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Nurs Sci Q 2009; 22; 250

DOI: 10.1177/0894318409337014

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Reiki and Changes in Pattern Manifestations

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The purposes of this qualitative research study were to describe the changes in pattern manifestations that individuals experienced associated with receiving Reiki, and to present the theoretical understanding of these changes. The unitary field pattern portrait research method was utilized because it was ontologically, epistemologically, and methodologically consistent with the science of unitary human beings. Reiki was found to be associated with changes in awareness from dissonance and turbulence to harmony and well-being by helping individuals knowingly participate in actualizing their own capacities for healing. Reiki was found to be an appropriate voluntary mutual patterning nursing modality.

Keywords: *pattern manifestations; Reiki; Rogers*

Reiki is a non-invasive healing modality that has been appropriate for use by nurses. Reiki has been used as a stand-alone treatment method or as an adjunct to traditional treatments, and has been used for general health improvement as well as for specific ailments. The ability to do Reiki results from receiving an attunement. Both attunements and techniques are passed down through lineages, from master to student.

The term Reiki has generally been used as a noun. As a noun, it has referred to the energy or frequencies of energy that have been used for healing. From the perspective of the researcher's training as a Reiki master/teacher, Reiki has been understood to be a specific kind of energy or frequencies of energy that have been abundant and universal, and as such, could be channeled through the practitioner to the client for the purpose of healing.

While there has been increasing interest in complementary and alternative healing modalities that were reflected in the professional literature, there was a significant gap in the literature regarding nursing studies involving Reiki that were grounded in nursing science. In addition, not enough qualitative studies had been done to understand the richness and depth of the various experiences that might be associated with receiving Reiki, and specifically, what changes, if any, individuals who received Reiki were experiencing. The purposes of this unitary field pattern portrait (UFPP) (Butcher, 1994) study were to develop a descriptive portrait of the changes that individuals were experiencing in their health related to receiving Reiki and then to elevate the

results to the level of theory based upon the science of unitary human beings (SUHB) (Rogers, 1970). The UFPP research method was chosen because it was directly derived from and was ontologically and epistemologically consistent with the SUHB (Butcher, 2006). The UFPP has also been recognized and heralded by nurse scholars as an appropriate research method that was sound and congruent with the SUHB (Barrett, 1998b; Malinski, 2002; Parse, 2001; Phillips, 2000). In the terminology of the SUHB, the research questions were as follows: (a) What were the changes in pattern manifestations (experiences, perceptions, and expressions) of unitary human beings who received Reiki; and (b) what were the unitary field pattern portrait and the theoretical field pattern portrait of the changes in pattern manifestations of unitary human beings who received Reiki?

Conceptual Framework

Rogers' (1970) SUHB was chosen as the conceptual framework to guide this study because it was specific to nursing and conceptualized the human being as an energy field, integral with its own environmental energy field. Reiki was a healing modality that involved the patterning of energy fields for the purpose of human betterment and well-being. A brief discussion of the postulates and principles of the SUHB follows.

Rogers (1994b) identified four postulates as being fundamental to the SUHB: energy fields, openness, patterning, and pandimensionality. *Energy field* was defined as

“the fundamental unit of the living and non-living. Field was defined as a unifying concept. Energy signified the dynamic nature of the field (Rogers, 1994b). *Openness* referred to a universe of open systems which explained “the infinite nature of energy fields, how the human and environmental fields are integral with one another, and that causality is invalid” (Rogers, 1992, p. 30). *Pattern* was defined as the “distinguishing characteristic of an energy field perceived as a single wave” (Rogers, 1992, p. 29). *Pandimensionality* was defined as a “non-linear domain without spatial or temporal attributes” (Rogers, 1992, p. 29). In their irreducible unity, these postulates form reality (Malinski, 2006). The boundary between the human energy field and the environmental energy field is perceptual, and “the energy from each field flows continuously through the other in an unbroken wave” (Malinski, 2006, p. 163).

Change was explained by Rogers’ (1992) principles of homeodynamics. Continuous changes in longer and shorter wave patterns and lower and higher wave pattern frequencies described the way change occurred (Malinski, 2006) in the principle of resonancy. Continuous, innovative, unpredictable, and increasing diversity in pattern described the nature of change (Malinski, 2006) in the principle of helicy. Finally, the continuous, mutual, and simultaneous interaction between human and environmental energy fields described the context within which change occurred (Malinski, 2006) in the principle of integrality.

The intent of nursing practice based on the SUHB has been to promote the well-being of the human and environmental energy fields (Samarel, Fawcett, Davis, & Ryan, 1998), as desired and valued by the client. Rogerian nursing practice methodology has involved pattern manifestation knowing and appreciation, and voluntary mutual patterning (Barrett, 1998a; Butcher, 2006; Cowling, 1997). The manifestations of pattern that have occurred in the forms of experiences, perceptions, and expressions have given rise to pattern knowing (Cowling, 1990), and appreciation (Cowling, 1997). Voluntary mutual patterning has involved the nurse facilitating the actualizing of the client’s potentials for health and well-being by patterning the environmental field (Barrett, 1998a).

