

# *Journal of Shiatsu* & *Oriental Body Therapy*

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*Issue 4*

*Spring 1996*

# Editorial

## An Apology

Due to a family crisis this issue of the Journal has had to take second place to other pressures and is therefore being published in the Spring rather than Winter. We apologise to everyone who has been waiting for it to appear. We have decided that, in future, it will be published in Spring and Autumn rather than Winter and Summer since there are natural breaks in my work load at those times and I can give full energy to the job of editing.

One thing this dark period has confirmed to me is that by doing as little as possible, you allow time itself to act as a healer. It is difficult, when in pain, to trust in Life and to allow the process to evolve and develop in its own way rather than trying to control and resolve the situation. However, life and living bodies are so intertwined and complex that I don't believe that the human mind is capable of truly understanding what is going on. Evolution has, over billions of years, fine tuned the self-adjusting capacities of living organisms and ecosystems and I feel more trust in those capacities than in my conscious problem solving abilities.

I have come to feel that the process of living through things is a spiritual practice in its own light, since by doing so you are enduring and possibly enjoying the present. Instead of trying to coerce the river of life towards a future goal, you are learning to accept that the force of the current has its own directions which are greater than you. The best you can do is relax and try to enjoy the ride. This is not a passive posture: you can actively swim in the river without trying to control its course, and the more engaged you are in an activity, the more enjoyment it gives.

The theme of this Journal reflects these thoughts. By chance, a majority of the articles received have been on this subject. Therefore this issue is dedicated to the Earth Element which provides the solidity, nourishment and support which allows us to learn to trust in life.

I recently attended the second international Shiatsu conference in Australia. Apart from the superb organization and a host of interesting talks and workshops there was one event that struck me as wonderful. On the first day, as people were arriving for the first plenary session, a fleet of taxis pulled up outside the main entrance to Queens College, Melbourne, where the conference was held. An old man was efficiently bundled out of one of the taxis and into a wheelchair and briskly pushed into the session and up onto the podium followed by a phalanx of smartly dressed Japanese. The Namikoshi family had arrived with vast energy! The old man was Tokujiru Namikoshi, the original founder of the Japan Shiatsu school and still extremely active at 93.

His son Toru, who has recently died, was a strong missionary for the Japan Shiatsu school's style and his son in turn carries on the torch. In the plenary session, they challenged one of the basic reasons for the conference (i.e. to network different styles and systems) by stating baldly



that any Shiatsu not performed with the thumbs or the palm of the hands is not "correct" Shiatsu!

The way in which the conference received this challenge was wonderful. Instead of debating the point, as would have happened in most other situations, the conference accepted it with respect, appreciation and humour. The president, Peter Gigante, praised the passion with which the Namikoshi clan put their views and everyone breathed agreement as if to say "Yes! I like their energy even if I disagree with their views".

Another of the international guests at the conference, Ryokyu Endo, examines how this principle is at the heart of the practice of Shiatsu. In his book, *Tao Shiatsu*, reviewed later in this issue, he says: "*A mistake easily made by healers is trying to understand the patient's pain through their own past experiences. Although some would see this as sympathy, it is in fact nothing more than the healers projecting themselves onto the patient's condition. In such cases, the healer's mind may easily fixate on the patient's symptoms. What the healer should sympathize with is not the patient's symptoms but the patient's life existing beyond the symptoms, because the patient's life force, not the symptoms, responds to therapy.*"

This is a great analysis of how Shiatsu culture has something to offer the world, full as it is of conflict and unending argument. I feel that it is within Shiatsu and other body therapies that this important principle of Oriental medicine is still practised and recognised. Acupuncture and Herbalism, although they are extremely powerful disciplines, have become quite analytical in the last seventy years, partly in an attempt to make themselves respectable in the eyes of Western science. This has unfortunately meant that many practitioners of these forms focus on what is wrong with the client, even if their view of what is wrong is more holistic than a western diagnosis of symptoms. In this case the practitioner tends to be drawn into an argument with the illness rather than a collaboration with the underlying life force.

The movement towards gaining official recognition for Shiatsu and other Oriental Body Therapies should proclaim this trust in life-process as a positive principle underlying the therapies rather than trying to prove that they can also match the analytic style of the west.

*Govern by letting things take their course!*

*Interference produces only distress*

*and does not succeed in ruling the world.*

**TAO TE CHING (48)**

*Bill Palmer*

# News

## Shiatsu and Physiotherapy

Andrea Battermann, a chartered physiotherapist and registered Shiatsu practitioner in Edinburgh, Scotland, who published an article in Issue 3 of the Journal on her use of Shiatsu with patients with Traumatic Brain Injury writes that her consultant now officially prescribes that she use Shiatsu with certain patients in her NHS clinic.

Shiatsu is already recognised by the Physiotherapy profession as a complementary skill that therapists can use alongside their normal work but this move adds to the recognition that the medical profession in Britain is giving to complementary therapy within hospitals and general practice.

## Research Award for Shiatsu Society, UK

The Research Council for Complementary Medicine (RCCM) has awarded the Shiatsu Society a grant of £2500 to conduct a nationwide survey of conditions presenting for shiatsu treatment. This is the first time that the RCCM has supported research into Shiatsu.

## New Publication Dates for JSOBT

From this issue the JSOBT will be published in April and October each year. Issue 5 will be published on Oct. 1 1996.

## Reprints of Articles

Since Issues 1 & 2 of the JSOBT have sold out and issue 3 is disappearing fast, we are offering a reprint service for articles published in issues out of stock. A list of the articles will be soon available from the JSOBT and will be published with abstracts in the next issue. There will be a handling charge of £1.50 per article and a postage fee

## European Shiatsu Federation

Anyone wishing for information about this growing association of all European Shiatsu professions can contact EFS, Piazza s. Agostino 24, 20123 MILANO. Italy.

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**ANNOUNCING:** Ask for information about our 1996 National Convention, Chicago, IL, July 12-15, 1996 ~ "East Meets West". Come join us for education, networking, and an opportunity to discuss issues important to the profession and to you as a practitioner!

# Healing the Earth

by Maddie Parisio

Mr. Baphna had been practicing natural farming for eleven years when I met him, he had a large 100 acre farm divided into two plots in a small coastal village north of Bombay. His family had been growing tropical fruit for several generations. Eleven years ago he had gone through a crisis in his farming and nearly lost all his crops. The trees grew in a ploughed space, and were maintained with chemical fertilizers, pesticides and herbicides. Like most of the land in this part of India, the soil was mostly dry and dusty, in constant need of artificial irrigation, and the trees were weak and sparse. His crops were deteriorating in both quality and quantity. Mr. Baphna tried more and more chemicals to give new life and strength to his rapidly diminishing means of livelihood, and the more he tried, the more his trees failed him. In despair, Mr. Baphna gave up. Looking around him at the Gujarati rain forest he could see that Nature left unattended supplied abundantly but Nature interfered with, as on all the farms in his vicinity produced a sorry, barren picture. He decided to do no more to interfere with Nature's process, but to allow it to work for him. By the time I visited Mr. Baphna's farm it was a paradise. His crops were abundant and of supreme quality. Work was down to a minimum: simply fruit-picking and keeping the grass down, but leaving the cut grass as a mulch. So nothing was ever removed from the land except the fruit. Several years after he started his do-nothing farming, and the success was beginning to show, he read about Masanoba Fukuoka who was doing the same thing in Japan with grain and vegetable crops, as well as fruit.

Fukuoka's journey into natural farming was a little different from Mr. Baphna's, but his philosophy was the same. In his book, 'One Straw Revolution' he says: *"people find something out, learn how it works, and put Nature to use, thinking this will be for the good of mankind. The result of all this up to now is that the planet has become polluted, people have become confused, and we have invited in the chaos of modern times..."*

*"The more people do, the more society develops, the more problems arise. The increasing desolation of nature, the exhaustion of resources, the uneasiness and disintegration of the human spirit, all have been brought about by humanity's trying to accomplish something."*

As I work with Shiatsu I believe that my role is simply to connect people back to their Earth again; to give them back their natural strength and energy; to allow them to be happy and healthy through their own sense of harmony; to reconnect people to their natural unpolluted lives. Mr. Baphna discovered that the more chemicals he added to the farmland, the more he had to continue using because the whole ecology was upset: pesticides killed insect predators as well as insects so pest control became dependent on chemicals; herbicides killed weed controlling and nitrogen fixing plants as well as the weeds. In the same way, with our bodies, the more we depend on outside

agents for our healing the more our self-healing capability is diminished. Working with the Earth energy is bringing people back to their home; helping them to be self-supportive and stimulating their capacity for self-healing and nourishment.

I discovered recently that this idea has very deep roots. In ancient China there used to be a "Spleen and Stomach School", whose practitioners believed that if the Earth element was healed then all else would adjust itself. Instinctively, I have slowly been on the road to discovering this. It has been a long and indirect journey, a spiral winding its way towards the fundamental like the wayward daughter finding her way home.

The story has its beginnings in Grandfathers. My paternal grandfather was an Italian nurseryman. My grandfather was an enterprising young man, because, not only did he teach himself to read and write in English, something he couldn't do in Italian, but he also taught himself to draw up building plans, and twice he built his own house for his family, setting up his own business to sell home grown produce. The second house finally became our family home when grandfather died, and the four acres of land which went with it became my childhood natural paradise. It was there that the exploration of gardens took on a new and wild dimension.

My grandfather had a certain enigmatic quality, he produced things like peaches, figs, splendid displays of pinks and dahlias for sale in Covent garden, and salads. Their old mahogany table was always abundant with sparkling cut glass bowls of lettuce, tomatoes, spring onions, green peppers, mostly unknown to a child of the 50's whose friends ate Irish stew and boiled-to-death cabbage.

When he died and we became inhabitants of the house and land, I found the new house bewildering and strange, so I spent most of my early days there in the green house. We had never had a greenhouse before, and I loved its warmth. I sat for hours poking around among the seed trays and discovering old envelopes with a sprawly, copybook script denoting "Tomato 1947" or "Lupins 1952".

For many years after that, I left the Earth, explored being an Art Student, hippie, the Kings Road fashion scene until I finally found my niche in the music business. Life at this stage was a party, a round of drinks, late nights, restaurants...until the Earth brought me back. My father's youngest brother acquired the piece of land alongside the two plots owned by my father and his sister. He built greenhouses, left his job, and, like his father before him, started a nursery which I started to visit whenever I went home and the healing began there. . . I came back to Earth.

