

# Lifestream

NAEH Newsletter

Volume VII Issue 5 January 2018

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Three things cannot be long hidden, The Sun, The Moon, and The Truth... Buddha

When the mind is Pure, Joy follows like a shadow that never leaves...Buddha

Whatever words we utter should be chosen with care for people will hear them and be influenced by them for Good or Ill... Buddha

### Message from the President



Carolyn Rose Frost NAEH President 2016-2018

It is that time when we once again reflect on a passing year and be thankful for the received blessings and challenges we have faced. I would like to thank all of you who have given time and energy this year to the NAEH and its mission. We are a unique healing community and continue to strengthen and support each other.

The NAEH website is expanding and the NAEH is growing! The NAEH Teaching Program has been posted on the NAEH website and a Teaching sub-committee has been formed to discuss new teaching methods. The Education Committee has developed 8 short Esoteric Healing videos which will shortly be posted. I suggest you periodically, review the website along with our Facebook page. <a href="http://www.naehonline.org">http://www.naehonline.org</a>

In the Fall newsletter, I mentioned our Journal editor Susan Bertrand was stepping down. I am so pleased to announce she has decided to continue.

I am looking forward to 2018 and the continued growth of the NAEH. Remember to save the date for the Annual Conference April 20-22nd 2018, at the Okemos Conference Center, Okemos, MI. I look forward to seeing many of you there and do feel free to stop me and say "hello."

At this time we are hoping some of you feel the call to be a nominee for the NAEH Board, our Nomination Committee Chair, Diane Rolka has more details on this.

If you have any concerns or comments please contact the NAEH office at <a href="info@naehonline.org">info@naehonline.org</a> or call/text our new telephone number (517) 898-0271. We are here to support you and to listen. In the words of Paramahansa Yogananda let us prepare to decorate an inner Christmas Tree "Around that sacred tree lay gifts of calmness, forgiveness, nobility, service, kindness, spiritual understanding, and devotion".

My best wishes to you all for a Happy New Year filled with new beauty, new hopes, and new opportunities.

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Carolyn Rose Frost NAEH President 2016-2018

#### **NAEH News**

#### STEERING COMMITTEE NOMINATIONS FOR 2018

Steering Committee nominations are being requested now. There are 3 positions open and nominations and/or self nominations are welcome.

The function of this Committee is to decide policy and pathways for the development of the NAEH. This Committee oversees the activities and processes of all other NAEH Committees, It's members are elected from the general membership and it is composed of the president, president-elect, immediate past-president and a varying number of general members. Each member serves a term of 2 years with an option to run for reelection.

Kindly send bio information including a photo by March 31, 2018 to Diane Rolka at rolka2@yahoo.com or phone my cellphone with any questions...517-881-7789

#### **EDUCATION COMMITTEE**

The Education Committee has created a series of eight short videos with the intent to support our NAEH Membership on educating the general public on how Esoteric Healing differs from other energy healing modalities.

It is our vision that these short videos will be helpful in the following ways:

- NAEH Practitioners may refer friends and clients to these videos
- NAEH Practitioners may create a link to these videos within their own websites
- Create public interest when visiting the NAEH website in using Esoteric Healing as a deeper method of healing
- Create public interest in Esoteric Healing when these videos are found and viewed through a general search in YouTube
- Attract potential Esoteric Healing students

You may view these videos on the NAEH website by clicking on this link: http://www.naehonline.org/videos/

We hope you find these videos helpful in your Esoteric Healing practice. Shauna Edmonds CPEH
Constance McCloy CPEH
Fran Oppenheimer CPEH
Bonnie Dysinger CPEH

### **Certification News**

If you are interested in applying to become a Certified Practitioner of Esoteric Healing and you have questions, please contact Bonnie Dysinger by email at <a href="mailto:bkdysinger@aol.com">bkdysinger@aol.com</a> or by phone at 517-281-1706 (PST).

## Fran's Facts: by Fran Oppenheimer RN, LMT, CPEH

As Esoteric Healing facilitators we will inevitably come in contact with people who have various disease processes or conditions. Although we do not treat or diagnose these conditions, it is in the best interest of both the client and ourselves to be familiar with some of these ailments. In this column I will be taking a look at some of the more common conditions that we may see in our practices and exploring them from both a physical and metaphysical perspective.

