expansion and the rhythm will eventually stillpoint for self-correction. The body will go into and come out of stillpoints. Do this as long as it feels appropriate. This is similar to a hands-on technique called the CV-4 where the practitioner consciously creates a passive barrier to the expansion phase of the CRI in order to initiate a stillpoint.

Another technique, I call "Healing Hugs". This can be done anywhere on the body. Gently cradle two arms, two feet, two shoulders, two sides of the hips or some similar option. As you rest your hands, bring them closer together until you feel the least resistance. Stay there and wait and once again follow in when you feel a slacking of resistance. Continue this gentle hug until you no longer sense it being able to follow inward. Wait. Things may be quiet for some time. When you feel the body symmetrically pushing you out as if it wants to expand out of the hug. Then expand with it. This is all with a very light, gentle touch.

### Freeing the Sacrum

Another issue related to craniosacral function that we often work with in kinesiology is the relationship of the sacrum to the two hip bones. When peoples' backs hurt, the sacrum is often seated improperly. In a typical Touch for Health balance, this may shift back into place when we restore balanced muscle function.



**The Sacral Rock** is a self-help way to free up the sacrum. This exercise is in Paul and Gail Dennison's *Brain Gym* book and Frank Mahony's *Hyperton-X*. Sit on the floor with your legs bent at the knees and your feet resting flat. Your hands rest behind your hips so your arms help to support you. Begin to gently rock. Feel for movements that may be stiff and gently work into them. Do small circles and figure eights. Breathe and relax.

As practitioners, we can assist the sacrum in natural self correction by helping to create space through a process called "gapping". Lightness of the touch, sensitivity and pacing allow for self initiated shifting.

Have the client lie on their back. Place one hand cupped under the sacrum. With the other hand, find the two ASIS's (the knobby points as the hip crest comes down in front into the pelvic area). Place your elbow on one ASIS and your fingertips on the other. Over time you will develop sensitivity and expertise at doing this effectively. Very gently use the fingertips and elbow to bring the ASIS's closer to each other. This is a five gram touch. Wait until you feel the sacrum begin to move in your bottom hand. Follow it wherever it goes. Continue until it stops moving and feels settled.

There is a self help option to this where you lie on your back, cradle your two ASIS's and very gently push them toward edge other.

### Conclusion

These are simple ways to help improve craniosacral function. I hope you find them

helpful. The references below will give you further information. If you have any questions, feel free to contact me. Mary Louise Muller, 39582 Via Temprano, Murrieta, CA 92563, (714) 677-0652.

Illustrations of exercises by Mark Allison from *Energy Exercises*, courtesy of Polarity Press.

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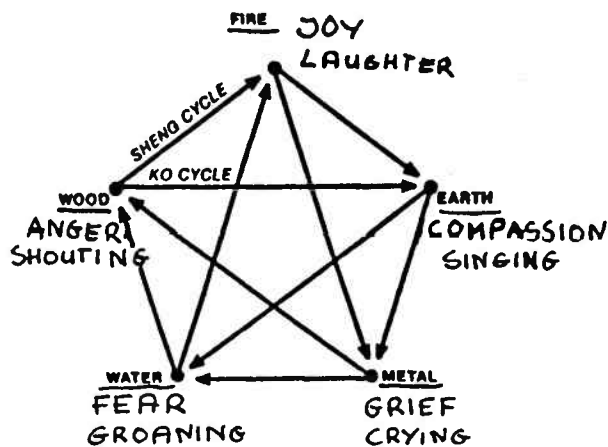
## Emotional Integration™

(Including Summary of Emotional Integration, Part 1, TFH Journal 1990)

by Paula Oleska, MA

Emotions can be viewed as a language of the body. It is the original language that we all used as infants to communicate with the world. The sounds and movements of joy, fear, anger, sadness, pleasure or frustration were signals by which we expressed how well our needs were being met. From that point of view then, no emotions are negative — they are only expressions of needs or fulfillment of needs.

As we developed more verbal skills, that primal language received more and more disapproval to the point where it is considered “immature” for adults to express any emotions directly, positive or negative. And yet as we look at the 5 Elements chart in TFH, we can see immediately that all of the basic emotions are necessary for life.



They are all an emanation of the life force flowing through all meridians and organs. They require acceptance and at least a minimum of expression to stay in balance. Someone who cannot shout is just as impaired as someone who cannot laugh.

It is also evident from the chart that blocking any one emotion will diminish the energy of the whole cycle, while expressing all of them will always eventually lead to joy.

It is beneficial to do a 5 Element balance using ESR points or Cook's posture or both,

for the goal “I accept and express all of my emotions.” While doing the exercise, go over the emotional cycle, recalling experiences when the expression was blocked. Give yourself permission to express each of the emotions.

This process, described in TFH Journal '90 is an essential first step in Healing Your Inner Child™ process. In this paper we will further explore the concept of the Inner Child and the importance of Emotional Integration™.

When we examine the traditional view of the brain functions, we can see that a child relies primarily on the right/back/bottom brain (which we will call Right brain for convenience).

LEFT	RIGHT
thinking	feeling
verbal language	non-verbal communication, movement, touch, sound
details	big picture
time	space
focused vision	diffuse vision
logic	intuition
sequential	simultaneous
conscious control	reflex
abstract	concrete

The non-verbal language described before, for example, is a Right brain function.

Verbal language integrates later, at approximately 1-2 years. Child's initial capacity is for feeling. Thinking integrates at 3-6 years. (ref. 1) Initial thinking, however, is concrete. Abstract, logical thinking often does not become fully integrated until mid-to-

late teens. A sense of time is non-existent in a child — it is either now or never (that is why children want immediate gratification). Most of us can recall how difficult it was to explain “next year” to a child. Children, however, have a great sense of space as evidenced by their games and drawings. It can be said, therefore, that the Inner Child is the Right brain.

We are born with the structure in place for both brain hemispheres, but the function of the Left brain develops later. The Right brain, then, contains our primal identity and individuality.

In the early years of life, the model for the subsequent development of Left brain skills is provided by the surrounding adults: parents, teachers, other family members. They serve as a sort of surrogate Left brain, with their verbal skills and intellectual understanding, necessary for the proper guidance and eventual integration of both hemispheres. The imprints those people make in the brain are called “introjects.”

Most of those people, unfortunately, have no acceptance for the Right brain behavior. Thence all the “don’t cry”, “don’t shout”, “don’t run”, “don’t ask stupid questions”, “don’t be a nuisance” injunctions imbedded in our brains. According to research, by the time we are 18 we have heard 148,000 negative commands and only a handful of positive ones. (ref. 2)

These introjects occupy so much space in our thinking and so distort our conscious perception that it can be said that our Left brain really does not belong to us.

And what has happened to the Right brain in the face of this constant disapproval?

- 1) It learned to pretend it was a Left brain. Children who went that way became very rational and verbal, trying to be like adults.
- 2) It went into fear and confusion. This could manifest a range of behavior from spacing out to severe learning problems.
- 3) It rebelled. This could produce behavior ranging from aggression to addictions. These

defensive postures against the Left brain so affected our behavior and self image that it can be said that the Right brain is not ours either. We lost our originality and creativity, putting ourselves down on the one hand and defending ourselves on the other one. This is the reason why there are so many people unsure of who they are and what they want to do in life. Emotional Integration™ involves liberating oneself both from the disapproving introjects and from the defensive behaviors, to reclaim one’s true creative potential.

### Reclaiming Your Brain

It is a well known fact that learning and memorization are tied to emotional states. The more intense the state, the deeper the learning. A concept of “state-bound learning” explains that if we learned specific information in a specific state we may need to go to that state in order to recall it. For example, if someone learned math in a state of panic, they may need to get into the panic again to be able to do math. Similarly, the introjects were internalized in specific emotional states and those states will need to be re-experienced to let go of those messages. TFH and other forms of balancing are in a unique position to facilitate release from the body of both the introjects and the defensive postures. The process could be greatly enhanced by including more direct emotional expression.

Messages were absorbed at various levels of intensity, so some of them can be released easily. The deepest beliefs about ourselves, however, are held in place by very intense emotions and can only be released by re-experiencing these states and the original trauma.

Emotional Integration™ includes this type of release. When an emotion comes up with a correction, a client/student is encouraged to express the sounds or words that emotion brings up, following with a movement or posture that seems appropriate at the moment. Complete experiences can be recalled and released this way, adding great depth to the balancing process, and accelerating the healing.

In one example, a man complaining of a recurrent headache started to experience anger during the correction of lazy 8. Following that with words and sound in a specific visual field, he recalled a forgotten incident when as a child he tumbled down the stairs and hit his head, experiencing an emotional state that was parallel to that surrounding his current headache. The headache subsequently disappeared. In another example, a woman who has had no memories of her childhood before the age of 7, was able to recall (in that way) an incident at age 3, when her mother was shaking her violently, yelling hateful words. It helped the client validate her own feelings and understand her childhood better. There are many other examples that can be given of how Emotional Integration™ helped clients release and heal deeply buried incidents that otherwise would have remained in the subconscious, constantly feeding destructive or baffling behavior patterns.

Emotional Integration™ is not a one shot deal. The programming happened over many

years from different sources and it will take time to "get it out of the system". While each session brings measurable improvements, clients are encouraged to pursue the process for one to two years. The above examples are just single experiences in those clients' long term process. All my clients who choose to go that way got better results. Longer periods of time allow us to develop a rapport that in turn encourages work on deeper levels. While miracles are nice to have once in a while, there is no substitute for a process. I would encourage you to include the process of Emotional Integration™ in your practice.

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## Appropriate Muscle Checking

by Sharon Promislow

The one common denominator to all our Applied Kinesiology disciplines is the necessity to clearly and simply teach and practise effective muscle checking. Whether we are directly testing the integrity of a specific muscle in Touch for Health, or simply getting a read-out of a brain stress response to a particular activity, goal or substance, it is important to have a simple and universal understanding of the process.

Over the years the languaging of energy balance has included "Switched on vs. Switched off" "Strong vs. weak", "High Gear vs Low gear" "Locked vs. unlocked", etc. The terminology for energy imbalances has been equally awash with jargon: blocked, overenergy, underenergy, overfacilitated/underfacilitated, switched, stuck high gear, stuck low gear etc. What does it all mean, and how can we teach people to easily identify and work with these energy responses?

I propose a simple concept:

**A MUSCLE CHECK IS EITHER APPROPRIATE OR INAPPROPRIATE.**

The definition of an appropriate muscle response is:

A "switched on" muscle that is capable of showing an indicator change: showing there is still an instantaneous, clear "appropriate" communication between that muscle and the brain.

**There are two easy physical ways to check for this:**

1. Zipping up/down the central meridian
2. Tonifying or Sedating the belly of the muscle in question using the spindle cell technique.

**There are verbal cues** to show if that clear communication is in place and the muscle can quickly respond:

1. "Show me an indicator change"
2. "Show me a yes: Show me a no." (or "positive" and "negative" )

3. "Your name is (Real name) Your name is (incorrect name) "

So a muscle test is **APPROPRIATELY** switched on or "high gear" when a strong muscle check can instantly switch off to:

1. Zipping down of the central meridian, or
2. Sedating (pinching the spindle cells in the belly of the muscle), or
3. "Show me a No", "Your name is (incorrect name)", or some other verbal request for a falling away of the muscle.

When a "low gear", falling away coding is expected for one-sided brain body processing, a muscle test is **APPROPRIATELY** switched off or "low gear" when a switched off muscle will instantly switch back on to:

1. Zipping up the central meridian, or
2. Tonifying ( pushing apart the spindle cells in the belly of) the muscle, or
3. "Show me a yes", or "Your name is correct name " or some other verbal request for a switched on or high gear response.

An inappropriate check that holds strong and can't fall away is blocked or stuck high gear, etc.

An inappropriate check that falls away and cannot be switched back on is in overload or stuck low gear, etc.

**A rule of thumb for effective muscle checking is**

**NEVER TAKE YES FOR AN ANSWER.**

Always zip it down or see if you can get an indicator change. Only then do you know that you have gotten a precise and appropriate readout of the effect of the stressor issue or substance on that person's system.

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## How to Find Priority Issue

by Sharon Promislow

Sometimes we have trouble getting specific about the issue we need to deal with. The following gives us a format for working with clients to identify their priority issues.

1. If the person's system demands conscious knowledge of a specific goal and if you have an idea of what it might be, state it and ask the body:

"This is the priority issue." (Push)

"Is there any better at this time?" (Push)

If your instinct has proven correct and you have identified the issue, proceed directly to #3.

2. If this is not the issue, ask:

"The priority issue is in the area of:"

☐ WORK RELATED

☐ PERSONAL LIFE

☐ Parent-(☐ Mother ☐ Father)

☐ Spouse ☐ Children ☐ Brother ☐ Sister

☐ Aunt/Uncle, etc.

