THE BORDERLINE BETWEEN TWO AREAS OF RESEARCH

by Mogens Ehrich, m.sc. PhD

ABSTRACT

Objective: Subtle energy is not measurable by physical means and therefore not widely accepted in modern western science. But if it were, how would that affect the acceptance of claims of being able to sense it? And how would that affect the comprehension of CAM and CAM research?

A discussion of this is based on data from a cross-sectional study selected to represent as closely as possible the adult Danish population. It was found that about a third of the population might be able to sense healing energies, radiation from people and the like, in short called ASTSE for "alleged sensitivity to subtle energy", and that the same third represented most of the reported visits to CAM therapists. The discussion leads to these intriguing results:

1. As the object of the ASTSE is subtle energy, it becomes a sense in its own right.

2. The current research about subtle energy phenomena and CAM is based on research designs suited for physical research, and the basis to believe that these designs are also suited for the area of subtle energy is questionable.

3. We propose in future CAM research to trust observations made by the ASTSE. CAM therapists already do so.

4. There are no objective reasons for people without ASTSE to accept the phenomenon of subtle energy and that ASTSE represents a real sense.

Keywords: Cross-sectional study, Alternative Medicine, CAM, subtle energy, sensitivity, terminology, research

INTRODUCTION

Complementary and Alternative Medicine (CAM) encompasses any healing practice that does not fall within the realm of conventional medicine.¹ Within a Danish association composed mainly of CAM therapists a series of pilot projects clarified that the therapists had in common the claim to sense healing energies and other aspects of subtle energy that could not be measured by technical equipment, here called ASTSE for "alleged sensitivity to subtle energy".

This ASTSE was used in many ways, e.g. clairvoyance, healing, and sensing the right placing of the hands during treatment, and furthermore the therapists claimed that they could somehow control the use of subtle energy with their minds. Further, most of the therapists claimed that the key to efficiency of their methods is in the area of subtle energy. This aspect of CAM methods is often characterized as "spiritual", referring to an area of existence where matter interacts with thoughts and cannot be regarded as "dead", in the way that physical matter normally is.

Some clients were asked as well, and most of them presented the ASTSE. This coincidence raised the question of how the ASTSE is represented in the population and whether there is a relation to the use of CAM.

Therefore a cross-sectional study was performed. 171 randomly chosen persons, that could be expected to approximately depict the Danish population from 21 to 60 years of age, were interviewed on the telephone. They were asked about ASTSE and about CAM treatments that are in some way claimed to be based on subtle energy, and it was found that mainly acupuncture, zone therapy, healing and reflexology were represented. The detailed method and complete list of the questions used and the results of analysis are presented in.² Table 1 presents the questions of relevance to this paper and Table 2 presents the main results from the answers.

Table 2 presents a strong relation between the ASTSE and the use of CAM, as the group with no ASTSE comprised 64% of the interviewed persons but only 20% of the reported visits to CAM therapists. The users of CAM without ASTSE are characterized by fewer visits and less satisfaction. 36% with ASTSE corresponds to one million Danes.

This study raises the question as to why CAM is not defined on the basis that its effects are rooted in the proper use of ASTSE. But this raises the question about the true character of subtle energy. Is it nonphysical or is it physical but not measurable by physical means? We will not give an answer but choose to call it "non-physical".

The aim of this paper is to discuss the question: *How* would it influence the comprehension of ASTSE and of CAM and CAM research if they were understood on the basis that subtle energy is something non-physical and that the ability to sense it really does exist?

How is life with ASTSE?

It is useful first to have a look at life with ASTSE. An extended interview was carried out with eight females

Table 1. The relevant subset of questions used in the interviews (translated from Danish)

3	Is complementary and alternative treatment something, you are using or have used?								
4	If yes	Did it help? How many times have you had CAM treatment during the years?							
12	We have found out that almost all CAM therapists report that they can sense radiations from people healing energies and the like. Do you also have this ability?								

The presence	Number of persons		Clients of CAM therapists		Number of visits			Did it help?		No. of visits for those, it did help	
of ASTSE											
			Yes	No	Sum		Per cli-	Yes	No or	Sum	Mean per
							ent		unsure		client
Present	61	36%	45=74% of 63	1 16	2275	80%	51	40	5	2237	50
Not present	110	64%	36=33% of 110) 74	559	20%	16	23	13	521	23
Total	171	100%	81=47% of 17	1 90	2834	100%	35	63	18	2758	44

Table 2. The presence of ASTSE and its relation to the use of CAM.

and four males with ASTSE, covering their life stories and possible advantages and problems caused by the ASTSE. None of these 12 had been working as CAM therapists, and all expressed they were convinced about the real existence of subtle energy.

