

An Ethnographic Account of Reiki Practice in Britain

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By

Dori-Michelle Beeler

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This book is dedicated to my husband and son, who through the many years of my research have been patient. They have sacrificed many hours and days separated from me through the process of this study. Through all of this they have shown me the highest levels of courage and strength, for which I am eternally grateful.

Additionally, and with equal measure, I dedicate this book to all the Reiki practitioners and clients who offered their time and knowledge and shared Reiki with me throughout our time together. I cannot name you here without compromising anonymity, however you know who you are and I thank you for all your efforts and above all, your friendship.

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LIST OF ABBREVIATIONS

ASA:	Advertising Standards Authority
CAM:	Complementary and Alternative Medicine
CAP:	Committee of Advertising Practice
CMA:	Competition and Markets Authority
CNHC:	Complementary and Natural Health Care Council
CPD:	Continuing Professional Development
EBM:	Evidence Based Medicine
FHT:	Federation of Holistic Therapists
GP:	General Practitioner
NHS:	National Health Service
NOS:	National Occupational Standards
OGM:	Office of the Grand Master
OFT:	Office of Fair Trade
RCT:	Randomised Control Trial
RJKD:	Reiki Jin Kei Do
TCM:	Traditional Chinese Medicine
T&CM:	Traditional and Complementary Medicine
TRA:	The Reiki Association (not to be confused with the Reiki Alliance)
UK:	United Kingdom
UKRF:	UK Reiki Federation
USR:	Usui Shiki Ryoho
WHO:	World Health Organization

ABSTRACT

Reiki practice is a hands-on-healing method with spiritual foundations that travelled from Japan to the West in the 1930s. Since that time, it has rapidly grown in popularity and has taken root in many countries around the world. During 14 months of fieldwork in Britain, with a focus on three groups: Reiki practitioners, Reiki clients and medical professionals, I sought to answer four primary questions. First, what does Reiki practice mean for practitioners as well as clients; second, is Reiki a form of spirituality, if so, what kind of spirituality is it; third, to what extent and in what ways are spirituality and health thought to be linked by research participants and; fourth, how is Reiki practice perceived by those working in conventional medicine? I introduce important Reiki terms and concepts and after a discussion of methods, I explore a specific method for identifying the action of lived faith in spiritual practice and the role that interiority has in this approach. Interiority was useful for ascertaining moments of meaning when spiritual practice was considered to influence well-being. I discovered that Reiki practice has deeply embedded meanings centred on well-being and spirituality. Not overtly eschewed by those working in conventional medicine, I found that Reiki practice is treated as a healthcare commodity within policy. Finally, I suggest that spirituality is not a static concept, rather there are multiple spiritualities informing Reiki practice. This research, while filling a gap in the qualitative literature on Reiki practice, contributes an ethnographic portrayal of a particular group's construction of well-being. Contributing to medical anthropology, the research findings demonstrate culturally situated ideas and practices related to health wherein the intersubjective nature of healing is a constitutive element for well-being. The distinctions of this are specific to culture and environment, broadening how spirituality and well-being are conceptualized anthropologically. Lastly, I develop a framework for commoditization, a process where products become a simple commodity. For Reiki this results in spirituality as a thing out of place in the healthcare market.

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PROLOGUE

Describing the complex nature of Reiki practice and *reiki* energy has been a challenge. However, during data analysis, I found a way to provide insight into an aspect of meaning for the Reiki practitioners involved in this study. The amalgamated narrative below, given by Reiki practitioners, describes this meaning while introducing Reiki practice.

You know, it came down and I don't know what, like my master gave me a little piece of heaven. It is bubbles in champagne. It has a sense of humour; it makes me giggle sometimes. My first experience was a feeling of coming home, feeling like it was something I remembered, something that was so natural to my being that it was part of me, that it was right, that it was warm and safe, a warm cup of tea. It feels loving, blessing healing and consoling, spacious; it feels right – whatever that means, trustworthy. It feels like an arrow goes right to the spot, warm friendly loving, embracing, safe - really safe. Like a huge sigh, here I am again, coming home, brings me into the present, and it is my own present, instead of all over the place. One of the things I love about it is that it is apparently physical. That feeling you get, like sinking through layers when it begins to flow, congruence, like the wheels in the cogs of a watch they fall into the right places and things flow smoothly. Hands on, I want to feel you; I want to be in my body, if I am here I am present I am now, it brings all the bits together. Sometimes it feels cold it is desperately painful - but totally to be trusted. It feels hallowed, protected, and consoling, physically it feels tingly, electric, and it has an electric feel to it, you feel the heat as well as emotional warmth. A kind of love energy, you can feel heat sensations, cold sensations, and flowing sensations, the feeling that I am not on my own in the Universe. The huge impact of the power never ceases to amaze me that I can make a gesture like that and feel the energy leaving my hands, radiating out, without thinking this is going to happen. You can be speaking to somebody and the energy comes out... the words are being drawn from me because that is what that person needs to hear. That does not make me responsible for how they are received, but I am the grateful servant with my hands there. I am just there. You become the energy, hands move about to 'find' the energy. We are straw and the client is the magnet, the client draws the energy through you. I can feel it in my body and so for me it is a kinaesthetic thing as well, it is the practice that can just allow me to let go of my body as well as to let go and surrender everything else. But that is what it feels like; it feels like surrender...when you

