BODY HARMONIZATION[©]: Using Body Wisdom To Evaluate & Address Anxiety & Depression, In a Select Group

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When all your energies are brought into harmony, your body flourishes. And when your body flourishes, your soul has a soil in which it can blossom in the world. These are the ultimate reasons for energy medicine—to prepare the soil and nurture the blossom.

—Donna Eden

This study examined changes in levels of anxiety and depression, using a selection of specific energy balancing techniques called Body Harmonization[©]. A protocol was followed for each individual using muscle testing (kinesiology). The study consisted of a 2-period, 2-intervention crossover design. In Period 1, the State-Trait Anxiety Inventory and the Zung Self-rating Depression Scale were administered to 86-subjects who had previous experience with a specific energy balancing technique. The dependant measurements were completed before and after the interventions, as well as one-week post-session. Group 1 received Intervention A, a Body Harmonization energy balancing session. Group 2 received Intervention B, an Education Session. After an eight-month period, 74 subjects returned and the dependent measurements were once again completed. In Period 2, Group 1 received Intervention B, and Group 2 received Intervention A. Body Harmonization[©] intervention yielded statistically significant differences in lowering state and trait anxiety, and depression. Body Harmonization[©] scores were lower relative to Education Session scores for depression and remained stable over a period of at least 8-months (p < 0.001). Additional findings also are presented. Implications and future research recommendations are included.

CHAPTER 1—Literature Review and Problem Overview. The literature review chapter includes a statement of the problem, a review of conventional as well as complementary therapies for anxiety and depression, their efficacies; and the research question. Statement of the Problem. Depression and anxiety are pervasive problems in the United States. [Lifetime prevalence of depression for women 10-35%, men 5-12%; and of anxiety 5% (DSM-IV); with an economic burden of \$42 billion in 1999 (Goldberg 1999)]. Current treatments often include the use of pharmaceuticals, which can have undesirable side-effects (Health Canada 2003) and psychotherapy, which can be time consuming and thus costly. Interventions which do not have undesired side

effects and are efficient as well as inexpensive to administer, with longevity are needed to be evaluated for efficacy.

Research Question. Will the measurable levels of anxiety and depression in the participants receiving Body Harmonization[©] as an intervention, decrease significantly as determined by the STAI and SDS scores, relative to subjects receiving "education," alone?

CHAPTER 2—Methods. The subjects included 84 adults who had received an energy balancing procedure called "laterality" by students or practitioners using Biocomputer Operating SystemTM, a type of kinesiology. All were native speakers of English.

Measures. 1) State-Trait Anxiety Inventory (STAI) Form Y and 2) Zung Self-Rating Depression Scale (SDS)

MATERIALS—Body Harmonization Intervention. *Filters:* Filters consisted of a black rubber holder with 2 clear plastic disks in the centre. These disks housed a piece of homoeopathically potentized filter paper which contained energetic frequencies representing the vibration of what was tested (e.g. neurotransmitters, hormones, glands, immune system components). They were placed on the body. If the subject's arm muscle weakened, the body indicated that particular filter was a part of the program in need of balance.

Flower essences were offered vibrationally with only a verbal invocation as indicated by the muscle testing protocol. Massage table for the subject to lay on during the energy balancing session.

Education Session. Materials included diagrams of flowcharts, dowsing rods, and a massage table.

PROCEDURE. The study consisted of a 2-period, 2-intervention crossover design. In Period 1, STAI and SDS instruments were administered to 86-subjects who had previous experience with a specific energy balancing technique. The dependant measurements were completed before (O_1) and after (O_2) the interventions, as well as one-week post-session (O_3) . During Period 1, Group 1 received Intervention A, a Body Harmonization energy balancing session according to the protocol outlined in the Appendices. After an initial interview in both groups, the subjects in Group 1 were asked to lie down on a massage table and point to where sensations were felt in the body. A decision tree in the form of a flowchart (Figure 1) served as a guide. As the subject touched the area, the principle investigator tested the subject's arm to identify filters needed, and the energetic causes according to the flowchart, including

Table I					
Summary of Trait & SDS Significant Values for Paired Sample t-tests					

Group 2

Period 1	Body Harmonization [©]		Education Session	
O_1 to O_2	p < .05	p < .05	NS	NS
O_1 to O_3	p < .001	p < .001	NS	NS
	Group 1 Group 2		ір 2	
Period 2	Education Session		Body Harmonization [©]	
O_4 to O_5	p < .05	NS	p < .01	NS
O_4 to O_6	p < .01	NS	p < .001	NS
8 Months	Significance Over Time			
O_1 to O_4	NS	p < .01	NS	NS
O_1 to O_6	p < .001	$\hat{p} < .001$	NS	NS
O_3 to O_4	NS	NS	NS	NS

Group 1

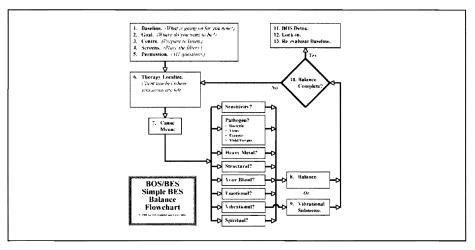


Figure 1. Body Harmonization[©] Flowchart.

emotional concerns found by muscle testing through the Emotional Meridian-Organ Chakra Connection Chart[©] (EMCC[©]). Balancing was achieved using tapping, plucking, and "vibrational infusion" of flower essences. Group 2 received Intervention B, an Education Session about energy fields of the body and a description of the Body Harmonization[©] protocol. After an eight-month period, 74-subjects returned and the

dependent measurements were again completed before (O_4) , after the interventions (O_5) , as well as one-week post-session (O_6) . In Period 2, Group 1 received Intervention B, and Group 2 received Intervention A.

CHAPTER 3—Results. State Anxiety. This research suggested that Body Harmonization[©] does help State anxiety to decrease immediately after the intervention, and one-week afterwards. The improvement in State anxiety after a Body Harmonization[©] session was not stable over time. This is consistant with what is known about State anxiety. State anxiety is influenced by stress, it does not remain stable (Spielberger 1983). State anxiety did not improve with an Education Session.

Trait Anxiety. This research suggested that Body Harmonization[©] did help Trait anxiety to decrease (Table 1). Trait anxiety was improved with Body Harmonization[©] alone and further strengthened when followed with an Education Session. Trait anxiety is not influenced by short term stress, thus is more stable and more difficult to change (Spielberger 1983).

Depression. The effect of Body Harmonization[©] on depression was the most powerful finding in this particular study (Table II). The findings were suggestive that Body Harmonization[©] does help depression to improve, remaining stable for more than 8-months. An Education Session alone did not improve the symptoms of depression. However, when it followed Body Harmonization[©], it supported the improvement. Further research should be directed towards discovering how long this improvement will hold, as the current study did not investigate past the 8-month post-session period, (a long period of time.)

CHAPTER 4—Discussion. In addition to a discussion of the results, this chapter includes a comparison of Body Harmonization[©] with Reiki, Therapeutic TouchTM, and Inner CounselorTM modalities of energy medicine.

CONCLUSION. According to the results of this research, Body Harmonization[®] suggested to be a very powerful intervention. The hypothesis was upheld for both anxiety and depression. The measurable levels of anxiety and depression did significantly decrease as determined by the STAI and SDS instruments. This research strongly suggested that a single 45-minute session of the Body Harmonization[®] intervention affected depression positively and this affect remained stable for at least eight months.

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