Related Literature

The literature reflected anecdotal reports of Reiki being used successfully in hospital settings (Sawyer, 1998; Scales, 2001), yet relatively few studies have been conducted in controlled settings. Reiki has been reported to relieve pain (Astin, Harkness, & Ernst, 2000), decrease stress symptoms (Shore, 2004; Wardell & Engebretson,

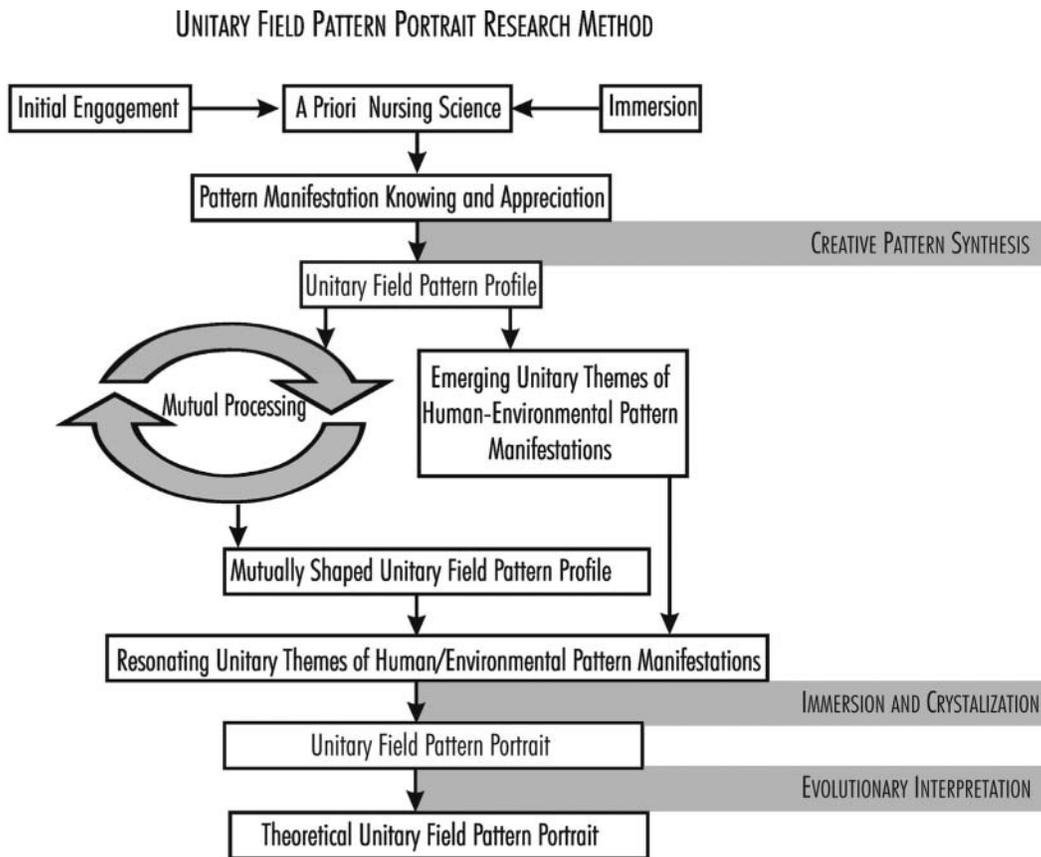
2001), and generate paradoxical experiences (such as feeling opposite sensations simultaneously) and liminal states of consciousness in subjects (Engebretson & Wardell, 2002). Reiki has been found to be dynamic, incorporating subtle fluctuations and variations that have made it difficult to measure outcomes (Engebretson & Wardell). At the time this UFPP study was conducted, the literature reflected only two studies using Reiki that were conducted by nurses. Mansour, Laing, Leis, Nurse, and Denilkewich (1998) did a qualitative study that did not use an explicit nursing conceptual framework. They found that Reiki affected healing on physical, psychospiritual, and social levels. The one quantitative nursing study on Reiki was grounded in the SUHB (Thornton, 1996a, 1996b). More recently, Vitale (2007) conducted an integrative review of the literature on Reiki. While major gaps existed in the literature, in part related to the difficulty in conducting rigorous studies involving Reiki, perhaps most significant has been the fact that no harm has been reported related to receiving Reiki.