surrender you get that feeling of, very zen, again, that space of is and is-not. I want to be connected to reiki.

CHAPTER ONE

INTRODUCTION

Development of Reiki Practice

The western narrative regarding the development of Reiki practice begins in the East, where, after 21 days of strict spiritual training using meditation and fasting, Mikao Usui (1865 -1926) came down from Mt Kurama in Kyoto, Japan. He brought with him *Usui Reiki Ryoho* or the Usui Method, a healing practice that he had learned during this ascetic training. Four years later, Usui passed away leaving behind his teachings with those he had trained, such as Chujiro Hayashi, a retired Japanese Naval Officer. In a span of fourteen years, from 1925-1940, Hayashi taught this practice to others. One student, Hawayo Takata, was a widowed Japanese-American woman from Hawaii who received Reiki training from Hayashi from 1936-1937. Due to the devastation of World War II it was thought that the Reiki practice had been lost in Japan, however this was not the case. Meanwhile, in the West from approximately 1937-1980, Hawayo Takata was active in Reiki practice in Hawaii, mainland USA and Canada. In the later years of her life, she had trained 22 Reiki Masters. Takata was the only Reiki Master at that time permitted to teach other Masters. After Takata's death, her granddaughter Phyllis Lei Furumoto acting as her successor in the West, endorsed the training of other Masters by these 22 individuals. As a result, the training of Reiki practice exploded, locally as well as globally. Reiki practice found its way to countries such as Turkey, Thailand, France, Greece, Germany, Russia, the Netherlands and the UK.

This is an ethnographic account of Reiki practice in Britain, where it first appeared in the early 1980s.¹ Overall, in following a practice theory approach, this text provides insight into the genesis, reproduction, change of form and meaning (Ortner 1984) of Reiki practice. During the span of

¹ In 1981, Reiki practice was exhibited at the Mind, Body and Spirit Festival in London. In addition to this festival, some individuals among my research participants went from Britain to the US to learn Reiki while some Reiki Masters came to Britain from the US to offer Reiki training.

twenty years, from the early 1980s to the early 2000s, Reiki practice has grown exponentially, globally and more locally, in Britain. In 1992, the first Reiki membership organisation in Britain was established and by 1999, Reiki practice was on offer at the University Hospital in London oncology ward. Based on the membership numbers of the organisations that register practitioners, it is estimated that there are over 10,000 Reiki practitioners in Britain. When I spoke with the UK Reiki Federation (UKRF), they suggested that there are four or five times more trained Reiki practitioners than are registered. Countless more never register with membership organisations and professional bodies as they may only practise Reiki privately for themselves and family members. To produce a more precise estimate of those trained in Reiki practice and who participate in Reiki practice as clients exceeds the scope of this study. However, this rise in popular growth of Reiki practice in a span of twenty years with its first appearance on U.S. and U.K. Primetime television², does point to how quickly this number has grown and will continue to grow as people carry on training and offering Reiki.

Another means of demonstrating this escalation of interest can be found in the amount of clinical trials conducted on Reiki practice. For instance, using the keywords 'reiki clinical trials' between 1980-2015 resulted in 4,950 scholarly articles. Nearly half this amount, 2,300, was published between 2010 and 2015 indicating a surge in research interest in Reiki practice during the last five years. In spite of this growth of Reiki practice in Britain, popularly and in clinical trials, there is limited qualitative academic literature to offer insight into what this practice is about and why interest in it has grown so quickly. This research aims to add to this literature with an in-depth, qualitative look into the meaning behind Reiki practice in the British context, specifically amongst those groups involved in this study. I make no reductionist claims about Reiki practice in a global sense. More specifically, I explore the following key questions:

1. What does Reiki practice mean for Reiki practitioners as well as Reiki clients?
2. Is Reiki a form of spirituality, if so, what kind of spirituality is Reiki practice?
3. To what extent and in what ways do research participants link spirituality and health?

