

# Cross Cultural Newsletter

February 2014

19 March 2014

## Dear Members

Firstly, let me send you a belated happy New Year to you all.

This letter is to report to you on the meeting we had on 25<sup>th</sup> February. As I have been inundated by reports and teachings, I have little option but to delay the writing of this letter. I offer my humble apologies.

The topic for that evening was “**AN INTRODUCTION TO COMMON CULTURE -INTRINSIC THERAPIES (Gi-gong and Acupressure for Mental Health “EFT”):- their efficacies and what can go wrong.**”

More than 50 of our members registered. The speaker was Dr Ingo Lambrecht who presented a most elaborate dissertation on Qi Gong and Qi Gong deviation syndrome. He also introduced another effective therapy “EFT-Emotional Free technique “ or “Acupressure for health” , a topic he will provide further elaboration on in his forthcoming talk to us in July.

The need for this topic was illustrated by a case of an old man, a Qi Gong practitioner who had evidently lost the control and presented with what is known to us as somatization disorder. No one knew how to deal with this, as evidently medication did little to help him. His case (a highly modified one to preserve confidentiality) was presented as an introduction to Ingo’s talk.

As Qi gong often seems mysterious to western practitioners, I could only provide a simplified and abridged summary of what Ingo expounded on that evening. Please again refer to the DVD for details.

Ingo first gave an introduction to Qi Gong. Following that, he painted the basic oriental concept of ill health and how Qi Gong restores health. With this, Ingo described in some detail the application of Qi Gong, its psychological benefits, why it works, the practice procedures and signs indicating effective application. He then elaborated on Qi Gong deviation syndromes, their classifications and intervention.

According to Ingo, Qi Gong has been in practice for thousands of years. It was intended to facilitate the life energy and thus restore health.

Unlike the common understanding, it is not a form of Martial Arts.

Qi Gong is not only limited to the Chinese. It is practiced in similar forms (under different names) in India, Tibet, and even in Maori culture.

More importantly, the practice is not alien to the occidentals. Jungian therapy, psychoanalytical literature and bioenergetics of modern times have included similar items in either their theories or practices.

Although it had been in practice for thousands of years, its practice got the recognition of the Chinese State only since 1911 when it became popular and formally offered as an alternative form of treatment. A Qi Gong hospital was founded in 1955 and the art got scientifically studied. Unfortunately, as yet, astute research designs are few and far in between today. However, in 2000, the State attempted to standardize Qi Gong movements such as the “8 pieces of Brocade”. This is a first step towards scientific study.

Ingo then provided the theory of Qi which offers a basis to understand why Qi Gong should work. In the Chinese health conceptualization, Qi is an energy that permeates the body maintaining health. When the flow of Qi is impeded then one is not healthy, and sickness supervenes. Further Qi flows in both the body in general and in specific organs which are deemed to control a range of emotions.

Impeded flow of Qi in specific organs would give rise to specific emotional disturbances eg the liver is the seat of anger. The consequent symptoms would be rage. Ingo illustrated the various organs responsible for the range of emotions and the symptoms manifested when the Qi circulation is impeded.

A number of psychological states are known to impede Qi flow viz anxiety, worries, sorrow, fear, and anger. Thus, the concept of treatment is to maintain health by facilitating Qi flow again via the practice of Qi-Gong which would result in health, with the consequent improvement in emotional tranquility, enhanced cognitive functioning, and more importantly heightened empathy and compassion.

As to how Qi Gong is practiced, Ingo described various exercises such as the 8 pieces Brocade with its repetitive

movements which, unlike meditation, helps the individual to focus externally rather than introspectively on negative emotions. It enhances self-regulation, and alertness. Needless to say, Ingo found such Qi-Gong exercises most helpful to people requiring emotional regulations.

Another method is to focus on an energy welling up from the pubic area (Dan Tien) through the body and reaching the head to induce a tranquil state of mind. The first signs that Qi-gong practice is effective are the feelings of tingling sensations, heat, sweating, lightness of body and a jovial state of mind.

Unfortunately, anything good when applied wrongly or taken to excesses would create harm. Qi Gong deviation syndromes are examples of these. It is reckoned that uncontrolled Qi, when taken to excesses could destabilise an individual.