#### Focus on the Thyroid Gland:

The thyroid is a butterfly-shaped endocrine gland in the neck, just above the collarbone. The thyroid gland produces thyroid hormones which control the rate of many activities in the body that we refer to as metabolism. These include how fast the body burns calories and how fast the heart beats. A healthy thyroid gland acts as the perfect engine regulator for the body but sometimes it can become imbalanced producing either too much or not enough thyroid hormones. In these cases the whole body suffers and the imbalance can even be life threatening. If the thyroid gland is too active it is called hyperthyroidism. This is when the thyroid gland makes more thyroid hormones than the body needs. If the thyroid gland is underactive it is called hypothyroidism and it does not make enough thyroid hormones to keep the body's metabolism running well. We are going to look at these conditions one at a time and then compare them together.

#### <u>Hyperthyroidism</u> (overactive thyroid gland) -

Hyperthyroidism is when the thyroid gland produces more thyroid hormones than the body needs. This condition is more common in women, people with other thyroid problems, and those over 60 years old. Hyperthyroidism affects about 1.2% of people in the United States or about 1 out of 100. Graves' disease, an autoimmune disorder, is the most common cause. Other causes include thyroid nodules, thyroiditis, consuming too much iodine, and taking too much synthetic thyroid hormone.

Overproduction of thyroid hormones causes almost every function of the body to speed up. In Graves' disease, which is the most common form of hyperthyroidism, the eyes may look enlarged because the upper lids are elevated. Sometimes, one or both eyes may bulge. Some patients have swelling of the front of the neck from an enlarged thyroid gland (a goiter). Medical treatment for hyperthyroidism includes drug therapy to control the amount of thyroid hormone produced, radioactive iodine which damages some of the cells that produce thyroid hormone, and in cases where drug therapy is not effective surgery may be necessary to remove part or all of the thyroid gland. In cases where the whole thyroid gland has been removed thyroid hormone supplementation will be needed at the proper level to keep the body in balance. See the chart below for some of the symptoms of hyperthyroidism.

#### **Hypothyroidism** (underactive thyroid gland) -

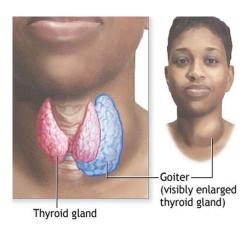
Hypothyroidism is when the thyroid gland does not produce enough thyroid hormones. This condition is also more common in women and those over 60 years old. Hypothyroidism affects almost 5%, or 5 out of 100, people in the United States 12 years and older, although most cases are mild. Hashimoto's thyroiditis, an autoimmune disorder, is the most common cause. Other causes include family history of thyroid disease, radiation to neck or upper chest, iodine deficiency and recent pregnancy. An inadequate amount of thyroid hormones in the body causes many of the functions of the body to slow down.

Medical treatment for hypothyroidism involves taking thyroid hormone supplementation to bring hormone levels back to normal levels. Lab work to check hormone levels will be necessary until the optimum dose is identified. After that thyroid hormone levels will be checked about once a year.

See the chart below for some of the symptoms of hypothyroidism.

This chart compares many of the symptoms of hyper- and hypothyroidism. With too much thyroid hormone it is like a car revving out of control and with too little thyroid hormone it is like driving on flat tires.

Hyperthyroid	Hypothyroid
Problems falling and staying asleep/Insomnia	Fatigue/Sleeping too much
Racing thoughts/Difficulty focusing thoughts	Forgetfulness
Sweating	Dry skin/ Brittle nails
Increased bowel frequency/diarrhea	Constipation
Weight loss	Weight gain
Muscle pain/weakness	Muscle cramps
Nervousness, Anxiety or Irritability/Panic	Depression
attacks	
Menstrual problems; light flow	Decreased menstrual flow
Swelling in front of neck (goiter)	Swelling in front of neck (goiter)
Feels too hot/Heat intolerance	Feels cold easily
Fast heart rate/Palpitations	Slow heart rate
Bulging eyes	



This diagram shows the normal size and placement of the thyroid gland as well as what an enlarged thyroid gland or goiter looks like. Goiter can occur with both hyper- and hypothyroidism.

#### **Metaphysical considerations:**

While people with thyroid gland imbalances need to be under the care of a doctor there is still much to be gained from examining the metaphysical possibilities of the condition. In her book, Heal Your Body, Louise Hay says that in general thyroid disease is related to feelings of humiliation and not getting to do what you want to do in your life. More specifically she suggests that hyperthyroidism (overactive thyroid) is related to rage at being left out and with hypothyroidism (underactive thyroid) the issues are more related to giving up and feeling hopelessly stifled. Dr. Christine Page in her book, Frontiers of Health, feels that an overactive thyroid gland is an energetic imbalance that also involves the basic and sacral centers.