For many, this journey back to the Earth is more complicated, they don't have the advantage of ancestral

gardeners, and I find that part of my job as a Shiatsu practitioner is to help them find their way home through their own bodies. The Earth element is our mother, described by Harriet Beinfield as 'The Peacemaker'. It speaks of our nurturing qualities, our ability to care for ourselves and others. The Earth element unites people; is the understanding and listening ear, creates harmony amongst conflict. In the rhythm of the seasons, the Earth time is the most abundant. The full ripening of the summer is complete, it is the time of "gathering in", the harvest is reaped, fruits and flowers are collected, a time of sweetness when the sweet fruits are collected and the slow growing sweet vegetables are ready.

And yet, our modern living enables us to feed ourselves and function for perhaps most of our lives without ever coming into contact with it. Farming practices have become businesses of mass production rather than for the growth of our daily needs, which has led to the land being used more and more for the building of roads and supermarkets for the selling of prepackaged artificially produced goods, and less and less for the growing of our true daily nourishment. The Earth is not being fed. and we, in turn are not feeding our Earth.

If the Earth quality in us is the Peacemaker, then the lack of Earth must lead to war, greed, selfishness and the inability to care for ourselves and others must be the result of under nourishment of the Earth element.. Discomfort like dis-ease comes more as people are unable to comfort and nourish themselves. Even our hospitals have become additional enemies to our Earth healing. Full of machinery, gadgets and drugs, people are subjected to tests, scans and probes, all without contact by human hand unless it is gloved in plastic. Sadly, this does not heal the Earth, our natural needs are left wanting. In the course of being prodded and probed by modern science, our need to be touched and listened to is lost. In the words of Ivan Illich *"The child learns to be exposed to technicians who, in his presence, use a foreign language in which they make judgments about his body, he learns that his body may be invaded by strangers for reasons they alone know, and he is made to feel proud to live in a country where social security pays for such medical initiation into the reality of life."*

Fortunately, the human contact with the Earth element is not completely lost, and as modern life attempts to draw us further and further from the nourishment and care of our great Mother, more and more people are seeking ways to find a route back. Counselling and complementary care professions are on the increase, perhaps simply because they give an opportunity for a person to be heard and have time for relaxation and pressure. It is difficult to offer an equivalent to the Earth element in Western terminology and it is sometimes difficult to explain to the seeker what the Chinese Earth imbalance might mean for them. Once again, modern culture limits people's view to the immediate physical body. Clients respond to talk of nourishment problems by asking "Do you mean there is something wrong with my stomach? Perhaps I've got ulcers...".

One could see the body as a tiny fence around a

glorious and complete idea embracing Mind, spirit and the environment. Then we in the West have only been trained to observe and repair the fence without looking into the garden at all.

Shiatsu as a practice can provide a way into this garden, working with the body but including the whole of a person's life, including the earth he lives on. It helps the healing of the Earth by the holding and comforting nature of its application. So whether or not one is actually working on the Earth meridians, it can give the comfort to the receiver which is lacking through the surrounding imbalance to the Earth. Many people who come for Shiatsu are in "Earth" professions themselves, they spend their time in the caring and nurturing roles which are increasing in today's society.

For instance, 'Maria' and 'Jacqueline' both work in such professions and came to me for Shiatsu with bodily aches and pains. They also both suffer from asthma but externally show signs of Earth imbalance. Both women were trying with limited success to lose weight and both were struggling with their home environment. Both women also showed an imbalance in Water energy. The aches and pains manifested in the lower back, although Maria was also having particular problems with her neck and jaw, and Jacqueline with her shoulders. The Water imbalance seems to be in keeping with the Earth deficiency found in both women, and the depleted Earth being unable to support Metal (Asthma). Both women responded well to gentle, holding Shiatsu, with the emphasis on the Earth element they relaxed easily and enjoyed the nurturing qualities of the treatment and both have been able to report varying degrees of relief from their aches and pains. I was also able to help them to look at their eating habits and to start a new approach to their ways of feeding themselves.

Both these cases needed nourishment, they were naturally able to give care and comfort to others, but were unsure how to replenish it. In the modern world in which we live, correct nourishment is defined by scientific formulae, the human body needing so much protein, so many minerals and vitamins in order to survive. *How* one receives these requirements is not specified except that lists of foodstuffs are made available to show how these formulas can be made up. *'So it is one thing to calculate the body's needs by using outside instruments in a laboratory, by burning these foods and finding out how much energy will be liberated by one gram of protein or fat outside the body. It is another thing to see one gram of protein or fat inside the body and see how much energy it then produces. It may be a different Story'* (Dr. R.P. Kaushik).

To discover wisdom through food is to go back to the garden and to our grandfathers. Food that heals and nourishes us also heals and nourishes the Earth. Our own environment can provide us with all we need if farming practices enabled the variety of foodstuffs to be grown. Eating large amounts of foreign produce needs transport and energy. Eating in tune with our natural environment does not. Following the pattern of our natural seasons through the Five Elements gives us a direction of eating simply; giving ourselves nourishment with the least expenditure of energy. If we see ourselves globally, then

any energy needed to transport, package and deliver food to our tables is equivalent to the additional energy required to digest it. The simplicity of growing, harvesting, preparing and eating are the four major steps required for our self nourishment .

'Robin' feeds himself badly. Although he says this is because of his skin which erupts at the slightest deviance from his strange diet, or the pains in his stomach which also readily occur through certain eating habits. Like the farmer using chemicals, Robin has increased the estrangement from his natural life by analysis and the breaking down of the components of his condition until he has found a formula which he believes is the answer This formula not only limits the foods he can eat, but includes constant doses of antibiotics which he has taken for about 15 years. It also restricts his potential for a social life which may include meeting friends to share a meal, or indeed eating the food that others might cook for him. The formula he has created has become his imprisonment just like the chemical farmer who finds that he has created a balance so fine that any deviance may create a plague of pests or a crop that is sadly deficient. "People become perplexed when bound by theories that try to free a fluid nature." Fukuoka.

Just as Mr. Baphna discovered that he was on an ever increasing cycle of chemicals which became less and less effective, then Robin is already discovering the ineffectiveness of his formulas, but is trapped with little understanding of how to get off the treadmill. If he could give himself up to nature the way Mr. Baphna did, perhaps he would make some interesting discoveries about his self-nourishment.

Working with Robin is part of my own Earth healing, the complexity of his problems reminding me of the sadness of the World we live in where so much Earth is destroyed, so much of nature is out of reach for people living far removed from it. Robin reminds me of the need to recognise the limitations of interference. "If Nature is perfect, then Man should have no need to do anything" It is easy to become an Earth Mother as a therapist to try to be the all-understanding shoulder to cry on, but, as in Robin's case, this would only perpetuate the situation in his childhood which created the inability to nurture his own Earth in the first place. So, like the natural farmer that I am, I have to keep my treatment of him non-invasive, slowly introducing him to his own ground so that he can learn real peace and harmony in his life. "Give them a place of refuge, prepared with love for them where once a desert was. And everybody you welcome will bring love with him from Heaven for you. They enter one by one into this holy place but they will not depart as they have come, alone. The love they brought with them will stay with them, as it will stay with you. And under its beneficence your little garden will expand, and reach out to everyone who thirsts for living water, but has grown too weary to go on alone" (The Course in Miracles.)

As I sit in the wilderness which I have now chosen as my home, and see the broad beans flowering amongst the clover, and the radishes full and ripe in circles around the pansies, I hear only birds singing, see the abundant butterfly and insect life around me, I wonder how many years it will take to help people out of their concrete blocks, their plastic kitchens and their 'germ free' dusted and polished microwave meals complete with added vitamins, to really understand what Earth healing is all about. As Fukuoka says. "Illness begins when man moves away from nature, and the severity with which he is afflicted is proportional to his estrangement."

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*The Complete guide to Macrobiotic Cookery* Aveline Kushi  
*Limits to Medicine.* Ivan Illich  
*The Ultimate Transformation* Dr R P Kaushik

*Maddie Parisio is a Shiatsu Practitioner in Norfolk, UK She is at present doing research into the ways in which Movement Shiatsu can be used to help Autistic adults. She also teaches cooking and Chi Gong*

## Paul Pitchford at Heartwood Institute

Author of the popular treatise, *Healing with Whole Foods: Oriental Traditions and Modern Nutrition* (North Atlantic Books, 657 pages). His 1996 schedule includes:

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# Embodiment

by Alice Pitty

*Abandoning my body in silence  
What is the body a shelter from?  
It cannot be deceived by masks  
Seeking to exist in itself  
Not waiting on anybody or anything  
But immersing itself in the present  
Living its life and dying its death  
Burying myself in my mortal flesh  
I have grasped the sense of my body's way.<sup>1</sup>*

In order to transcend his flesh the Buddha starved himself. He tried for years to liberate his spirit from the conditioning of the body by fasting and purification but it didn't work. Eventually he gave up and accepted rice and milk from a passing woman. This surrender of effort and acceptance of his body was the last crucial step in his path towards full realization. Rather than gaining freedom by escaping from the prison of his flesh he transcended the condition of imprisonment by accepting his incarnation. He realized that the body is no less spiritual than the mind and thus could allow the light of consciousness to fill all aspects of his existence. He became fully enlightened.

I see embodiment as the feminine expression of enlightenment. The Mind is brought into the present through bodily sensation. Embodiment is the bodily felt experience of being fully awake in the present. Therefore, in order to become fully awake one must also become fully embodied, fully incarnate in this human body. Being in one's body and being in the present are the same experience. If we are to be awake and alive as human beings in the present moment, we must be fully embodied.

As a human being I exist in an embodied form, but I may not be consciously inhabiting all of my body. I may feel that parts of my body are uncharted territory, or contain memories of past experience that I would prefer to forget. If I am not able to consciously accept all aspects of my incarnation, good and bad, then I shall be reluctant to fully inhabit my primary home.

*We have been meeting everyday with our body which has come from our mother's womb. It's ours, whether we are satisfied with it or not. The hands have recognized how to touch, the legs have known how to walk. Yet we find the body has been left. Who let it become abandoned?<sup>1</sup>*

## Embodiment is a Developmental Process

As newly born babies we develop and learn through sensation and movement. It is through sensation from within the body and from the environment that we get a feel for ourselves. If we experience any sensations as threatening or painful, we will often contract in order to brace the body against being hurt. If the sensation is too traumatic for the body to process at one time the nervous system will close down certain motor or sensory pathways. The effect of this



photo: Yeshie Dondan & baby by Mary Bloom/Omega Institute

on the body can be numbness or immobilization. Contraction, numbness and paralysis all disable our capacity to respond fully and immediately to our environment through the body. If these painful experiences repeat enough then these neuromuscular patterns will become incorporated into the structure of our developing body. They will become part of our posture and personality.

