Health Communication of an alternative medical therapy:
Analyzing knowledge and persuasion of Reiki healing

Trisha T. C. Lin
Assistant Professor
Division of Electronic Broadcast Media
Wee Kim Wee School of Communication and Information
Nanyang Technological University
31 Nanyang Link, Singapore 637718
trishalin@ntu.edu.sg

Abstract

Using the innovation-decision process model (Rogers, 2003), the study examines how Reiki users go through various stages before adoption decision and how Reiki masters frame and disseminate this abstract concept. This video ethnographic study interviewed Singapore’s Reiki masters and practitioners and observed local healing practices. The findings show Reiki masters use metaphoric languages to associate Reiki healing power with natural forces to make it understandable and believable. Newspapers and magazines are found useful to arouse receivers’ awareness and knowledge; however, interpersonal communication, like trials and peer influence, is more influential in persuasion to overcome biases. As for online communication, websites can promote the therapy and create brand awareness, while blogs offer interactivity and answer queries.

Keywords: Reiki healing, health communication, complementary medical therapy, innovation-decision process, video ethnography

Introduction

Reiki is a healing energy that uses one’s ability to heal naturally. By doing so, it removes any physical or emotional blockages that can be the reason of a sickness or unhappiness (Lambert, 2000). It is a form of complementary therapy that is used adjunct with conventional medicine. Like other forms of natural healing, practitioners of Reiki believe that “disturbances in the body’s energy system can cause illnesses and that by improving the flow and balance of energy, disease can be treated and health can be maintained.” (Bauer et al., 2007) Although Reiki healing has been increasingly used in recognized hospitals in the US and Europe as an alternative medical therapy (Pelletier & Weil, 2000), it has not yet accepted into mainstream hospital practices in Singapore. However, this energy healing method gains increasing popularity locally in the garden city. Koh et al. (2004) found that Singapore’s public severely lacked of knowledge about the complementary treatment.

Roger (2003)’s innovation-decision process model was used by health researchers to study the communication of HIV prevention methods (Dearing et al., 1996) and the negative impact of drugs (Sharman & Kanekar, 2008). The model is used as an analytical framework in this study to examine not only how Reiki centers or masters present this abstract and mystical health idea and communicate through certain channels (interpersonal communication, mass media, new media, etc.) to reach and convince potential users to adopt Reiki practices, but also how the users go through the pre-adoption stages (knowledge and persuasion), which are essential to affect the decision making to adoption or non-adoption.
This study collected qualitative data by video interviewing with Reiki masters and practitioners, as well as overtly observing local Reiki Healing scenes during actual healing practices. The video ethnography method allows researchers to gain in-depth understanding of how this complementary therapy works. Using Miles and Huberman’s (1994) thematic data analysis method, the researchers coded and analyzed the audiovisual data, transcribed interviews, observational field notes, and second-hand documents to find out recurrent patterns.

In terms of contributions, this study not only explains the growing popularity of Reiki healing in Singapore but also provides insights for health communication of similar abstract health concepts, which will be useful in understanding other complementary medical therapies. Methodologically, as Reiki healing, an alternative treatment is mysterious and foreign to many; video ethnography is useful to record audiovisual data of the healing process and the interaction between the healers and the healed. It is proved as an appropriate method to investigate medical treatment or health communication.

**Literature Review**

*Complementary and Alternative Medicine*

According to National Institutes of Health (2007), Complementary and Alternative Medicine (CAM) is a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine. A therapy, such as Reiki healing, is generally considered to be "complementary" and "alternative" when it is used besides mainstream medical treatments.

In the United States, unconventional medicine has an enormous presence in the health care system. Patients made 425 million yearly visits to CAM practitioners, compared to 388
million visits of primary care physicians (Eisenberg et al., 1993). A 1998 follow-up study reported significant increase in CAM use with prevalence-of-use rate up to 42%, 629 million visits, and estimated $27 billion expenditures. There are many reasons for the popularity of unconventional therapies. Most persuasive, perhaps, is the “desire in a computerized, impersonal world to exert a measure of control over well being (Peters & Woodham, 2000).” Ernst (2000) argued that CAM is “individualized, holistic, intuitive etc, and call for a ‘paradigm shift’ in research.” A CAM treatment must still be rigorously tested to prove its safety and effectiveness (Angell & Kassirer, 1998), in addition to assertions, speculation and testimonials.