She feels that the main issues are not being accepted and not being good enough which drives the individual to work harder and harder to achieve the rewards that they crave.

Dr. Page feels that an underactive thyroid gland also involves issues in the sacral center involving fear of change and blocked creativity where the person has lost the 'spark' in their life.

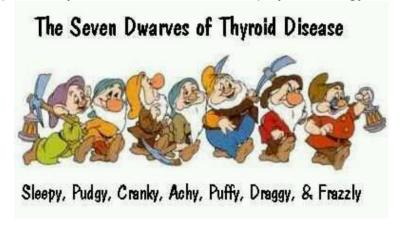
Throat center imbalances can often be related to blocked creativity and verbal expression as well as not feeling heard or acknowledged. In Esoteric Healing we recognize the link between the throat center and the sacral center so issues in one of these centers can have an unbalancing effect in the other.

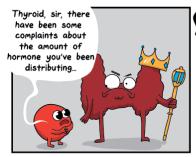
#### **Esoteric Healing considerations:**

In addition to assessing the entire energy system for areas of restriction and imbalance and treating accordingly some more specific treatment related to thyroid imbalance might be:

- Thyroid triangle
- Voice triangle
- Ear triangle
- Alta triangle
- Lymphatic triangle and treatment
- Ajna + pituitary gland
- Ajna + hypothalamus
- Sacral triangle
- Fear and Courage triangles
- · Shock triangle
- Spleen treatment
- Upper and Lower vitality triangles
- Upper and Lower triangles of Force
- Vagus triangle
- Emotional and Mental body treatments
- Upper extremity triangles
- Lower extremity triangles

Try adding the appropriate Ray for the center used to amplify the energy of the triangle.











the Awkward Yeti.com

Fran Oppenheimer is a Certified Practitioner of Esoteric Healing<sup>SM</sup> and has been actively practicing the healing arts for almost twenty years. She is also a Registered Nurse and Licensed Massage Therapist and delights in exploring the physical and metaphysical connections to dis-ease in the body. Fran has an active practice in Gainesville, Florida.

## Ethics By Shauna Edmonds, CPEH

#### Ethics – A Perspective for The Practice of Esoteric Healing

There are differences of opinions in the world about what is right and wrong on almost any issue. With Esoteric Healing, the use of ethics is important not only when working with the energetics of another person but in creating our part in right human relationships. This is the reason we are creating a series of short articles focusing on points of ethics that truly need to be acknowledged and discussed.

The first point I would like to offer is – "I will not interfere with the will of another person." This is huge. When we start an Esoteric Healing session, we always ask that the healing be given according to the Will of the soul. That is the client's soul – not our little ego or personality. So, what does that mean? We are taught the soul is the true healer of the form and we are to honor that as healing facilitators.

A friend of mine who also is an Esoteric Healer taught me the potential consequences when we do not listen to that quiet but powerful voice. Her husband was quite ill and was actually in the beginning stages of actively dying. She wanted him healthy and to stay with her for many more years to come and started a healing session. When she asked his soul, the answer she received was no. Well, that was not what she expected or wanted! She proceeded anyway.

The next day, he took a turn for the worse. She tried another session; again, she received a no answer and treated him anyway. And again, he got worse. She realized the reality and significance of the Will of the soul and let him eventually pass in peace.

I have heard so many people say "I can heal you," or "He/she healed me," when the reality is it is our own soul that does the healing. We can hold the space and facilitate the healing only when a client's soul allows. Otherwise, we could be creating chaos and cause discomfort for the client and ourselves. In Esoteric Healing, page 677, there is a statement that clearly exemplifies this: "The self-will of the healer (no matter how high a quality) and his determined effort to heal the patient, create a tension in the healer which can seriously deflect the healing current of energy. When this type of will is present, as it frequently is in the inexperienced healer or the non-initiated healer, the healer is apt to absorb the patient's difficulty and will experience symptoms of the trouble and the pain. His willful determination to be of help acts like a boomerang and he suffers, whilst the patient is not really helped."

Help can always be given with "the lifting of the downward focused eyes unto the soul, the true Healer within the form," (Law IV) if they are willing on the personality level. By listening, observing and with knowledge and consent from the soul and personality, we can assist with healing on whatever level is needed – or not.