Methodology

The UFPP method is a new and emerging interpretive approach to inquiry in the hermeneutic-phenomenological tradition with the purpose of creating a unitary understanding of the dynamic kaleidoscopic and symphonic pattern manifestations that emerged from the pandimensional human/environmental field mutual process of a phenomenon associated with human betterment and well-being. The method consists of 8 essential facets: (a) initial engagement; (b) a priori nursing science; (c) immersion; (d) manifestation knowing and appreciation; (e) unitary field pattern profile; (f) mutually shaped unitary field pattern profile; (g) the unitary field pattern portrait; and (h) the theoretical unitary field pattern portrait (Butcher, 1998). The UFPP (refer to Butcher, 2005, p. 295) also included 4 essential processes: (a) creative pattern synthesis; (b) mutual processing; (c) immersion and crystallization; and (d) evolutionary interpretation (Butcher, 2005).

For this study, the researcher contacted a local support group of Reiki practitioners statewide and presented the study proposal at a monthly meeting, receiving full endorsement by all present. A brief explanation of the study was provided to the Reiki masters so they could discuss the study with their clients. When clients expressed interest in participating in the study or in receiving more information, the clients contacted the researcher. The researcher then discussed the study, and when appropriate, set up an appointment that was mutually satisfactory between the Reiki master, the participant, and the researcher. Reiki was conducted in the offices of the

Figure 1
Model of Unitary Field Pattern Portrait Research Method



Note: From "Unitary Field Pattern Portrait Research Method: Facets, Processes, and Findings," by H. K. Butcher, 2005, *Nursing Science Quarterly*, 18, p. 295. Copyright 2005 by SAGE Publications.

specific Reiki masters who participated in this study. Prior to receiving Reiki, full and informed consent was obtained. Each participant chose a pseudonym that was used throughout to maintain confidentiality. Each participant received one session of Reiki which lasted about 1 hour. During the session, clients laid on a massage table, fully clothed. The Reiki masters placed their hands on various parts of the clothed body for 1 to 3 minutes, using intuition to sense when it was time to move their hands to the next part of the body. Typical hand placements included the forehead, top of head, over the ears, over the eyes, over the neck, on the sternum, over the abdomen, the thighs, knees, ankles, and bottoms of feet. For the purposes of this study, hand placements were not standardized. Immediately following the Reiki session, the researcher met again with the participant to engage in pattern manifestation knowing and appreciation. All interviews were audio-taped. A professional medical transcriptionist was hired to transcribe the interviews.

The researcher read through the transcripts at least twice to review them for accuracy. Creative pattern synthesis was used to describe each participant's experience of Reiki, and resulted in the rich and vivid descriptions of the unitary field pattern profiles. The significant pieces of text were identified, cut, pasted, and rearranged so that a rich narrative arose in the participant's language. This profile was then shared with the respective participant for comments, revisions, and validation (Butcher, 1998).

After conducting the second participant's interview, shaping his individual profile, and receiving his validation, the researcher synthesized the two individual profiles together to begin the shaping of the mutual unitary field pattern profile. Mutual processing, the second process of synthesis in the UFPP, was consistent with Rogers' mutual process epistemology, thereby enhancing knowing participation in change by providing a means for participants to share an understanding of the nature of

the experience from the perspective of the other participants (H. K. Butcher, personal communication, February 8, 2006). By continuously sharing the content between participants, integrality was strengthened (Butcher, 2005). The mutually shaped profile also allowed the researcher to recognize when pattern repetition across profiles had occurred, thus determining sample size (H. K. Butcher, personal communication, February 8, 2006). This process continued until pattern repetition occurred across participants, ending data collection.

After identifying the emerging unitary themes of human-environmental pattern manifestations (emerging themes) in each pattern profile, the themes were sorted into common categories, creating the resonating unitary themes of human-environmental pattern manifestations (resonating themes). Each participant's list of emerging themes was taped in a row to a large wall in the researcher's home, participant by participant, so that all the themes could be worked with as a whole. The initial names of these categories were listed at the top of each participant's list of emerging themes, as they applied. In this way, each emerging theme was eventually placed into an initial category, and each participant's list of emerging themes also contained a brief list of the categories represented in that profile. Then, the researcher wrote out each category by hand, followed by the specific emerging themes of each participant for that category. Again, the pages of each category with its themes and the pseudonym of the participant who said it were posted on the wall so the material could be worked with as a whole. The fit of each emerging theme for the specific category was verified. Duplications were eliminated and clarification sought so that each category was indeed unique and captured the meaning identified by the researcher for that category. Further understanding came about from the researcher's ongoing immersion into the SUHB literature during this process.

Immersion and crystallization entailed lengthy periods of time during which the researcher dove into and was completely immersed in the text, while remaining open to intuition, tacit knowing, and creative insights (Borkan, 1999). The researcher compared each resonating theme to make sure it was found in most of the individual profiles. Finally, the resonating themes were synthesized into one descriptive portrait called the unitary field pattern portrait (Butcher, 2005). The unitary field pattern portrait was more aesthetic than prose or scientific writing. This process fulfilled the first purpose of this study and described the changes in pattern manifestations of unitary human beings who experience Reiki.