² Dr. Oz Show, January, 2010 and Nick Knowles, BBC-2 Health and Wellbeing Series, September, 2016

4. How is Reiki practice perceived by those working in conventional medicine?

After interviewing over 30 Reiki practitioners from a range of Reiki teaching, 11 Reiki clients and 6 medical professionals all within Britain (Figure 2: Interview Locations), this study began to take shape and the meanings of Reiki practice began to emerge. Each chapter in this ethnography addresses an aspect of these meanings.

I discovered that Reiki practice has a complex demography; the diversity of practitioners, the practice and its expected trajectory are not fixed. This is due in large part to the fact that there are several pathways into Reiki practice. For example, some practitioners have preferred to think of Reiki practice as a folk healing art while others are actively working to professionalise the practice to ensure its acceptance as part of an integrative medicine. Reiki practice is taught in both amalgamated and isomorphic forms and defining what constitutes ‘mainstream’ Reiki practice proved impractical.

At the same time, what unites my research participants’ discourse on Reiki is that they most often describe it in terms of spiritual experience. Moreover, these descriptions often revealed Christian undertones. This led me to consider the way narratives of spiritual experience intersect with narratives of healing in the rhetoric of British Reiki practitioners. The traditional religious language as it is used in the West, is a necessity in discussing spiritual life (Hay 1998). Language is a self-referential system (Turner 1995), and as this is a study of individuals in the West, the language reflects a socio-historical and predominantly Christian identity. In this way, ‘the language of religion has been co-opted in a way that provides common meaning for individuals’ (Pesut *et al.* 2008: 2806).

My research was undertaken using what is often called the ‘ethnographic family of methods’ (O’Reilly 2005: 26) consisting of participant observation, informal interviews, a focus group and surveys. Additionally, research data was collected from a prolific review of popular texts on Reiki practice as well as a ‘Reiki Taster Day.’ For this research event, individuals signed up to receive a Reiki session and conduct a survey upon their session completion. I also explored a relatively new approach in researching spiritual practice with a focus on interiority. As an ethnography grounded in phenomenology these methods and the analysis of the data collected have been undertaken with an eye for the nature of lived experiences as a

means of illuminating the meanings behind those experiences (van Manen 1990).

My position in this research was two-fold; I am a Reiki practitioner, trained to Level 2 in Eastern and Western Reiki and a researcher. On the one hand, the insider position lends itself to a particular category of ethnography, that of autoethnography. On the other hand, this creates challenges due to the complex and contentious nature of the insider/outsider debate as well as the problematic notion of membership in the field (Hayano 1979). It can be argued that the position of “insiderhood” provides just one point of view, nevertheless, it is one view which is better than no view (Brewer 2000). Furthermore, the insider position places me at the centre of the research. This provides a form of validity to the acquired knowledge, as my position is contextually relational (Maher and Tetreault 1993) with Reiki practice, practitioners and clients. However, the notion of “insiderhood” is limiting in that the entirety of any one person’s identity within a complex social setting is more multifaceted than the insider/outsider debate allows for. In crafting and weaving together the multiple identities between my professional life and personal life (Kondo 1990) I am obligated to address these issues and criticisms of autoethnography in producing the knowledge acquired in the field as a member and further presented within this text. Therefore, I argue that the idea of researcher identity is never fully fixed; rather it is marginal, always moving betwixt and between domains such as the field, academia and one’s personal life. Additionally, these reflections on the marginality of identity weave into what I would characterise as a journey of self-discovery (Foltz and Grffin 1996) that has been influential in this work. For instance, this journey has influenced my attitude regarding fieldwork where I will no longer take group membership and language for granted. For example, in relation to my research participants, we spoke the same language, we were members of the same “community”, and yet, I found there were moments when a shared discourse or a shared sense of belonging was absent. Ambiguities and misunderstanding are still very much an issue. In consideration for data collection, I have discovered the high value of not assuming *a priori* knowledge during participant observation despite the position of “insiderhood”.

Structure of the Text

This text comprises a detailed ethnographic account and analysis of Reiki practice in Britain, involving an approach that includes practitioners, clients and medical professionals. Each chapter of this text considers a

facet of Reiki practice that emerged during the course of fieldwork. Furthermore, each chapter includes one or more ethnographic vignettes, which serve to contextualise the theme and scope of the subsequent discussion.

I begin by introducing specific terminology and concepts that apply to Reiki practice. Chapter Two is meant to help orient the reader to Reiki terminology and ideology presented throughout this ethnography. I first clarify the terms I encountered in the field, such as *reiki*, *session*, *client*, *directing*, *lineage*, *precepts* and *form*. I then discuss how they are used and how and why I use these terms in the ensuing text. Concepts such as “medical system” and “medical culture”, “the Reiki paradigm” on health and well-being and the ways in which Reiki is practised are also discussed. These sections help to place the ethnography within the context of medical anthropology where ‘medical anthropologists explore culturally situated ideas, norms, and practices related to health and illness, natural and supernatural’ (Ross 2012: 13).