The ethics of this statement applies to the Will of the soul as well as the will of the individual personality. We are here to help and support our clients as we ourselves would like to be helped and supported according to our own will.

Alice Bailey writes in "From Bethlehem to Calvary," page 279, quoting Dr. Schweitzer: "Civilization originates when men become inspired by a strong and clear determination to attain progress, and consecrate themselves, as a result of this determination, to the service of life and of the world. It is only in ethics that we can find the driving force for such action, transcending as it does, the limits of our own existence."

## Esoteric Stories By Nell Weast, MPT

"I like to be awed and I am awed every day," Barbara Briner, D.O.

Every day I am blessed to go to work and treat patients with my hands as a physical therapist. The past year I have added Bioenergy (Esoteric Healing) to my physical therapy "tool box" as a level 2 practitioner. With my new skillset, my patient population has changed and I do not attract easy orthopedic injuries anymore; the injuries I now treat are more chronic in nature.

The simple diagnosis of "distal radius fracture" really was a fracture with multiple complications. My patient – female, age 73- had broken her right wrist (distal radius fracture) which was initially set in the cast wrong for two weeks. She had to have her fracture reset and then immobilized in a cast for 8 weeks. Once the cast was removed, it was apparent that she had developed complex regional pain syndrome, or CRPS.

CRPS is a complex painful reaction believed to be caused by malfunction or injury of the central or peripheral nervous system. The symptoms include burning nerve pain, lymphatic swelling, and severe sensitivity to any touch to the skin. The diagnosis has minimal treatment interventions that include physical therapy, pain medication, and psychotherapy.

My patient had all of the above symptoms. The CRPS caused painful swelling from her fingers to shoulder. The dense lymphatic swelling was painful to the touch. Her fingers were straight with no movement. She also had no movement in her wrist, elbow, or shoulder. The initial treatment was lymphatic reduction before any work on the range of motion could begin.

For 5 visits we worked to reduce the swelling with bandages. As I treated the patient I learned that she was a survivor of physical abuse. She has visceral complications as well as posttraumatic stress syndrome. My patient said she was able to heal as a born again Christian. She talked about God and his healing powers every visit.

In 5 visits, minimal gains were seen due to her severe sensitivity to touch, especially to her wrist and hand. Her system was out of balance and needed bioenergy treatments. In order for her to understand Esoteric Healing, I referred it as "bioenergy," and as focused prayer when it came to helping her with her CRPS. She agreed to the treatment.

I aligned and attuned with her soul light, asking permission to treat. Then I laid my hands above and below her wrist. As I did this, I visualized her alta major triangle and asked for balance. I then held her alta major, carotid gland, and nervous system minor; I thought balance as I held these points. Next, I visualized her chakra centers and I focused on her throat emotional center and her lymphatic system. I visualized sweeping her lymph with the help of Ray 3. Very quickly I began to feel the heat escaping through her wrist. So much so that I started sweeping the heat away so that I would not take in any of the energy. This went on for a few minutes as I was telling her how the CRPS is leaving her body. It was important for her to believe this as energy follows thought. She believed me, thanked me, and thanked Jesus. After this session, she was relieved of the CRPS. We were now able to touch her arm and move her joints in an effort to regain her motion.

The CRPS never returned with the rest of the 30 treatments needed to restore the damage left from the CRPS.

## NFEH Retrospective Study: A Preliminary Analysis By Susan J. Linz, Phd, CPEH, C.Ht

#### October 2017

As part of an effort to document the influence of Esoteric Healing (EH), over 100 case studies associated with the NAEH certification process were collected by the NFEH. This paper briefly summarizes the characteristics of those individuals (humans) reported in the case studies, as well as some of the EH treatment characteristics described in the case studies. Additionally, it proposes a way to proceed, if NAEH members are interested in participating in another way of gathering information to systematically document the influence of EH. Any opinion or interpretation is my own, and not a reflection on NAEH or NFEH. Moreover, excluding the EH treatments on animals in this summary was based purely on time constraints, not on any assessment of relative merit. The purpose here is simply to provide preliminary information to NAEH members about what happened to those case studies that were submitted.

#### **Characteristics of Human Participants**

In all but 1 of the 93 human case studies reviewed, it was possible to determine whether the client was male or female: either it was noted explicitly by practitioner, or the language referred to him/her altogether, 74 females and 18 males were included in the case studies available for review.