## Karma & the embodiment of the past

When our body is enacting habitual patterns unconsciously, our movement and body processes are not consciously responding to the present and become an

embodiment of past experience. We lose our capacity for full bodily expression in response to the present moment and our experience is coloured by the past. This could be seen as a physical understanding of karma. I cannot be fully present if my body is still bound up in holding forgotten past experience. The more our energy becomes bound, the more our bodies gradually assume a form which reflects our unconscious life.

The loss of sentient awareness through trauma or habitual patterns of contraction is one way in which our incarnating form becomes stuck like a groove on a record. The possibility of a fluid and mobile experience of being embodied is replaced by a more fixed experience. There is nothing wrong with this as such, but it means that we are living a more impoverished sentient life; one in which we are not fully experiencing being alive right now.

Another way that embodiment may be incomplete is through lack of incoming sensation. We get a feel for ourselves and our environment through movement and tactile awareness. If a child lives in an environment without much sensory or active stimulation then he may not find out how to enter some aspect of himself and his body because the sensations that would show him how to inhabit this aspect are not present. Also, some children may not engage with certain parts of their body or certain forms of movement because of in-born tendencies. Some people seem to be innately ambivalent about being incarnate, being fully on the earth in their body.

Embodiment is a practice of literally touching the present moment with our awareness. The process and experience of being embodied is what draws people to bodywork. I believe that bodywork and movement work are ways in which embodiment becomes a practice, an exploration of how we can more fully live and understand our particular path of incarnation.

In the client's position the underlying questions may be - "How come my particular way of being alive and being in my body is causing difficulty? Or "How can I feel more at home and more alive in my body?". As a practitioner one may ask "What are the characteristics or tendencies of this person's incarnation?" or "To what extent can they receive the experience of being in their body right now with whatever sensation or movement that is present?" This practice allows us to cut through the cognitive understanding of experience which is so easy to take hold of as a way of reasoning with our idiosyncratic life process. Instead of trying to understand and analyze what is happening in terms of patterns and illnesses it is possible to work with someone by simply helping them in their ongoing process of incarnation. A person wanting growth or change is usually trying, in the process, to inhabit an aspect of their body that has been in shadow. The therapist can simply assist them in that task in the present moment rather than trying to analyse the causes of the imbalance in the past.

### **Kyo and Jitsu are distorted Embodiment**

The concepts of kyo and jitsu and the meridians can be also be seen from the perspective of embodiment. I like to use the metaphor of a rubber band to explain kyo and jitsu. When a rubber band is without tautness it is still a rubber

band but it has not yet fully embodied the quality of a rubber band. One does not yet have a feel for its purpose. When the band is stretched to a point of tension where the elasticity is felt, its quality begins to emerge. It is the point when the rubber band comes into its own because you can feel its quality embodied in its action. It is being fully a *rubber* band. If the rubber band is pulled further it becomes so taut that it loses the quality again through over-stretching. The rubber band is fulfilling its purpose but some of the quality of being has been lost in the extra tautness. Whereas the limp rubber band has a sense of potential for coming into being, the over-stretched rubber band has gone past the point of comfortable embodiment and loses its flexibility in the process.

This echoes the previous descriptions of a person who has not fully come into their body. When the body is held with a taut and over-active quality, as in the overstretched rubber band, there is a lot of energy but the flexibility of life is lost. This is described as a *jitsu* state. In terms of embodiment, I feel that the quality of kyo is that which has not fully come into being like the unstratched rubber band. There is potential for more vibrancy and fullness, be this in a part of the body or an aspect of a person's life. It is like the light shining under the bushel; its full brilliance has not yet emerged. The quality of embodiment in jitsu is more one of having to do oneself. There is a sense of tension in one's embodied state as one is pushing out slightly further into life than is comfortable.

If we look at kyo as background and jitsu as foreground, then the sense of balancing the two can come from looking at the changing scenes of a person's incarnation. What is constantly in the background of their life? Perhaps there is quality that is obscured or very diffuse. Is it possible to help this energy have the courage or interest to be seen more fully. The degree to which one is embodied may reflect the degree to which one is willing to be seen. What aspects are always at the forefront so that one cannot avoid seeing them because they attract so much energy? Without foreground there is no background and vice versa. However, when some qualities rarely come into being and others tend to dominate the picture, at some level we lose out on the potential expansiveness of our embodied awareness. Certain corners of our incarnation may never know what it means to be fully alive.

### **Meridians and Incarnation**

Our early development is a process through which we incarnate, first through developing a body and secondly by learning to consciously move and use the body. This happens in an archetypal way. There is an inbuilt developmental map which we follow in inhabiting our bodies. The meridians can be seen as archetypes of life processes and each of us has the inherent potential to embody all of those archetypes. If the meridians are an energetic blueprint of the body, then our body will come into formation according to those guidelines<sup>4</sup>. However the degree to which we embody any one of those archetypes will affect the formation of our structure. So if a particular meridian is diagnosed kyo the blue print may be there, but

the person may not have fully embodied or brought into life the strength of that archetype. This may create a line energetic weakness through the body, because it has not fully come into being.

We all have tendencies in life. The blue print of any one person's life may contain information that is still to be revealed. Perhaps it is appropriate that certain energies remain unseen or under-utilized at different times. However if a person gets a feel for the potential of what may be contained in any one quality or archetype, then they may have easier access to that energy if need be. There is the possibility for more choice in how they come into being at each moment. Ultimately we cannot tell what the path is going to be. It is a well known tale that artists avoid therapy because they fear losing their creative drive in becoming balanced and whole. Whether or not that is true, I think the underlying idea is that we each have a certain way in our incarnation that needs to be respected. Who is to say what will be revealed and when? However, in opening up the possibility for deeper embodiment we can only become more who we already are.

### Conclusion

What I have presented is essentially a way of seeing: the perspective of embodiment. When the rubber band comes into being, its purpose is revealed. If it becomes over-stretched, the purpose is superceded by doing, as the purpose is simply to become itself and any action will arise from that place. I believe the quality of the rubber band when it just comes into being is the same metaphor as treading lightly upon the earth. We are incarnate and accept this body and this earth as our primary home, but the quality of our presence is just enough to simply be present.

If embodiment is a spiritual practice, then I really do feel it is a practice of our time, and I think that bodywork from a planetary point of view has a role to play learning how to tread lightly upon the earth.

*When the great swing has taken an individual into the symbolic mysteries, nothing comes of it, nothing can come of it, unless it has been associated with the earth, unless it happened when that individual was in their body.....And so individuation can only take place if you first return to your body, to your earth, only then does it become true.*<sup>3</sup>

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*Alice Pitty is a dancer and percussionist who has trained as a Shiatsu practitioner and also in Core Process Psychotherapy. She has taught Movement Shiatsu in the UK and is interested in developing links between psychotherapy, movement work and Oriental Bodytherapy. At present she is living in Indonesia exploring the movement teachings of Suprpto Suryodharmo .*

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# The Energetics of Food

*Part 3: by Daverick Leggett*

**I**n the first two parts of this series we looked at the framework of ideas and language which form the basis of dietary recommendations in traditional Chinese medicine. In this part we will look at some of the basic diagnostic patterns and see how the theory is applied. We begin by looking at deficiency.

We can describe people as deficient in Yin, Yang, Blood or Qi. As practitioners, we look for a way to guide them back to sufficiency and one part of this may be suggesting changes in diet.

## **The Yang Deficient Person**

Someone who is weak in Yang lacks the catalytic spark; the cellular chemistry of combustion. When our fire is weak, we become cold and slow and physical processes become sluggish.

In daily life it is activity which generates our Yang, quickening our metabolic processes into action. Exercise is therefore always encouraged. We apply the same principle to food: to stimulate the Yang we use foods which are activity generators. And just as Yang deficiency is treated with heat, as in the use of moxa, Yang strengthening foods are also warming in nature. To help the heat penetrate more deeply into our system we also use slower cooking methods such as baking, roasting or casserole.

So the advice to a Yang deficient person is: move more, keep warm, reduce cold foods and exposure to cold, increase warm foods and use some of the warmer pungent spices. Chestnut casserole, baked trout, roast lamb or warming chai are typical recommendations flavoured with such spices as ginger, cinnamon, clove, nutmeg or cardamom.

## **The Yin Deficient Person**

With Yin deficiency, rest is the key to recovery and replenishment of our subtle reserves. This deep level of depletion is restored by practices which take us deeply into ourselves such as meditation practices and good quality rest. In working with Yin deficiency we reduce stimulation and encourage calm. In daily life this means giving ourselves quiet space and stillness, nourishing the subtle and reflective aspects of our being.

This is supported by a diet which nourishes us deeply, especially the subtle mineral base of the body. Yin strengthening foods are generally cool, calming and moistening and they penetrate like water to the deepest level. Sweet, salty foods are most useful, whereas the drying bitter or stimulating pungent flavours are usually reduced. Yin tonics include many fruits, seeds, sea plants and dairy foods. A Yin nourishing meal might be a fruit salad, scrambled eggs on toast or fish soup. Seaweeds, kelp and algae are useful complements to this diet and pork or rabbit are useful meats.

So the advice to a Yin deficient person is: reduce

stimulation and increase restful practices, reduce stimulating foods and increase calming, subtly nourishing and more lubricating foods. The principles are simple and, in my view, best kept that way.

## **The Qi Deficient Person**

In addressing Qi deficiency we need to look at how our Qi is being inhibited from fully expressing itself.

The inhibition of our Qi's expression can have many causes: the issue may be emotional; it may be environmental due to geopathic or industrially induced stress; it could be due to lack of oxygen caused by poor breathing. Food also plays a part: lifeless foods, especially microwaved, do not provide the vitality needed for vibrant living. The subtle Qi present most strongly in fresh and organic produce is necessary to support the quality of Qi in our bodies.

In diet then, Qi deficiency is addressed by the use of vibrantly alive food. The principle of resonance is also used with foods of specific shapes or colours being used to strengthen the Qi of particular Organs. Pumpkins, for example, are used to strengthen the Spleen, Kidney beans for the kidney. Animal organs are also considered to strengthen the related human organs.

Fresh air and exercise are good recipes and such foods as pumpkin, lentil or chicken soup are great Qi tonics. Porridge is a great strengthener too as are date and oat flapjacks. Oats, chicken and dates are some of the best known Qi tonics supplemented by herbs such as ginseng and royal jelly. Supplementation, however, is only recommended in the short term and the return to abundant energy needs to be supported by breathwork, exercise and exploration of why our Qi is depleted.

## **The Blood Deficient Person**

The quality of our Blood is a measure of the available nourishment circulating in our bodies. Its manufacture is dependent on the strength of our Spleen. It is made from the solids and fluids we consume and is oxygenated by breathing. Blood deficiency is readily treated by diet, especially when supported by exercise.