Chapter Three is an in-depth discussion of data collection methods and research ethics. This anthropological study of Reiki practice took place in Britain (Figure 2: Interview Locations) from June 2013 to August 2014. Within that time, I used a variety of ethnographic methods to explicate the meaning of Reiki practice for participants. For example, ‘the ethnographic family of methods’ (O’Reilly 2005: 26) includes participant observation, informal interviews, focus group and surveys. Among other methods, I also explore the consideration for a method that works to discover what is taking place in a spiritual practice with an emphasis on interiority. After a discussion of my use of theme analysis in examining ethnographic data, I outline my consideration for research ethics.

Reiki practice considered as a way of life in Chapter Four is the first discernible theme that emerged during interviews and participant observation. I often heard Reiki practitioners use the refrain ‘Reiki is a way of life’ or that it is ‘their life’. In order to explain the meaning behind this refrain I use the life experiences of the Reiki milieu (taken to include both practitioners and clients) as the foundation for my analysis. Given the focus on meaning, I have found it useful to draw on phenomenology in order to describe certain phenomena in the way they are experienced (Moran 2000), in an attempt to understand who we are and how we act within those phenomena (van Manen 2007). I develop a triadic process of *doing* — *becoming* — *being* in order to describe a shared meaning on a continuum of experiences, not necessarily as separate stages but as one

totality (Todres 2011). I show how during this triadic process mind/body duality shifts into a co-dependent plurality (Todres 2011) involving the physical, the emotional, the mental and the spiritual. It is within this process, grounded in plurality, that an embodied spiritual practice is mediated by emotions (Lutz and White 1986) and transfigures individuals into well-being.

I introduce the Reiki training story in Chapter Five. There is not just one story, but several that emerge from each Reiki form in unique ways. It was this story and the way in which it is shared that led me to reflect further on the use of narrative within tradition. Training as narrative connects practices and beliefs from the past to the present in the form of tradition. The statement often heard in the field can sum up this narrative, ‘I am *reiki*’. Tradition is presented not merely as an object passively handed down but as an active process of symbolic construction transmitted through storytelling. I demonstrate the ways in which Reiki practitioners develop this narrative over time as a mode of distributing the constructed tradition through storytelling. These stories are framed by the lives of the Reiki lineage bearers in each *form* and through narrative link the past to the present with a regard for the future. Within this narrative, the projected tradition offered through Reiki training is considered ethnographically in the way it engages with broader social information, known, experienced and manipulated.

“Spirituality”, much like New Age, appears to have become a catch-all term connoting various meanings (Rose 2001b). In Chapter Six, I demonstrate that there is no single Reiki spirituality, rather many spiritualities informed by mainstream culture or ‘occulture’ (Partridge 2012: 116) that coalesce with Reiki practice. I want to emphasize that this falls in line with a study of New Spiritualities (Jespers 2013), rather than with the ubiquitous New Age spirituality or alternative spiritualities. As a consequence, this study does not align with a New Age construct. This outcome is primarily motivated by the research participants, who when asked, said they were not participating in a New Age practice. This prompted me to look more deeply into the spiritual practice, which is I discovered, the core feature of Reiki. This revealed two consistent themes that characterise the meaning of spirituality for Reiki practitioners as derived from practice. These themes are connection and love as practised in everyday life. In addressing this matter, I found that in context of my research group the New Age label is inadequate to describe what is happening in spiritual practices (MacKian 2012a) such as Reiki, particularly when understood in terms of connection and love.

In Chapter Seven, I discuss healing and care from the perspective of the Reiki milieu. I begin by distinguishing the differences between well-being and health, necessitated by the fact that Reiki practitioners often invoked the term well-being as the aspired outcome of healing and care. I discuss and conceptualise healing as a process (Ostenfeld-Rosenthal 2012) that elicits well-being as an outcome within a particular mode of care. This mode of care has two considerations for the Reiki milieu. In one sense, care is qualified as an imperative imbued with an ethical quality. In the second sense, care is characterised as a subjective and intersubjective experience. I refer to Alfred Schütz's concept of 'tuning in' wherein the practitioner and client are experiencing a 'vivid present together' (Schütz 1951: 96). The process of healing and care reflected within Reiki practice characterise the social and cultural values of well-being (Adelson 2009) for the Reiki milieu. In this chapter love is elucidated as a value in the healing process of well-being and how it underpins the moral imperative to provide care. This imperative becomes a practical ethic when knowing what the right thing to do means actually doing it (Aristotle and Crisp 2000). Love, as it is used in the West, is problematic however in that it leaves little room for understanding what is going on (Oord 2008). I work through this problem by discussing love analytically, aligning it to the term *agápē* understood as an intentional response to promote well-being (Oord 2005). Therefore, within Reiki practice as healing and care, it is revealed that love is a foundational value of well-being.