Eight of them believed that everybody could develop ASTSE by training. One thought that the possession of ASTSE is a matter of higher development. Another mentioned that the ASTSE made her too sensitive, and that she was regarded as a strange person. Generally, the practical aspects of the sense were appreciated, such as the ability to sense the mood of others, or whether somebody was trustworthy or not, to sense approximately who they could or confidentially speak with about their ASTSE and related matters, an ability normally classified as clairvoyance. Three of them had experienced social problems related to taboos. None of them had experienced explicit discrimination. None of them "asked for problems" by speaking about such matters to the "wrong" persons, but in answering the questions of the interviewers they showed that under safe conditions they had no reservations. Ten of them mentioned some unspecific precognition about future events, and six had experienced telepathy. Nine of

them had experienced some kind of help and guidance from the world of subtle energy, one of them as automatic writing. In all cases the abilities were used for personal purposes and were just an accustomed part of their lives.

They all kept a low profile about their ASTSE, and none of them claimed to know much about it. They all paid much attention to the quality of their experiences and were focused on avoiding illusions. The information from the interviews did not suggest the existence of different types of ASTSE, but the possibility of many ways of using it, out of which each individual only utilized a few.

DISCUSSION

A very close relation was found between the identified subpopulation with ASTSE and the use of CAM. Besides the use of CAM, this subpopulation shares some characteristic experiences and also a daily selfcensorship in speaking about it.

The concept of CAM differs very much between countries, comprising a varying number of CAM

methods not met in this study. Some of them will probably show the same close relation to ASTSE, and others will not. An interesting aim could be to identify all methods that are closely related to the presence of ASTSE and invent another name for them than "alternative".

The next question could be whether the key to efficiency for all of them is hidden within the area of subtle energy.

Under the assumption of this paper that the matter sensed by the ASTSE is non-physical, the ASTSE cannot be seen as a variant of other senses, but must be seen as an individual sense.

The accordance with a generally accepted definition of a sense must be discussed. The following statement is found in Wikipedia:³ A broadly acceptable definition of a sense would be "a system that consists of a group of sensory cell types that responds to a specific physical phenomenon, and that corresponds to a particular group of regions within the brain where the signals are received and interpreted." Disputes about the number of senses typically arise around the classification of the various cell types and their mapping to regions of the brain.

In ⁴ Taylor describes how the right half of her brain sensed subtle energy while her left half was out of order because of a stroke. Taylor reported to have sensations just as real as those from her physical senses, but due to their nature were considered as not physical. This observation could be seen as a testimony of how ASTSE could fit into the definition above as it *"corresponds to a particular group of regions within the brain where the signals are received and interpreted"*. The real connection between the sensations reported from the consciousness and the mechanisms of the brain is out of scope for this paper.

Phenomena related to ASTSE have in the western world been studied under the name of "ESP" for "extrasensory perception". Traditionally ESP research is targeted towards information of the same type as given by the physical senses e.g. remote viewing, but it can be seen from actual life experiences above that the ASTSE is a broader phenomenon. Further there is in the term "extrasensory" a denial of being a real sense, which is in contrast to what we recognize here.

Subtle energy is known from ancient India as "Prana" flowing in "Nadis" and from ancient China as "Qi" and is still debated in western science.⁵ From the same sources comes the explanation that acupuncture is based on "Qi" flowing in "Meridians". To our knowledge none of these phenomena are measurable by technical means.

Even though subtle energy is an old subject, it has no social or scientific approval in the western world. To clarify the potential social and scientific effects of an approval let us describe the two subpopulations with and without ASTSE by the viewpoints and knowledge about subtle energy that researchers and CAM therapists possess.

G1 is that majority of the population which does not have ASTSE. G1 believe in the ruling scientific research paradigm and its applications to health science, including the recognized CAM research. Members of G1 have a low frequency of visits at CAM therapists.

G2 is the subpopulation with ASTSE. A majority of them have used CAM treatments and most have experienced that it did help. G2 contains practically all CAM therapists.

THE POSITION OF G2 IN SOCIETY

The G2 members are scarcely aware of the fact that they represent a well-defined minority with common interests. Nor have they used the social power potentially implied by being a considerable number of persons.

On the contrary, it appears from the extended interviews that the members of G2 subject themselves to a daily self-censorship when in contact with the members of G1. Herein lies a recognition by each single member that members of G1 see their subtle energy experiences as nonsense or at most hypothetical, but maybe a compensating advantage is found in their ability to observe a little more. It is remarkable that this vigilance has been hiding such a large subpopulation from society and from themselves, hiding also the potential conflict therein.

CAM therapists have not been aware of the fact that G2 constitutes a well-defined target group. Fragments of a science culture older than the present health research are a living reality among the therapists, and although this ancient culture is based on the use of ASTSE, therapists are not yet aware of this being a common tool and the conceptual basis it might provide.

G2 does not have a coordinated research activity. The current CAM research is subjected to the research paradigm of G1, and G2 has to our knowledge not formulated a useful alternative research paradigm.

THE POSITION OF G2 IN RESEARCH

Susan Blackmore has studied in depth a number of representatives of ESP, especially telepathy and clairvoyance.⁶ Her own research is characterized by well-prepared studies, and she did not find any substance in ESP. Also, she has carefully monitored the apparently successful works of others concerning ESP, and found a number of logical errors, conjuring tricks and cheating.

Based on the results of Blackmore, G1 can consider the experiences of the G2 members as illusions and gossip, not the least in ⁷ where she demonstrates that people believing in ESP phenomena are less good than others at estimating probabilities correctly.