☐ RELATIONSHIP

(☐ Male or ☐ Female)

☐ SELF TO OTHER

☐ OTHER TO SELF

☐ SELF

☐ PERFORMANCE

☐ Learning ☐ Physical ☐ Sensory

☐ Goal setting ☐ Organization

☐ Procrastination

☐ SELF ESTEEM

☐ WEIGHT LOSS

☐ PHYSICAL WELL-BEING -  
SERIOUS ILLNESS

☐ HABIT CHANGE

☐ FINANCIAL

☐ SPIRITUAL

☐ Social Readjustment Rating Scale  
(If yes, determine priority area)  
(See Success Over Distress by  
Wayne Topping)

☐ Burnout Issues  
(If yes, determine priority area.  
See above)

☐ Health, nutrition, or exercise

☐ Use your intuition

3. When you have determined issue ask:

"Do we have to be more specific."  
(push)"

Anything to be added or changed."  
(push)

When body is satisfied with priority  
issue, correct using your preferred  
methods.

THE PRIORITY ISSUE IS:

\_\_\_\_\_  
\_\_\_\_\_

ROLE PLAY ISSUE to involve  
kinesiological response:

Action1:\_\_\_\_\_

\_\_\_\_\_

Action2:\_\_\_\_\_

\_\_\_\_\_

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## Pro/Con Issue Defusion

by Sharon Promislow

The brilliance of kinetic work is never brighter than in its ability to assist the client in identifying the priority stressors underlying his/her body and brain imbalances. Correction literally flows from new understanding.

This Pro/Con issue defusion was inspired by the work of Dr. Wayne Topping and is made more profound with techniques drawn from One Brain. It is a superbly insightful and easy way to approach any stressful and puzzling relationship, goal or issue the client may present. It is particularly useful for breaking down into segments an issue that in its totality causes overwhelm for the client.

### A. Analyze Issue in Depth

1. On the top of a sheet of paper write down the affirmation, statement, goal or issue. Create two columns - Pro and Con.
2. On the left side of the sheet, have the client write down all the pros--everything good that will come if it were to be actualized. Everything, no matter how silly.
3. On the right side to the sheet, have the client write down all the cons--all the negative things it would cause in your life, fears, etc. Again, everything, no matter how silly. Muscle check that all necessary pros and cons have been identified. If not, determine how many are missing, and assist the client in determining what they are. This is, in many cases, the most insightful part of this defusion.

### B. Defuse Stress with Muscle Testing

4. Muscle test to determine which pros and cons are stressful.  
Determine the percentage of Negative Emotional Charge on stressful issues: more than 60%, more than 70%, etc., until arm falls.... more than 65, 66, 67%, etc. until arm falls.

5. Muscle test for the priority stressor ( is is most often a pro!)  
Determine the priority emotion using Five Element emotions, the Behavioral Barometer or Barton's organ emotions. If a pro, determine percentage of positive emotional charge.
6. Ask permission to age recess to age of cause or best understanding if you possess these skills. Determine that age.
7. Defuse this issue at that age with a priority correction offered from your personal knowledge. Usually frontal occipital holding is sufficient.
8. After defusion retest indicator muscles on issue. If strong, determine that the emotion is now clear and issue is 0% negative emotional charge, at age of cause and in present time. (If you wish use, other One Brain skills (infusion, future progression etc.,) to support your balance.)
9. Proceed to retest all the other formerly stressful statements. Most if not all will have been defused by the priority defusion. If any remain, determine next priority issue - Pro or Con- and repeat steps 5 through 9 for defusion. Retest until all pros and cons are 0% negative emotional charge with no emotion locked in.
10. Muscle test main issue. It should be stress free, 0% negative emotional charge and 100 % positive emotional charge. Defuse if necessary to achieve this.
11. Confirm 100% willing to get the benefit of this balance. Defuse if necessary.
12. Determine if there is any homeplay necessary to support the new integration.

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## How To Fix Anything/Everything

by Jim Reid, D.Min.

Necessity was the mother of invention where this correction is concerned. Two weeks before Christmas a friend of mine had oral surgery on a Friday morning. That evening she was in a world of hurt. Her oral surgeon had given her no medication and had left town. Her dentist was unavailable. She called me in tears and asked if I could do anything to alleviate her pain. I told her to come over. In twenty minutes she got off the table without any pain, and went to the mall shopping with her friend that had driven her to my house.

The process I used with her I have repeated many times on a variety of complaints that one might think cannot be affected by the Touch For Health Synthesis with incredible results. Here is the process.

1. Identify the emotion involved and defuse using F/O holding.
2. Ask, "Is there something that I know that can facilitate relief of your complaint?"
3. How many corrections will it take to facilitate relief? Muscle test to see how many are necessary.
4. Say, "Be the first correction on the right," and test indicator, "on the left," test indicator.
5. Ask, "What meridian are you on?" Use Five Element chart to identify meridian.
6. Ask, "Should I use neuro-lymphatics, neuro-vasculars, or meridians to make this correction?"
7. Make an extended correction. Rub neuro-lymphatics twice as long as you normally would. Hold neuro-vasculars twice as long as you normally would. Ask how many times to run the meridian. Ten, twenty or thirty times is not unusual.
8. Retest indicator for the first correction on the right and the left. Now the IM is locked.
9. Proceed through all corrections the same way.
10. Drain negative energy from the session.

When you do this process, expect miracles, because you will see them again and again.

## Positive Kinesiology Practice Building Skills

by Kerry Rowe, Dip.App.Med.Sci.

Why do we want to be Kinesiology Practitioners?

Do we want to help people to help themselves? Do we want to help people to help ourselves? Or are we just helping ourselves to people ??

We all have different motivations for working as Practitioners, some community minded, some personal and some global. The burning question really is: " How do I create a successful business as a Kinesiology Practitioner?" What is the essence or the difference that makes a difference between a "successful" person, and a "non - successful person ?"

In my paper I presented at the TFH Conference 1991, I mentioned that many studies have been done to find the " magic" and it all came down to YOU!! You are the intention, the will, the determination, you are the energy. You are your business and what you put into it , is what you shall get out of it. Look at your intention behind the decision to be a practitioner. Does it line up with your heart and spirit?

What we work with in Kinesiology is the energy of the heart and spirit. A large part of your success in the business is understanding yourself. We can access such deep changes in people with whom we work, but are we willing to keep making those changes ourselves in our lives, or do we think we now know everything? While we have studied Kinesiology, we have experienced many corrections and many insights, some profound, that have affected us enormously. Through these insights many of us have had to adjust our lives in order to continue with our commitment to become Practitioners.

As Practitioners we sometimes take for granted the power and effect of the work we do. We need to keep in touch with ourselves through the work, and have regular sessions. As well, we remember the preciousness and

vulnerabilities of our clients when we experience the client role.

Having completed enough training to begin a business, we feel our goal has been reached. The action is to now open a business. We have the table, the room and all the bits and we are ready to begin. It is time to re-assess our GOAL. Is it still congruent? Has it changed? Have you compromised yourself, or have you achieved a greater expectation? GET SPECIFIC!! Be clear about your outcome. The next step is to set up your outcome procedure for you and your business.

### **Process: Specific Personal and Professional Outcome Procedure Handout**

The Business begins as You, Your energy, Your intention, Your generation. As it builds, it becomes a separate entity. It begins to move with its own momentum, and You begin to work ON the Business instead of IN IT. What does it now enable you to do? The Business becomes an asset. The Business has value. Once you have achieved your initial goal, it is time to step up to the next chunk and create greater momentum, for greater challenges and greater successes. CLIENTS.

Clients create our baseline. Clients are not the sum total of a successful Practice. (read: expertise) Clients are the baseline. To achieve our specific outcome as a Practitioner we need clients. How do we "GET" clients? An almost unquantifiable question. There are many ways of generating clients, through free lectures, brochures, advertising etc. The stability of the practice depends upon enough clientele. Kinesiology itself is unquantifiable when people ask you "What do you do?"

Many people will come out of curiosity, last chance fix its, pain, trauma or for personal development. The diversity of the work is boundless. However what is the key to a stable clientele? Will they come back, and



will they refer? Referrals are about THE main source of regular clients. Why do people refer? They have experienced something of value and have shared that experience with a friend, acquaintance or a loved one. It is important to acknowledge the client who has referred, and to find out what works for them. Clarify the expectations of your new client specifically about why they came, and explain again how you work to avoid misunderstanding. Kinesiology can be very easily misrepresented.

Personally I feel success does not depend upon the amount of people you see, but the effectiveness and commitment you have with each person individually. The commitment of your 100% attention and intention reaps its own rewards. "Where the attention goes, the energy flows". Be congruent with yourself and your clients. When a person feels understood most of the stress is dissipated. Understand your clients needs and meet them. Effective communication and listening skills are essential. Using the tools of Human Physiography and Language Patterning we need to be able to identify the subconscious stresses, and communicate within their reality. This may be the first time in their lives that they have felt truly understood. Listen to what they are not saying ?

Establishing rapport in the first session can be critical to the success of any subsequent sessions.

You don't get a second chance to make a good first impression.

#### **Process: Language Patterning Exercise and Handouts, Key Physiographics Exercise and Handouts**

#### **The Wellness Model:**

Last year at the Annual IASK Conference I delivered a paper on *Reframing for Enhancement*. A different philosophical approach in the sickness / wellness paradigm. The Wellness model is just that. Through useful communication with our clients we can reframe their intention for coming to see us. Most often we are sought out to alleviate pain and suffering and so, we are neurologically implanted into the clients subconscious as

part of the pain process. Many clients exhibit similar symptoms week after week even though we have done a GREAT SESSION, and they left feeling wonderful. The next appointment fires off the sickness anchors and some or all of the symptoms recur.

Often practitioners have hidden agendas to keep people coming for financial security. The fear is, "If they get well they won't come back." On the other hand some practitioners feel rest assured that, "There are a lot of sick people out there to keep me in business."

Reframe your clients' reason for coming to Kinesiology. Become a positive anchor for their wellness and your own. The projection of negative energy in the office is not good for you. Work towards a goal they could achieve without the current pain or symptoms. Instead of defusing stress, work towards wellness behavior beyond the problem. Believe me, the same issues come up, however in a Positive context with a Positive purpose. The sessions no longer focus on the negative but create a positive, which the Conscious Can Understand.

(Note: See 1991 IASK Paper for reframing process.)

#### **Enhancement**

And yet again, beyond the reframe we have Enhancement. The balance we do when the goal has been defused. There is no more pain and suffering. But is there enough understanding and feedback about how we can sustain this state in ourselves. Is the client fully empowered ? Now is the time for Future Balancing with Enhancement. In this workshop I will address the needs of the Practitioners in the process.

#### **Process: Enhancement Finger Mode with Future Balance Handout.**

**Goal Statement:** "I want all my clients to get well."

**Enhancement Statement:** "I will be creating positive health for as many people as I can."

Clients now become free to **CHOOSE** to come and see you for a session. A Practice based on **POSITIVE KINESIOLOGY** works. The client understands Kinesiology as part of the progressive aspect of life. They are free of the stress that they need to be "sick" to come and have a session. You are building a business on referrals where you see the people who are in need of healing on some level, as well as the clients who now choose to see you for enhancement, and use Kinesiology to maintain their wellness. On going generation of business from a positive perspective. There is a real feeling of client and practitioner working together, rather than "us" working on "their" problem.

The reframe of using Kinesiology to clear any obstacles to get to a better place takes the focus off the obstacle. This is a change in the

paradigm of your thinking, your intention and energy. It is up to you to actualize this philosophy. I hope the Enhancement Process will prove to be a great tool to your practice. (read: expertise) Balancing for changing goals, and the Enhancement beyond the goal towards the future. Positive Kinesiology means feeling great and being congruent with Physical, Emotional, Mental and Spiritual wealth and health, both for the Practitioner and client.