Scholarly discussion surrounding spirituality as a commodity (York 2001; Leibrich 2002; Carrette and King 2005) abounds, however the relevance of these discussions to the ethnographic data was unclear. Chapter Eight sheds new light on the discussion of spirituality as a commodity. In understanding Reiki practice, spirituality is a principal feature and an integral part of the life of the practitioner. Reiki as a commodity serves as a platform in which to highlight tensions and current issues that face Reiki practice. These tensions and issues concern the wider public domain, specifically the political and ethical interests of public safety as a matter of risk. My examination of the relation between *reiki* and risk is interpreted through Mary Douglas's concept of an ambiguous event, where an anomaly is labelled dangerous and unclear, as a matter out of place that must be brought to order (1966). Consequently, Reiki practice is undergoing a dynamic process of definition amongst the Reiki community and regulatory bodies. Attempts to define the practice apply contrasting points of "framing" and "valuation" and the processes of "entanglement" and "disentanglement" of Reiki practice.

This ethnography closes with an overview of the chapter conclusions and develops an argument for the contributions this work has made overall to anthropology. While the text fills a gap in the literature it has also contributed in novel ways to the anthropology of well-being, medical anthropology and the anthropology of religion. This work has contributed to the anthropology of well-being by providing an ethnographic portrayal of a particular group's understanding of this complex concept, which can add to further comprehension of well-being in a broader sense (Mathews and Izquierdo 2009). As a contribution to medical anthropology, this ethnography explores 'culturally situated ideas, norms, and practices related to health and illness, natural and supernatural' (Ross 2012: 13). In addressing the aspect of Reiki practice as it concerns religion, spirituality is seen to have broken free of the religious boundaries and perhaps is capable of its own anthropological inquiry. I have demonstrated that there are many spiritualities, therefore a study of spirituality transcends the reductionism of being, for example, individualistic in a narcissistic sense. Spirituality within Reiki is intersubjective where each person becomes tuned-in to the other through practice. The distinctions of this tuning-in would be specific to culture and environment. These specificities have the potential to broaden the way in which spirituality is conceptualised in future research.

Unexplored Themes

Surrender, symbols and ritual are themes that are not explored as they exceed the scope of this text. The theme of surrender for example, while relevant to my study (see Prologue) remains hidden in scholarly representations of this spiritual practice. Academic literature characterises spiritual surrender as letting go and having trust in a higher power (Fukuyama and Sevig 1997) with 'benevolent intent' (Duckham and Greenfield 2009). Letting go is a common refrain amongst some of my research participants that involves agency on the part of the Reiki practitioner whereas the control or responsibility is given to the 'higher power' also acting as an agent (Hanegraaff 1996: 300). This hidden variable, when revealed, transcends the idea of a single authority. Surrender, within the Reiki context is indicative of a religious, external authority and source of significance. Therefore, there is not one authority, rather an uncontested collection of internal and external authorities prevalent in Reiki practice, whereby *reiki* is seen to have agency (Beeler forthcoming). In discussing *reiki* as the "other" or a "thing" exuding agency (Gell 1998; Latour 2005; Holbraad 2011), a paradoxical tension

that exists within academic discourse regarding the source of significance for Reiki practitioners that informs practitioners sense of self is revealed.

Another significant aspect of Reiki practice involves ritual and symbols; however, to adequately address these concepts would require another study. While I do explore Reiki symbols in Chapter Two, there is much unsaid. These aspects of Reiki practice would require that I undertake training to the Reiki Master level. This would allow me to understand and negotiate all the symbols based on the quality of attention placed on them (Firth 1973) within ritual, such as the *attunement* or initiation process. Depending on the form of Reiki practice, I might also become familiar with the *Reiju* ritual and then be better informed to discuss it from personal experience. The sacred nature of Reiki training imbues a Reiki Master with an ethic whereas they are not inclined to discuss these things with an untrained person. Therefore, rather than asking another Reiki Master to break their training ethic, once trained I would be in a position to provide further insight into this level of Reiki practice. I anticipate that the ‘enactment’ of these practices would allow for a particular aspect of efficacy as it pertains to the ability to effect transformations through ritual (Bowie 2006). As the performance of the Reiki *attunements* is meant to effect a transformation through bodily connection to *reiki* energy, an exploration of efficacy in context of ritual would be possible.