In terms of the age distribution of human participants:

0-1 years2 (None between ages of 1 and 5 years)

5-19 years 4

20 - 29 years 1

30 - 39 years 11

40 - 49 years 15

50 - 59 years 16

60 - 69 years20

70 - 79 years6

80+ years2

#### **Characteristics of the Treatments of Human Participants**

The following four treatment characteristics were inferred from the case studies, based upon the treatment protocol provided or the wording included in the SOAP write up: 'novel' treatment, Higher Centers treatment, Emotional and/or Mental Body treatment, number of treatments. They are all lower bound approximations because of the way the case studies were prepared. While nearly all included the SOAP format, much detail related to what specifically was done during the EH treatment and with what results was missing from most reports. One feature common to all EH treatments is the align and attune at the beginning of the session; some also include allow (the treatment to be for the highest will of the soul).

#### Novel (Individualized) Treatments

At least 64 case studies involved at least one 'novel' Esoteric Healing (EH) treatment,' where 'novel' is defined here as not explicitly included in the EH handbooks. For example, some case study treatment descriptions included a 'new' triangle when the practitioner was working with a particular endocrine gland (spleen, pancreas, liver, for example) or system (e.g., circulatory, lymphatic). Others report the removal of entities, and several describe a different way of 'cooking' or 'sweeping' (e.g., kidney, vagus nerve, spine) that involved an 'unconventional' ajna focus and / or multiple rays.

Often, the practitioner noted the novelty. For example, in the case study write up, sometimes the practitioner's research and preparation of a 'new' protocol to treat the issue the client requested (in advance) be addressed was described. Sometimes the novelty was associated with being 'guided' during the EH treatment to include different combinations of things than appears in the standard protocols. In these cases, the novelty was identified by the practitioner. Other times, I noted descriptions in the SOAP wording not included in the EH Handbooks. In these cases, it is my judgement that the EH treatment involved 'novel' items.

The fact that more than two-thirds of the case studies involved 'individualized' work is worthy of note, and speaks, I think, to the power of Esoteric Healing. It would be nice to know more about the practitioners in order to put this 'novelty' finding into some sort of perspective. For example, how many EH levels were completed by practitioner prior to preparing the case study/certification? How many years (months) of EH practice were completed by practitioner before the certification process began .Was the practitioner trained by INEH as well? Was practitioner trained in other 'healing' modalities.

#### Higher Centers Treatments

In at least 40 case studies, at least one of the (minimum) 3 EH treatments involved treatment of the Higher Centers (8th - 12th). This was easily determined when a detailed treatment protocol was included with the case study. Other times, it was inferred on the basis of the descriptions provided in the SOAP wording. Again, knowing more about the practitioner would put this 'result' – at least 43% of those receiving the EH treatments had work in the Higher Centers in at least one of the required 3 sessions –into better perspective. It would be useful to know, for example, if practitioners who have completed levels 5-8 routinely work in the Higher Centers. If not, what particular 'signal' caused the practitioner to treat the Higher Centers during the treatment session.

#### Treatment of Emotional and/or Mental Body

In at least 19 cases studies, it appears that the Emotional and / or Mental bodies were balanced as part of a particular EH treatment. This 'result' is largely based on wording in the SOAP write up. Only very rarely is the actual protocol included in enough detail to determine the different aspects of the EH treatment. Sometimes the wording is confusing. While assessing and balancing at P/E, E, M, P, S levels is different from the protocol for assessing and balancing the Emotional and Mental bodies, sometimes the wording in the case study write up is not clear about this difference. So this 'result' – the number of case studies where at least one treatment involved the protocol for the Emotional and/or Mental body – is the most subject to error.

#### Number of Treatments

In at least 42 case studies, more than the minimum required 3 treatments are involved. Sometimes, more than 3 EH treatments were involved in the case study: all treatment dates were indicated, but only 3treatments were written up for inclusion in the case study. In other instances, the case study report refers to additional sessions to be scheduled later. Having information about the number of EH treatments and the time between treatments, would be useful in understanding the impact of EH treatments on a particular issue.