The unitary field pattern portrait was interpreted from the perspective of the SUHB using the synthesis process

of evolutionary interpretation to create a theoretical unitary field pattern portrait of Reiki. The purpose of the theoretical portrait was to explicate the theoretical structure of Reiki from the perspective of Rogers' nursing science. The theoretical portrait was expressed in the language of Rogerian postulates, principles, and concepts, thereby lifting the unitary field pattern portrait from the level of description to the level of unitary science (Butcher, 1998).

Scientific rigor was maintained utilizing Lincoln and Guba's (1985) criteria for trustworthiness, which included criteria for judging credibility, confirmability, dependability, and transferability. Trustworthiness involved the methodological decisions made throughout the processes involving pattern synthesis. For ethical issues, approval was obtained from the Committee on the Protection of Human Subjects for the conduct of this study, and permission was obtained from the Vice Provost and Dean of Graduate Studies to proceed with this research. Butcher (1998) developed authenticity criteria specific to qualitative research conducted guided by the SUHB.

Findings

Sample

Intensity sampling, a form of purposeful sampling, was used. As such, samples tended to be small, yet focused in-depth on the phenomenon of interest (Butcher, 1998). There were six Reiki masters involved in the study. Participants 1 (Nina), 2 (Carlos), and 5 (Hopkins Nor) had the same Reiki master. Participants 3 (Easy Rider) and 4 (Claire) were both Reiki masters and did a trade with each other. Participants 6 (Zayne) and 8 (Sally) were also both Reiki masters, doing Reiki on each other, and each participated in the Reiki given to participant 7 (Lisa). Finally, participants 9 (Tres Cool), 10 (Gabriella), and 11 (Joey) all had the same Reiki master. In total, there were 11 participants.

Participants ranged in age from 13 (Tres Cool) to 65 (Lisa). Six of the 11 participants were between the ages of 50 and 60 years old, one was 29, one was 30, and one was 46. Nine of the participants were women and 2 were men (Easy Rider and Carlos). Ten participants were Caucasian, and 1, Carlos, was Hispanic. Nina had never received Reiki before. Tres Cool's mother was her Reiki master. Two of the participants had major health problems. Gabriella had been diagnosed with breast cancer one year earlier and had chosen not to pursue traditional medical treatment. Lisa had previously sustained a gun shot wound and had significant residual damage to her left arm, as well as many emotional scars.

Exemplar Unitary Pattern Profile

Nina's unitary field pattern profile is presented here as an example. She was the first participant, and had never received Reiki before. Nina's profile was chosen as the exemplar profile because of the richness of detail in it. Nina validated her profile with no revisions.

Nina's Unitary Field Pattern Profile

Everything became unclear, almost like I got into my head more. I felt a quickening, an embarrassment of exposure, and I tried to calm down. Anxiety arose for a brief moment, and then went away. Something did WOW. My body jolted, then it was calm. My mind slowed down and I started to leave my head.

It went from my thinking head to just awareness of touch. I don't recall thinking anymore. Maybe my mind was in neutral. I noticed the transitions of my Reiki Master's hands from one part of my body to another. It just became touch, nurturing touch, warm and cool, a security feeling. I felt held and warm, in a quiet space. I slowed down.

Eventually I lost sight of all the transitions. I was less aware of what my Reiki Master was going to do next. There was a loss of time frame. Everything else was tuned out. It was a feeling of sinking and dissipating, a deepening. The anxiety feelings went with not thinking consciously. That appeared in synch with the feeling of soothing and clearing. I felt light, smooth, calm, and clear. It was a clearing balance, a secure balance, but sinking still. I couldn't tell where my Reiki Master was anymore. I didn't have a sense of my body. There wasn't me in my skin anymore. There was nothing tangible, a loss of boundary. I just let myself go, and everything melted together, and allowed me to just be. I was engulfed in something. There's something there. It just happened. It was somewhere inside of something but nothing. I think there's just energy, just I have no words for it. I cannot get the words for it. I liked it. It was safe.

I could sense muscle movement—lateral movement. I felt things moving inside of me. It felt like movement that was deep, yet I couldn't understand what I was moving in. I was part of something, but was constantly able to move through it. I was in good hands. I was part of another human being for an hour. Questions lost their significance; they didn't need to be anymore. It was something special in a different sense. There was a whole feeling of being connected.

I moved from feeling light in my body, no pains, no aches, no heaviness, no feeling of muscle, to becoming

more aware of it. I took a big breath in. then everything came back again. I felt a need to recognize my body, and to recognize my Reiki master. I was slow, dreamy, and not very alert. I had been thirsty and hungry, but I'd forgotten those things. I can't recognize what happened to me, but it's important. Nothing was out of place. There's a place for everything, but it's as if it's together to make a whole. It was a powerful moment. I felt more grounded. I felt it was important, significant. Something did happen. Whatever was going to be, that's what it was. Where I was right then was fine. I would definitely put myself in this place again, wherever this place is. How has this opened me up?