It takes about 120 days for us to fully renew our blood, so much can be achieved in a few months. A diet rich in fresh vegetables is essential. In particular, green leafy vegetables and chlorophyll rich foods are beneficial, especially when combined with grains. Most meat, beans and high protein foods also greatly strengthen the Blood.

Beyond this we can simply say eat well and widely as all food is ultimately converted into Blood or Qi. Blood is particularly weakened by sugar and its quality lowered by heavily salted, de-natured or fatty foods. Poached egg on a dish of spinach, beetroot soup, braised liver, nettle tea; all these are simple recipes for a blood-nourishing diet.

## Stagnation, Heat and Cold

These excess conditions are approached simply. Stagnant conditions need movement. This may be emotional, physical or creative. When it comes to food the recommendation is to reduce conditions which encourage stagnation such as overeating, too much complex food or poorly combined food and to maintain simplicity and lightness in the diet. The pungent flavour is used to give a little extra movement.

Cold and heat are treated by their opposites. cold conditions are improved by warming foods and vice versa. When a pathogenic factor is involved and the condition is acute, then the pungent flavour is used to drive the invader out of the body.

## Dampness

Dampness comes from the failure to burn off or transform moisture in the body. It is nearly always associated with a weak Spleen, often with a weak Kidney and sometimes with weak Lung. Dampness can lodge in a specific part of the body or affect us more generally. As the word suggests, Dampness can make us feel heavy and tired. It can make us swell up and it can obstruct our body's functioning.

Some people are more prone to Dampness than others. A tendency towards dampness can be aggravated by living in damp conditions or by a sedentary lifestyle. It needs the transformative power of the body's Yang to stop it accumulating. Eating in ways which inhibit our Spleen function or which injure the Yang will increase our tendency towards Dampness.

Dampness is treated by strengthening the Spleen and may also need tonification of the Kidney, the Lung and the Yang. Dampness is often the result of overeating or overnutrition. It may also result from jamming the digestive system with poorly combined foods. We also need to avoid too much raw, cold, sweet or rich food and the overconsumption of fluid.

Some foods are particularly dampening. They include dairy products (sheep and goat products are less dampening), pork and rich meat, roasted peanuts, concentrated juices, especially orange and tomato, wheat, bread, yeast, beer, bananas, sugar and sweeteners, saturated fats. Some foods, on the other hand have properties which help to resolve dampness. Many of these are bitter flavoured or diuretic and include aduki bean, barley, seaweed, rye and garlic.

Phlegm demands the reduction of Phegm-forming foods and the use of Phegm-reolving foods. Water is helped by Water-removing foods (diuretics). Transforming chronic dampness takes some persistence, combining the use of damp resolving food with a fairly consistent avoidance of damp formers. When the system is weak, as in ME, tonification may be a more important principle than the reduction of dampness: until dampness can be transformed by the Spleen and the body's Yang it will accumulate easily.

Such recipes as barley and cabbage are used to reduce damp heat in the Liver, dandelion root coffee is an excellent transformer of lower burner dampness and jasmine tea will

help a cold and damp Spleen.

There is no need to make things complicated. If we bear in mind the simple principles that Yang needs warmth or that stagnation needs movement it is easy to see the appropriate dietary path. The next step is to get out there and have fun making recipes. Here's one to end on that we dreamed up (and ate) on a workshop. It dries dampness, tonifies Yang and strengthens the Spleen.

## Pumpkin and Chestnut Soup

*A medium pumpkin*

*A mug of dried chestnuts*

*Two medium onions*

*Garlic*

*Vegetable stock*

*Black pepper, Bay leaf, Rosemary to taste*

*Perhaps a dash of cider vinegar*

Fry the onions gently in olive oil, add the chopped pumpkin and garlic and cook until a little soft. Add the pre-soaked chestnuts, stock and flavourings. Simmer for 40 minutes, remove the Bay leaf and liquidize. Garnish with parsley and paprika. Bon appetit!

*These articles are an introduction to the art of helping ourselves through food, discussed more fully in Daverick Leggett's book (see advert on this page). Some good recipes can be found in Paul Pitchford's "Healing with Wholefoods" or Aileen Yeoh's "Longevity - The Tao of Eating and Healing".*

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# The Healer & the 'Rescuing Role'

by Delcia McNeil

## THE HEALER & THE 'RESCUING ROLE' by DELCIA MCNEIL

*Do you give healing sessions at short notice even when it's inconvenient for you? Do you feel personally responsible if someone's condition does not improve? Do you feel guilty if someone wants a healing and you are unable to do it? Do you often run over your allotted time in a healing session? Do you find it difficult to set a boundary between social and work contact with those you give healings to? Do you feel obliged to be of service to others at all times even to the detriment of your own health and wellbeing? Do you always think you know what's best for your clients/patients? Do you feel the need to jolly someone up when they are feeling depressed?*

If the honest answer to any of the above questions is 'Yes' then I hope what follows will be of especial interest to you.

### INTRODUCTION

My aim in writing this article is to draw on a psychotherapeutic perspective to help bring about greater awareness and understanding of the kind of issues that can arise in the healer/client or patient relationship. I believe that how we feel emotionally, and consequently how we behave as healers, has an impact on the quality of relationship we have with our clients. Even though we may move into an altered state of consciousness to do healing, our emotional state may well influence the quality of energy we channel and transmit. This does not mean that we have to be perfectly balanced and free from neurotic behaviour in order to do healing. If this were the case none of us would

be able to begin! However, I believe it does mean that we should be curious about and take responsibility for our own 'wounded healer' - the internal part of us that is attracted to this work because we have our own unmet unconscious emotional or psychological needs. The need to help others can sometimes be a problem.

These ideas are in no way meant as criticism, nor are they meant to deride the virtues of compassion, service or dedication. They are an exploration and an attempt to draw on the invaluable body of knowledge of psychotherapy to help us develop as spiritual healers.

Earlier this year I was asked by Dr. Dan Benor to introduce the topic of 'Rescuing' at the April London Doctor Healer Network meeting. Being a Rescuer type I said 'yes!' straight away without thinking! This short talk, together with the discussions that followed, proved to be very useful for all of us.

### HEALERS AS RESCUERS

My interest in the Rescuer Role and the Healer comes from my own personal experience as a healer and my experience of teaching, supervising and meeting with other healers. Kate Williams and I coined the phrase 'The Rescuer Syndrome' (NFSH Healing Review Autumn 1993 Supervision for Healers) which is "the desire to make others feel better whether or not it is appropriate. Human compassion should not be confused with responding to someone's suffering because we cannot bear to see it ... The rescuer syndrome occurs when helping becomes a compulsion and the compulsion covers the healer's denial of their own needs ..."

### THE ROLES OF THE VICTIM, RESCUER,

## PERSECUTOR & LEVELLER

The term 'the Rescuing Role' comes from a model used in a method of psychotherapy called Transactional Analysis. I was introduced to this during my own psychotherapy training at Spectrum, a Centre for Humanistic and Integrative Therapy, in North London. I want to acknowledge Terry Cooper, a founder Director of Spectrum, for the theoretical information that follows because he has developed this model and created the 'Leveller' role. The model is made up of a triangle, each side of which describes a particular role any of us may play at any one given time. The dictionary definition of the word role is: "one's function, what one is appointed or expected or has undertaken to do." Within this model the roles are viewed as behaviour which has been learned in childhood from parents or other authority figures. In adulthood we continue this behaviour unconsciously. It is important to say that each role is a stereotype and in reality we move around the different roles and are a mixture of all of them eg. when a 'Victim' won't be 'rescued', the 'Rescuer' starts to feel persecutory towards the 'Victim'.

It is also important to say that there are genuine victims and rescuers. For example, if someone is drowning in a pond and a passer-by jumps in and pulls them out, this is a genuine victim and a genuine rescuer. However, once rescued and once safe the two roles end.

**The Rescuer** avoids conflict and desires harmony and often imagines that others are sad. They look after the needs of others but deprive them of being able to do things for themselves. They have difficulties in saying no and maintaining appropriate boundaries, and ignore any negative motivation that exists in others and themselves. Because of unrealistic expectations they often feel guilty.

**The Persecutor** is isolated, critical, aggressive, and defines things in

black and white terms. They welcome conflict and use this as a way of staying at a distance emotionally and not showing vulnerability. They see no good in anyone and are angry a lot of the time.

**The Victim** complains but doesn't take any action. They ask for help and advice but always have a reason not to take it. The Victim leaves you feeling helpless and frustrated. They often think the world owes them a living. They have difficulty in achieving goals.

**The Leveller** is the emotionally healthy alternative to the other three.

They are honest and authentic in their communication. They are not fixed but are flexible and are able to assert themselves without being overpowering. They are also able to maintain a sense of self even though the price may be rejection.

## A CASE EXAMPLE

The following is a poem written by one of my clients. She wants to share her poem and background information publicly because she wants others to become more aware of the possible long term effects of childhood trauma. I have simplified the information which follows the poem to illustrate an example of the victim/rescuer/persecutor dynamic. In reality although Christine's pain level has not reduced over time there have been brief periods of some relief and psychologically and spiritually she has made enormous progress. Here I am focussing on what can happen when trying to help someone who is in chronic, severe physical pain. Her case also illustrates the difference between healing and cure.

### WHEN I ASK FOR HEALING by Christine Steer

When I ask for Healing  
Please, don't say "Yes"!

For years and years I've tried and tried  
First this remedy, then that,  
First this cure, then that,  
This treatment and more, and more,  
and more.  
I've wanted to be "fixed"  
To be cured.  
I've wanted to be healed.

Please "make me better" I would beg  
Please, please take away my pain.  
Each time I hoped, I prayed, I begged.  
Maybe, Maybe, just this time  
It will be it -  
The time I'm "fixed" for good,  
Relief from pain for ever.  
But no - once again it's not to be.  
Hopes come crashing down,  
Soul-destroying failure yet again.

But now it's time for change.  
Time to let go of the desperation.  
No more searching.  
No more fighting.  
Trying this, trying that.  
No more hoping for a cure -  
A cure that isn't there.  
No more "fixes" please -  
I'm fine the way I am.

Not just the "I'm fine thank you"  
Which does not mention agony or anguish.  
But that which says  
"I am in pain, so much in pain,  
And my hands are numb  
And my legs are weak.  
And yet I'm fine -  
I'm fine the way I am."

So when I ask for healing  
I don't expect a cure,  
I'm asking for yourself  
To just be there with me  
And come into that place -  
That place of pain and fear.  
Where it really is OK  
For me to not get better.

So when I ask for Healing  
Please don't say "Yes!"  
Just say "I'm here with you" -  
And we will walk awhile together  
And see what is to be.