Studies of CAM. At the heart of traditional health systems such as naturopathy and Chinese medicine, is the belief that the body has a natural tendency towards equilibrium. Modern medicine science calls this “homeostasis”. The idea of maintaining this internal balance and boasting the body’s self healing powers have become increasingly important. Meanwhile, researchers found a constant interplay between emotions, thoughts and actions and body systems. For instance, studies revealed that loneliness and grief can depress the immune system, leaving people susceptible to diseases. Research shows that emotions trigger waves of messenger chemicals called neuropeptides, which reach all parts of the body, prompting physical changes that disturb or support homeostasis (Pert, 1995). Many forms of simple are exceptionally effective in preventing and quelling the widespread chronic diseases. It has also been pointed out that CAM can be “effective” to provide wellbeing for patients due to Placebo effect (Ernst, 2000). In effect, medical researchers and clinicians overlooked that lifestyle factors caused many diseases, and complementary and alternative medicine can have a powerfully positive impact upon those diseases (Pelletier & Weil, 2000).
Although users of CAM have commented on the improvement of overall well-being, CAM generally lacks both a research tradition and infrastructure. “The orthodox attitude remains highly skeptical, and as a consequence, the funding of research is dismal (Ernst, 1999).” In Choices in Unconventional Cancer Therapies, Dr Michael Lerner (1996) states that, “Critics has characteristically dismissed the alternative therapies as quackery…and have worked systematically often effectively to…disbar or ‘defrock’ physicians, researchers and attorneys.”

Hence, for CAM therapies, or conventional therapies, their goal is to hold to equal scientific, medical, legal and ethical standards of an ‘evidence-based’ approach to health care.

Reiki healing in US. The National Institutes of Health (NIH), an important medical institute in the United States (Miles, 2004), set up the National Center for Complementary and Alternative Medicine to study complementary and alternative medicine (Pelletier & Weil, 2000) and conducted several investigations on the effectiveness of Reiki in clinical settings. In addition, NIH’s Pain and Palliative Care Service uses many complementary and psychosocial treatments, such as Reiki, acupuncture, hypnosis, tai chi, and yoga, individually or in combination, or integrated with pharmaceutical treatments in order to reduce patients’ sufferings. Two Reiki masters in the Center provide healing and train medical personnel, patients, and their family members about Reiki healing. Reiki has proved to be effective in soothing pain, anxiety and “precipitate the relaxation response (Miles, 2004)”. It has also helped in “precipitat[ing] a beneficial attitude change” in patients who are resistant to the treatments and help them in positive acceptance of their situation (Miles, 2004). Non-expressive patients also find it easier to relate their sufferings to their caregivers after Reiki.

CAM in Singapore. A survey conducted (Koh et al., 2004) on knowledge, attitudes and usage of CAM in Singapore found that 86.5% out of 704 respondents have used some
forms of CAM and 80% of them used it in the past year. The reasons for using CAM included recommendation by friends and family (70.6%), maintenance of general health (59.5%) and treatments for medical conditions (56.8%). This survey also found the public severely lacked of knowledge related to CAM because 60.7% of the respondents admitting not knowing much about CAM and 11.4% not knowing at all, even if almost half of them used CAM concurrently with conventional medicine before. This is alarming as more than 70% did not consult a doctor or pharmacist when they used CAM. Mass media, such as television, radio and newspapers, were indicated as the main sources of their knowledge of CAM treatments. There is an urgent need to provide reliable information about CAM to the public and to educate them to seek for reliable information themselves.

Reiki Healing – A complementary medicine

Reiki healing is a form of complementary therapy that is used adjunct with conventional medicine. Derived from two Japanese words – *rei* which means universal spirit, and *ki* which means life force energy, Reiki Healing is founded by a Japanese theologian, Dr Mikao Usui, in the late 19\textsuperscript{th} century. Reiki believes in “bringing harmony to mind, body and spirit” by cleansing the body and balancing the chakras. Chakras are “spiritual energy centers” which are located on seven points of the body – namely lower pelvic area, pelvic area, upper abdomen, center of chest, center of throat, center of forehead and top of the head (Lambert M, 2000). As with other energy therapies, Reiki practitioners believe that “disturbances in the body’s energy system can cause illnesses and that by improving the flow and balance of energy, disease can be treated and health can be maintained (Bauer et al., 2007).”

Reiki healing - medical perspective. Across the United States, hospices and hospitals have begun to value Reiki Healing. The June 1997 issue of Cancer Prevention Control (Olson & Hanson, 1997) shared preliminary results from a controlled study at the Cross Cancer
Institute in Edmonton, Canada. Twenty volunteers with chronic pain, including pain from cancer, received Reiki treatments from a certified Reiki Level 2 practitioner. Study supervisors used both a visual analog scale (VAS) and a Likert scale to measure pain before and after Reiki. The study found that receiving Reiki greatly improved pain levels.

Dana-Faber Cancer Institute in Boston have also integrated Reiki healing into their cancer treatments (Bossi, Ott, & DeCristofaro, 2007) and used Reiki before or immediately patients’ treatments, like radiation therapy and chemotherapy. Dana-Faber Cancer Institute believes in treating the “Whole Patient”, and that “Reiki is one of the interventions used in treating the ‘Whole Patient’” with the aim being to “support and encourage the body's natural mechanisms to recover from illness, by addressing the needs of the mind, body and spirit (Mitchell, 2008).” Patients who experienced Reiki said it induced a calm and soothing effect and helped reduce pain. Reiki also proved to aid patients in decision-making with a calm and clear mind. In fact, after receiving Reiki therapy, some patients changed their perceptions with illnesses and led their lives with a more positive attitude (Bossi, Ott, & DeCristofaro, 2007).