Table 1 contains the emerging themes for Nina categorized by resonating theme.

Mutually Shaped Unitary Pattern Profile

A portion of the mutually shaped pattern profile, which reflected the synthesis of all 11 of the individual participants' profiles (specified in first person) is:

Prior to the session, my head was very busy. I had a headache. I was holding a lot of tension and resistance due to some stuff that I was going through. I noticed all the areas of little pains that I forget about. The pain can be incredible. Without Reiki, I wouldn't be able to tolerate the pain. When I'm feeling down, I feel heavier, like I'm being weighed down. Suddenly, everything became unclear, almost like I got into my head more. I felt a quickening, and an embarrassment of exposure. There was a spike of energy and restlessness, and then it faded out. That restlessness can feel very anxious, like wanting to get up and go, not wanting to be static, muscles wanting to move, and thoughts really racing. My mind was like a chatting monkey. It didn't last very long. I tried to calm down and everything went back down to baseline.

Then, my level of energy felt like it went up again. I felt hyperaware, and hyper alert, feeling very much in the room, eyes open, searching, looking at the ceiling. I could have sat right up and BOOM, energy. I felt more energized, like I could have shot out. It wasn't anxiety or anything. It wasn't unnerving. It was just my mind: no psychological arousal. My mind raced a little bit, but then slowed back down again. To have that flip-flop, it was interesting. I hadn't really expected that. I observed the session in a way. It was like taking a tour of my body.

Table 1
Nina's Emerging Themes Categorized by Resonating Themes

Resonating Themes	Emerging Themes
Bearing the burden of hardship, distress suffering, and sorrow	Everything became unclear; I got into my head more; Embarrassment of exposure; I tried to calm down; Anxiety arose for a brief moment; Thirsty and hungry
Simultaneous perceptions of Reiki as warm and cool, neutral and intense, dark ice, tingling, warm thick liquid	Nurturing touch; Warm and cool; A security feeling; I felt held; In a quiet space; Feeling of sinking; Deepening; Feeling of soothing and clearing; Clearing balance; Secure balance; It was something special in a different sense
Perceptions of speeding up and slowing down	Felt a quickening; Something did WOW; My body jolted, then it was calm; Mind slowed down; I started to leave my head; I slowed down; Moved from feeling light in my body; No aches, no pains, no heaviness, no feeling of muscle; Everything came back again; Felt a need to recognize my body; Felt a need to recognize my Reiki master; Slow
Transitioning awareness	I lost sight of all transitions; Less aware of what my Reiki master was going to do next; Loss of time frame; Let myself go; Dreamy; Not very alert
Stillness of mind Past and future melting into the timeless now	I don't recall thinking anymore; My mind was in neutral From my thinking head to just an awareness of touch; Everything else was tuned out; Allowed me to just be; There's just energy
Heightened awareness	Just became touch; Sinking still; Didn't have a sense of my body; Wasn't me in my skin anymore; Nothing tangible; Loss of boundary; Melded into; Everything melted together; Engulfed in something; There's something there; Inside of something but nothing; Sense muscle movement; Lateral movement; Felt things moving inside of me; Felt like movement that was deep; I couldn't understand what I was moving in; Part of something but constantly able to move through it; I was part of another human being for an hour; Can't recognize what happened to me; It's important, significant; Something did happen
All embracing embodiment of integrated awareness, harmony, and health	I felt light, calm, clear; I liked it; It was safe; I was in good hands; Questions lost their significance; Whole feeling of being connected; Nothing was out of place; A place for everything, but it's as if it's together to make a whole; Powerful moment; Felt more grounded; Whatever was going to be, that's what it was; Where I was right then was fine; I would definitely put myself in this place again, wherever this place is

Let's say you are upset and holding all this anger and frustration and sadness. You need to release it, but instead, hold it. As a result, you have knee problems and can't participate in sports, and maybe need to use a knee brace. As a result of the Reiki session, you can run and play sports. One session isn't going to heal all that anger, but it's definitely going to help you on your way. After one session, I don't think it can ever completely go away, but I think over time and always working on it, and trying to work through the root of it, I think it will definitely go away.