There are several types of these, from milder to more severe forms:-Motor and sensory hypersensitivities (similar to the one the patient suffered); cognitive and affective symptoms; personality changes (spiritual emergence which could be a positive consequence –see later) and lastly psychosis.

The latter condition is often associated with intense meditation practice, together with excessive exercises, drug intoxication, and other traumas. As to the causes, it is reckoned that they are often related to a combination of predisposition (eg highly suggestible individuals), mis-guided practices and like the case presented, new environmental stresses such as grief and loneliness.

Thus, in traditional Qi gong, the selection of individual suitable for the practice was deemed to be of paramount importance in the past. Also having a proper teacher was most important (contrary to the present day practice of self-learning).

Qi Gong disorders often make it difficult for the clinician to differentiate them from other DSM IV disorders. Important differentiating signs are that the individual’s behaviours prior to Qi-Gong practice are normal; the onset is rather sudden; symptoms comprise of predominantly physical (somatic) concerns; sensation of heat is common; and in psychosis, visual hallucinations are more visual than auditory. Also, the symptoms commonly come and go.

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Ingo mentioned in passing about personality changes. He mentioned that the practice of Qi-Gong can change a person's spiritual outlook and their life most often for the betterment of the individual. These states are usually experienced by Shamans practicing Qi-Gong, known as "spiritual emergence". (In this regard, one finds examples abound in the west eg Saul on his way to Damascus, and also mentioned in Jungian literatures.

Treatment would be to focus patient's attention on the external environment through grounding techniques such as focusing on exercises, working on creative activities such as arts, music, basic breathing practices and mindfulness training.

The other strategy is aimed at the cause, e.g. to stop any meditations, and by attempts to reverse the flow of Qi from the head down to the pubic area. (Most sufferers believe that excess Qi wells up from the pubic area to the head, thus bursting their mind). The latter technique is known as microcosmic exercises.

The third strategy, should deviation be severe or unyielding to the above, would be to use acupuncture and medication - especially in the highly anxious and psychotic. To get the optimum effect, therapy should be under the guidance of a proper Master in Qi Gong.

At this juncture, Ingo introduced what is called EFT, a culturally intrinsic acupressure practice to accord an individual with emotional regulation. He will speak more in depth about the technique in July.

As usual, the presentation ended with much discussion.

By the time you receive this letter, the DVD would become available. Please contact Diane for a copy.

## HIGHLIGHT OF THE NEXT FEW SESSIONS.

We will have a break in March.

In April, we are negotiating with speakers to talk on topics such as "Primary and Secondary Mental Health inter-face—is it suitable for the Asians?"

We are also trying to invite an Occidental family therapist to share with us her experience in inter-cultural family therapy with Asian patients and the use of a language appropriate co-therapist.

We have also asked Patrick to repeat his talk on "Assessment and prevention of suicide among Asian patients", a subject which has been much tabooed in these cultures. Patrick had a good audience when he presented it earlier this month before the primary care clinicians. For the sake of most of our members who were not there, I have invited him to talk to us again. Please watch this space for the flyer.

Later in the year, we have asked Ingo to talk to us about EFT, and Dr Nada Baba to speak on her experience of Psychiatric Services in Singapore where she is currently spending her Sabbatical.

Yours sincerely,

S Wong

For Cross Cultural Interest group

For a more accurate rendition of the presentation, please request the DVD from Diane Evans at [dianee@adhb.govt.nz](mailto:dianee@adhb.govt.nz) - please send a \$2 stamp to help cover costs.



Chinese Year 4712 or  
Western 2014 is the  
Year of the Horse

**Kung hei fat choy!**

**Gong Xi Fa Cai**



The Year of the Horse



Festival of the Lanterns

**Preview of  
next session**

**Flyer will be coming soon  
for the  
Tuesday 29<sup>th</sup> April meeting!!**

For ADHB staff, previous newsletters and flyers can be viewed on the Intranet – click on this link  
[http://adhb.intranet/Mental\\_Health/Resources/CrossCulture.htm](http://adhb.intranet/Mental_Health/Resources/CrossCulture.htm)