Christine has chronic spinal pain and suffers from Arachnoiditis. This is inflammation of one of the membranes

surrounding the spinal cord and is the result of a dye used for X-raying the spine. The dye, called Myodil, sometimes does not leave the spine completely. It is now banned. Christine has had operations on her spine and also on her intestines. Several of her vertebrae are fused together, thus severely restricting her movement. She has a history of being seriously and grossly sexually and physically abused. Her physical prognosis medically is poor and she faces a future of increasing loss of feeling in her limbs. After over two years of her coming for regular healing and massage sessions her overall pain level remained the same and her physical condition has been gradually worsening. No therapy or therapist has been able to help with this in any significant way. She has had osteopathy, acupuncture, homoeopathy, and allopathic pain killing drugs over a long period of time. Christine is also in psychotherapy.

We realised that regarding her physical pain we were very much caught up in the roles of the drama triangles. She would say "I don't care what you do just do something to get rid of this pain". In my own need to see physical results I placed myself in the rescuer role. When my attempts failed too we both felt let down and disappointed. Our relationship reached a difficult point in which I felt angry because I thought she was blaming me when in fact she was blaming herself for not getting better. Worse still her sense of hopelessness increased - she felt she was letting me down. She was trying to rescue me!

Fortunately, with the help of my own supervision and Christine's goodwill, integrity and willingness to explore her own part in the situation, we were both able to see that, even though she is clearly a genuine victim of horrible physical symptoms, psychologically she was playing a victim role and I was colluding with this. I was not facing the fact that her condition was likely to deteriorate. We were both denying the reality. Through this recognition a spiritual healing

occurred in that for the first time Christine is not denying the seriousness of her condition and she is learning to ask for and receive help. She has stopped fighting against herself and spiritually and emotionally she is stronger than ever. She is preparing for her future realistically and although this is very painful for her she is facing her fear. Instead of pretending to others, she is now talking more openly about the amount of physical pain she is in.

**THE STEREOTYPE ROLE OF THE HEALER**

The stereotype role of the healer and the expectations of the public make it difficult for us Rescuer types. People come to healers often as a last resort. They may well have tried lots of different therapies as well as having exhausted the medical route, and still expect to be fixed by one healing! We need to reeducate the public and clarify our role. It is important to be clear at the outset when we are taking a history of the client that the healing process is a journey we enter together. The healer should resist colluding with the client's expectations that they, the healer, have some kind of magical omnipotence. The kind of books published that emphasise miracle healings and immediate 'cures' do not help with this issue. These claims set up the ordinary healer going about his or her normal daily healing work to be some kind of magician. This is not to say that we shouldn't be open to miracles, but when they happen they are within a context that is relevant to the readiness and level of development of the client, and the clear degree of connectedness with their healer. And do we only define miracles in physical terms? Miracles come in many different forms and sizes.

**HOW TO CATCH YOURSELF RESCUING**

As a Rescuer type I find it useful to become aware of what I am doing when I'm in that role - my posture, tone of voice, the language I use. When I'm playing Rescuer my tone of voice has a patronising, condescending quality; I've learned that I put my head slightly to one side and have a

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# BOOK REVIEWS

by Bill Palmer

## **TAO SHIATSU by Ryokyu Endo**

*Publisher: Japan Publications Inc. 1995.*

*ISBN 0-87040-940-9.*

**R**yokyu Endo is one of the interesting Shiatsu teachers who were attracted by the teachings of Shizuto Masunaga. Like the latter he studied psychology and bases his work on the holistic connection between body and mind and on spiritual insights rather than medical analysis. He carries on Masunaga's exploratory approach to Shiatsu, breaking new ground in theory and finding new meridian connections through clinical experience rather than scholastic analysis of the classics. Developing Masunaga's extended meridian system further he presents 26 meridians in each limb which connect each limb to all parts of the body. Alongside these he also introduces horizontal and spiral meridians.

Before anyone throws up their hands in despair or ridicule, this multiplicity of meridians does not confuse or complicate the essential simplicity of his book. The book is a beautiful exposition of the spiritual and intuitive basis of Shiatsu.

The book starts with an analysis of the difference between Western and Oriental medicine through examining the different environments in which the two disciplines evolved. Oriental culture, growing in an environment of agricultural abundance, sees natural processes as benevolent, to be respected and obeyed. Western culture, its religions originating in desert regions and its society growing in harsh northern climates, sees nature as something to be conquered and manipulated. He continually emphasises that Oriental medicine depends on the empathy between two people rather than the analytical diagnostic approach. In fact he says:

"Differences between Oriental and Western medicine are not in healing techniques but in attitude. When a technique of Oriental medicine is practised through a diagnostic system that views patients analytically and manipulates their bodies it can no longer be called Oriental medicine. On the other hand...Western medical techniques may be valued as Oriental medicine when practiced with sympathetic understanding towards the patient."

Thus he presents Shiatsu as a way of encouraging the positive life process of the client rather than a system for correcting imbalance. With our emphasis on teaching theory and technique in this modern era, this is an attitude that is often buried under a weight of knowledge. As he points out, the therapist needs true humility to let go of his

"expertise" and trust that the client's energy has its own self-correcting wisdom.

His perspective on diagnosis is inevitably imbued with this attitude. He has one of the best explanations of the concepts of Kyo and Jitsu that I have seen.

For example: *Kyo-Jitsu patterns may be compared to conditions on roads: the jitsu pattern is peak-hour traffic when roads are congested with cars and progress is difficult; in the kyo pattern, the roads have caved in and, because it is difficult for the cars to cross, the traffic is detoured towards the jitsu road.*

This has the interesting implication that, whereas jitsu areas might benefit from facilitation of movement (helping the traffic to flow), Kyo meridians do not need more "traffic" brought to them, they need to mend the subsidence. Then traffic will naturally use their pathways. In other words Kyo meridians do not need tonification, they need mending. (In fact, the Chinese word "Bu" which is translated as "Tonify" also means "to Mend"). Endo sees this road healing process as something that happens naturally once space is given to the kyo, once it is allowed to come to light. Therefore the job of the therapist is to create an environment in which the client can expose their kyo and allow it to heal. He continues:

*...diagnosis is not a practice in which the healer actively probes the patient's body, nor is it a search for a weak part of the body. The healer is always passive, does not pass judgement on the patient, and listens to the appeal of life with honest empathy and humility. When the healer does so, the patient develops unconscious faith in the healer and...the kyo disorder clearly reveals itself. The absence of judgement towards others must also prevail during counselling and ordinary human relations, for kyo does not reveal itself to those who judge and criticize. ... People trust and want to confide in those who listen sincerely to what is being said.*

This does not mean that diagnosis, for him, is a mystical process that cannot be described or taught. On the contrary, he gives an extremely detailed description of how to sense which meridian is the one through which kyo can reveal itself. He is however, emphasising that diagnosis is not a technique to be learnt mechanically, but a revelation arising out of the relationship between healer and client.

Endo also includes a chapter on basic technique which contains many new positions and stretches. He also describes the properties of the meridians and devotes a

chapter to showing how he has extended Masunaga's meridian system to include secondary meridians in each limb, including an extension of the Conception and Governing vessels into the arms and legs. Whatever you feel about these meridians, his explanation of their existence is interesting. Simply, he is saying that if a meridian is jitsu it is more superficial. A kyo meridian is hidden deeper. A very deeply kyo meridian actually is so deep that it appears on the other side of the limb, giving the appearance of a secondary branch to the meridian. However, these secondary branches only are perceivable in cases of deep emptiness.

His idea is that a few decades ago, energy imbalance expressed itself in more jitsu patterns. This was best approached through the physical, symptomatic style of Namikoshi's Shiatsu which deals with pure congestion, without reference to meridians. In the 1960's and 70's, the culture changed to allow more vulnerability to surface. Kyo became important as a cause of imbalance and meridians needed to be included within Shiatsu to express the relationship between an empty area and the compensatory congestion in another place. Masunaga's Zen Shiatsu incorporated these concepts into Shiatsu. Lately, due to increasing cultural insecurity, environmental conflict and the long term stresses of capitalist life, kyo patterns have been etched deeper over time and the emptiness is not only on the superficial meridian level but at a deeper, energetic level. The kyo of the energy body can only be approached energetically through the quality of the healer/client relationship but it also manifests in the emptiness of the secondary meridians.

Thus Tao Shiatsu emphasises the energetic relationship of the healer and client and puts this forward as the style most suited to contemporary "deep-kyo" energy imbalance. The extra meridians arise technically as ways of contacting deeply empty meridians and also provide connections of the limbs to all parts of the body. This is why the subtitle of the book is "A Life Medicine for the 21st century."

In conclusion, I think that this book contains the most lucid and mature exposition of the subtle concepts of diagnosis and philosophy of Shiatsu in my experience. On this strength alone I recommend it wholeheartedly. The translation by Maria Borrelli and Nathalie Latham is extraordinary. The pictures of Endo working are good and will provide fresh ways of working for practitioners of any style of Shiatsu. The concept of secondary meridians is interesting but probably not useful to people who are not training in Endo's particular style. However, his exploratory style is inspiring and re-confirms the fact that Shiatsu is not a fixed tradition but is a youthful and evolving discipline.

## SHIATSU THEORY & PRACTICE

by Carola Beresford-Cooke.

Churchill Livingstone 1996. ISBN- 0-443-04941-6

This book is in interesting contrast to Endo's Tao Shiatsu. Whereas Endo is trying to write about the ideal attitude underlying Shiatsu as a form of energy healing, Carola Beresford Cooke is presenting the theory and techniques of Shiatsu in a form that is extremely useful to students. In her introduction she states her aims in explaining Shiatsu theory thus:

*Truly intuitive and healing Shiatsu may remedy the problem without any need for theory, but perhaps the giver is below par on that particular day and intuition is absent. Or perhaps she gives relief with her intuitive treatment but feels the receiver needs to take steps to prevent a recurrence and is at a loss what to advise.*

*This book aims to present three important sources of Shiatsu theory and to show their relevance in clinical situations. These are*

- Five Element theory
- Traditional Chinese Medicine or TCM
- Zen Shiatsu

Carola Beresford Cooke fulfils these aims very well. Her explanation of the Five Elements is, in my opinion, the best in print today. In the section dealing with each Element she also gives detailed descriptions of the meridians, clearly pointing out the difference between Zen Shiatsu meridians and the classical ones. The diagrams and drawings also show specific body positions and techniques for working with each meridian and she includes a description of the actions of the most important points.