**Specific Outcomes, Effective Communication, Reframing and Enhancement** are integral in creating the Wellness Model that is the difference that makes a difference in successful Kinesiology Expertise. (read: Practice)

**What is Kinesiology? Handout.**

## Test for Hormone Imbalance

by S.J. Schultz, DC

- I. When and how to test for hormone imbalance.
  - A. When to test for imbalance.
    1. Each time the season changes.
    2. A week before the full moon or the menstrual cycle.
    3. If you are having mood swings or unstable emotions.
    4. When the world is wrong and you are right.
  - B. How to test for any imbalances using any strong indicator muscle.
    1. Patient puts one hand on the forehead so testor can test against the pituitary. Then, either one touches the other points for testing.
    2. Test each gland listed below for over and under functional energy (use the alarm point to test for over). If any gland tests weak, do all the corrections.
- II. What to test against pituitary.
  - A. Pineal - Emotion: Unsettled, want to move or leave, migratory feeling, seems to have cycles of 3/6/9/12.  
Circuit localizing point (CLP): baby's soft spot on top of the head.
  - B. Pituitary - Emotion: Can't focus, feel abandoned, uncaring, self-destructive, suicidal, "so what".  
CLP: forehead, (can test this alone as well as against the others).
  - C. Thyroid - Emotion: Cry easily, discouraged, depressed.  
CLP: lower throat.
  - D. Liver (regulates estrogen & progesterone) - Emotion: Anger, rage, "work-a-holic"  
CLP: lower right ribcage.
  - E. Pancreas/Spleen - Emotion: Compulsive eating  
CLP: lower left ribcage.
  - F. Kidney - Emotion: Fear, withdrawal, "leave me alone".  
CLP: Over each kidney on patient's back.
- III. Corrections for hormone imbalance.
  - A. Achilles' heel: With two fingers of each hand, firmly hold the Achilles' heel. Breathe in. Counting to seven so it will work faster.
  - B. Liver points: Tap the point (three fingers below the knee and just to the inside of the leg) with the knuckle, gently 30 times.
  - C. Head Pull: Overlap both hands in hollow at base of skull(nape). Pull forward and upward gently as you count to 3. Count to 3 again as you release. Do 4 times.
  - D. Pituitary pump: Place heel of hand on forehead of patient and whole hand on the nape of the neck. Firmly squeeze as patient breathes in deeply, and release as patient breathes out. Repeat 3 times.
  - E. Foot reflexology point; massage the big toe.
  - F. Recheck any gland that showed weakness. You can also rub any weak points, except the lymphatics on the chest of a nursing mother, unless you intentionally want to dry up her milk.

IV. Nutritional Corrections:

	OVER	UNDER
Pineal	digestive aid with pepsin & chloride	hypothyroidalamic concentrate
Pituitary	magnesium	vitamin B6
Thyroid	chromium or GTF	thyroid glandular with kelp
Liver	B vitamins	vitamin A
Pancreas	pancreatrophin	GTF
Kidney	protein enzymes	protein enzymes

S. J. Schultz, Chiropractic Physician  
Specializing in Injuries and Proper Diet  
4200 N. Cloverleaf, Ste K, St. Peters, MO 63376



## The Drama-Triangle and Kinesiology

by Rosmarie E. Sonderegger Studer

### Purpose

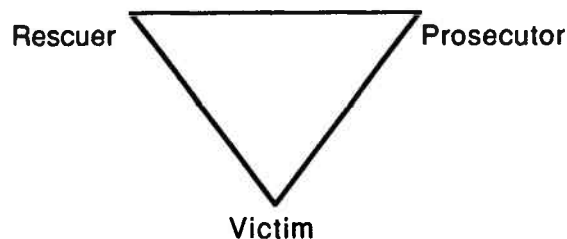
As a Kinesiologist, each one of us works with people that come to use, be it to groups or private sessions, with courage and trust. Therefore, it is important for use, to know how we interact with people and what our reflex patterns are in communication when we are under stress. One way to deal with this, is to look at the DRAMA-TRIANGLE.

This presentation helps to reveal these maybe unknown patterns and show ways to deal with them in a responsible way.

### Introduction

In Kinesiology we state that a human being is STRUCTURAL, CHEMICAL, and EMOTIONAL.

In TRANSACTIONAL ANALYSIS the triangle is used to explain human relationship patterns under stress. Stephen Karpman, a transactionalist, has designed a diagram, a triangle, that shows the "games" (tricky transactions) we all play at times.



### The Roles

**The Prosecutor:** The prosecutor is hard on the other person, puts down, devaluates, give the impression of looking down on them and that, of course, they cannot measure up to him/her.

**Consequence:** The others are not okay = Discount.

**The Rescuer:** Devaluates the other person, understanding that he/she is slightly "above" and from this position he/she offers help ... because the "poor people" are unable to help themselves.

**Consequence:** The others are not okay = Discount

**The Victim:** Also for this person, somebody is inferior and not okay - he/she him/herself.

**Consequence:** Discount of self.

Sometimes the victims are "hunting" for a prosecutor that puts them down, or are looking for a rescuer for help because they believe that they need help. They confirm: I am unable to make it by myself.

**Whereas prosecutor and rescuer discount others, the victim discounts him/herself.**

All the three roles are part of a "game". People participating react to past experiences (often as far back as childhood) and lack the presence of HERE and NOW.

### Balance

With Kinesiology, a DRAMA can become a COMEDY!

1. Switching, PACE, etc.
2. Permission to address this issue.
3. My "favorite" role in general?  
in specific circumstances?
4. A situation, a person?
5. % Stress - my role  
- my co-players' role
6. What advantages/disadvantages do I have in this game? - Be specific.
7. "I am willing to release the need for this role", M-test  
"I allow my co-player to give up his role", M-test
8. How will I be different, then?  
- Be specific
9. Balance

This balance is not only important for Kinesiologists or people working in a helping profession, very often a client who does not feel any changes, is repeating the DRAMA-pattern over and over, and has a chance for change with the DRAMA-TRIANGLE.

## Developmental Kinesiology Kinesiological integration of early childhood reflexes

by Angelika Stiller and Renate Wennekes

The baby is born with reflexes and reactions. They belong to his "first equipment". They are planned in our genetic code and proceed in a special order. The normal development is dependent on the building up and impairing of reflexes. The special stages of the reflex activities helps the medical doctor to recognize the degree of ripeness of the brain.

The reflexes are dominated by subcortical cores. In getting older most of the reflexes are impaired, and higher parts of the brain take over. Others especially the ones which influence the vestibular system stay or arise and help us during our whole life.

During therapy the main interest in reflexes is whether they are impaired or not. In our work we are more interested in the living of the reflexes and reactions.

Why do they exist?

And what are our possibilities in kinesiology to integrate the early childhood reflexes?

The healthy child does not come completely passive and helpless to this world. It is provided with abilities that help it to survive, such as breathing and the beating of the heart. In addition to this it has the sense organs and reflexes that support the baby in its growth. These abilities that the child has when it is born, can only unfold in a supporting environment, because the development of the child proceeds "reactively". Besides feeding, it needs warmth, body contact, a smile, love and stimulation (see ref. 3, p 45-46)

It is like a bunch of flowers. We get a little present: the flowers can only unfold their beauty, when we know how to handle them, and they have a beauty completely independent of us. The baby needs providing and has abilities to "convince" the adult to be busy with its needs so that it gets enough stimulation for the development of the nervous system. The baby is not completely helpless. It is competent.

We think that the child makes special experiences with each reflex. They are mainly connected with the senses: the child is all ear, all eye, all movement. Each reflex procures kinesthetic, tactile, and vestibular experiences for the child. Again and again the child is governed by automatic movement patterns. Again and again it has sensory experiences that help it to learn how the body feels in doing special movements, how heavy the head is, how the relation is between the various parts of the body, etc.

The development of the child underlies complex cycles, and the reflexes are a very important part of it.

We can't miss them in our development:

- They give us a feeling of the movement and prepare for complex movements.
- They help us in the development of the sense organs and help us to survive (e.g., suck reflex).
- They serve the development of the brain with its complex connections.

**We conclude** that it is very important to alive the reflexes, to integrate and sometimes impair them. Only when they are free from charges and compensation, we can reach and feel competence as adults.

**What does this mean?**

"Living" means that the child experiences the reflex on the level of the senses and the movement during the stage where nature has planned it.

"Integration" means, that these experiences left marks in the brain and that they were connected to other experiences.

"Impaired" means that higher developed parts of the brain can stop the reflex activity and

therefore the voluntary movement can develop.

"Charges" can emerge when one or several of those aspects are disturbed in their sequence.

"Compensation" is a reaction of the body, to make up for deficiency in order to reach the next developmental stage.

"Competence" means that the integration of the reflex frees you for self-determinate action.

What happens, if you don't have this experience?

What happens, when we learn only insufficiently to impair special reflex reactions?

What happens, when we got dependent on old reflex patterns under stress?

Here are two examples:

As adults we often have problems with grasping and letting go, in the literal and transferred meaning. We suppose that this has something to do with the grasping reflex that is lived insufficiently during childhood and therefore often poorly integrated and compensated.

Children who have problems with reading and writing often have difficulty in crossing the midline. This can have a connection to the insufficient impaired ATNR

Kinesiology gives us the opportunity to help the body to integrate the reflexes even after the early childhood development. We use the 14 TFH-muscles as indicator for the effects of a non-integrated reflex on the body.

Procedure:

1. 14 muscle balance.

2. Activating of the reflex by a movement similar to the early childhood reflex.
3. Test of the 14 TFH- muscles.
4. Stress test on "living", "integrated", "impaired", "charges", compensation", and "competence".
5. Balance
  - Touch for Health
  - The reflex movement
  - The senses that belong to the reflex
  - Hand modes
  - Other systems.
6. Re-test the weak TFH-muscles, the words, the movement of the reflex, and the initial problem.

The ideas that we have presented in this paper are part of our kinesiological work for early childhood development. We feel that human development is a process for the whole life. It started in early childhood and gets more liveliness when we respect these experiences.

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## Using Flow Line Massage to Determine the Relevant Acupressure Points

by Wayne W. Topping, Ph.D., LMT

**Abstract:** Flow Line Massage is one of several techniques we have used in Biokinesiology in our multi-faceted, wholistic approach to restoring balance to the body. A specific application of flow line massage provides us with a fast way to determine which of several acupressure points is most useful to balance the body. To illustrate this, we'll consider acupressure points to (i) reduce cigarette withdrawal symptoms, (ii) balance the eight extra meridians, (iii) determine whether toxicity is priority, and (iv) help balance local problems.

### Introduction

One of John Barton's first books, *Flow Lines to Health*, published in 1977 (now titled *Take Care of Yourself Naturally* - ref. 2), described how any kinetic tissue in the body muscle, tendon, ligament, fascia, or aponeurosis can be switched on by massaging firmly along the tissue from its origins to its insertion. Massage of foot and hand reflexes, for example, is toward toes and fingers.

It was also discovered that kinetic tissues and acupressure points can be switched on temporarily by use of light pressure. The light brushing is in the origin-insertion direction on the head, torso, and toward the fingers and toes on the palm and bottom of the foot.

However, all brushing of skin on the top of the foot and back of the hand, plus the skin on the arms and legs, is toward the shoulders and hips respectively. Light brushing in this direction switches on the tissue, dorsal hand or foot reflex, or acupressure point temporarily. Tapping the same reflex or brushing lightly in the opposite direction recreates the imbalance or restores it to its previous condition.

### Applications

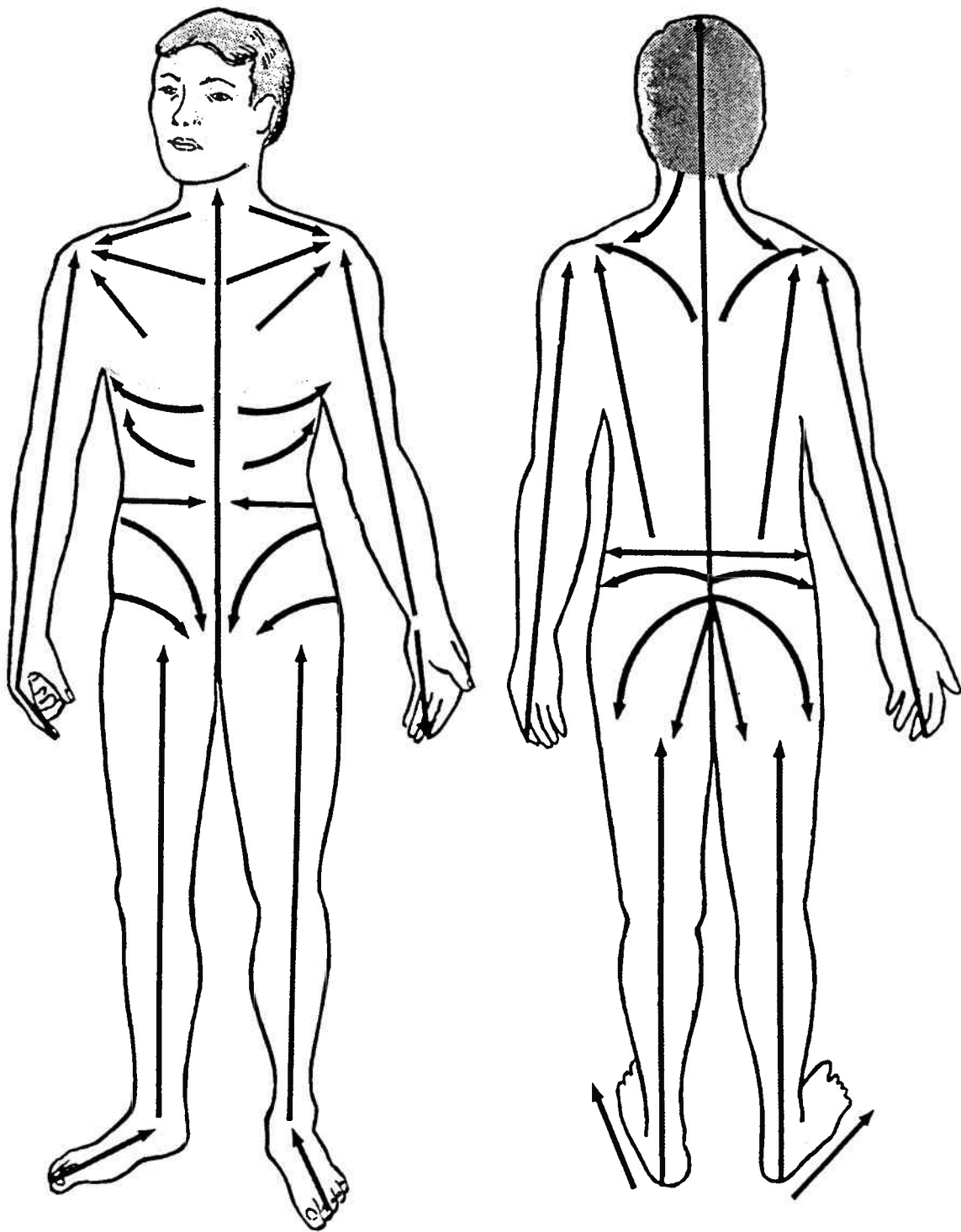
There are unlimited applications for this procedure. Four will be described here to get your creative juices flowing.