Besides, to discover the impacts of Reiki, a laboratory experiment (Baldwin, Wagers, & Schwartz, 2007) implanted noise-stressed rats with radiotelemetric transmitters as an animal model to test the efficacy of Reiki in reducing elevated HR and blood pressure. These rats were exposed to 90 dB of noise for 8 days. Results concluded that for the last few days, the rats received Reiki and their heart beat rates were reduced and less disturbed by the noise.

Reiki healing - psychological perspective. Reiki healers viewed depression as negative energy which is caused by the imbalance in the Chakras (energy centers). Because the energy center governs the health or disease of the organs and endocrine glands located within its purview, serious Chakra imbalance can cause physical problems and manifest as a
form of illness (Nudel, 2000). Reiki healing had been proven effective in curing mental
diseases, especially depression, and thus became a sought-after alternative to modern drugs
(Tremayne, 2006).

*Reiki healing - religious perspective.* The development of the religious healing in
Netherlands started from 1850 and Reiki was used in religious healing there since 1984
(Vellenga, S. J., 1850). However, one Irish priest claimed that Reiki is “the work of SATAN”
to give patients temporary peace of mind and some Reiki healers sought for priests’ help to
drive out strange spirits entering them (Hogan, S., 2006). Till now, Holland has more than
500 Reiki masters and 150,000 students.

*Roger’s innovation-decision model*

Everett Roger (2003)’s innovation-decision process has been used in several instances
for the examination of medical concepts. Although not particularly on Reiki healing, some of
those studies involve the exploration of communication strategies regarding health programs
or health prevention methods. Dearing et al.’s study (1996) on communicative strategies for
HIV prevention methods adopted the model to understand the tactics used by program staff
and the effectiveness of such strategies. This model is also frequently used in understanding
the health promotion efforts by organisations to convey messages on the use of alcohol,
tobacco and drugs and the level of success of such interventions (Sharman & Kanekar, 2008).

Similar to HIV prevention methods and health promotion efforts, Reiki healing is also
something many are unfamiliar with. Reiki healing is considered a new health concept for
many people in Singapore or elsewhere. Hence, Rogers’ model is appropriate to explore the
messages, channels, and strategies that Singapore’s Reiki centers and practitioners use to
reach and convince potential Reiki users. It is useful to describe the process how individuals
encounter and experience Reiki healing over time and their decision-making process in adoption. The decision-making process associated with an abstract and mystical innovation, like Reiki healing, is likely to be different from long-existing subject. Hence, “the perceived newness of an innovation, and the uncertainty associated with this newness (Rogers, 2003) are taken into account in this study.

Everett Roger (2003)’s innovation-decision process model consists of five stages namely knowledge, persuasion, decision, implementation and confirmation. Knowledge defines the stage where one learns about the innovation. Persuasion involves forming an attitude towards the innovation. Decision is the stage where one makes the choice to either accept or reject the innovation. The implementation stage is when one takes action and begins using the innovation. However, at this stage, one’s attitude towards the innovation can change for better or worse. Thus, there is the last stage which is the confirmation stage. This stage determines if one is going to continue adopting the innovation or cease adoption.

Figure1: Innovative-Decision Process Model
This study examines only the first two stages – knowledge and persuasion – of the diffusion of the Reiki concept. It aims to find out how adopters of Reiki healing obtain initial knowledge of Reiki, and thereafter forming an attitude towards it. In order to “reduce uncertainty about the advantages and disadvantages of an innovation (Rogers, 2003, p.172), information seekers look three types of knowledge: awareness-knowledge, how-to knowledge and principles-knowledge. According to Rogers (2003), awareness knowledge defines general information on the innovation; how-to knowledge involves information on how the innovation is used; and principle knowledge provides information on how the innovation will work for users. In the persuasion stage, five “perceived characteristics” of an innovation are taken into account, namely relative advantage, compatibility, complexity, trialability and observability. They are critical because potential users will consider the attributes of an innovation when undergoing the mental procedure of deciding whether to adopt an innovation. However, the decision stage is not examined in this research as the subjects selected are all adopters of Reiki and hence, analysis of this stage is not necessary.