With each Organ and meridian she presents both the view of TCM and of Zen Shiatsu. In general her language is clear and with a minimum of jargon. She also draws on not only her extensive studies of Oriental Medicine but also her knowledge of Eastern spiritual tradition. These factors combine to produce interpretations that are clearly understandable to a western reader, scholastically accurate within Oriental Medicine but also including more insight into the psychological and spiritual dimensions of the concepts than most other modern texts about Oriental Medicine. For example, in her explanation of the Heart in Chinese Medicine she says:

*The Heart does not have the same emotional connotations in TCM as it does in Western tradition, since all the organ pairs in the Five Element system are connected with an emotion... The Heart, in ideal circumstances, is an embodiment of the spaciousness of pure, unattached consciousness; in such conditions, emotions may come and go but they do not affect the Shen, which radiates out accompanied by contentment ("joy") and compassion. In the normal course of events, our consciousness is attached to our emotions, so that they stay and register with us for a while and tend to produce physiological effects in our Ki and Blood.*

Her interpretation of Shen as consciousness, makes much more sense to a western person than the usual translations of “Spirit” or “Mind”. Mind is a very broad term encompassing the activities of many organs such as Thinking (Spleen), Intent (Kidney), Sensation (Lung) etc. Spirit is a term that many people cannot relate to every day experience. Consciousness, on the other hand, is readily understood and is also present in all the aspects of Mind, just as the Heart and Shen play a central role in the Chinese Organs.

Another refreshing thing about this book is that she does not try to make Zen Shiatsu consistent with TCM. She presents them clearly as different systems and does not try to shirk the point that a Zen Shiatsu diagnosis may present different Organs for treatment than a TCM diagnosis. In her excellent discussion of Kyo and Jitsu in Zen Shiatsu she explains why these concepts are not the same type of phenomenon as Deficiency and Excess in TCM and why this difference will present different meridians within the diagnosis according to the two systems.

Her main point is that Kyo and Jitsu correspond to fluctuations in the flow of Ki seen in the present. They may relate to a “deep” diagnosis of an underlying chronic condition or they may relate to a transitory event in someone's life like eating the last meal too fast. The presence of Kyo and Jitsu does not necessarily imply a disease, nor need it be related to physical symptoms. This implies what Ryokyu Endo explicitly states in *Tao Shiatsu* that:

*“What sho (i.e. Kyo/ Jitsu diagnosis) indicates is not an objective image of the patient's illness that reveals “something wrong”, but a choice of therapy that provides the appropriate stimulation for restoring the patient's life to its original state of health.”*

In other words, what both authors are pointing out is that Zen Shiatsu does not aim at diagnosing the deep condition of the patient but pragmatically determines which meridians would best respond to treatment in the present moment. This “diagnosis” may well change as the treatment progresses thus modifying the emphasis of the work, while a TCM diagnosis made at the beginning of an acupuncture session will, in general, determine the treatment given during the whole of that session and probably future sessions as well.

The text is liberally sprinkled with examples and case histories which illuminate the theory and link it to actual practice. Instead of giving tables of keywords and signs for different diagnoses as Masunaga did in his books she explicitly teaches a “way of thinking” about diagnosis which emphasises that the Kyo/ Jitsu pattern may refer to various levels of the receiver's existence, from the totally superficial to deep and chronic conditions. Using one particular diagnosis (Stomach Jitsu- Lung Kyo) as an example, she shows how this energy pattern could refer to:

*Current physical symptoms, for example:*

- *Stomach Jitsu - bleeding gums*
- *Lung Kyo - cough*

or to the receiver's body type, e.g.

- *Stomach Jitsu - heavy thighs, large stomach*
- *Lung Kyo - stooped shoulders*

or to a long term pattern such as

- *Stomach Jitsu - duodenal ulcer 6 years ago*
- *Lung Kyo - colds as a child*

or to lifestyle and habits, e.g.

- *Stomach Jitsu - always eating*
- *Lung Kyo - just given up smoking*

or to the psychological state

- *Stomach Jitsu - always worrying about others*
- *Lung Kyo - depressed*

She goes on to say:

*The interpretation of Zen Shiatsu diagnosis at the highest level rests on an understanding of the meridians as expressions of a particular phase of activity of Ki ...The catch phrases which capture the essence of each phase in the cycle can be applied to the condition of the receiver's Ki at this moment and can be interpreted according to our own understanding, in the light of the receiver's physical and psychological state. In this way, we can avoid relying on lists of symptoms or typecasting the receiver; instead, the receiver's condition is seen as an expression of the Ki in the meridians.*

Lastly, the book includes sections on how to translate the diagnosis and theory into practical treatment and a very practical chapter on recommendations that may be given to a receiver including diet and Do-in or self-treatment by points or exercise. Within this section she includes some of Masunaga's meridian stretching exercises but, unfortunately, two or three diagrams have been mislabeled. The publishers are including an erratum slip to correct this proof reading error. A unique feature of this section is her description of specific recommendations for receiver's with imbalance in a particular meridian pair. For example she recommends breathing and physical exercises, with the possible addition of aromatherapy, Chinese Herbs or homeopathy for imbalances in the Lung and Large intestine while she suggests meditation, singing and counselling for receivers with imbalance in Heart and Small Intestine. I am not aware of any text which attempts to analyse, as she does, which other therapies likely to be of benefit to people with particular energy conditions

In conclusion, this book is as a complete textbook of modern Shiatsu as one could hope for. It is scholarly and accurate without being pedantic. Full of good examples and clear descriptions of how to translate theory into practice. It is written from the perspective of an obviously experienced practitioner, showing how the subtle concepts of Oriental medicine are perceived and used in real life situations. As such, I feel it is an ideal textbook for students and practitioners studying any style of Shiatsu. In fact, I would recommend this book and Endo's *Tao Shiatsu* as an essential core to a Shiatsu library, this book for the theoretical and practical details, *Tao Shiatsu* for its emphasis on the practitioner's inner attitude and the spiritual context of Shiatsu.

# Measuring Quality of Life

by Philip Harris

**M**easurement for health care professionals is a complicated issue. Physiological measures (eg body temperature and blood pressure) can usually be taken swiftly and accurately and are likely to be good predictors of well-being for people with acute illness. However, the usefulness of physiological indicators in predicting the quality of life of people suffering from chronic disease is less clear. For people suffering from terminal illness, physiological signs often deteriorate, although much may be done to improve the persons' quality of life.

**Quality of life** is a complex concept which has sometimes been referred to as ineffable, amorphous, and confusing. The usefulness of the concept has been questioned and, ultimately, it may defy scientific analysis. However, most people would agree that health is a crucial factor. **Health**, in this context, is a multidimensional concept incorporating physical, psychological and social well-being. The past two decades have seen a proliferation in health-related quality of life studies. In much of the early work the concept of **health-related quality of life** was narrowly defined and based on the assumptions of those conducting the research. Later work has tended to take a broader perspective and to evaluate quality from the point of view of the person receiving treatment. This work has led to the development of a wide range of standardised measures which have been used to evaluate changes in quality of life (Bowling, 1995).

## Using standardised measures

Standardised measures of health are measures which have been tested for reliability and validity. **Reliability** refers to the consistency of a measure (how likely it is to produce the same results if it is used again in the same circumstances). **Validity** is concerned with whether a measure really assesses what it claims to be measuring. Some standardised measures also have norms against which an individual's score can be compared. **Norms** represent a range of scores based on large samples of particular populations. For example, functional ability norms (derived from the general population) can be used to determine whether a person is performing so far outside of the normal range of skills as to require special treatment.

There is a wide range of standardised measures (see Bowling 1991; 1995) and the choice of measure depends upon the type of research question being asked. In Shiatsu, health-related measures can be used to:

- to monitor progress in individual case studies
- to evaluate the effectiveness of Shiatsu for a specific

condition (eg migraine) across a number of clients

- to compare the effectiveness of Shiatsu with other types of therapy.

A note of caution: care must be taken when using and interpreting any standardised measure since all measures include some degree of measurement error.

## Choosing a measure

An important question when choosing a standardised measure is whether a generic or disease-specific measure is needed.

A **generic** measure of health status is a broad measure encompassing a range of physical, psychological and social factors. Generic measures can be used to examine the effect of a treatment across a number of different conditions. The main constraint of generic measures is that they are unable to detect the specific aspects of a disease essential to measuring clinically important changes. For this reason, generic measures are often used in conjunction with disease-specific measures.

### *The Short Form 36 (SF-36) - a generic measure*

*The SF-36 is increasingly being regarded as the main generic health-related quality of life measure within the UK and internationally. It was developed from a longer set of measures (hence the term Short Form!) which were used to detect changes in health status as a consequence of health service use over a relatively short period of time. It has become increasingly popular among health researchers in the UK and internationally and is often used in conjunction with disease-specific measures.*

*The SF-36 consists of 36 items which together make up the following health dimensions: physical function; social function; role limitation; mental health; energy/vitality; pain and general health. The 36 items are scored by the respondent and scores can be calculated for each of the health dimensions ranging from 0 (poor health) to 100 (good health). The measure has been well tried and tested and with good results. It shows acceptable levels of reliability and there are a considerable number of studies supporting its validity. For further details and information about where to purchase the SF-36 see Bowling 1995: 282.*

*Brown (1995) used the SF-36 to measure the health effects of spiritual healing. The study was undertaken at a general practice and patients were invited to attend a spiritual healing clinic held at the practice. Thirty-three patients completed a SF-36 before attending the first*

healing session and again after eight weeks. The patients suffered from a range of conditions the most frequent being anxiety-stress. Apart from physical function, the results showed statistically significant changes on all dimensions of the SF-36 and particularly for mental health and vitality. Since there were no controls in this study, the results do not demonstrate that healing was the agent of change (other factors of the intervention such as increased attention may have contributed). However, the strength of this study is that it demonstrated, using a valid and reliable measure, that change had occurred. This may justify the pursuit of more sophisticated studies which aim to identify the key factors in bringing about the change.

### ***The Arthritis Impact Measurement Scale (AIMS) a disease-specific measure***

*Arthritis is a condition that cannot be easily measured. It often affects many joints at the same time resulting in a wide range of consequences including disability, physical and psychological discomfort and financial loss. There is evidence that biochemical measures are not a good predictor of patient satisfaction with treatment and there is a growing consensus that patient quality of life is the most important outcome in health care (Kaplan et al 1993).*

*The AIMS is one example of a quality of life measure specifically developed for arthritis. It is composed of 45 items which assess nine dimensions of health and functional ability: mobility; physical activity; activities of daily living; dexterity; household activities; pain; social activity; depression and anxiety. A score can be calculated for each dimension with a range from 0 to 10, with 0 representing good health status and 10 poor health status. The AIMS has been well tested for reliability and validity, it is self-administered and takes about 15 minutes to complete (Bowling 1991).*

A **disease-specific** measure focuses on a specific condition or disease, eg arthritis. The use of such measures minimises the risk of asking irrelevant questions and maximises the chance of detecting clinically significant changes. Specific scales tend to be more sensitive to smaller but important changes in health status. However, they are often criticised for being too narrow in focus. It is arguable that the most sensitive indication of health outcomes is achieved through the combined use of generic and specific disease scales (Bowling 1995).