### A) Acupressure Points for Reduction of Cigarette Withdrawal Symptoms.

Many of the withdrawal symptoms people may experience when they quit smoking cigarettes can be eliminated or prevented by stimulating acupressure points related to the liver and other digestive organs. There are nine points that work very effectively (ref. 3). However, usually only two or three are needed for each individual. Using flow line massage allows us to determine what those points are.

1. (a) For the client experiencing withdrawal symptoms, test indicator muscle for central and governing and the twelve regular meridians and challenge the neuro-lympathic points or use the priority mode to determine which one is priority over the others.  
  
(b) If the client is still smoking and is not currently experiencing withdrawal symptoms, you can have the person imagine they have been without a cigarette for 24 hours to artificially create the "withdrawal" pattern of imbalances. Determine priority indicator muscle.
2. Test the priority indicator muscle, IM (it should be weak). Lightly brush over one of the acupressure points listed in Table 1 in a direction consistent with the arrows in Figure 1 (i.e. up the arm or leg, up the center of the body).





**Figure 1: Light Flow Lines**  
(From Take Care of Yourselves Naturally by the Biokinesiology Institute, permission of John Barton)

**Table 1: Acupressure Points for Prevention of Withdrawal Symptoms**

- CV 15: On the midline of the body, immediately below the bottom of the breastbone (sternum).
- CV 17: In the center of the breastbone (sternum), in line with the nipples (must be compensated for in the case of an adult female).
- CV 22: On the midline, in the depression above the suprasternal notch.
- CX 6: The width of two thumbs above the most prominent crease on the inner wrist, in line with the middle finger.
- LIV 2: The width of two thumbs above the separation between the biggest and second toes, top side of the foot.
- LU 5: In the crease of the inner elbow, on the radial side of the biceps brachii tendon. Flex elbows slightly to locate the points.
- LU 7: Above the styloid process of the radius one and one-half thumb widths above the transverse crease of the wrist. Or, when the index fingers and thumbs of both hands are crossed, the point is in the depression right under the tip of the index finger.
- SP 6: The width of one hand above the crown of the inner ankle bone, just behind the bone (tibia) on the front of the leg.
- ST 36: The width of one hand below the bottom of the kneecap; then the width of one thumb toward the outside of the leg.

**3. Retest the priority IM.**

(a) IM is strong. This acupressure point can be used to help prevent withdrawal symptoms. Brush over the acupressure point in the opposite direction to restore the IM to its original condition. Go to 4.

(b) IM is weak. This acupressure point will probably not be useful in helping to eliminate or prevent withdrawal symptoms. Go to 4.

**4. Repeat step 2 with each of the other eight acupressure points until you have determined which of the nine acupressure points will be most useful for your client.**

**B) Acupressure Points to Balance the Eight Extra Meridians.**

1. Each of the eight extra meridians (irregular vessels) has its own specific nature and symptomatology, and acupuncturists can work with them independently as the client's picture requires.

2. They can be used in coupled pairs, paired as in biokinesiology: central and

governing; vital and belt; mobility yin and mobility yang; regulating yin and regulating yang. These meridians are yin/yang pairings in the same way that there are yin/yang pairings of the twelve regular meridians within the five elements.

3. Traditionally, acupuncturists have coupled the eight extra meridians on a different basis, either both yang or both yin, thus utilizing the individual "flavors" of each meridian in combination to produce a third, totally different one (ref. 8).

The coupled meridians with their Key Points (Master Points) are:

Belt/Regulating Yang	GB 41/TW5
Governing/Mobility Yang	SI 3/UB 62
Vital/Regulating Yin	SP 4/CX 6
Central/Mobility Yin	LU 7/K 6

When an extra meridian is out of yin/yang balance, acupuncturists have a number of different options:

(a) They can stimulate the **Key Point** to empty excess energy from the meridian.

**Table 2: Key Points (Master Points) for the Eight Extra Meridians**

<u>Key Point</u>	<u>Location of Acupressure Point</u>
CX 6:	(Regulating Yin) The width of two thumbs above the most prominent crease on the inner wrist, in line with the middle finger.
GB 41:	(Belt) In the depression anterior to the junction of the 4th and 5th metatarsal bones.
K 6:	(or 3) (Mobility Yin) In the depression one thumb width below the inferior border of the medial malleolus. (This is K3 on Felix Mann's chart.)
LU 7:	(Central) Above the styloid process of the radius, one and one-half thumb widths above the transverse crease of the wrist. Or, when the index fingers and thumbs of both hands are crossed, the point is in the depression right under the tip of the index finger.
SI 3:	(Governing) Located at the end of the transverse crease, on the border of the palm below the little finger.
SP 4:	(Vital) On the medial aspect of the foot, in a depression at the anterior and inferior border of 1st metatarsal bone, at the junction of the "red and white" skin.
TW 5:	(Regulating Yang) Two thumb widths above the transverse crease of the back of the wrist between the radius and the ulna.
UB 62:	(Mobility Yang) Directly below the tip of the outer ankle bone, and half a thumb width lateral to its lower border.

(b) If unsuccessful, they can use the **coupled point**.

(c) If still unsuccessful, they can use the key point of the **central/governing meridian** whichever is opposite (yin/yang quality) of the original unbalanced meridian.

(d) They can also stimulate the **beginning and end points of the extra meridian**.

With the flow line massage technique we have an ideal means of determining whether any of these options would benefit us in our quest to balance our IM/meridian.

#### **Method:**

1. Test IM for the specific extra meridian (weak).
2. "Switch on" **Key Point** for that meridian by light brushing in the flow line direction.
  - (a) IM strong, stimulate point then check more mode (ref. 6) to see if (i) point

needs further massage, (ii) you've finished, or (iii) you need to go to 3.

(b) IM weak, tap point to restore it to its previous condition then go to 3.

#### **3. "Switch on" the coupled point.**

(a) IM strong, stimulate point then check more mode to see if (i) point needs further massage, (ii) you've finished, or (iii) you need to go to 4.

(b) IM weak, tap point to restore it to its previous condition then go to 4.

#### **4 "Switch on" Key Point for central meridian if you are working with a yang meridian or switched on Key Point for the governing meridian if you are working with a yin meridian.**

(a) IM strong, stimulate point then check more mode to see if (i) point needs further massage, (ii) you've finished, or (iii) you need to go to 5.

(b) IM weak, tap point to restore it to its previous condition then go to 5.

#### **5. Switch on beginning or end points for the extra meridian.**

(a) IM strong, stimulate point(s) then check more mode to see if (i) point(s) needs further massage, (ii) you've finished, or (iii) you need to pursue other correction procedures such as neuro-lymphatic points, neuro-vascular holding points, nutrition or emotions.

(b) IM weak, tap point to restore it to its previous condition. Pursue other possible correction procedures.

### C) Is Imbalance Related to Toxicity?

In Biokinesiology we have long used a quick screening test to determine whether the imbalance we are working with is due to toxicity or not. This method is a simple application of the flow line massage principle.

At first we used GV 25 for this purpose. More recently, John Barton of the Biokinesiology Institute has found GB 14 to be even more effective.

1. Test weak muscle, or an IM while localizing a "weakness."
2. Brush up lightly on the tip of the nose to switch on GV 25. Or, brush down over GB 14 (one thumb width above the midpoint of the eyebrow, below the frontal eminences). If either of these acupressure points switch on the IM, we can assume there is toxicity involved and you might want to look for nutrition that will antidote the toxicity.

### Acupressure Points for Miscellaneous Problems

A number of books describe various acupressure points which may be useful for a series of named conditions such as nosebleeds, car sickness, hiccough (hiccups), heat rash, restlessness, nightmares, and light headedness (eg. refs. 3, 4, and 5).

Generally, several acupressure points are listed and the reader is asked to "begin *deeply*

probing the area on your body that most closely corresponds to the illustration *until you feel a distinct twinge of sensitivity*. That is the exact pressure point....If the point does not announce itself clearly, you may need to apply more pressure; some points are not easily found. Finding the "best" point is a trial and error process; however, that point is often distinctly more pressure-sensitive than other recommended points." (ref. 3, pg. 5)

While this method does work, if the "problem" can be localized, such as bursitis, headaches, sore throat, sprains, and various other aches and pains, the flow line massage method gives us a faster way of determining which points are relevant to us.

### Method

1. Test a strong IM.
2. Circuit localize (C.L.) the "problem" area. If it weakens, go to 3.
3. Switch on one of the acupressure points:
  - (a) IM is strong, you've located a relevant acupressure point. Tap point to restore it to its previous condition before going to 4.
  - (b) IM is weak, this acupressure point is not useful to help the problem area. Tap the point then go to 4.
4. Repeat step 3 with each of the other acupressure points that are possibilities.

### Contraindications

This is a reminder not to use acupressure if you are pregnant (especially beyond the third month of pregnancy), have a chronic heart condition (especially if you wear an artificial energy-regulating device such as a pacemaker), or take regular medication for a serious health problem such as cancer or diabetes. Don't use acupressure within four hours of taking drugs, medications, alcohol or other intoxicants. Don't massage an acupressure point if it is beneath a scar, mole, wart, blemish or other disfigurement.



**Table 3: Key Points and Coupled Points for the Eight Extra Meridians**

Meridian	Key Point	Coupled Point	Biokinesiology Pairing, i.e. Relationship I	Traditional Pairing, i.e. Relation II
Central	Lu 7	K6 (K3* =Mann)	F	F/O
Governing	SI 3	UB 62	H	H/D
Vital	Sp 4	CX 6	N	N/T
Belt	GB 41	TW 5	C	C/I
Mobility Yin	K6 (or 3)	Lu 7	O	F/O
Mobility Yang	UB 62	Sm 3	D	H/D
Regulating Yin	CX 6	Sp 4	T	N/T
Regulating Yang	TW 5	GB 41	I	C/I

\*K6 in other charts is shown as K3 on Felix Mann's chart (i.e. in the depression one thumb directly below the inferior border of the medial malleolus).

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## Identifying Personality Traits

by Andrew Verity

### Kinesiology and Cheirology

Hand analysis (cheirology) is a reflection of the entire personality in all of its forms from human potential to grave, from before birth to death, from health to sickness. It refers to time and successes, failures and destiny. As design, it can be studied, being the visible reflection of the unconscious resolutions and genetic influences.

Authors as Noel Jaquin, Dr. Charlotte Wolff, Desbarolles and others have provided substantial research to indicate certain formations in the hand as symbolic of the existence of definite characteristics. Carl Jung, in his introduction to *The Hands of Children* by Julius Spier acknowledges in his cautious manner:

"... then hands whose shape and functioning are so intimately connected with the psyche, might provide revealing and therefore interpretable expressions of psychical peculiarity that is, of human character"

The study of the hand is a most frustrating and rewarding activity. It will provide insights hitherto unthought of, challenges your set and precious ideals, changes your complacencies and captures your imagination. It will reward you for your diligence and motivate you in your persistency for truth. In all things when analyzing from the hand ... **ask the reasons why.**

Cheirology looks more for the "why" of anything via the traits in the hand. It interests itself in proofs that can be established psychologically and physiologically, noting correlations and using this data to redirect faulty behavior patterns.

Cheirology maintains that change can take place within the person's life, if the person takes the necessary steps to create that change. It points to the **Will** as the guiding force, this will being subject to the worlds

view, the person holds to. If that world-view is contrary to the psychological makeup, conflict will surely be involved in the life...the degree of which will be recorded in the hand. If there is a harmony established and allowed to develop, then good must follow. The lines will then change to suit the new life-style.

Hand-analysis is a serious business, dealing with a person's potential and limitations. It sets out to comfort the sorrowful by offering hope, while also identifying illness in its various forms from the systemic diseases to the more subtle dis-eases of the psyche.