Methodology

Many health studies utilized video ethnography as a form of data collection. As Reiki healing is considered as an alternative therapy, this method is effective to collect rich audiovisual data to enhance the understanding of the mystical and abstract medical treatment and its communication process. We tried to set the video camera and film less intrusively in order to capture interviews and interaction (e.g. procedures of Reiki healing and behaviour of the participants) in a natural setting. The audiovisual data of interviews and observation are useful for the researchers to analyze and interpret the data and seek for deeper meanings or subtle clues. For ethical considerations of observing human behaviour (Santiano et al., 2008), we obtained the interviewees’ consent prior to the recordings.
Interview

This study aims to analyze how users of Reiki healing go through the various stages in the innovative process. As the Reiki organizations and masters are the messengers to spread the Reiki healing concepts and beneficial impacts, how they frame these through what kinds of channels are also examined in the process because they will affect the users’ perceptions and behaviors. From September to December 2008, the researchers conducted in-depth video interviews with two Reiki masters and eight practitioners in two sites: a largest Reiki center (SoulCenter Academy) and a smaller local Reiki center (Miracle Gardens) (Appendix A). SoulCenter Academy has been in operation since 2004 which attracts 500 students aged 6 to 80, including many expatriate students. Miracle Gardens has more than 100 local students. We purposely selected interviewers with various profiles to obtain diverse perspectives and insights into the findings. Four people from each site, including Reiki masters and practitioners, were interviewed 20-40 minutes. The researchers asked Reiki practitioners questions about the innovative process: why they learned this alternative healing, how they knew about it initially, and what made them decide to adopt it. Reiki masters primarily were asked about their framing of Reiking concepts, publicity strategies, and methods to persuade people to know, try or adopt Reiki.

Observation

Observations of actual Reiki healing sessions were used to explore if the practices of Reiki healing actually contributed to the increasing acceptance of this alternative therapy. From September 2008 to January 2009, the researchers attended four Reiki healing sessions to observe how Reiki healing was conducted and the interaction involved during the sessions- 2 from Miracle Gardens, 1 from SoulCenter Academy, and 1 from Thekchen Choling, a Tibetan temple. We took field notes during the observational process. The communication during the sessions was noted to understand if the messages delivered during Reiki healing are responsible
for people’s decision to accept or reject Reiki healing. The researchers also looked at the differences and similarities of how healing was conducted and how the participants interacted. Most importantly, the procedure, messages conveyed and conversations of the practitioners were examined to understand if efforts were made to make the idea less abstract to the practitioners or made to complement their beliefs.

Data analysis

Miles and Huberman’s (1994) thematic data analysis approach was adopted in analysing the audiovisual material, transcribed interviews, observational field notes and second-hand documents, so as to find out recurrent patterns related to the innovative process, including past experiences, Reiki messages, diffusion strategies and communication channels. All data gathered were then coded with reference to the six codes which were identified from the model and research questions. The analysis of Reiki healing’s innovative process will focus on the knowledge and persuasion stage before making the adoption decision.

Table 1: Code definition

<table>
<thead>
<tr>
<th>Code</th>
<th>Definition</th>
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<tr>
<td><strong>Messages (M)</strong></td>
<td>Information presented and delivered by innovation providers (i.e. Reiki center, temple) to their potential users</td>
</tr>
<tr>
<td><strong>Communication Strategies (M:CS)</strong></td>
<td>Methods and tactics used by innovation providers (i.e. Reiki center, temple) to disperse the information to reach and convince potential users to try or adopt</td>
</tr>
<tr>
<td><strong>Communication Channels (CC)</strong></td>
<td>The medium used by innovation providers (i.e. Reiki center, temple) to reach their potential users for different stages and purposes.</td>
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<tr>
<td></td>
<td>- Mass media (CC:M)</td>
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<td></td>
<td>- Interpersonal (CC:I)</td>
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<tr>
<td><strong>Knowledge (K)</strong></td>
<td>A stage that commences when an individual is exposed to an innovation’s existence and gains an understanding of how it functions (Rogers, 2003, 171 - 173).</td>
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<td></td>
<td>- Awareness knowledge (K:A): information that an innovation exists</td>
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<td></td>
<td>- How-to knowledge (K:H): information necessary to use an innovation properly</td>
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- Principles knowledge (K:P): information dealing with the functioning principles underlying how an innovation works

**Persuasion (P)**

A stage that involves individuals’ mental activities to seek information about Reiki and decide whether or not to adopt it (Rogers, 2003, p. 175).

**Perceived Characteristics of Innovation (P:C)**

The characteristics of the innovation perceived by the adopters that affect decisions to adopt it (Rogers, 2003)

- Relative advantage (P:C-RA): the measure of whether the innovation is seen as better than other choices available
- Compatibility (P:C-CPT): the measure of whether the innovation is consistent with the individual’s values, past experiences and needs at that moment
- Complexity (P:C-CPX): the measure of how easy it is to understand the innovation and its usage
- Trialability (P:C-T): the measure of whether an individual can try out the innovation before decision to adopt or reject
- Observability (P:C-O): the measure of whether the results obtained from the innovation can be visible to others