### **Measurement of pain**

Pain is a feature of many diseases and chronic pain (persisting for six months or more) often severely disrupts quality of life. It can affect our outlook on life, how we feel and what we are able to do. Pain has many dimensions such as intensity; location; thermal properties and movement. Measuring pain is difficult and demonstrating the reliability and validity of pain measures is particularly problematic.

Self-report measures are a quick and easy way of collecting information about pain. A general criticism of self-report measures is that they tend to focus on 'feeling' states and give little insight into the meaning of pain for the individual.

**Intensity ratings** are one of the oldest ways of measuring pain. They can take the form of **verbal descriptions** to which numbers can be added to form numerical intensity scales.

*No pain =0, Mild=1, Moderate=2, severe= 3. unbearable= 4*

Alternatively, a **visual analogue scale** may be used. This consists of an unmarked 10 cm line anchored by verbal descriptions at either end which allows respondents to express their pain along a continuum. The interval marked by the respondent can be measured with a ruler to give a simple pain score.

### ***The McGill Pain Questionnaire (MPQ) - a pain-specific measure***

*The MPQ is the most frequently used measure specifically designed to assess pain (particularly in cancer studies). It evaluates four aspects of pain: where the pain is; what it feels like; how it changes with time; and how intense the pain is.*

*The questionnaire is self-administered, but more reliable if the instructions are read to the respondent. Respondents first indicate the location of their pain and then choose the words which best describe the pain from a list of 78 adjectives, eg throbbing, shooting, stabbing. A short version of the scale consists of 15 such adjectives. There are a number of scoring methods. The two simplest scores are based on counting the number of adjectives chosen to describe the pain and ratings from the pain intensity scale. For each method of scoring, a higher score indicates a higher level of reported pain.*

*The MPQ is very widely used, but there is little evidence supporting its reliability and validity. Although there is no normative data, average (mean) scores are available for groups with different clinical conditions, eg menstrual, dental and back pain.*

### **Measuring pain in Shiatsu**

Standardising a measure is a lengthy process and there seems little point in reinventing the wheel if an existing measure will do. However, existing measures of pain may not be well suited to oriental diagnosis and treatment, the Shiatsu practitioner may wish to explore properties of pain which are not normally covered by current measures, eg thermal properties and movement.

*What follows are some suggestions about how pain could be monitored during or between Shiatsu treatments, it is by no means an exhaustive account:*

• counting the **frequency** and monitoring the **duration** of the pain will enable the practitioner and the client to assess changes over time. Some types of pain such as lower back pain may be more or less continuous (although the intensity may change) whereas other types such as migraine are episodic

• monitoring the pattern of the **temperature** and **movement** properties of pain may (or may not) provide useful diagnostic and treatment insights. Body heat is frequently used in oriental diagnosis and some painful conditions like arthritis have pronounced thermal properties. Movement is a common occurrence in painful conditions like migraine which sometimes begin on one side of the face and then transfer to the other

• most pain measures take account of the **intensity** of the pain. Pain which may not vary in frequency or duration during the course of treatment may show signs of change in intensity

• identifying **trigger** factors which appear to relieve the pain or make it get worse may lead to preventative measures. For example, migraine can be triggered by a wide range of stress-related, food-related or sensory-related factors. Simply avoiding these trigger factors may help to alleviate the pain

• identifying and rating important **activities of daily living** which are affected by pain may provide further information about changes over time. For example, activities affected by chronic back pain could be monitored periodically:

The information collected about the thermal and movement properties of the pain as well as the factors which trigger pain may provide insights for diagnosis and treatment. Information about the frequency, duration and intensity of pain and its effect on daily living activities may be used to evaluate the effect of treatment. Pain measures may need to be constructed according to the specific condition being treated.

The 'pain record for migraines', shown below, is both **untried and untested**. It is best considered as a pilot instrument which can be modified and improved with use. It is intended for record keeping by the client between Shiatsu treatments.

The following pain dimensions are identified for measurement: frequency and duration of pain, location and movement, thermal properties, intensity and factors which appear to trigger the migraine.

### **Pain record for migraines might include**

1. How long did the migraine last?

Give date and time:

2. Where, precisely did the pain begin?

Did the pain move?

If yes, please describe the movement:

3. Was the pain accompanied by heat/cold?

4. At its worst, how intense was the pain?

5. What made the pain get better?

6. What made the pain get worse?

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# Process Acupressure

*An Interview with Aminah Raheem by Daverick Leggett*

**A**minah Raheem is the creator of Process Acupressure, a system of bodywork which aims to bring the client's conscious awareness into their body experience. The body is seen as the vehicle of the soul and body symptoms and experiences are seen as resistance to or expressions of the soul's journey as it unravels through our personal histories. She was interviewed by Daverick Leggett.

**Daverick:** Tell me what your journey was.

**Aminah:** I began with an academic background in psychology, so I started out from a psychological perspective, namely counselling people. And then after a while of that I would have success up to a certain point and then it would kind of run into a wall. Around this time I was rolled and in my own rolling I experienced how history is stored in the body. (At the time it made me totally crazy because I didn't know what was going on and the roller couldn't explain - it took me a number of years to figure that out.)

That gave me a clue that I had to start learning to work in the body. So I literally prayed because as I looked at the bodywork field I thought, "Where do I begin?" Since I was already a professional in another way, I prayed for the right body modality and literally two weeks later a treatment manual from Jin Shin Jyutsu was dropped in my lap. So I started studying there and I was very taken by what happened when I worked on people with this work. I was mystified theoretically because I was taught virtually no theoretical background. So in this vein I started a journey which is still going on, of studying the Chinese medical model in many different ways. I was studying Shiatsu, Jin Shin Do and Do In and also, informally, acupuncture. Much of this was self-taught.

Before beginning this work, I took up a spiritual practice which changed everything and caused me to see the core of everything to be the spiritual or the soul and through that spiritual practice I had many experiences of how the soul, if given the opportunity, can direct life toward greater harmony with the being and with the universe. This is not theoretical, it was experiential.

So gradually, despite the fact that I was teaching in an academic setting for many years, I gained the courage to start speaking out about this, about the necessity for a spiritual core and eventually published Soul Return with that thesis. And in the beginning that was difficult because people were not then into that, particularly in the psychological world. In the body development area, in 1978, I learned about and started studying Zero Balancing, which I have been studying ever since. In ZB I found the depth of solid bone and the clarification of touch that I really needed to complete the body component of my work. And that gets down to fulcrums which we will talk

about later and the structural component of working with the interface.

**D:** The sequences for releasing the back, haemorrhoids, etc., where did they come from? What is the historical origin?

**A:** The seed of them is from Jin Shin Jyutsu and I have enhanced and amplified them through my experience over the last twenty years. There was this Japanese man that came from a medical family. In early life he became deathly ill and he went to the top of a mountain to die. Then he decided that he really preferred not to die. So he prayed, saying that if he could be shown how to heal himself he would devote the rest of his life to healing humanity. He would go unconscious and when he woke up he would do Acupressure on himself. Then he would lapse back again into unconsciousness and this went on until he was able to get up and finally get well. He kept his promise.

He walked up and down Japan, studying and treating people and developing his work through his whole life. They say he became such a spiritually evolved person and so discriminative towards the end of his life that he wouldn't teach anybody his work who wasn't on a spiritual path. It didn't go out into the world because he wasn't a promoter. He taught this one woman, a Japanese-American called Mary Burmeister for 3 years. And he told her that his gift to America was for her to take his work back there. So she taught it for a long time, but she wouldn't let anyone else teach it. I studied with her as well as three other people who studied with her originally. Therefore I got the seeds of it. He was already dead when I learned of the work or I would have gone straight to Japan.

That's all we know about Jin Shin Jyutsu. I have heard that he left this woman a whole trunkful of writings describing his perspective on all of the esoteric work, astrology, religion and many things. They are in Japanese and as far as I know, they have never been translated. I feel very good about disseminating that work more fully in the world. I have added ways of working with consciousness and spirituality. Who knows if he did this or not. When I first studied his work, I could see the psycho spiritual implications right off the bat and I asked my teacher "What do you do with people's dreams, etc." She said, "Oh we never talk about that." So I have added this whole psycho spiritual dimension.

**D:** Let's look at some of the terms you use. What do you mean by interface?

**A:** This level of working on the body, at interface, is about the gap where energy and structure meet. In my experience, this is a level that takes the receiver into a very deep and harmonious state aligned with their own being. Therefore, with that method of touch and that understanding I am able to go in the body where I was always trying to go in the consciousness. Namely, to the deep most harmonious

place. So that is the whole body angle on my work. The other professional component is that I eventually needed to be fully schooled in psychology so I took a PhD in transpersonal psychology because it embraced the spiritual aspect. For about ten years I focused on healing principally because of the early death of my sister. This took me into a realm of wanting to understand what the healing mechanism really is and to facilitate it. However, in the overview for a lifetime work, my most principle interest is helping people to align with their own soul in harmony with the flow of the Creator, the Tao. And to do that, even though I could go to very deep and harmonising levels in the body, I found that people really needed to have some conscious realisation of what was happening, And of course my own early rolfing experience really triggered that idea because I felt that I could have saved about five years there if somebody had been able to explain what was going on and I had been able to embrace it consciously. So I think of my work as bodywork but also the consciousness component of the work is really important. That component took me into Arnold Mindell's work. I literally bumped into him in 1983. He and I were doing very similar explorations of bodymind consciousness and I found that he had worked out many processing tools for getting at the truth of what is actually going on in the flow of consciousness faster and more directly. I was so fascinated by what he put together that I studied with him for ten years, became a diplomat of his process work and taught with that group for a while. Finally I felt I had found the missing piece of being able to bring conscious awareness to an individual's consciousness so that he or she could own his or her power. And we could bypass another theoretical framework that goes right on top of conditioning. Let me explain. All of us need to clear up and release personal histories that are generally the overriding and limiting conditioning of our family of origin. But what often happens in psychotherapy is that in dismantling that conditioning we often take on another theoretical belief system. In order to "understand" or be "liberated" along a psycho-spiritual path, eventually we have to shed all that stuff and come to the direct, in the moment truth from our own being.

**D:** So you are talking about the direct experience of God?

**A:** Yes! I have had to contain myself for so many years with certain words!

Sometimes someone comes in and says "My body has a pain or tension here or there. My physician says that it is blah, blah." I am trying to help people to go to the level of "My body has a certain pain or sensation and as I explore it I realise that it relates to the loss of my mother and blah blah blah." This is the directness that I am talking about. The honesty to live and experience one's own being and one's own experience rather than interpret it through any theoretical framework.