The cheirologist sees destiny as being controlled by the individual through the will, finding in the hand the best paths for success in life. The change of the shape of the hand and the change of lines as well, shows we are in control of our own destiny - if we exercise our God given skills to do so.

Dr. Charlotte Wolff refers to Drs. Carl Guntar Carus and N. Vaschide as two who have added much to scientific knowledge of hand reading. W. Benham has brought hand reading into a clearer perspective, along with Noel Jaquin. A.A. Desbarolles should be mentioned along and DeArpigny all of these people being serious students of the hand. There are hundreds of others as well, all adding to the knowledge necessary to the study, but it is the **INDIVIDUAL** who adds knowledge in any science. **YOU** can be that individual.

As everything has a **CAUSE**, everything must have an **EXPLANATION**.

### WHY STUDY HAND ANALYSIS?

Because of the advantage it has over other methods of analysis.

1. IT IS PERSONAL.
2. IT IS IMMEDIATE.
3. IT IS CONVENIENT.

4. IT IS TOTAL ... in the hand are found the psychological make-up from the parental influences, the inherited tribal instinct, the subject's place within society, the relationship of the inner world of self with health, ambition, direction, capacities, strengths and weaknesses, best times for major events to be attended to, and when to avoid action, vocation and so on.
5. IT IS INEXPENSIVE.
6. THE HAND'S DESIGN ... the manufacture of the hand is indescribably complex and incredible in its design. The nervous, lymphatic and circulation systems, chemistry, state of the organs and glands, a MIND, the unique and almost indefinable spirit of man that sets before him his own unique desires. The hand is designed to show all this, and much more.

#### WHAT IS IN THE HAND?

Character, temperament, genealogy, childhood, health, profession, attitudes, thought processes, ambitions, mental strengths and weaknesses, emotions, affections, money, children, milieu, friendships, enemies, failures, successes, losses, gains, psychology, all this and more revealed by a process of logical deduction that effectively puts it into the area of human science.

Failure in job satisfaction has become commonplace. Failure in marriage the same, failure of parents, failure of children, failure of personality. All brought about by a lack of knowledge of the self. This is where hand analysis excels.

When balancing the Cheirology traits, always use care in expressing an opinion, knowing the individual is extremely sensitive to influence from his/her own make up. Sensitive, nervous, anxious to hear what you have to say. Treat all your clients with the dignity they deserve. Never EVER ridicule, as their fears and phobias are real to them, and they have had to live with them for many years.- their fears are old friends that haunt and hurt daily.

Embryonic development is a time of **individual success**, and although locked into a micro-world, it is a world of design, and is subject to strict natural laws of development, these laws continuing through the creation of the blastocyst, the trophoblast, the bilaminar germ disc to the establishment of the body form. The ectrodermal derivatives include two interesting features between days fourteen to twenty eight: the beginnings of the brain, and the beginnings of the hands and feet, all made from the same material.

#### THE SHAPE: THE MASTER INFORMATION

This is the most important part of any study of the hand. It will be the initial contact, and final arbiter of your analysis of the person in front of you. Without this knowledge of the shapes and their meanings, any attempt to certify accurately will be presumption rather than fact. **All else in the hand is determined by shape**, and every condition, combination, characteristic, and line will be established in a most accurate manner once the shape has been mastered. We will be looking at the natural divisions within the framework of cheirological analysis.

There are three natural divisions in the shape of the Hand:

- (1) Prehensile/tactile
- (2) Three levels of comprehension
- (3) The psychological divisions

#### Prehensile/Tactile

Beginning with the prehensile/tactile, there is a natural division that sets the person, very broadly speaking, on one of two paths. The prehensile hand is eminently suitable for grasping or holding onto objects, and is seen as a broad, strong hand designed for movements of purpose, the broader the hand, the more prehensile the person. This demands also an outdoors existence, to exercise the prehensile preferences of the person. The more square the palm, with the outer edge protruding, the more prehensile the hand.

The prehensile personality is seen as the more extravert type of person, a person whose basic orientation is towards the external world of doing. This creates the outgoing, sociable, and rather impulsive person who needs a constant source of stimulation from the environment. They also have lower anxiety levels than their opposites-the introvert personalities. It is peculiar that the prehensile person also has a strong potentiality towards music, and also seems to be more in tune with the extra-sensory phenomena, perhaps because of their closeness to the elements of nature. There are several outlines of extraversion, (keenly noted in the difference between the types described by Wolff in her elementary and motor classifications.) The different extraversions can be seen under the general description of an outward-directed personality that seeks a sociable activity, with interests in the public environment rather than inner-directed attitudes and interests.

#### Summary of types of Extraversion.

1. **Active extraversion.** The outward direction of the libido (the totality of mental energy at the disposal of the instinct of love) which is willed by the subject, rather than pulled from an external object or source. The hand would register this at the MtVenus, that mount being rather large in proportion to the rest of the hand.
2. **Passive extraversion.** This outward direction of the libido is compelled by the external object this being seen in the heartline that sits on the prehensile hand starting from the headline - the romantic position, or from high up, even touching the finger of Jupiter, with the MtVenus normal.
3. **Extraverted-feeling.** Here the extraversion is directed by a feeling for external objects, and the ability to establish friendships. The hand-type here will include slightly finer fingers, a slightly longer palm, finer skin and lines than the elementary type. This is sometimes referred to as the 'social-square' type.
4. **Extraverted-intuition.** This type sees an ability to manipulate and control the

external objects. Here, the hand will record a bent little finger, and/or a longer than usual Apollo finger. These are the speculators, and businessmen. A long little finger with a long Apollo will do the same. A very straight headline will bring about similar results if the fateline is also strong, and leaning towards the MtJupiter.

5. **Extraverted-sensation.** This type is characterised by a realistic, materialistic outlook and an orientation towards the concrete features of objects. Square fingertips on a squarish palm will show this.
6. **Extraverted-thinking type.** Here the personality is characterised by an attraction to sensory impressions as a base for logical areas of life, and an interest in fact rather than theory. The hand in this case will have a large inclusion of bony fingers, square fingertips, masculine headline.

Thus the four areas of thinking, feeling, sensation and intuiting become a base for the expressions outlined above. For further study on the active/passive extravert, see Freud. For further study on the other four see Jung.

The tactile hand is a narrow hand, and exhibits movements of expression. Where the prehensile hand relates to the cortical activity of the brain, this tactile hand relates to the subcortical responses of the person. This hand is narrow, often flat across the palm. The more narrow the hand, the more the person is centered to the indoors, with its amusements and activities, and seeks tactile releases for his/her feelings and activities.

The tactile hand is involved in introversion, a characteristic type that is described as being hesitant, withdrawn, reflective, reserved. Here we see the thoughts being directed inwards, with personal thoughts dominant, rather than toward social interests. They are characterised by rather fast dissipation of inhibition, allowing a ready response to stimulate, but in an internalised sense. It is for this reason they are often seen as neurotic. The neurotic form is characterised by anxiety and depression symptoms, this type being



seen in a thick, but narrow palm, with rather short fingers.

### Summary of Types of Introversion

1. **Active introversion.** Here the inward direction of libido is willed by the person, or a voluntary preoccupation with internal subjective reality. This is seen in the 'motoric bony' hand quite often, in fact it could be said to be a basic characteristic of that hand type.
2. **Passive introversion.** Here the inward direction of the libido is due to an inability to direct it towards outer objects, or an inability to relate to external reality. This hand is called the 'sensitive long type'.
3. **Introverted-feeling.** Here there is a dominant subjective orientation such that the person lives in his/her own inner world of feelings, a daydreamer, a quiet peaceful person. The hand shows a short first finger, non aggressive thumb, and is most often the 'sensitive' type.
4. **Introverted-intuition.** A need to express through imagery, the visionary, to the point of influencing activity, with a strong tendency to live within the self. A girdle of Venus line, and/or the line of intuition on the sensitive long hand would carry this indication.
5. **Introverted sensation.** This type is characterised by his/her attendance to the external world through perceptions dominated by the individual's internal state. Here is the 'bony motoric' hand, with a short first finger, and strong lines.
6. **Introverted-thinking.** This type is characterised by logical and thorough organisation of ideals until they suit the person and society. A strong ego-centering can associate. Again the bony motoric, but with square fingertips and a masculine, straight headline.

Introversion is seen mainly in the first finger being shorter than the ring finger, when the thumb is held relaxed, beside the hand. If this finger is far too short, and the little finger is also short on a narrow palm, the Adler's complex can result.

This complex represents unconscious forces that exaggerate feelings of insignificance, resulting in defensive and behavioural manifestations. If the first finger is bent inwards the defences are active if the finger is also short, and aggressive if the finger is long.

### HORIZONTAL DIVISIONS WITHIN THE SHAPE OF THE HAND

The second natural category within the shape of the hand is seen in an interesting division of the three levels of comprehension. As shown in diagrams A, B, and C respectively, the first division is at the base of the hand, the second through the middle, and the third is the fingers.

**The first division (diagram A) measures the 'energy' of the feeling,** or the strength value of it. The area is comprised of the base of the hand, with the ball of the thumb included. It is the area of the viscera. It represents the basic feelings—the gut feelings, the physical forces available through the affections, vitality and sociability. The outer part of the hand represents the deeper, internalized feelings incorporating the imagination, and also the ancestral influences.

The viscera has an organizing mind of its own. This is the '**understanding of energy**'. The larger this area, the larger the energy content at the physical level. If this part of the hand is narrow, then the person is living in another part of the feeling; not basic, not earthy, not outdoors. They become weary in action, and are not to be found among athletes or physical workers.

The base of the thumb is a reservoir of basic and latent energies that can be utilized for self-assertion, as well as offering a sense of stability. Any type of hand has its own peculiar type of thumb base. If a stout, heavy and stiff base of thumb is found on a sensitive hand, then, being atypical, it would show unusual force, even strong feelings of superiority. If there are no lines on the Mt Venus, and the mount is large, then the energies are concentrated mainly upon the sexual, as there are not other avenues for expression, and the concentration of energy



Diagram A



Diagram B



Diagram C

### Horizontal Divisions of the Hand

there promotes an asocial attitude, sometimes to an extreme. This mount **represents the outer strengths.**

The hypothenare side of the hand, Mt Moon, represents **the inner forces of the psyche** - imagination, closeness to natural forces, inner and outer consciousness. The area of ancestors, those forces accumulated over many centuries, is here. Lines of this part of the hand will allow a free flow of forces if those lines link up with other primary lines. If they fall into an empty void inside the mount, then a neurotic response can occur, not having the ancestral forces working within the psyche to create a harmony of purpose. **The first division is the area of understanding.** The base of the hand is rich in information relating to the *'Child' in Transactional Analysis*, and is a measure of the child.

**The second division (diagram B) measures the quality of feeling and expresses it with strong emotional power.** The area included both the mounts of Mars and the Plain of Mars. It is the area of quality, and represents the value the person subconsciously puts on life matters. If the first division is seen as first-line consciousness, then this area would be second-line consciousness. Many lines in this area activate the Martian energies. The firmness of this area, and its development, records the ability to face life realistically. With a weak feel to this part of the hand, there is a lack of life quality.

The Mt Mars Lower offers a description of the person's willingness to fight for his or her beliefs, whether in a physical or intellectual manner, depending upon the shape. It is like the active soldier.

The outer Mt Mars Upper is also an expression of the person's active readiness to fight, but in a more defensive manner - it is like the sentry on duty. Lines on these remote mounts are a positive help to expression. A lack of lines will offer no form of release, and forces within can accumulate the feelings of passive resistance. The area also shows the quality value of the response in the feeling. This is the area of the understanding of quality, and helps the person to adopt control, helping also to create purposeful activities. This is the 'Parent' in Transactional Analysis, and is a measure of that parent quality, or controlling capacity.

**The third division (diagram C) measures the full comprehension of what is being felt, and eventually communicates the feeling through the symbols of language and thought.** It is the reality of the feeling and the place where the understanding comprehension takes place. The fingers and thumb-upper are the aspirations of the person, so if there is any un-evenness to be seen here, there can be no objective appreciation from the brain as to what is being felt.. Nor can there be perceiving from the memory. This part enables us to 'be in the present', and allows us to relate to the past and screen it through our mind to the present. This is the

understanding of comprehension, and is the 'Adult' in Transactional Analysis.

If any of the digits are deficient, then the value of 'present thinking' is diminished in these fingers. A short, or weaker, first finger would not allow the outer world reality to function in a strong and balanced manner. Thus, the comprehension peculiar to that finger would be impaired. A state of inferiority towards the outer world would be present. If the finger is too long, then an air of extreme competency - or superiority - would be present, an out of place energy that overcompensates for irrational feelings of self-worth. The world view of the person is thus geared to the superior self image, and is often expressed in employment, or positions of authority.

### **VERTICAL DIVISIONS WITHIN THE SHAPE OF THE HAND**

The divisions seen in the Psychological study of the hand shape are the vertical divisions. These distributions run.