**Findings**

*Reiki Healing - the mystical alternative therapy*

As Reiki healers believe that all kinds of illnesses result from imbalance of energies in the body, detection of energies at chakras is the first step to start the healing process. The procedure of Reiki healing was observed in two Reiki centers and a temple. The largest Reiki center in Singapore, SoulCenter, uses a Germany energy emission machine to take pictures of patients’ fingertips and toes to reveal his/her physical, emotional and mental states. Figure 2.1 shows that the energy detected is weak due to the incomplete outlines, while Figure 2.2 is taken from a healthy patient with clear shapes of fingertips and toes. Each fingertip or toe is associated with the health condition of a body part or inner organ. After reading the pictures, the Reiki masters find out the ill areas and place their hands upon them for healing purposes.
Another Reiki center, Miracle Gardens uses crystal to detect the strength of the energy at different chakras by looking at its oscillation and speed. When a crystal spins with a small radius, the chakra energy is low. Similarly, the Reiki masters will place hands on the weak areas to heal the patients. During the Reiki healing sessions, the patients closed their eyes, lay down or sat relaxingly with dimmed lighting and soothing music, while the Reiki masters/practitioners placed hands lightly on or just above their targeted body areas. They channeled the life energy from the universe through hands to cure. In total, there were 12 to 15 hand positions which represented different parts or organs of the body. Each hand position was held about 2 to 5 minutes until the patients feel the warmth and flow of energy.

Also, Reiki healing focuses on the development of the individual’s emotions and life quality. Apart from teaching practitioners the mind-body connections of all illnesses, Reiki masters provide life advices to the practitioners/disciples/patients. For instance, Miracle Gardens’ practitioners used a set of inspirational cards, Angel cards, to signify the answers to what people feel perplexed in their minds.

Message
Reiki is a Japanese term: *Rei* stands for universal spirit and *ki* means life force energy (Lambert, 2000). Reiki Healing is the usage of the universal energy to heal oneself. As this healing power cannot be seen, heard, or felt, how to convey this mystical concept to the healers becomes very challenging. The Reiki master, like Sally Forrest, usually explained to people that Reiki healing was a kind of “self healing” so as to let people understand they can help themselves. The Reiki master Tan Hwee San described: “[Reiki] energy from the universe is unconditional loving. It doesn’t need anything in return. It just gives and gives, just like Mother Nature.” Reiki masters used Mother Nature, like trees and plants, to analogize Reiki healing to make this abstract concept more comprehensive. Forrest (2008) also described it as the force that “makes the trees and waves move”.

Reiki masters also used electricity, a power used in Singaporeans’ daily modern life, to explain the universal energy. Tan (2008) thought this familiar analog helped people who first encountered this treatment feel easily related to:

> It is just like electricity. Can you see electricity? Maybe lightning… Only through appliances, that you know we are using electrical energy…. So same with this concept of universal energy, we cannot see with our physical eyes, but we can experience it.

Reiki healing believes that human’s mind and body are connected, and illnesses are caused by the imbalance of energy in the body or in the mind. Sally (2008) mentioned one of her patients had stuttering symptom caused by mental or emotional unwell. She used the root of the tree and its fruits to describe the deep causes of the illness and the surfaced symptoms.
What you have to focus on is the root. So you water the root of the tree, not the fruit of the tree. So by understanding the root cause behind every illness, it almost gives the body some sort of rebalancing exercise.

To further explain how Reiki Healing heals, Forrest (2008) also used research of the alpha and beta state of the mind to substantiate and convince the potential adopters about the effect of Reiki Healing:

There are two sides of Reiki. The physical side is laying the hands on the body. So that brings the energy of the universe into your body to heal yourself. So the cells vibrate at an energy, your organs vibrate at a different energy. So using this universal energy, you actually start to change the vibration of your own body. It has been scientifically shown that when you do Reiki, your brain goes into what we call alpha state. Alpha is a very deep relaxation. Normally when we are talking, our brain is in beta. It (Alpha) is the healing vibration so the body starts to heal itself.

Reiki healing occurs after the palms place upon the patients to bring them into relaxing alpha state in the brains. From the observation and the interviews, we found Reiki masters used tangible matters in the natural world to concretize the mystical Reiki healing concept. By doing so, potential adopters/receivers would reduce skepticism to this abstract innovative notion. This kind of verbal expressions is vital to promote Reiki healing effectively.

Channels

Mass media. Reiki centers used mass media, mainly newspapers and magazines, to reach out to a large amount of audience and increase public’s awareness of Reiki Healing. SoulCenter advertised Reiki lessons for children (Straits Times, 2005) and explained what Reiki healing was and their benefits to patients:
Children aged six to 14 can learn Reiki, a self-healing technique from Japan, at this two-day workshop by Reiki masters Sally Forrest and Vikas Malkini. They will teach techniques to calm oneself and for minor ailments such as headaches or stomachaches, as well as how to apply them. (Straits Times, 2005)

This strategy proves to be successful as children as young as six-year old are learning Reiki Healing in this center.