The G2 members must think that something must be basically wrong in the Blackmore results, because as the present study shows, examples of telepathy, clairvoyance and inner help are common experiences for members of G2. Their experiences are natural events in their daily lives, and they can therefore not be repeated in the classical way, which make them unsuitable for entering in the formal schematized studies of Blackmore. G2 will see those studies of Blackmore as depending on a level of systematization that only physical matter can comply with, while events in subtle matter cannot, because they to a higher degree are expressions of life and intelligence. Blackmore supports them to a degree in this opinion by recognizing that in parapsychology there is a problem with repeatability.⁸

In the foremost documentation of medical research, the Cochrane library, five reviews on homeopathy and 36 on acupuncture were found.⁹ No reviews about zone therapy, healing, reflexology, cranio-sacral therapy or clairvoyance were found. Only one review about homeopathy and eight about acupuncture showed evidence or insufficient evidence of effect. In contrast to this, table 2 shows that almost all CAM users from G2 reported an effect.

G1 and G2 will probably agree about the fact that if the information from table 2 also is found in other countries, the research on the effect of CAM should be based on members of the G2 subpopulation. This study shows that doubt can be raised as to whether the effect of CAM treatment on patients from G1 is just as good as on patients from G2.² The ethics in allocating patients from G1 to CAM research can therefore be questioned too, as in a randomized procedure they do not choose by themselves, but in society they normally choose not to use CAM.

This criterion has not been known and is therefore not taken into account in the projects reported in the Cochrane reviews. Consequently it could be suspected that the results at hand present a bias towards no effect.

When G1 researchers plan randomized, controlled trials with the most possible blinding, the G2 experts will warn against this strategy, because this research design, just as that of Blackmore, is developed for physical conditions.

Consequently G2 experts have two reasons to believe that it is too seldom that this research ends up with

positive results, namely the selection biases and the repeatability problems.

It is apparent that G1 and G2 are facing a serious communication problem. A member of G2 can illustrate it with this scenario: If most people were deaf, and some deaf researchers decided to study whether there is any substance and usefulness in the claim from some people that they can hear, what would the likelihood be for obtaining a meaningful result? Hardly considerable, because their whole world of concepts would be built on their lives as deaf. The values in the form of the language, culture and experience that the hearing might have established would also not be understandable, and therefore they would be impossible as subjects of research.

G1 would hardly approve the relevance of the scenario, but G2 would argue that the G1 researchers are up against a similar but more difficult situation when they want to study CAM methods that are based on processes in the world of subtle energy. The deaf researchers would have the advantage that hearing is a phenomenon in the physical world and that their research methods might therefore be conceptually sufficient, and they might even have measuring instruments that could measure e.g. air pressure. These advantages are not available to the G1 researchers, and their situation is therefore even worse than that of the deaf researchers in the above scenario.

One of the consequences of the communication problem is that G1 researchers in their classical research designs have not utilized the huge amount of information about the world and being of subtle energy which can be found in the so-called spiritual literature. Without ASTSE they cannot relate to it, just as the deaf researchers cannot relate e.g. to music. In contrast many members of G2 do read spiritual literature.²

But how could G2 do it better? A first step could be to apply observations made by the ASTSE in future work. Most CAM therapists relate that they use such observations daily. Unfortunately G2 lacks both a proper theory of science and an organization. Could a set of concepts with the ASTSE as starting point contribute to a fruitful paradigm of research? Already some research about the role of consciousness provides a hope for the creation of such a new level of research.¹⁰

G1 and G2 do not agree in this round, but about CAM the discussion is settled by the fact that it is the G2 members who are the users of CAM, and they will rely on their own G2 viewpoints whatever the deeper truth might be.

CONCLUSION

This paper is based on the assumptions that 1) subtle energy is something non-physical and that 2) the ability to sense it is real. Under these assumptions the ASTSE must be accepted as a sense in its own right.

There are no objective reasons for people without ASTSE to accept the phenomena subtle energy and the ability to sense it, or to accept the CAM methods said to be based on them, but when so many claim to have ASTSE, and thereby recognize these phenomena, there is no sense of reality for them not to take cognizance of this, whatever the deeper truth might be.

The current research about ASTSE (ESP) and CAM is performed on the premises of the physical world, although there are no grounds to believe that these premises also should be usable in the world of subtle energy. The results of this research are in most cases not in accordance with the experiences of people with ASTSE.

It is only natural that there is a communication problem between people without ASTSE and people with ASTSE. Therefore it is also natural that unproductive results are obtained when the firstmentioned make research in the matters of the lastmentioned. Future research in ASTSE and CAM must naturally be connected with the users and build on their reality, so that the ASTSE will be applied as a useful tool for observation and intervention. CAM therapists already do so.

ACKNOWLEDGEMENTS

Support has been granted from ViFAB – the Danish Knowledge and Research Center for Alternative Medicine. The sponsor has not been involved in the research or publication process.

CORRESPONDENCE

Mogens Ehrich, m.sc. PhD Mollegaardsvej 3, DK 4320 Lejre, Denmark Telephone (45) 31797731, (45) 46497731 e-mail: mogens.ehrich@gmail.com

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