Then, something did WOW. I felt a big amount of energy come on me. It was a big swish, and then I was aware of the heat. The energy feels like penetrating heat, like a nurturing, warm, flowing, thick liquid, or more of an insight, or like a light inside. My body jolted, then it was calm. My energy felt like it went back down. My whole system slowed down. My mind slowed down, my brain waves slowed down, kind of faded, and were drifting back down to be really calm. There was a kind of change in my consciousness. I started to leave my head. The mind chatter stopped. I wasn't so wrapped up

in what was going on in the room or what was happening to me. I wasn't so preoccupied. I was just being there and letting go. I felt more in the room. I felt more present. There were shifts of emotion. It was like the middle place of twilight: that in between place where I still have awareness of myself but I'm not as aware as if I'm up and around. It's the type of awareness I have where I'm just mildly aware before I pass absolutely into dreamland. It's also somewhat similar to what happens when I meditate. Reiki has more of a physical component than meditation. I had a free stream of consciousness, simply thinking as opposed to thinking about something, or thinking that was goal directed. My thoughts were not as concerned with labeling, and not feeling any need to focus on anything. My thoughts weren't very profound. My thoughts were adrift, completely abstract and inane, and then they were gone. My analytical mind turned off. It's the analytical sense of self that defines my boundaries of self. I really let go inside of me, like a falling down to that place where there's a loss of boundary in terms of my analytical mind. There was this kind of release where that boundary was gone. I felt a hyper-deep relaxation.

The mutually shaped pattern profile represented an emerging field pattern for all the participants involved in this study.

Resonating Unitary Themes of Human-Environmental Pattern Manifestations

The resonating themes that became apparent from the synthesis of the emerging unitary themes were as follows: (a) bearing the burden of hardship, distress, suffering, and sorrow; (b) simultaneous perceptions of Reiki as warm and cool, neutral and intense, dark ice, tingling, and warm thick liquid; (c) perceptions of speeding up and slowing down; (d) transitioning awareness; (e) stillness of mind; (f) past and future melting into the timeless now; (g) heightened awareness; and (h) all embracing embodiment of integrated awareness, harmony, and health.

An in-depth discussion of the fourth resonating theme of transitioning awareness follows as an example of the data processing that occurred from the initial interview through to the final theoretical portrait. In this way, the participants' original words can be followed from the individual profile through to the theoretical portrait.

The fourth resonating theme was the combination of four separate preliminary themes: twilight, letting go,

change in time, and losing track of one's Reiki master's hands. Individually, these four preliminary themes did not occur in enough of the individual profiles to represent a universal theme. Once the researcher was able to let go of her attachment to these preliminary themes, and elevated the level of abstraction of her thinking, it became clear that the universal theme represented in these preliminary themes was that of a transitioning awareness. Transitioning implies a starting place or state of being, a different ending place or state of being, and the process of getting from one to the other. The awareness of each participant had indeed transitioned significantly, from that of ailments to that of health and harmony. While Reiki has typically been understood to bring about such changes from states of ailments to states of health and harmony, the significance and stages of this transitioning awareness have not been reported in the literature. Engebretson and Wardell (2002) reported that participants experienced changes in their states of awareness that included changes in their orientation to space, self, time, temperature, and awareness of ambient sounds. Bullock (1997) described "Reiki slumber" (p. 31) as the experience of being lulled into a peaceful and secure mental and emotional space while remaining mentally alert. These were the only references found in the literature that hinted at describing this transitioning awareness.

Nina reported letting go in mind and body, feeling less alert, and experiencing a loss of time frame. Carlos described letting go and still being in his body, the middle place of twilight where he is mildly aware before passing into dreamland, the misconception of time, and not being able to tell where his Reiki master's hands were. Claire described little pieces of losing awareness, and that it is easier for her to relax and let go now than it used to be. Easy Rider described not feeling anything after the session in terms of not being aware of his body, his body's pain, or his mind. Hopkins Nor reported letting go of her body, and feeling right on the edge of falling asleep. Lisa described experiencing the in-between place like sleep. Sally reported feeling like there was a weight on her back, but there was nothing there. Sally's Reiki master's hands were placed on another part of her body at that moment. Tre Cool stated she was not asleep but not conscious, and also was not aware of where her Reiki master's hands were. Gabriella described the perception of not being able to tell what time it was. Zayne and Joey did not report experiencing any of these perceptions. However, the researcher believed it was her lack of experience in interviewing that resulted in not uncovering Zayne and Joey's experience of a transitioning awareness.

The following portrait represented a synthesis of the resonating unitary themes. *Reiki is pursued to seek relief from bearing the burden of hardship, distress, suffering, and sorrow; is simultaneously perceived as warm and cool, neutral and intense, dark ice, tingling, and warm thick liquid; and perceived as speeding up and slowing down rhythms unfolding into a transitioning awareness that further unfolds into a still state of mind where past and future melt into the timeless now of a heightened awareness that finally unfolds into an all embracing embodiment of integrated awareness, harmony, and health.*

Theoretical Unitary Field Pattern Portrait

The theoretical unitary field pattern portrait was as follows: *Reiki is knowingly participating in change to seek relief from the manifestations of dissonant field rhythmicities experienced as bearing the burden of hardship, distress, suffering, and sorrow; integrality perceived simultaneously as warm and cool, neutral and intense, dark ice, tingling, warm, thick liquid patterning; resonance experienced as speeding up and slowing down rhythms; helicy experienced as a transitioning awareness unfolding into a pandimensional awareness of stillness of mind where past and future melt into the timeless now of a heightened awareness; and helicy unfolding as manifestations of continuously innovative, creative, diverse, unpredictable, and harmonious field rhythmicities, experienced as the all-embracing embodiment of integrated awareness, harmony, and health.*