Besides, Reiki centers placed their advertisements on niche magazines as they perceived needs for Reiki Healing amongst the magazine’s target audience. SoulCenter advertised itself in “Expat Living,” a magazine that serves expatriates’ needs. 3 out of the 4 foreign practitioners in this center interviewed first heard about Reiki by reading this magazine. Forrest (2008) said the advertisements on this magazine attracted many expats to learn reiki healing:

There is a high turnover rate for expatriates, so there are a lot of people who feel a bit lost, like we call them trailing wives, the women who came with their husbands. Their husbands come over for a job and the wives come here. She does not know anybody and start to feel a bit lost, so a lot of these people come to SoulCenter.

Interpersonal communication. From interviews and observations, it is evident that interpersonal communication is useful when helping people to make decisions to adopt Reiki Healing or not. Both Reiki centers held Reiki Sharing Night once a month, where Reiki practitioners gathered to practice Reiki on each other. Despite different activities, the two centers had a “group Reiki healing session” that a group of practitioners practiced Reiki on an individual. During the healing process, the Reiki master kept explaining the procedures so that
the audience could understand the rationales for the different hand positions and effects. For instance, at Miracle Gardens, the practitioners used a crystal to detect the energy at the various chakras. To help the participants understand, they explained what each chakra were linked to the parts of body and how the oscillations of the crystal revealed the physical, emotional and mental state of the receiver.

Reiki Sharing Night allowed practitioners to bring friends for Reiki healing experience. For example, Koh Jinglin, a Reiki practitioner from Miracle Gardens first experienced Reiki during one of such sessions and felt more energized in work after healing. It then prompted her to learn Reiki healing. We observed that the newcomers usually were brought by friends to experience Reiki healing and get their queries answered by the knowledgeable masters. During the Reiki Sharing sessions, the face-to-face interpersonal communication, personal trials, and group influence helped arouse interests, strengthen beliefs, and clarify doubts. Besides, Miracle Gardens frequently held exhibitions at the “Holistic Living Festival”, an bi-annual exhibition that gather exhibitors such as Reiki masters, Feng Shui Masters and other therapists to let people have a deeper understanding of holistic living. Through such exhibitions, the Reiki master can reach out to a niche market – people who are interested in holistic living and metaphysics and thus be more open to Reiki healing.

New media. Both centers had set up websites to disseminate information of Reiki Healing, so that interested public can understand more about Reiki Healing by reading online content. The SoulCenter’s official website has detailed illustrations of Reiki healing and training, as well as short profiles of the Reiki masters. The website of Miracle Gardens provides the definition of Reiki Healing, the history of Reiki Healing and the ethical principles of Reiki. Another commonality between both websites is that they introduce other holistic treatments, including SoulCenter’s website’s meditation and Miracle Garden’s ear
candling and radio frequency therapy. However, Miracle Garden places facial, massage, and manicure services on the website that might confuse the viewers and reduce the credibility of Reiki healing.

As Blogging has become popular, some Reiki masters’ personal blogs write about personal encounters with Reiki students, patients, and motivational stories. For example, in an article titled “A true Inspiration” posted in her blog Forrest (2008) talked about one 72-year-old student, Ying, who completed her Reiki master training: “Ying as a shining example to women everywhere… It’s so beautiful to still be learning and growing as we age!” In the same post, Sally Forrest also described how Reiki healing has helped Ying improved her quality of life: “Ying has changed dramatically on the course… she realizes that trying to change everyone around her is futile- instead she is focusing on herself and living a happy life, inspiring others.” This blog also contains a message board where readers can post their comments. We observed Forrest’s blog was read not just by her students but also people who seek life advices and inspirations. A reader, Samantha, wrote: “I am so happy I found your blog… I check it everyday. Please keep writing.” By publishing and updating blogs regularly, it not only helps Reiki healers spread the knowledge to their students/patients, but also attract more online readers to give Reiki Healing a try.

The findings showed that newspapers and magazines which provided more in-depth or niche information were more widely used to create awareness of the abstract alternative treatment to general public or some target audience. Interpersonal communication was useful to explain concepts, clarify doubts, demonstrate effects, and convince potential adopters. Comparatively, interpersonal communication is more influential to make the decision to adopt Reiki healing, as it creates personalized messages to cater for individual’s needs, which is crucial for a mystified, intangible, innovation to be accepted by adopters. This also explains why the Reiki centers place more emphasis on this communication channel than
mass communication. Moreover, Internet provides broadcasting website information for interested audience to actively seek for Reiki information as well as share personal experiences or respond to individual enquires via Reiki experts’ blogs. The online media can be used as an effective channel to reach and persuade potential users at a low cost. Reiki healing should further harness the power of social media to create viral marketing of this innovative concept and even foster preference or persuading adoption within the social networks.

Innovative process- Knowledge stage

Rogers (2003) identified three different categories of knowledge: awareness knowledge, how-to knowledge, and principle knowledge. From interviews and observations, I also found the three types of knowledge in the knowledge stage of Reiking healing.