- (1) down the first finger and includes the thumb and the wrist (diagram D).
- (2) the finger of Saturn down to the wrist (diagram E).
- (3) the last two fingers down to the wrist (diagram F).

This type of approach allows us to gain further insight into how a person by way of the three Freudian concepts of

- (1) the **Active** self,
- (2) the **Balancer**, and
- (3) the **Unconscious**.

**The first vertical division (diagram D) represents the 'executive' of the person.** This division is represented by the placement, length, flexibility, finger tip, fingerprint pattern, nail shape, and differentiation of the first finger, as well as the same relative to the thumb.

The function of the first finger relates to the outer world of reality, and measures the adaptive abilities of the subject's active self. This is the measure of the reality principle, the synthesis of the pleasure principle in

conscious and applied actions. This area does not represent creativity, but rather organises the creative energies into an acceptable presentation to the self and the outer world. It is a totally conscious area which plans to achieve satisfaction for the underlying unconscious. Being the 'executive' of the personality, it decides what actions are appropriate, and what deeper instincts or pleasures will be satisfied, how and when. The index finger related to the outer world of observation, and the more forceful the finger, the more efficient are the powers of observation and sense-perception, with self-assertion. It records outer-world realities and how the subject can deal with them. Repression can also be measured here as an action of the active self, in response to signals from the more automatic balancer.

**The third vertical division (diagram F) represents the Unconscious.** It measures the content of the non-real world of fantasy and hope. Its part on the hand consists of the last two fingers of the Apollo and Mercury, plus all the area under them down to the wrist.

The area under the fingers includes the mounts of Apollo and Mercury, of Mars Upper and Mt Moon.

Apollo shows understanding, competency, pity.

Mercury shows communication in all of its forms.

Mars Upper shows inner calm and quiet force.

Moon mount shows the deeper feelings associated with the imagination.

All of these qualities of the person are encompassed within the area of intuitive feeling.

In studying the active self or balancer, we can cite cases and actions, also behaviour patterns can be examined in their light. But when we study the unconscious, there is no scenario for description, and we are thus led to vague descriptive devices. It is with this limitation that the unconscious is here discussed. However, no such limitation is placed upon the Kinesiology/cheirological measure of the



Diagram D



Diagram E



Diagram F

### Vertical Divisions of the Hand

unconscious, the size and shape of the parts constitute the focus of the procedures.

The **unconscious** is represented in man as the original personality source from which the **active self** and **balancer** develop. Here are all the inherited and instinctual drives. When the energies of the id are increased from either internal or external stimuli, a psychological homeostatic reaction occurs to reduce the tension and return the personality to an acceptable balance. The unconscious is seen as a source of primitive impulses, operating on the pleasure principle, avoiding pain and seeking gratification of the senses. It is obvious the innate desires of the young child must go somewhere, and the amount of available energy to do this is measured in this third area.

What happens when the free flow of energies from these areas is interrupted? The child seeks release through pathways that are unique to him/her, these being recorded in this part of the hand in bent fingers, broken lines, underdeveloped mounts, all of which have their own story.

Short fingers do not allow a full development of the unconscious, restricting the unconscious values to little desire, or even to no action available at all. As the little finger relates to industry, these people would not find satisfaction in working for themselves, but would rather have others make the decisions for them. They have a weakened sexual drive, but become the more reactionary because of it, a pretend sexuality,

with no ability to back it up with action.

The second vertical division of the hand (diagram E) represents the **Balancer**. The third area is almost entirely in the realm of the unconscious and may be playful or destructive, but is always unpredictable. The **balancer** however is a totally learned process as the child internalises experience as he learns and matures. It is essentially a controlling factor in the personality, and operates at a more or less conscious level of experience. Where the **action self** tests the reality value of an act, and the **unconscious** seeks a comfortable balance of psyche, the balancer strives for harmony between the two, to make for perfection. It is the judge, the **balancer-ideal**. Parental standards, whether good or bad, are found in this division, and are analyzed from the middle finger in its length, lineality, and in the lines that associate with it.

It shows the internalised representation of values as seen through the developing child's eyes. All the experiences that hold a permanent part of the child's psyche have a need for resolve in some way, and if the resolve was acceptable by parents and/or society, then the conscience is good for that matter, and is rewarded by feelings of pride. This is the **balancer-ideal**. If the resolve was inappropriate and the child was reprimanded in some way, then the prevailing guilt becomes the controlling conscience of latter years. From this learned platform, the person judges rights from wrongs.

It is obvious then, that in most cases, the conscience is not a safe guide, but must be safely guided. An overly long finger of Saturn shows the ability to over-react to strictly mental resolves and absorbs the defences to the point of splitting off from reality into hysterical reactions. Defenses turn to rationalisation.

Tensions and anxieties can be produced from the conflicts between the Action self, Balancer, and the Unconscious. Fears caused by either conscious or subconscious memories from childhood, or from impulses from the Unconscious as taboo sexual desires, or from guilt that comes from impulses from the Unconscious sources. Inadequate Action self response to conflicts can also cause anxieties that have to be defended against. These anxieties may be connected to a specific object or cause, and the reason for the anxiety is usually clear.

In this third natural division, or method of hand analysis, the fingers can give the first important clue to the person's stability within the **Action self-Balancer-Unconscious relationship**, by their being straight and therefore sound in structure, or weakened and bent, indicating unsound structure. These fingers can be strengthened or straightened by application of will and appropriate kinesiological balancing.

**FIRST DIVISION, THE ACTION SELF**  
Self-preservation, reality, resolution of problems, adaptive abilities, organization, totally conscious, achievement satisfaction, decision pride, honor, dignity, high ideals, love of nature, observation, control, reasoning will, thought power, integration, sociability leadership logic.

## SECOND DIVISION, BALANCER

Balance between the ego and id, conscience, the judge, ego-ideal, perfection, mediator, intellect, wisdom, sobriety, caution cultural standards, social standards, internalised parental standards.

## THIRD DIV., THE UNCONSCIOUS

The unconscious, pleasure, art, expression, success forces, resistance, courage, imagination, mystery, calm, forces utilised in the ready assistance to help mankind.

## HANDS

Please remember there are very few opportunities for you to see any 'type' in its purity, although anything is possible in hand analysis. When you do see one, it will stay in your mind and memory forever as a constant reminder of its form.

When we speak of the form, or type of hand, we are speaking of the final product, up to that time of a mass of energetic growth patterns that have as their material all the cells of the hand, with the nervous and venal systems with the host of other factors making up the final product. The forces of both nature and nurture have combined to create the shape that offers you the key to understanding the person. It is not a simple study, but it is a most satisfying one, if the underlying rules are adhered to.

The client has travelled through time and experiences and by several laws of nature, as is seen at the time of analysis as a complete unit, and not a series of disjointed statements.

If you ever find yourself lacking an answer, go back to the shape of the hand for the foundation of your final assessment.

## THE SHAPES THEMSELVES

Elementary simple =	Practical =	Elementary
Elementary Irregular =	Intellectual =	Square to square/philosophic
Motoric Bony =	Intellectual =	Philosophic
Motoric Fleshy =	Intuitive =	Conic(variable) to square
Sensitive Short =	Sensitive =	Smaller versions of any type
Sensitive Long =	Sensitive =	Psychic
Dysplastic =		Mixed

Hand shapes as named by three different sets of criteria by three different authors.



**Defusion Procedure for Hand - Divisions**

1. Prehensile/Tactile
2. Horizontal-Adult, Parent, Child
3. Vertical-Psychological Makeup
4. Shape of the Hand

Holding the Structure/Function finger mode,  
Test that Cheirology is the current priority to  
clear.

If it is not, do not proceed to balance this  
without further understanding of Cheirology.

If it is, Test for the area to correct, eg, say,  
**"Prehensile"** and test **"Tactile"** and test.  
If this changes, an indicator muscle, put this  
response into retaining mode, (pause lock),  
and do a full balance with any and all tools  
available to you. You may need to find the  
specific category under prehensile or tactile.

OR

**"Horizontal Divisions"** and test to see  
which division actually needs clearing by  
saying **"Adult"** and test,  
Say **"Parent"** and test,  
Say **"Child"** and test.  
Whichever division makes the indicator  
muscle change will be the one to balance..

OR

**"Vertical Divisions"** and test to see which  
division needs clearing by saying **"Action  
self"**, **"Balancer"** or **"Unconscious"**.

OR

**"Shape"** and test off the list above to identify  
the shape to be balanced.

Andrew Verity, Adv. Kinesiology Centre Educating Alternatives 4 Brougham St, Box Hill 3128, Australia 61-3-898 4477, FAX 61-3-890 6686
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## The Power of Your Belief Systems Don't Underestimate Them

by Alice Vieira, PhD  
Clinical Psychologist and PHP Practitioner

Belief systems are formed early in life by how others treat us, how we see others treat each other, and how our needs are responded to as we grow through our developmental stages. Our belief system permeates all that we do. It is the sum of assumptions, judgements, myths, and behavior patterns that are familiar to us on a moment to moment basis. Our belief systems contain all our family messages about our own personal value and worth. Our belief systems determine how we plan and make decisions, how we interpret other people's actions, how we make meaning out of any experience we have, how we solve problems, how we form relationships, how we develop our careers, how we establish our priorities. Our belief systems form the filter through which we conduct the business of our lives. If our inner child is wounded in some manner or if we experienced some trauma during our growing, then our view of the world will be skewed and distorted. The phrase "seeing is believing" is more accurately stated in the reverse: "believing is seeing" for it is what we believe that becomes the screen through which we see our world.

What makes this a most important phenomenon is that whether we are happy or miserable depends completely on how we see our world, which is based wholly on what a number of authors refer to as our core belief systems. Milton Erickson, a famous hypnotherapist, states that every person has a unique map of the world, an inner belief system that is unconscious. Erickson calls the unconscious belief system a kind of hypnotic trance out of which we operate every action for our entire lives. Thus, when M. Scott Peck (refs 10 and 11) says that mental health is based on two things: (1) the belief in a power greater than ourselves and (2) the constant struggle to know and be in touch with reality, isn't it crucial that we examine what is the reality in which we believe?

DeePak Chopra (refs. 3, 4, and 5) describes the way our initial sensory experiences get programmed. Once sensory experiences are conditioned the nervous system continues to respond in such a way that reinforces the initial interpretation of that experience. Dr. Chopra calls this a Premature (because it is made at an early stage of cognitive development), Cognitive (because it programs our senses in a certain, fixed way), Commitment (because it fixes us to that certain reality). The Premature Cognitive Commitment imprisons us in that reality. The sensory experience gets structured in such a way that it shapes the very anatomy and physiology of our nervous systems so that ultimately the nervous system serves only one function: to reinforce what has now become a core belief system. The Premature Cognitive Commitment limits our world and becomes the core belief system.

Dr. Chopra gives numerous illustrations of the above phenomena. A few of his examples will serve to imprint the visual for our own empowerment:

- a) Fish, raised in a tank in which a glass plate is placed in the middle of the tank so that only a portion of the tank can be used, will only use that portion of the tank when the glass is removed from the tank. The glass that has been removed remains a sensory barrier that, in reality, no longer exists.
- b) Flies, raised in a jar with a top on it, will remain the jar and will not fly out - even though the barrier that, in reality, no longer exists.
- c) When an elephant is young it is bound to a tree with a rope. As the elephant grows the tree can be smaller and the rope changed to string and yet the grown elephant remains bound to the twig of a tree without believing that his own power

can overcome what has become a limiting sensory experience.

- d) An autistic child (one who does not respond to his/her world) can be taught to stand up with a rope tied between two chairs. With practice the child will stand up, hold on to the rope for support and move from the one chair to the other. In time the rope can be changed to a string tied between the two chairs. Then the child can be given a string alone, tied to nothing, and will walk unaided. If the string is taken away the child will fall down.

William Faulkner in his classic book, *Light In August*, puts it a different way but with the same powerful impact: "Memory believes before knowing remembers". In my own psychotherapy/PHP practice I experience the incredible limitations an individual places on him/herself by their premature cognitive commitments. We become predictable because what we feel we become. We are the end product of our experiences and the interpretation of those experiences. Emotion is the energy our body carries. Alice Miller (refs 7, 8, and 9) states it well: "Your body will present its bill". John Bradshaw (refs 1 and 2) states that our bodies carry the pain of our wounded inner children. He emphasizes that we must realize that we can be in our head and not even know that sadness and rage is going on inside our emotional brains. Our unresolved issues will be acted out. Our belief systems will ensure that we will act to others the way that we were acted upon. Our neuronal gates can close down to the emotions just as the fish get closed down to the other side of the fish tank, the flies to the outside world, the elephant to its own strength, the autistic child to his/her ability to walk without the support of a string, and each of us to our limitless potential. If we allow ourselves to remain in the prison of our original experiences than we allow ourselves to be limited and cramped in a space that, in reality, has no walls, no doors, no barriers, no limits, but those of our own making.