Conclusions

Human beings seek healing modalities like Reiki when they are experiencing dissonant (Bultemeir, 1993) and turbulent (Butcher, 1993) energy field patterns that are perceived as undesirable or uncomfortable. As Boguslawski (1990) stated, "releasing, transforming, and transcending one's present energy field pattern are changes that portend new manifestations of health" (p. 83). For the participants in this study, the experience of Reiki was associated with a transition of awareness to that of harmony (Carboni, 1995) and well-being. Transitioning in awareness in this way is a pandimensional experience. The findings of this study supported that Reiki promoted health and well-being by facilitating the transition of awareness from dissonance (Bultemeir, 1993) and turbulence (Butcher, 1993) to the healing, pandimensional experience of integrated awareness (Phillips & Bramlett, 1994), harmony, and health. While Reiki does not cause change, in this study it was associated with change by

helping individuals (clients) knowingly participate in actualizing their own capacities for healing.

Receiving Reiki was simple. The process of Reiki seemed simple. Reiki helped individuals feel whole. Wholeness was simple, even though our perceptions did not confirm this as true or real. With increasing complexity came human and environmental field patterns that reflected higher frequency wave patterns, increased diversity and innovation, all of which were associated with an increased sense of well-being and harmony (Gueldner et al., 2005). An increased sense of well-being and harmony was associated with maximum health. Reiki helped us to move toward maximum health, while allowing the nurse and the client to co-participate in evolutionary change (Carboni, 1995). Carboni described this beautifully, as the "dynamic evolution of flowing wholeness of human and environmental energy fields . . . that centers us more and more in the essence or spirit of the universe, a universe of oneness that embraces all that is" (p. 74).

Recommendations for Nursing Practice

The following recommendations were made for nursing practice: (a) begin to integrate Reiki in traditional practice settings; (b) encourage in-service programs to be held in practice settings so that care providers can receive accurate information about Reiki and other complementary alternative medicine modalities; and (c) provide support for patients who choose Reiki.

Recommendations for Future Research

Recommendations for research were as follows: (a) validate Reiki as a voluntary mutual patterning nursing modality in practice settings by observing and documenting the experiences of the clients who receive Reiki; (b) validate the theoretical structure of Reiki in practice settings; (c) measure power as knowing participation in change before and after receiving Reiki; (d) develop a tool to measure integrated awareness both before and after receiving Reiki; and (e) repeat this UFPP research study and incorporate multiple Reiki sessions over time. The use of the UFPP research method was further validated by this study and is recommended as a research method that is sound and consistent with the ontology and epistemology of the SUHB

References

- Astin, J. A., Harkness, E., & Ernst, E. (2000). The efficacy of "distant healing": A systematic review of randomized trials. *Annals of Internal Medicine, 132*, 903-910.