#### General observations

The objective of the retrospective study was to gather information in order to assess whether it would be possible to analyze /document the influence of EH treatment on particular issues. Step one is thus categorizing the case studies by issue. Unfortunately, I was not really able to sort the case studies into categories according to the issue to be addressed. Most times, multiple issues (sometimes widely disparate issues) were described, and sometimes these issues changed from treatment session to treatment session for the same client. I can say that the 93 human case studies involved a wide range of issues, and that even where the issues seemed similar (heart, fertility, back pain, diabetes, bulimia, IBS etc. compounding factors (abuse, accident, depression, stress, weight, general health, etc.) made each case study rather unique. Consequently, grouping the case studies into categories (for analysis of the influence of EH on this issue) will require a set of clear and carefully constructed guidelines that allows for identifying similarities. I currently do not have the skill set to develop the requisite guidelines.

Step two in any effort to evaluate the influence of EH treatments on a particular issue would be to have detailed information about the treatment protocol used during the treatment session. Step three would include pre- and post-treatment measures, both self-reported (pain scale, feelings of stress, anxiety, depression, etc.) and objective (blood pressure, pulse, mobility, etc), with a commonality in when these measures would be taken. Despite the requirement of 3 EH treatments per case study, I was unable to discern any pattern in the post-treatment follow up: were clients asked to report on changes in how they felt at the end of the session? Were they asked at beginning of next session to report on changes since prior session? Were any objective tests used to measure the EH treatment results (change in blood pressure, etc.)?

Thinking about the future and how to proceed ...

The retrospective study provided a wealth of anecdotal information about the influence of EH treatments. I learned a lot from reading the case studies, and I suspect others would as well. It is inspiring to 'see' what EH can do.

However, for any study to actually become a pilot study for future funding of a project designed to document the influence of EH treatments, a more systematic approach to gathering information (of practitioner, of client, of treatment protocol, of measuring outcomes) would need to be established. This might be done by focusing on a particular issue, especially a 'simple' issue. For example, I would imagine that kidney stones, high blood pressure, or high cholesterol, would be simpler than cancer or Parkinson's. But I do understand, especially after reading these case studies, that on some level, nothing is 'simple." Because of this reality, to develop a pilot study, it would be helpful to pick a 'popular' issue(one that is currently receiving funding, or one that involves a wide population) on which to focus, and then begin collecting information in a systematic way. One possibility would be focusing on individuals, particularly veterans, diagnosed with PTSD. While the 'issue' is complex, a large, well-defined and (relatively) easily accessible clientele is available (contacting Veterans Affairs, Head Strong Project, National Guard, for example).

Collecting information in a systematic way would be facilitated by having a 'core' protocol that all practitioners use in treating the issue, with options for including additional aspects. For example, the 'basic core' protocol could focus on lower body centers so that NAEH members who have completed level 4 could participate. This would provide a 'control' group for the study. There would also be an 'extended core' protocol which includes Higher Centers. Both the basic and extended 'core' protocols would likely be developed by NAEH members who have experience with and/or an interest in using EH to treat trauma. For both of these 'core' protocols, practitioners would have the option of adding anything they are guided to do during the treatment session. The only constraint would be to record what 'new' features were added (what was done in addition to what was specified in the 'core' protocol).

By necessity, practitioners would also have the option of EH treatment sessions that do not adhere to either 'core' protocol. That is, there is no need to impose a straight jacket on EH treatment sessions, but there is a need to acquire common information from the session. In this case, the practitioner would simply write up the EH treatment session results, with enough detail so that what was done during the session could be replicated.

NAEH has already taken a step in this direction (acquiring common information). The adoption of a common assessment tool (Likert scale) makes possible the aggregation of information across clients/practitioners. A second step in collecting common information is a detailed record of the actual EH treatment. Effectively, in the proposed study, there would be common information gathered from 5 types of EH treatment sessions. A third step in collecting common information is to develop a pre- and post-treatment form for the client, as well as a practitioner form. The former might be developed in consultation with NAEH members who work as nurses or physical therapists, for example; individuals who routinely collect information on physical (blood pressure, pulse, pain, mobility etc.), emotional (fear, anxiety, stress, self-esteem, etc.) or mental (memory etc.) conditions of a client. The latter form would involve collecting basic biographical information of the practitioner.

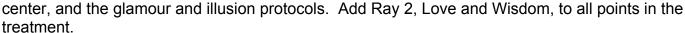
As NAEH thinks to the future, there may be ways to incorporate in the instruction process (especially in levels 1-4) these different ways to collect common information. There might also be a re-thinking the instructions for preparing the case study in the certification process. The routinization of information collection does not undermine in any way the capacity for EH treatment sessions to go in whatever way they need to go to be in focus with the highest will of the soul. However, for EH to become more mainstream, or better understood by conventional and alternative healers, it is important to speak a common language and/or follow an accepted method of collecting and reporting information. NAEH is perfectly positioned to promote EH in this fashion.