CHAPTER TWO

REIKI LEXICON

Chapter Introduction

In this chapter specific terminology and concepts that apply to Reiki practice within the specific groups involved in this study are introduced and discussed. This is necessary in order to orient the reader to these items as they are presented throughout the ethnography. I will first make it clear which terms I have encountered in the field, such as *reiki*, *session*, *client*, *directing*, *lineage*, *precepts* and *form*. I then examine how they are used and why and how I use these terms in the ensuing text. Concepts such as “medical system” and “medical culture”, the Reiki paradigm on health and well-being and the ways in which Reiki is practised are discussed. This will help to place this ethnography of Reiki practice within context of medical anthropology where ‘medical anthropologists explore culturally situated ideas, norms, and practices related to health and illness, natural and supernatural’ (Ross 2012: 13).

Vignette – Reiki and *reiki*

Tony: It's life. There is no Reiki session. There is just reiki. Like right now, just being with you and connecting with another human being that wants to have more likeness in this world already we are doing Reiki. For example, that is one way of saying it; yesterday I was giving somebody a treatment. I didn't know what they wanted; they walked in I wanted to hold their neck; I started to massage the neck and I said, actually you need some needles in your shoulders. So before I know it, after massaging their neck there was needles in their shoulders and then I was holding their brain and giving them reiki.

Dori: So it is a little bit of everything. Trying to bridge this gap between Reiki as a spiritual practice with Reiki as life, what is it – what is in the middle, what is connecting these things – is it reiki with the little ‘r’ the energy or is it that feeling of connectivity that heals us, in your own version of explaining that how would you approach that

concept that idea of the bridge between those two – what makes it happen?

Tony: A quote I want to use; it is a yoga quote: ‘The true yoga cannot be seen.’ So when you see people now in the very watered down version of yoga, you see a yoga mat and they are making shapes with their bodies and then going home and kicking their cat or arguing with their spouse, or whatever... living it is a completely different thing. It is absolutely embodied.

Important Reiki Terms

Terminology, when used without question, can be misleading. In the interviews I conducted, it never occurred to me that there should be a question as to what a Reiki practitioner refers to when using the term ‘*reiki*’. Despite my own training, I had at that point not acknowledged these two distinct terms. Conversation simply carried on with the term *reiki* used without elaboration. It was not until after I had conducted several interviews, such as the one above with Tony, an integrative health specialist, that I began to detect a particular use of this term and then began to question research participants in a new light. In fieldwork, when speaking the same language, it can be easy to forget that words can be used in different ways even when one is considered a member of the group using those words. Therefore, terminology began to take on new importance, I began to question not only the use of *reiki* but also terms such as *God*, *client*, *energy*, *directing* and *session*. This insight also motivated me to look at the way in which broad concepts are used and how this influences views on health and healing.

Beginning with basics, the word ‘Reiki’ comprises two ideas: *rei* and *ki*. *Rei* has many meanings depending on the Japanese kanji³ used. This translation is understood to mean spirit or universal and is not necessarily a direct translation of what Usui meant when he used the term *rei*; however, British practitioners commonly use this interpretation. *Ki*, like *rei*, has many derivations such as air, mood or atmosphere. However, most commonly *ki* is used to denote energy. Much like *chi* and *prana*, broadly meaning life force and *mana*, broadly meaning sacred universal force, *ki* is considered a form of energy that infuses the body with life. Moreover, *reiki* has the added capability to restore overall well-being.

³ Kanji are logographic Chinese characters used in the modern Japanese writing system.

An important distinction is contained in the word *reiki* itself and the two ways in which it is used. Reiki, or Reiki-*ho*, spelled with the uppercase 'R' will hereafter refer to the practice, discipline or technique of Reiki. Reiki categorized as a Complementary and Alternative Medicine (CAM) modality is also the discipline within one's spiritual practice. To characterise this spirituality, I employ the term subjective and the phrase *formative-nonformative tension*, suggested by theologian Matthew Woods where *nonformative* describes a situation where a phenomenon 'eschews any scholarly encapsulation' (2007: 9-10) of that phenomenon. The term *subjective* is 'loosely used by anthropologists to refer to the shared inner life of the subject' (Luhmann 2006: 345). I will elaborate further on my use of these concepts, *formative-nonformative tension* and *subjectivity*, in subsequent chapters.

Spelled with a lowercase *r* – *reiki* – denotes the *reiki* energy itself, also referred to earlier in the description of Reiki as universal or spirit energy. This is important as Reiki and *reiki* refer to quite different things and I have found that this distinction, if not made, can cause confusion and misunderstanding. For instance, when a practitioner states: 'Receiving *reiki* can assist in alleviating stress and pain,' what the listener inevitably hears is: 'A Reiki practitioner can assist in the alleviation of stress and pain'. When in fact what the practitioner is saying is: 'The universal life energy known as *reiki* can help to alleviate stress and pain while I, the practitioner, act as a vehicle for directing this energy.' This distinction draws attention to the point that there is more underlying these statements than first appears. It also leads one to believe that a practitioner is capable of relieving the stress and pain, when in fact the Reiki paradigm, as some practitioners demonstrated, does not support that belief. For example, within a focus group I conducted, practitioners felt uncomfortable being described as healers based on the belief that *reiki* and the body receiving *reiki* does the healing, not the practitioner.