Awareness knowledge. The first stage of the innovation-decision process is the knowledge stage and the most efficient way to let more people know about Reiki Healing is through advertising in magazines and holding exhibitions in festivals. For example, SoulCenter advertised itself in magazines. Many Reiki practitioners first heard about the existence of Reiki Healing from the advertisements, like SoulCenter’s Reiki practitioner Mary Jo Maffi and Lim Si Yun:

*I’ve always been interested in energy healing and I just found this ad in Expat “Living about Reiki,” so I just followed it. I just discovered more about it here (SoulCenter) (Maffi, 2008).*

*Initially, I came to SoulCenter for colour therapy; it’s after the colour therapy that Sally (Reiki master) introduced me to Reiki. I feel that I can’t cope with*
life and by looking at the lifestyle magazine, I saw these colour therapy and I came to Sally for help (Lim, 2008).

Large-scaled exhibitions, like “Holistic Living Festival” also provide good chances to let people expose to various holistic living treatments. Reiki masters practiced Reiki Healing on volunteers as well as issued pamphlets and brochures during the exhibition. This bi-annual festival is a good occasion for informing people about Reiki Healing as it usually attracts many people who are interested in complementary therapies. Thus, advertisings and exhibitions are useful get Reiki Healing exposed to potential users to try out this therapy.

How-to knowledge. Training in Reiki Centers is the way to learn and obtain the know-how information to perform proper Reiki healing. A Reiki disciple must complete three lessons before becoming a Reiki master. The first level, he will learn the concepts behind Reiki, attune to the universal energy, and know how to administer Reiki to oneself and others. The second level lets the disciple understand Reiki theories and symbols. It also teaches him to heal someone else across a distance, to heal plants and animals, and to use Reiki energy to enhance the energy in their homes. The third level course is a training program that lasts between six to nine months. It teaches one how to attune another and educates the Chakras in the healing process. Every day Reiki practitioners must practice the five principles of Reiki (not angry, not worry, grateful, work honestly, kind to living being) that was developed by Dr. Mikao Usui, the founder of Reiki healing.

Principle knowledge. The principle knowledge involves information that addresses the underlying rules of how Reiki healing works. Before the start of a Reiki healing, the master, use crystals or other equipment to detect the imbalances of energy at the various chakras, explain what each chakra mean, and how the low energy affected health. For instance, the heart chakra is about love, and that if there is imbalances of energy in that
chakra, one would hold on to grudges and not able to give and feel love. During the treatment, the Reiki master would constantly communicate with the healer to understand how he felt. At the end of the treatment, the chakra energy will be detected again and see the improvement in the level of energies. Then, the master would explain how the treatment had helped.

It is evident that each type of knowledge is targeted at different people for different purposes. In terms of awareness, the organizations use mass media channels to advertise and reach the general public. How-to knowledge is meant for training the Reiki practitioners. To effectively provide principles knowledge, interpersonal channel is more helpful and frequently used. This might be attributed to the nature of Reiki healing that is invisible to the naked eyes and thus more complex. Hence, interpersonal communication is more effective since it allows detailed explanations and clarifications when the need or doubts arise.

*Innovative process - Persuasion Stage*

This stage takes place when potential adopters of Reiki healing move one step further to seek specific information about this innovation or even approach Reiki masters to try out Reiki Healing. I analyzed Reiki practitioners’ recall about how they were convinced to adopt this treatment and found that the Reiki masters usually allowed the users to experience and let Reiki does the talking. Forrest (2008) encouraged users to try out Reiki to know the effects instead of worrying whether they could do it or not.

When potential adopters are considering the adoption or non-adoption, they will go through a thinking process to evaluation the characteristics of the innovation. Roger (2003) identified five factors namely *relative advantage, compatibility, complexity, trialability* and *observability*, as the characteristics that a user would take into account before adopting the innovation.
Relative advantage. Research has shown that complementary therapy is gaining popularity because patients can get more attention from the therapist than from the mainstream doctors as a complementary treatment (Vellenga, 2008). In addition, Reiki healing’s non-invasive nature also gave it an edge over the other treatments. Koh (2008), a Miracle Gardens’s Reiki practitioner, was very open to alternative therapies that would not injure the body:

Well, there is no harm in Reiki itself. If it doesn’t work, then at most it doesn’t work, you won’t fall sick. If you take some western drugs, if it is not good for you, you will have liver problems or gastric problems.

When comparing Reiki Healing to other holistic therapy, Reiki practitioner Tess Woo said Reiki Healing not only relax the physical body, but also heal the mind and soul. Hence, it is more advantageous to the adopters than physical therapies and conventional treatments as Reiki can cure the roots of unwell in a holistic and non-intrusive way.