It is not surprising that there are numerous modes in PHP that deal with belief systems: PE & ST over second joint of thumb (personal belief systems); PE & EM over first

joint of thumb (tribal unconscious belief systems); Self Mode 8e (beliefs about self); EM 14 (roles under stress); EM 5 1/2a (misinterpretation or assumptions about self and others); EM 3 1/2a (misunderstandings about self and others). I believe that all modes on the Self Mode are belief systems or one sort or another.

The key point of this paper is to call to mind that these belief systems are not easy to shake. All that we do is based on the reality as we see it through our own set of glasses. Ernest Holmes describes the situation:

"We are like one who, without knowing it, has put on some kind of glasses that invert everything so that in walking down the street the right side of the street might appear to be at the left, the sidewalk might appear to be up on the top of the buildings, the sun might appear to rise in the west and set in the east. Suppose we imagine someone wearing such glasses, and imagine that everything he looks at is inverted and is out of place. Even that which is true in itself assumes a false position. In reality this falseness is not the object of his perception but in his interpretation of that object. The Bible speaks of this as looking through a glass, darkly. Now he has become so accustomed to this inverted viewpoint that a true viewpoint would be shocking, it would be amazing, it would be unbelievable. Suppose, then, we change the glasses and put on a pair that reveals things more nearly as they must be. He has to reverse his whole mental reaction. The sun is now rising in the east and setting in the west etc... It will be difficult for him to readjust his mental viewpoint to this new order, even though seeing straight for the first time. It almost seems as though he must put on the old glasses that he may again be in familiar surroundings..." (ref. 6).

Any new belief system will be unfamiliar, uncomfortable and, in some instances, intolerable. Change comes from awareness, then acceptance and appreciation of how and why these belief systems got embedded. Tony Robbins suggests that a way to get to the bottom of how we act and react is to list

things that we do and like to do, things that we don't do and don't like to do. Then write down the belief system that has established that behavior. Muscle test for accuracy. It is a beginning of a most important journey - one that we cannot ignore if we are to grow beyond where we are.

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## Hypothyroidism - The Overlooked and Unsuspected Illness

Essential Considerations for Anyone Working in the Health Field

by Kim Vieira and Alice Vieira, PhD

Have you been in touch with anyone who is chronically fatigued even after being rested? Anyone who has a continual loss of energy? Anyone always coming down with a cold or flu? Anyone who always has cold hands and feet or who are very sensitive to the cold? Anyone who has UMS (ugly mood swings)? Anyone who is depressed and no amount of psychotherapy or anti-depressants seems to help? Anyone who has excessive menstrual flow, cramps or irregular periods? Anyone who has severe headaches? Anyone who seems to have lost their sexual appetite? Anyone who swings from being a perfectionist to not caring about anything? Anyone who has rapid weight gain or cannot lose weight? Anyone who has excessively dry skin, broken nails because they are too brittle or nails that are too soft, brittle hair or loss of hair, cracked or constantly bleeding heels? Anyone who has poor memory? And all of these complaints are met with the diagnosis that "nothing is organically wrong" and thus a person is seen as a hypochondriac or someone that "doctor shops"? These people may have hypothyroidism. If you see anyone with these complaints, it is essential that hypothyroidism be one of your considerations. Hypothyroidism is simply that the thyroid is subnormal. Broda Barnes, M.D. (ref. 1) emphasizes that a thyroid may be under functioning and not be detected on a thyroid blood panel. David Williams, D.C. discusses the thyroid on an excellent tape (available at Mountain Publishing P.O. Box 829, Ingram, Texas 78025): The thyroid is the body's thermostat. It regulates the metabolism, how you burn energy. If the body is not burning enough energy, everything slows down resulting in a number of conditions, including fatigue and inability to lose weight. Depressed and suicidal people can also have serious hypothyroidism.

The thyroid, like all the other glands in the body, is like a factory, it produces products that are needed in other parts of the body. The body works as a total unit and each part

depends on every other part. The thyroid produces hormones and to do this it needs the proper raw material. In the thyroid's case, the raw material needed is iodine. This is not the type of iodine that is used on cuts which is a poison. It is an iodine that is found in some seafood, vegetables, fruit grown in areas whose soil is high in iodine content, etc. It doesn't take but a little bit of iodine for the body to function but being just a little bit low can cause any of the above conditions. In the extreme, as what happened in the Mid-West in the 1930's, goiter is the result. Goiter is nothing more than an enlarged thyroid. The enlargement of the thyroid is caused by the thyroid searching desperately for iodine. When the thyroid gets too large it may have to be surgically removed.

The thyroid is a little bow tie shape gland that sits under the Adam's apple. It forms sort of a semi circle around the trachea or the windpipe. If it gets depleted in iodine it will enlarge to try to absorb or accumulate more. Most people with thyroid problems do not have goiter. They have enough not to have goiter but not enough to produce the needed hormones. Without the needed raw material to function properly a person will have a lot of symptoms and begin to live life miserably in a chronically fatigued, and/or unhappy, less than optimally functioning manner.

Since the functioning of the thyroid varies from person to person the usual method of checking low thyroid by blood tests is not always indicative of low thyroid functioning. The blood tests show the circulating hormone of the thyroid (T-3 and T-4 tests are different hormones produced by the thyroid and the blood tests will show if these hormones fall within normal limits. The problem is that these hormones will fluctuate throughout the day and may show within normal limits but may be too low for a particular person, i.e. the thyroid may still not be functioning at 100% efficiency.)



There are a number of ways that the thyroid can be easily and simply checked. A few examples will be cited here for your perusal:

1. Dr. Broda Barnes method: Take a temperature reading first thing in the morning (shake thermometer down the night before, leave on bedside because to do this accurately you cannot get out of bed first). Place the thermometer on bare skin in the armpit for 10 minutes. Take the temperature 2-3 days in a row to get an accurate reading. The normal temperature should be between 97.8 and 98.2. Anything below that will usually indicate a hypothyroid condition. Women should begin taking this reading the 2nd or 3rd day after their menstrual flow has started.
2. Dr. Victor Frank's method from the Total Body Modification workshop: Being that there are three functioning lobes of the thyroid the thyroid cartilage can be contacted with all fingers, one finger left (MT), one finger center (MT), one finger right (MT), or any one of the 16 combinations possible.  
(Note: MT = Muscle Test)
3. Gordon Stokes (Three in One Concepts) utilizes the Venous/Arterial Flow tests in Structural Neurology: Use a running motion with your first two fingers to strike the sternal notch a couple times (MT). If the muscle test is weak, continue to stroke the sternal notch until a redness appears. Retest. If redness does not appear within 5-8 strokes hypothyroidism might be considered.

The solution to hypothyroidism may be simple. Dr. David Williams recommends thyroid glandular supplements, available at health food stores, which are desiccated thyroid glands from healthy cattle and are similar to the thyroid hormone. He also recommends Ioaquasoll, a non toxic water soluble ammonium iodide (available from TPCS Distributors, 343 E. Orange Grove Blvd., Pasadena, CA 91104). This form of iodine is easily assimilated and becomes a pure iodine in the body (unlike sodium or potassium iodide). He also recommends kelp that has not been depleted of its normal iodine

content by pollution. He cautions that if you take thyroid supplementation that your body may need to have increased amounts of the B vitamins as well.

Dr. Stephen Langer, M.D. discusses the care and feeding of the thyroid (ref. 4). Walter Schmitt, Jr., D.C. discusses the need to be particularly aware of thyroid deficiencies (ref. 5).

In extreme cases a thyroid hormone may be taken. When a hormone is used, it may replace the natural functioning of the thyroid. The message from the pituitary gland is that enough hormones exists. This false message will make the thyroid lazy and unproductive. What isn't used will be lost! A recent study that appeared in the Journal of the American Medical Association (ref. 3), indicated that there is some evidence that the thyroid hormone levothyroxine may cause decreased bone density and therefore may be a risk for osteoporosis.

There are other things to be aware of when hypothyroidism is a consideration, such as mineral deficiency of iron as well as iodine (ref. 2). But the initial awareness that there is a problem that may be unsuspected, undiagnosed or overlooked and can be corrected is important to all of us.

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## The Clinical Effects Of Touch Healing Encounters

by Walter L. Weston, D.Min.

The most ancient form of touch healing has been practiced by every culture and religion on Earth by persons simply known as "healers" who transmit a healing flow or energy with their hands or minds in order to restore health by healing the body's energy fields. As a clergyperson with the ability to heal with the hands, I searched for scientific evidence to understand the causes and effects, eventually receiving by doctorate in healing research. As the clinical evidence accumulates, a clear picture of the healing effects is emerging. The following data offers a scientific and experiential picture of the healing encounter.

**1) Touch Healing Produces a Measurable Effect.** Montreal biologist Bernard Grad's classic 1957 Wounded Mice Experiment (ref. 3) is a good example of healing clinical research. With a scalpel and template, Grad surgically removed a one-half inch square of skin from the backs of forty-eight laboratory mice, of whom sixteen were treated by healer Oskar Estebany with the rest of the mice used as controls. The wound healing rate was regularly measured with a template. After fourteen days, the healer treated wounded mice had a statistically significantly increased surgical wound healing rate over the control group. This experiment provided the first scientific verification that healers produce a measurable healing effect on living organisms.

**2) Healing is a process taking place over a period of time.** the wounded mice's surgical wounds were not healed instantly. Touch healing increased the normal rate of healing in mice. My own experience validates this for humans. For twenty-five years as a pastor-healer, I have practice touch healing with thousands of surgical patients. In about eighty percent of surgical patients, the wound healing rate appeared to double and in the rest, there was an approximately seven-fold increase in healing rate.

**3) The existence of a healing energy.** Early life energies researchers proposed the existence of a healing energy to explain the experimental effects of healing prayer. The existence of a healing energy had long been claimed by healers, who sensed the energy flow from their hands into the healee. The healing energy changes the surface tension of water. (Ambrose Worrall) It acts like electricity in flowing from a high potential source to a person or object of lower potential. (Bernard Grad and Ambrose Worrall) Human beings act like electrical capacitors for the healing energy. (Bernard Grad)

**4) The healing energy is informational and acts intelligently.** Researcher Grad states: "the energy is informational! The energy itself is an information-bearer, self-regulating, programmed. Where healing calls for the slowing down of cell growth, as in the goiter experiments, thyroid development is inhibited. Where healing required speeding up of cell growth, as in the wounded mice tests, the process is accelerated. Slow down or speed up for healing? The same agent does both. The energy itself knows." (ref 1)

**5) Healing energy produces the optimum state for life.** A bean experiment by Spindrift in Salem, Oregon, graphically demonstrated this. Three trays of beans were prepared. One contained beans which had been dried out by oven heat. The second tray had been soaked to increase water content. The third was the control with untreated normal or healthy beans. In a series of runs, persons prayed for the beans. This resulted in all three trays of beans developing the same moisture content. The prayer effects added to the dried out beans, reduced water content in the soaked beans, and had no scientific effect on the normal beans. The healing energy of prayer effect was to bring the treated beans to their optimal state of being.

**6) Healing energy can be imparted to other substances.** Through touch healing, human hands can impart the healing energy to sealed glass or plastic containers of water, to cotton or wool, or to surgical gauze. This causes the same effects as direct touch healing. In Grad's "Wounded Barley Seed Experiment", twenty barley seeds were wounded by soaking in a 1% saline solution and then planted and water with 1% saline solution. Half of the saline solution was treated through touch healing; the control group was not. Robert Miller (ref 6) discovered similar effects in healer treated water as a research chemist in Atlanta, Georgia. As a healer, I regularly charge bottled water with healing energy and have found it to heal viral infections, arthritis, and spinal spurs. Grad's "The Healing of Induced Goiters in Mice Experiment" involved depriving mice of iodine and feeding them the goitrogen thiouracil to artificially produce goiters. Healer touch treated wool and cotton cuttings were placed in the cages., preventing goiter from growing. Dolores Krieger, (ref. 4) reports similar results with healer treated gauze which was applied as a wound dressing, resulting in a faster rate of wound healing. I regularly charge cotton dish towels with healing energy by touching them with my hands for fifteen minutes. These charged towels, draped over a body part 24-hours a day, consistently enhance the healing rate and produce healings of arthritic joints, spinal injuries, sprains, bruises, broken bones, lacerations, skins ulcers, and skin diseases.

**7) Healing energy is extremely stable.** The qualities of the healing energy in healer treated substances are different from any other energy source. The energy does not dissipate; its power level will remain unchanged, even when stored for a two year period. Healer charged bottled water does not leak out to contaminate adjacent bottles of water. Healer treated cotton cloth continues to emit healing energy for up to two years and is not dissipated by contact with an ill person. (Bernard Grad) This means that isolated healing energy is the most stable, sotable form of active energy known. Heat over 120 degrees F and direct sunlight do destroy the healing energy.