At the core is the soul, which, when you can access it, knows exactly the right guidance and has the power to direct life to complete the soul's destiny. The soul work that I do I have had to evolve because there is no place I know that teaches it, except my own spiritual practice which is not theoretical but a purely experiential thing. I

had to evolve ways to keep going back to home to soul with people, in ways that are authentic, not airy fairy, but rather in ways that the knowing, the authority and the security of one's own essence are clear. At a personal level, I have four beautiful grown up children. Having the privilege of trying to keep up with them has really added to my understanding of human development. Now I am interested more in optimum human development than I am in pathology. I focused principally on pathology in order to understand healing, but I think there is too little understanding of where human beings can actually evolve to.

**D:** As bodyworkers that is an interesting principle to work with. What we are very good at and what we do habitually is focus into pathology, what is wrong. We become skilled at it and that becomes the focus of the exchange. The other component of that which I think is missing is what is going well, the broader picture: growth, development and direction and seeing what's happening as part of a whole process in a positive direction. Is that what you are saying?

**A:** Exactly, definitely. And specifically with that, the whole picture to the extent that when somebody has a symptom, say a bad shoulder or headaches or whatever, to go for what is the growing edge, what is the gift in the symptom.

**D:** Can we look at an example here and what that might represent?

**A:** One of the most dramatic examples I know of: A fellow in late mid life with a very abundant pension came to me with a pain in his hip that would not go away despite the fact that he had the finest bodyworker around here. It would go away for a few days and then come back. I asked him what I could do for him since he has already seen the best. I said "I only have one recourse, I have to amplify the pain and bring your awareness straight into the pain." I did that (which was hard for me because I had been trying to do away with pain for many years) by putting my elbow into the hip to amplify the pain, and literally within a few seconds he shifted his whole posture and said "Oh my God." I asked what happened and he said "The hip said to me 'Get off your ass and do something valuable with your life!'" He had the kind of life that we all want: he was free financially to do whatever he wanted. He had many talents and gifts which he was not using. He changed the course of his life at that point, took up a whole new life of contributing and being active and all that.

Another example is a young woman who came to me who was a bodyworker and who owned and operated a massage school. She was extremely busy, did good work, but when she came to me she was on the verge of a collapse. She said "I don't know what is going on with me. I have recurring symptoms, I feel like I'm going crazy, and I have to get to the bottom of it." It's recorded in her book *Coming Home*. We explored into the principle site of her symptoms, which was mainly her belly and as we went deeper into that consciousness, a voice came out of her stomach which said "If you don't change, you're going to die within six months."

At the time, this seemed overly dramatic. However, the woman took it literally. She sold her school and moved to

another location and started trying to find her way, her guidance from her own inner being instead of from whatever achievement standards she had learned from her family. It took her a year exploring herself and getting work but she emerged in a whole new direction, a whole new person, enjoying her life. And that one session, she reports in her book, was a turning point, a key that the information was all right there for her and she could access it, with a little facilitation, and interpret it better than anyone else. Those are examples of the way that I work with people as whole beings and to honour the stuff that is "wrong" with them. You have to set aside fixing for a little bit in order to comprehend what is trying to grow there.

**D:** Let's go on to fulcrums and explore that as a concept. Can you describe the feeling under your hands?

**A:** It's hard to describe that proprioceptive, kinesthetic feeling. The back ground is that in traditional Acupressure style I had learned to hold points, with pressure, and I was looking for the flow of energy, period. When I got into ZB and started to understand interface, working at the level between energy and structure. Then I started to apply fulcrums to acupuncture points, instead of just holding them. Now a fulcrum by technical definition is an agent around which other forces may adjust change and move. So, this concept of fulcrum works perfectly for me in every aspect of my work. Namely, in the body as well as consciousness. I am placing a steady, stabilising, secure fulcrum, around which the persons own body tissue, energy and process may adjust and change to serve that person's purposes.

In placing a fulcrum into a point, I feel both the flow of energy at the point and in that meridian, and the quality and adjustment of the tissue beneath my fingers as well as tapping into the deeper current of energy which I think of as the bone current. Both of these currents together really affect the entire being. Now you and I know we can affect the entire being from one point, if you know what you are doing. But this is a feeling of global response from that one fulcrum. I've seen Fritz do this many many times where

he has a whole being affected with one fulcrum.

Now in addition to the currents I've just described there is also for me a higher electric quality of energy different from normal meridian energy. Sometimes I describe that to students as the feeling of hitting an electric fence. It's really hard to describe. When I feel the electric fence then I know I've got it, the interface between energy and structure. One component of this is our discovery that when you work at the level of interface in the body, you are not subject to blurring your boundaries and blending with the other person. You can tell the distinction between their symptom and what's you. This clear distinction is really helpful in my work.

**D:** We say that Qi follows thought. If your attention is fixed somewhere and held, it is natural for the attention of the receiver to come and meet yours.

**A:** And it is that very meeting place in the body and in consciousness that I want to work with. In other words, this is actually the opposite of the traditional psychological and medical approaches wherein the authority who has all the power comes in and fixes the thing. What we are working with here is a facilitator with some skills, coming to meet the other person where they are at all levels, then the two of them together can unravel it to the next level and come to clarification.

**D:** So is this what you mean by Team Awareness?

**A:** Exactly. I am wanting to encourage the client's awareness into the point, into the body, into the issues that are going on with him or her. Then both therapist's and client's awareness can become fulcrums for enlightenment

*Aminah Raheem lives in California with her husband Fritz Smith. Her book Soul Return was published in 1987. She teaches Process Acupressure in the USA and Europe. Her next workshop in England will be on September 6-10th 1996 at Gaunts House, Dorset (contact Deirdre Burton 0121 449 5234)*

## ***The Journal of Shiatsu & Oriental Body Therapy***

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# Makkho-Ho Exercise

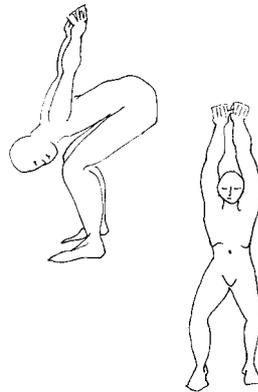
by Shruti Gordon

*These exercises are designed to enliven and open each meridian. Shruti Gordon has developed this series over a number of years from a number of sources and with each exercise is a sound which she suggests is made while breathing out during the stretch. These sounds are appropriate to the energy of the Organ whose meridian is being stretched. The drawings are by Clio Wondrausch.*

## METAL

**LARGE INTESTINE:** Stand feet apart, clasp thumbs behind back and inhale. Lean forward, bring arms up behind back and exhale with Sound: SHEEE

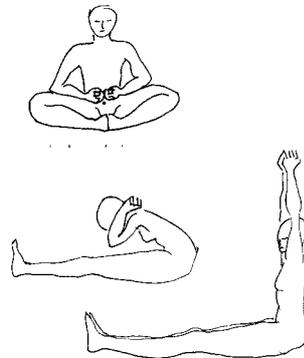
**LUNG:** Arms up, breath in, put thumb into palm and close. Sit into hips, legs shoulder width apart and hold breath, breathe out letting arms fall forward, make sound: FEESH and release



## WATER

**KIDNEY:** Sit, fist closed outward pointing, one inch above navel, hold both hands on hara, breathe in and fill belly, hold for approx. one minute, then spit the air out. Repeat three times and make the sound: CHUUA on outbreath.

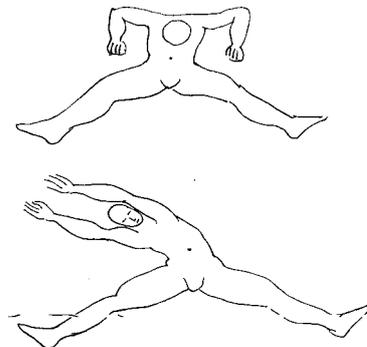
**BLADDER:** Extend legs in front, clasp hands over head; inhale and hold breath, rest hands on neck and close elbows forward, lean forward with head between arms, keep a straight back and exhale with sound: CHAAW



## WOOD

**GALL BLADDER:** Sit, legs wide apart, pull hands up making fists, breathe in slowly drawing elbows back (feeling stretch in shoulders) breathing out bend forward with sound: EAASH

**LIVER:** Clasp hands over head, inhale, lean to left side, exhale and aim to touch toes with sound: OOSH. Repeat on other side.



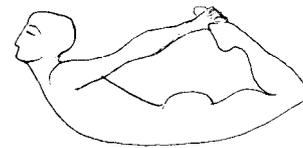
## **FIRE**

**HEART PROTECTOR:** Stand legs slightly apart. Sit in hips, knees bent. Stretch out hand with palms up in front then inhale, make fists and pull arms up, hold breath, look to ceiling, straighten legs for a moment, then release arms down to side and sit in hips again with sound: HO (Short)



**TRIPLE HEATER:** Bend Down, knees pointing outward, grasp them with crossed arms, inhale, push knees apart, exhale while hanging out of pelvis relaxing the upper spine with sound: HOOE

**SMALL INTESTINE:** Take a deep breath in prone position, grab the toes of each foot and pull towards ceiling breathing out. Hold then release legs and torso back to floor with sound: HIIGH

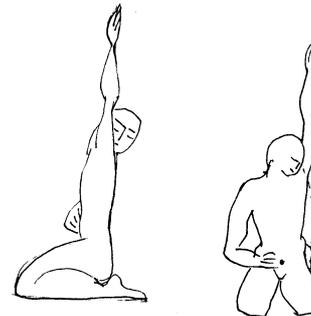


**HEART:** Kneeling posture. Raise arms breathing in grab one elbow pull arm straight towards head breathing out with sound: HEEYY and repeat other side.

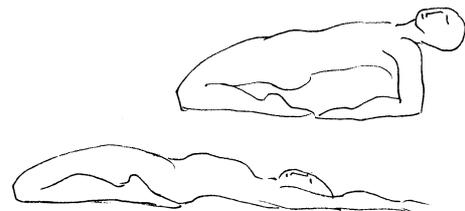


## **EARTH**

**SPLEEN:** Kneeling posture hands by side, wrists loose, point and hold right palm towards hara, breathe in, lift left arm high above head, palm facing back, hold breath, look over left shoulder down to floor, breathe out with sound: ARRRH



**STOMACH:** Sit on heels, slip between feet, buttocks on floor or pillow, lean back on elbows, inhale and slowly stretch all the way back along floor exhaling until shoulders touch the ground, inhale and move arms behind head, exhale with sound: EERRRH





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