- Barrett, E. A. M. (1998a). A Rogerian practice methodology for health patterning. *Nursing Science Quarterly*, 11, 136-138.
- Barrett, E. A. M. (1998b). Unique nursing research methods: The diversity chant of pioneers. *Nursing Science Quarterly*, 11, 94-96.
- Boguslawski, M. (1990). Unitary human field practice modalities. In E. A. M. Barrett (Ed.), *Visions of Rogers' science-based nursing* (pp. 83-92). New York: National League of Nursing Press.
- Borkan, J. (1999). Immersion/crystallization. In B. F. Crabtree & W. L. Miller (Eds.), *Doing qualitative research* (2nd ed., pp. 179-194). Thousand Oaks, CA: SAGE Publications.
- Bullock, M. (1997). Reiki: A complementary therapy for life. *The American Journal of Hospice and Palliative Care*, 14(1), 31-33.
- Bultemeir, K. (1993). The theory of perceived dissonance. *Rogerian Nursing Science News: Newsletter of the Society of Rogerian Scholars*, 5(3), 5-6.
- Butcher, H. K. (1993). Kaleidoscoping in life's turbulence: From Seurat's art to Rogers' nursing science. In M. E. Parker (Ed.), *Patterns of nursing theories in practice* (pp. 183-198). New York: National League for Nursing.
- Butcher, H. K. (1994). The unitary field pattern portrait method: Development of a research method for Rogers' Science of Unitary Human Beings. In M. Madrid & E. A. M. Barrett (Eds.), *Rogers' scientific art of nursing practice* (pp. 397-429). New York: National League for Nursing Press.
- Butcher, H. K. (1998). Crystallizing the processes of the unitary field pattern portrait research method. *Visions*, 6(1), 13-26.
- Butcher, H. K. (2005). The unitary field pattern portrait research method: Facets, processes and findings. *Nursing Science Quarterly*, 18, 293-300.
- Butcher, H. K. (2006). Applications of Rogers' Science of Unitary Human Beings. In M. E. Parker (Ed.), *Nursing theories and nursing practice* (2nd ed., pp. 167-186). Philadelphia: F. A. Davis Company.
- Carboni, J. (1995). Enfolding health-as-wholeness-and-harmony: A theory of Rogerian nursing practice. *Nursing Science Quarterly*, 8, 71-78.
- Cowling, W. R. (1990). A template for unitary pattern-based nursing practice. In E. A. M. Barrett (Ed.), *Visions of Rogers' science-based nursing* (pp. 45-65). New York: National League for Nursing Press.
- Cowling, W. R. (1997). Pattern appreciation: The unitary science practice of reaching essence. In M. Madrid (Ed.), *Patterns of Rogerian knowing* (pp. 129-142). New York: National League for Nursing.
- Engebretson, J., & Wardell, D. W. (2002). Experience of a Reiki session. *Alternative Therapies in Health & Medicine*, 8(2), 48-53.
- Gueldner, S. H., Michel, Y., Bramlett, M. H., Liu, C-F., Johnston, L. W., Endo, E., et al. (2005). The well-being picture scale: A revision of the Index of Field Energy. *Nursing Science Quarterly*, 18, 42-50.
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Newbury Park, CA: SAGE Publications.
- Malinski, V. M. (2002). Nursing research and the human sciences. *Nursing Science Quarterly*, 15, 14-20.
- Malinski, V. M. (2006). Martha E. Rogers' science of unitary human beings. In M. E. Parker (Ed.), *Nursing theories and nursing practice* (2nd ed., pp. 160-167). Philadelphia: F. A. Davis.
- Mansour, A. A., Laing, G., Leis, A., Nurse, J., & Denilkewich, A. (1998). The experience of Reiki: Five middle-aged women in the Midwest. *Alternative & Complementary Therapies*, 4, 211-217.
- Parse, R. R. (2001). *Qualitative inquiry: The path of sciencing*. New York: National League for Nursing.
- Phillips, B. B., & Bramlett, M. H. (1994). Integrated awareness: A key to the pattern of mutual process. *Visions*, 2(1), 19-34.
- Phillips, J. R. (2000). Rogerian nursing science and research: A healing process for nursing. *Nursing Science Quarterly*, 13, 196-203.
- Rogers, M. E. (1970). *An introduction to the theoretical basis of nursing*. Philadelphia: F. A. Davis.
- Rogers, M. E. (1992). Nursing science and the space age. *Nursing Science Quarterly*, 5, 27-34.
- Rogers, M. E. (1994a). Nursing: A science of unitary man. In V. M. Malinski & E. A. M. Barrett (Eds.), *Martha E. Rogers: Her life and her work* (pp. 225-232). Philadelphia: F. A. Davis Company. (Reprinted from *Conceptual models in nursing practice* [2nd ed.], pp. 329-331, by J. P. Riehl & C. Roy, Eds., 1980, New York: Appleton-Century-Crofts)
- Rogers, M. E. (1994b). Space-age paradigm for new frontiers in nursing. In V. M. Malinski, & E. A. M. Barrett (Eds.), *Martha E. Rogers: Her life and her work* (pp. 250-255). Philadelphia: F. A. Davis Company. (Reprinted from *Nursing theories in practice*, pp. 105-112, by M. E. Parker, Ed., 1990, New York: National League for Nursing Press)
- Samarel, N., Fawcett, J., Davis, M. M., & Ryan, F. M. (1998). Effects of dialogue and Therapeutic Touch on preoperative and postoperative experiences of breast cancer surgery: An exploratory study. *Oncology Nursing Forum*, 25, 1369-1376.
- Sawyer, J. (1998). The first Reiki practitioner in our OR. *Association of Operating Room Nurses*, 67, 674-677.
- Scales, B. (2001). CAMPing in the PACU: Using complementary and alternative medical practices in the PACU. *Journal of PeriAnesthesia Nursing*, 16, 325-334.
- Shore, A. G. (2004). Long-term effects of energetic healing on symptoms of psychological depression and self-perceived stress. *Alternative Therapies in Health and Medicine*, 10(3), 42-48.
- Thornton, L. M. (1996a). A study of Reiki: An energy field treatment: Using Rogers' science. *Rogerian Nursing Science News*, 8(3), 14-15.
- Thornton, L. M. (1996b). A study of Reiki using Rogers' science: Part II. *Rogerian Nursing Science News*, 8(4), 13-14.
- Vitale, A. (2007). An integrative review of Reiki touch therapy research. *Holistic Nursing Practice*, 21, 167-179.
- Wardell, D. W., & Engebretson, J. (2001). Biological correlates of Reiki touch healing. *Journal of Advanced Nursing*, 33, 439-445.