**8) The healing energy dissipates when imparted to living organisms.** When healing energy is imparted to living organisms, it is rapidly utilized and diminished in quantity. When Olga and Ambrose Worrall sought to make a blade of rye grass grow, the rye grass rapidly accelerated growth for 11 hours to a maximum of 830% of normal. This growth enhancement then diminished for the next 36 hours, reaching a low of two times the normal growth rate, where it remained for two weeks. (ref. 5) The healing effect decreases with time as the healing energy is used up. Grad reports that the healing energy imparted to laboratory mice was so rapidly used that a healer had to hold the mice for an hour at a time to maintain the necessary healing threshold of energy. This was attributed to the rapid metabolism of mice. My experience is that the imparted healing energy is at its highest strength for about forty-eight hours in surgical patients. After this the emotional calming side effect disappears. When seeking to heal a chronic condition like scoliosis, a series of daily healing encounters is required to provide enough energy to restore the spine's normal curvature. In acute illnesses, the energy appears to dissipate as quickly as in lab mice in order to heal the disease.

**9) The emitted energy can be photographed.** Research indicates that when photographed with infrared film, the healing energy can be seen emerging from the fingers and the palms. (ref. 8)

**10) Healer treated water emits a 7.8 to 8.0 hertz electromagnetic frequency, as do all healers world-wide, as does the planet earth.** No surprise. All energy sources emit electromagnetic frequencies. All persons effectively practicing touch healing must emit a specific healing frequency. Those known as healers emit a 7.8-8.0 hertz frequency at all times. Beginning in 1969, physicist Robert Beck began testing the emitted healing frequencies of the healers throughout the world. All healers emitted in the identical energy frequency range of 7.83 hertz, plus or minus. This occurred regardless of what society they were in, what customs they believed in or what type of healing modality they employed. Beck

worked with charismatic Christian faith healers, a Hawaiian hahuna, and practitioners of wicca, Santeria, radesthesia, radionics and seers, ESP readers and psychics.

**11) A specific extremely low frequency electromagnetic wave below 8 hertz induced cancer in mice within 48 hours. An 8 hertz frequency healed the induced cancer in mice. Other frequencies caused such mood and behavioral changes as depression, anxiety, aggressiveness, and calming.** This high security data from United States Navy research physicists, (1977-78) was reported in a lecture by Dr. Andrijah Puharich. It provides evidence that electromagnetic waves have an effect on living organisms and can cause physical illness at below the 8.0 hertz frequency and at an eight hertz frequency heals cancer. The U.S. naval physicists learned that at 6.6 hertz a person gets drowsy, has diarrhea, and can become depressed. Frequencies below 5 hertz are dangerous and can result in death. The Navy physicists then tested a healer's energy field. They discovered that when a healer placed his hands in water, the water's protons began emitting an 8 hertz signal. The significance of this is that human body chemistry is made up of protons in body fluids. Thus one way the healing energy may work is by effecting these protons. Every enzyme in the body is also triggered by hertz frequencies. These researchers are proposing that all diseases have a hertz frequency, which can be cured by exposure to 7.8 -8.0 hertz frequency.

Physicist Robert O. Becker (ref. 2) reports that several Russian and Polish groups have established that prolonged exposure to a 50 hertz, 130 gauss magnetic field produced stress system changes and depression. Becker's U.S. Veteran's Administration research team discovered that frequency waves produced by high power lines are linked to tumors in mice, slowed heartbeat in fish, and chemical changes in the brain, blood, and liver of rats. Another study demonstrated that depression and suicide occur more often in those exposed to high tension power lines. The greatest harm to organisms has been thought to be in the 35 to 100 hertz frequency electromagnetic bands. A 1979 study by Nancy Wertheimer and Ed

Lepper of the University of Colorado Medical Center on childhood cancer and power lines, statistically lined a doubling of the childhood death rate due to leukemia, lymph node cancer, and nervous system tumors to high current wiring configurations. These are the negative effects of certain frequencies. In December, 1990, the United States government made its first public announcement that electromagnetic energy can be a health hazard. For our purposes, the fact that electromagnetic frequencies have an effect on human health strengthens explains how healing energy form a healer works.

**12) A Threshold of healing energy is required.** In the 1989 Chouban-Weston Clinical Experiments in the Bioelectrography Lab of the JIPMUR government hospital in Pondicherry, India, Ramesh Chouhan, M.D., and this author videotaped the energy fields of cancer patients as Western practiced touch healing. The videotape demonstrated that the healing energy did not slowly transform the test subjects' energy fields. The cancer subjects' original ill energy fields remained constant during the passage of eight to ten minutes. This was followed for a sudden change in the energy field. Like an explosion, the test subjects' energy fields became about three times larger, about ten times more intense, and were altered from a bluish-white to a pure white. This experiment implies that the transmitted healing energy needs to accumulate in power, reaching a specific threshold, before it can transform a cancerous energy field. This implies the need to soak people with healing over a period of time for any effect. In other words, the healing energy works somewhat like an antibiotic, needing to be applied regularly.

**13) There is no correlation between the size of a healer's energy field and healing effectiveness.** Previous research has assumed that there is a direct correlation between the large size of the healer's energy field and the rate of healer effectiveness. But emerging data refutes the contention. In preliminary tests during the Chouhan-Weston experiments, the five staff members were all younger than the healer by seventeen or more years. The healer's energy field was the smallest of the six persons present and grew even smaller during healing encounters. This

implies that it is in the quality of the healing frequency and not the quantity, which determines healing results. An attuned healing frequency is the first requirement of any transmitted energy which heals. Dr. Chouhan's clinical research data verifies this.

**14) Touch healing increases the amount of oxygen in the blood by up to 12%.** (ref. 4) Dr. Dolores Krieger, professor of nursing at New York University, had heard that Grad had measured increased chlorophyll in plants treated with healer treated water. Krieger noted that hemoglobin "is an iron-containing proteein and, as do all proteins, it is able to act either as an acid or a base, depending upon the medium in which it is. This ability...would appear to make it an appropriate vehicle for the 'balancing of the positive and negative currents' of life energies during the healing process as postulated by Eastern literature." In each of three different sophisticated tests with hemoglobin, the lying-on-of-hands for healing resulted in increased oxygen in hemoglobin up to 12% beyond normal.

**15) All persons can emit an energy through their hands, but this energy is not necessarily healing energy.** Bernard Grad had two depressed men in a psychiatric ward charge up the water in a contained held in their hands. One man's energy retarded the growth of the plants. The other man's charged water caused a positive growth in the plants, seemingly due to being happy with being useful. After one healing service, a woman filled the chronic anger asked if she could place her hands on this researcher's head to offer me healing. Unwisely, I agreed. Within moments of her touch, I experienced a terrible headache and felt myself being drained. The presence of some people can make an illness worse.

**16) Medical clinical evidence.** Medical clinical research in the Russian Republic, Poland and Italy (ref. 7) clearly established the benefits of touch healing. The following diseases and conditions responded to touch healing:

allergies	arthritis
bedwetting	benign tumor
bronchial asthma	coronary insufficiency

deafness in children	chronic middle ear infection
gall bladder disease	gastric ulcers
headaches	heart muscle damage
nervous system fatigue	nutritional disorders
ovarian disorders	ovarian cyst
respiratory disorders	sinus infection
skin diseases	sterility
anxiety	depression
hypochondria	hysteria
obsessive-compulsive neurosis	stress disorders

**17) The professional observations of a healer.** These are this healing researcher's observations from twenty-five years of practicing healing with thousands of persons. Two other clergy healers agreed that these results matched their own observations.

With trauma injuries like bruises, torn muscles, lacerations, broken bones, and surgical wounds touch healing enhances the healing rate by 2 to 30 times. Some medically untreated ruptured discs became symptom free within twenty-four hours. Treatment of the brain dead with skull injuries were healed in two-thirds of cases, with damaged brain tissue regenerated. Normal physical therapy follow-up was necessary.

Most illnesses normally require three or four twenty-minute healing sessions a week for several weeks or months. The exception is osteoarthritis. With no previous surgery, most osteoarthritis responds to one or two healing sessions, with the healee being relieved of all symptoms. Muscle damage due to a heart attack is best treated in the earliest stages. Irregular pulse rates can be restored in one twenty minute session using two healers. Genital herpes IT can be cured with a few minutes of treatment. Scoliosis (curvature of the spine) responds to four consecutive daily one-half hour sessions. Between sessions the healee usually experiences extreme spinal pain or pleasant spinal spasms during the night. Breast lumps disappear overnight and liver cancer can be healed within six weeks.

**18) Grad sees health care professionals as unwitting healers.** Bernard Grad made an important conclusion from the studies of the placebo effect. His experimental data suggests that positive results in psychotherapy and the placebo effect are the results of psychotherapists and physicans emitting a healing energy to the



patient when there is a rapport and trust by the patient. Professionals can assess this occurrence by the side effect of healing energy: patients feel an inner sense of calmness, their negative behavior diminishes, and their vitality noticeably improves. (ref. 1)

As a healer and preacher, the author of this paper has practiced most of the healing techniques offered in the United States. None have proven to be more effective than simply touching the ill with the intention of offering healing. During my first dozen years as a healer within the Christian Church, I knew of no other healing technique other than simple touch. Touch is the primary means by which the Christian Church and healers in most cultures have offered healing throughout the centuries. From these experiences, I am forced to logically conclude that most touch healing techniques are by a respectable way of making both patients and practitioners feel comfortable with the healing encounter. Techniques also engage the awareness of the healing practitioner, occupying the mind, and thus, freeing his or her hands to naturally transmit healing energy. Any technique which enables the energy to be properly attuned and transmitted through touch for the applicable amount of time will produce healing results.

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## Balancing the Endocrine System and their Related Emotions using the Australian Bush Flower Essences

by Ian White

The Australian Bush Flower Essences are a powerful system of healing that act as catalysts in helping an individual resolve their negative beliefs, attitudes and emotional and physical traumas. The Bush Essences integrate all hemispheres of the brain, bring about mental clarity and literally balance the body.

The Bush Essences carry on a very long tradition of healing using flower essences. Ancient records show that the Egyptians used them thousands of years ago whilst the Australian aborigines have also used flowers to heal emotional imbalances. \*They used to eat the flowers in a symbolic ritual as well as placing the person amongst the particular flower to gain the same effect.

The earliest European record dates back to Paracelsus in the 15th century, who used to make remedies from the dew of flowers in order to treat his patient's emotional imbalances. More recently in the last fifty years there has been an upsurge in familiarity with flower essences due to the work of their modern founder, the late Dr. Edward Bach (1886-1936).

### Endocrine Glands

For each endocrine gland in the body, there is a corresponding Bush Essence that will balance the gland.

1. Pituitary - Yellow Cowslip Orchid
2. Pineal - Bush Iris
3. Hypothalamus - Bush Fuchsia
4. Thyroid - Old Man Banksia
5. Thymus - Flame Tr
6. Pancreas - Peach Flowered Tea Tree
7. Adrenals - Macrocarpa
8. Ovaries - She Oak
9. Testes - Flannel Flower

To test the endocrine gland circuit locate (CL) and the corresponding Test Point (TP), ie. put two fingers on the gland.

If any gland test weak, retest while the testee holds the corresponding Essence against the body, eg. if the Thyroid is weak, then hold the Old Man Banksia and retest. NB don't take any Essence at this point, unless there is only one gland down. The Endocrine System is similar to a symphony - if one is out then all the others are affected. Also, there is usually one key gland which, if corrected, will balance the whole Endocrine system. If there is more than one gland testing weak, use the Schmidt test to determine that key gland. This test is as follows:

1. CL a weak gland TP whilst the tester sequentially test the other weak glands. Stop if there is an IM change. If, for example, the thyroid tests strong while also CLing the adrenals, this indicates that by correcting the adrenals you will also correct the thyroid. If the thyroid tested weak while also CLing the adrenals, this simply indicates that the adrenals aren't causing the weakening in the thyroid.
2. i. If no other gland is affecting the thyroid simply balance it with the appropriate Essence, This is an unusual outcome.

OR

ii. If the adrenals correct the thyroid, then hold the adrenal TP then CL any other weak gland to see if it will correct the adrenals - usually Macrocarpa - then test the other weak endocrine glands. They should now all test strong. The adrenals being the key gland. If the adrenals tested strong whilst holding the thymus, TP then repeat the same pattern that you have just done for the thymus.

3. When you have the key gland, balance it by taking the appropriate Bush Flower Essence.

The beauty of the Bush Flower Essences is that they are a totally safe, non-addictive and simple and yet a very effective, inexpensive system of healing that works in harmony with Kinesiology and is a very valuable tool.

In practice, seven drops of the essence is prescribed on rising and retiring and it is usually best if either a single remedy or remedies addressing the one theme are taken at one time. The usual duration for taking the remedy is two weeks.

On the finger modes when Bush Essence comes up, one dose is usually sufficient to clear the problem although again one merely needs to test to find out how long to take the remedy for.