### Ask Auntie Karana

**Q.** About the state of the world, no one feels safe anymore. All my clients are coming for their sessions in despair, but since these issues are beyond our control, what can I do to help them?

**A:** Encourage them to give themselves a break and let it all go by reminding them they can create their own minute-to-minute reality, beginning with the time spent in your office, a sacred space.

Include their higher centers in the protocols. Always balance the nervous system, do the courage/fear protocol, the emotional and mental points in every center, and the glamour and illusion protocols. Add I





Suggest to your clients daily meditation. If they are inclined to pay attention to constant news, remind them to reconnect to Source as often as needed to stay above the fray. Suggest they add to the goodness of this world by practicing trust instead of aligning themselves in the vast arena of fear that exists in today's culture.

**Q:** I have taken 4 levels of EH and want to start practicing it with my massage clients, but am unsure of how to introduce the work to them without a long explanation. Most of them are very practical people about their aches and pains, can relate to hands on, but I don't believe they would understand energy treatments. Do you have any tips on adding it in an organic way?

**A:** Just keep it simple. If, for instance, a client comes in with shoulder pain, do the normal massage you would usually perform on those muscles. At the end of the treatment, mention your energy healing studies and ask if they would like to experience a quick treatment including the spinal protocol and the lymph system to help clear tightness in their body. Explain that when the lymph is compromised, because it is concentrated in the shoulder area, acidity can cause the surrounding muscles to tighten. The reason for doing the spinal protocol is self explanatory.

Before beginning, make certain there is no cancer in their medical history. Every time you approach someone's lymph, you want to avoid stimulating abnormal cells. The lymph protocol can always be performed with the idea that you are clearing all dis-ease. Align, attune according to the will of their soul, assess their centers and do the lymphatic sweep, the spine, then balance the centers and close.

Another common way to add EH to massage is with a client who has lower back pain. An inefficient colon is toxic and becomes acidic which can cause the back muscles to spasm, a similar concept as shoulder health relates to lymphatic efficacy. Sweeping the colon is very helpful.

Write up a pamphlet for your office that simply explains the chakras as concentrations of nerves, each plexus governs specific functions, and how energy treatments can have a positive effect.

Explain that a healthy and integrated person is balanced in the physical, emotional, mental, personality and the spiritual, and Esoteric Healing works on all those levels.

As your clients become more informed and you add the work to your sessions, recognition of the subtle and profound shifts will naturally be the outcome. It's only a matter of time before they ask for help for themselves and their loved ones.

### Esoteric Healing Study/Practice Group

#### Benicia, California

**ZOOM** (an online video communication system) Esoteric Healing practice group meets the 4th Tuesday of each month at 7:00 pm PST with Bonnie Dysinger, CPEH. All levels are welcome. Join us on Zoom from wherever you are in the world! Email Bonnie at <a href="mailto:bonnie@gtheal.com">bonnie@gtheal.com</a>, or call 517-281-1706 (PST) and let her know you would like to be added to the Zoom invitation list. Esoteric Healing practice groups are a great way to meet and interact with other Esoteric Healing practitioners, ask questions, and practice your skills.

#### Ann Arbor, Michigan

Mei-Ying Moy and Diane Rolka have been meeting nearly every month for a Study/Practice group over the past 2 years. Current dates we have chosen are January 20, 2018, February 17, 2018 and March 24, 2018. We meet for 2 hours at one of our homes on Saturday afternoon and we meditate, spend some time studying/reviewing points of interest and close by doing esoteric healing treatment on each other. We are open to others joining us!

Phone Diane 517-881-7789 for confirmation of date, time and location.

#### Naples, Florida

Esoteric Healing practice group meets the 1st & 3rd Monday of each month, (beginning the 3<sup>rd</sup> Monday in January) from 7 pm to 8:30 PM.

Contact Katie Mulligan, CPEH at <a href="mailto:katiemulligan@gmail.com">katiemulligan@gmail.com</a> for the location.

#### **Members of the Publications Committee**

Dr. Barbara Briner, Christine Dawson, Catherine Finigan, Fran Oppenheimer, Lori Settersten, Stephanie Urdang



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