When one hears the word *reiki* the structural context is missing and some practitioners do not consider that newcomers, and even researchers, when first shown the Reiki practice may not be aware of this distinction between the practice and the energy. When I had conversations with practitioners it was often the case that they were not even aware that a distinction had to be drawn, as for them, it was clear that there was a contextual difference in the way in which they were using these terms.

Holism and Vitalism

CAM practices and therapies are more diverse in their approach than they are similar (Pizzorno 2002), therefore it is useful to be clear about these distinctions when possible. As practised in the West, Reiki is a complementary treatment with a belief in vitalism and an approach to healthcare characterised as holistic. Vitalism is defined as a conviction in the body's ability to heal itself utilising some sort of bioenergy, *chi* or *prana*: chiropractic is a therapy that shares such an acceptance (Pizzorno 2002). Holism is the approach that diverse practices make use of and considers a range of varied causes pertaining to health and illness which interact with physical, mental, emotional, spiritual, social and environmental factors (Williams 1998). It is generally accepted in Reiki practice that the body has the ability to heal itself and that it seeks to restore balance to the four elements of a person's life; body, mind, emotion and spirit. In Reiki, if one or more of these four elements is out of balance for a prolonged time, it is considered to lead to myriad consequences, such as those pertaining to both illness and disease. Reiki practice does not allow for a medical diagnosis, nor does it set out to discourage clients from undergoing conventional medical care. It is a curious situation that while Reiki is receiving attention through clinical trials within medical science and where Reiki practitioners are allowed a vocational presence in the National Health Service (NHS) (Appendix 4: NHS Trusts and Reiki) Reiki terminology, as considered here, can be seen to be distancing the practice from conventional medicine.

The results of my fieldwork suggest that a practitioner's particular use of terms within the practice can determine whether or not they are supportive of Reiki being accepted into the biomedical framework. For instance, sometimes my use of the term *treatment* as opposed to *session* was met with a curious look from other Reiki practitioners. While some were not bothered about the difference in the use of these two terms in describing the experience of *directing reiki* to a client, others felt that *session* was more suited. The term *treatment* has several meanings, the first relates to the manner in which one person deals with another while the second, also commonly used in the medical field, refers to the application of a therapy to remedy a health problem (Oxford English Dictionary 2014g). The second definition tends to imply that a remedy is achievable through the application of Reiki. Some Reiki practitioners I interviewed were concerned that the use of the term *treatment* was perhaps inappropriate as it implied a potential outcome on behalf of the client. The term *session* seemed to them more neutral, suggesting fewer complications and implied

outcomes. This is unsurprising since the term derived from the word ‘sessional’, meaning a specified time dedicated to a specific activity (Oxford English Dictionary 2014d). An implied outcome resulting in health is absent in the use of the term *session* over the term *treatment*. As this study is not about efficacy, I will continue to use the term *session* to refer to that experience of meeting with the intent of *directing reiki*. However, I am aware that by using the term *session* here, I am contributing to this tendency of distancing Reiki practice from conventional medicine.

Client or Patient?

Reiki practitioners refer to individuals seeking a Reiki session as *clients* as opposed to *patients*. This distinction is important because it provides an understanding of the relationship between the practitioner and the client in this domain. For example, as a client, the individual is perceived as taking part in the healing alongside the work of the practitioner (Goldstein *et al.* 1988). In holistic approaches the client is empowered (Williams 1998), whereas in conventional medicine the doctor takes control of the healing or curing process. Reiki practitioner Simon, for example, showed his support of this concept of the client taking part in the healing when he said, ‘clients become more receptive to *reiki* when they allow, are open to or accept the healing’. From one client’s perspective and their understanding of a Reiki *session*, one comment was that it is a ‘true patient experience as well as an expectation and realisation of deep relaxation that marks the beginning of the process of recovering a sense of balance within the body’.

Reiki practitioners commonly referred to the activity of providing *reiki* as part of a self-treatment or public treatment as *channelling*. This term describes the activity of intentionally connecting with the *reiki* energy in order to provide it to oneself or others. In this capacity, the body of the practitioner acts as a vessel in which *reiki* energy travels to the recipient. While this term is accurate mechanistically, it does inaccurately align Reiki practice to another sort of practice. The practice of channelling began in a movement dating from over 130 years ago in upstate New York and consists of channelling spirits with the intent to send a message from the deceased to the living (Klimo 1998). The term ‘channelling’, as used within the Reiki milieu, requires context so as not to confuse it with this practice of channelling messages from beyond. Instead, ‘channelling’ is meant to highlight the belief that *reiki* is external to the practitioner and is drawn inward for the intention of transmitting *reiki* to the recipient. This is

an important distinction as it immediately points to the externality of *reiki* energy (Beeler forthcoming). The *reiki* that is channelled is not internal, or part of one's individual body, although it merges with the body, and it is not related to messages from spirits that have gone beyond.

In order to distinguish the movement associated with channelling messages from beyond from what is occurring in Reiki practice, another term that is helpful and often used by the Reiki milieu, is *directing*. Practitioners use the expression *to direct reiki* synonymously with *channelling reiki*. However, the term *directing* eliminates any ambiguities on the part of the practitioner and their participation in the process. This participation is limited since *to direct reiki* implies that *reiki* does the healing work as practitioners direct *reiki* in context of caring for the client. *Reiki* energy is the external element that is directed with its own intelligence. This idea of *reiki* energy having its own intelligence is a provocative one, however exceeds the purpose of this text. I have explored this theme further in another publication (Beeler forthcoming). In order to remain authentic in terminology, I will continue to use the term *directing* as opposed to *channelling*, as they are both used in the field and by preferring one over the other, it might eliminate the confusion of these two terms and their significance to Reiki practice.

Demystifying Lineage

Lineage is a term used within Reiki that has a familial and kinship meaning as well as having similarity with, among others, martial arts practices. Having originated in Japan there is some expectation for a familiarity between martial arts and Reiki terminology. When trained in Reiki, a student is taught by someone classed as a Master, Master Teacher or *Shihan*, and the lineage then becomes part of the kinship and identity of a Reiki practitioner. This title of Master was explained to me during the Gendai *Reiki-ho* training that I received as 'an honorary title showing respect for someone's professional level of knowledge'. In this explanation, 'professional' can be thought of as a particular skill or knowledge that is recognised through certification. The form of Reiki that a Master will be teaching was handed down through a lineage of previous Master Teachers, and can be traced all the way back to Mikao Usui (see Introduction). A Master's or Teacher's lineage reflects the different techniques, philosophies and understandings of *reiki* that the teacher passes on to the student in a face-to-face, private setting commonly referred to as Reiki training. Therefore, different lineages will disseminate and pass down different

information and some lineages will even pass down different traditions (Chapter Five).

While interviewing research participants I asked for their Reiki lineage. This diagram contained what can best be described as a family structure depicting a kinship system that, as a social formation, resembles biological kinship (Strathern 1992), except that instead of a pair of parents, there is only one person on each branch of the family tree (Figure 1: USR Sample Lineage). Previous kinship studies refer to this structure as fictive kinship, first introduced by Mintz and Wolf (1950) in their study of Latin American families and the relationship called *compadrazgo*, loosely defined as “godfamily”. Fictive kinship has been described as the ‘adoption of non-relatives into kin-like relationships’ (Ibsen and Klobus 1972: 615). Of concern to these studies are where non-relatives are used as a form of replacement kin, where terminology is used as a form of address that expresses familiarity and where terminology is used as a public validation of a special relationship. Similarly, the fictional, ritual kin system provides a ‘framework for integrating the activities of a group of people engaged in a common activity’ (Ishino 1953: 697).

While these concerns of fictive and ritual kinship align to the discussion of Reiki lineage, the use of “fictive” in kinship studies has been challenged as it creates a precedence for a “true” kinship based on biological, blood relations and as the foundation for all types of kinship (Stone 2002). What concerns my study of Reiki kinship is not whether this kinship is true in the biological sense but with identifying those “things” or activities that constitute this special Reiki relationship.

Unlike “blood ties”, kinship is brought about by a variety of things (Carsten 1997) such as relatedness. In this sense, “kinship” refers to those traits that distinguish being related within a particular social context (Carsten 2000). Similar to the initiation process of Cuban diviners who become godchildren of their initiating *babalawos* (Holbraad 2012), Reiki practitioners become related to their Reiki Masters and fellow training practitioners. This relationship can last a lifetime where an initiating Master will be someone’s Reiki mother and those who have trained together with the same initiating Master will be Reiki brothers and sisters. This use of kinship terminology offers an interpretation for a meaningful relationship (Ibsen and Klobus 1972). However, I have found that this relationship is not developed with the purpose of replacing relatives. Family is for life, and like family in that sense, so is a Reiki Master and the lineage that stands behind that individual. Reiki kinship is a process of