Compatibility. The concepts of Reiki Healing are highly comparable with the experiences and values that the Reiki masters and Reiki practitioners had. Reiki healing attracts like-minded people who are interested in the holistic living and spirituality. Lim, a SoulCenter’s Reiki practitioner, was also interested in color therapy. Another practitioner, Maffi, was highly acceptable to energy healing. As for Tibetan temple Thekchen Choling, many receivers of Reiki healing were the devotees who were open to trying this alternative therapy as they believed that the energy of Reiki healing came from the Buddha they worshiped. The free Reiki healing sessions were held in the hall of the temple, which matched the users’ religious beliefs.
**Complexity.** Although Reiki Healing’s curing process seems easy, its concept is mystical and even dubious to most. As mentioned previously, one must have long training to become a Reiki practitioner or even a master. The abstractness and complexity involved made Reiki healing less easily comprehensible and hence more efforts would be needed to persuade potential adopters.

**Trialability.** According to Forrest (2008), there were two reasons to hold people back from Reiki Healing: firstly, some thought that it was related to the paranormal, and thus reluctant to adopt it; secondly, they doubted the possibility to harness the unseen universal energy to heal people. Trials often were powerful to convince non-believers or doubters. People healed by Reiki experienced warmth flowing through their bodies (Koh, 2008; Yeo, 2008) and felt more energetic and healthier. Such feelings convinced them of the effect of Reiki Healing and thus persuaded them to take up Reiki Healing lessons.

**Observability.** After receiving Reiki treatment, all interviewees experienced physical and/or emotional changes that were observable to others. For example, Cecelia Watson’s husband noticed his wife’s stuttering problems were cured by Reiki and became more optimistic. Maffi (2008) found her marriage relationship was improved after she learnt Reiki Healing.

Above analyses showed that relative advantage, compatibility, trialability and observability were useful to promote Reiki healing. However, as Reiki healing is complex, more effort should be made to simplify this treatment for potential adopters to understand.

**Discussion**

Undeniably, promotion of Reiki healing is definitely more difficult than subjects of past studies which use the innovation-decision process. While HIV prevention methods and health
campaigns to convey messages on the use of alcohol, tobacco and drugs are relatively new ideas then, the topics addressed are not alien to their target audience. However, Reiki healing is such a mystical and intangible concept and therapy and thus its introduction expectedly will encounter more obstacles. Roger’s innovation-decision process model (2003) is proved useful to analyze the adoption of such a health innovation, but its adoption seems more complicated in both knowledge and persuasion stages than other health-related concepts or campaigns and thus requires further investigations.

By using video ethnography, the Reiki Healing sessions and the interaction between the Reiki masters and students were fully captured. The rich audiovisual data was helpful for us to obtain more heuristic understanding of the abstract Reiki healing treatment because it allowed the researchers to revisit the healing scenes to discover the deeper meanings of the abstract healing concept and procedures, as well as to pick out the non-verbal messages and the ambience. Many health studies used video ethnography as a form of data collection. This study also found it very useful to tackle the complex phenomenon of Reiki healing and its adoption process.

As Reiki Healing is gaining popularity in Singapore, it is important to conduct research to examine its rise in Singapore. It is found that using analogies to communicate this concept can make it easier to comprehend and free trials help convince potential adopters of the effectiveness of this therapy. The findings also show newspapers and magazines are influential to broadcast this innovative health concept to arouse receivers’ awareness and knowledge and echo Rogers’ (2003) argument that mass media are relatively more important than interpersonal channels for earlier adopters and innovators than late adopters. However, interpersonal communication is found more effective in persuasion stages, because people can consult friends and experts and seek clarifications to overcome disbeliefs or biased perceptions. While
mass media is generally useful in the marketing of products, this is not the case for Reiki healing – a therapy which is less known and abstract. Due to the nature of Reiki healing, interpersonal communication is a more suitable communication channel, since it invites more interaction among the practitioners and the receivers. As for new media, official websites are useful to offer knowledge of Reiki healing for many potential users who actively seek for one-way broadcasting information, while Reiki masters’ blogs provide interactivity, feedback, and personalized experiences and stories, which has the functions of virtual interpersonal communication to effectively build up trust and make believes. New interactive media seems a powerful channel to reach out interested, like-minded people without time and geographic boundaries to disseminate health concept, like alternative medical treatments. Hence, future diffusion of any similar innovations should emphasize more on interpersonal communication and new media than mass media to improve the adoption of the innovative health concepts or treatments.

As Reiki Healing is a relatively innovative concept in Singapore, related prior studies are limited. This qualitative research contributes to increase the understanding of Reiki healing as a health innovation and provide insights on how it is coded and disseminated through different channels in the knowledge and persuasion stages of adoption. It also proves video ethnography is particularly useful to study the complex and abstract alternative medical treatment. For future studies, it is interesting to explore the use and effect of social media to promote the adoption of alternative medical treatments.

Acknowledgment

Thanks to the assistance of Wee Kim Wee School of Communication and Information students (Chiann Huey Ow, Shu Jing Mok, Shu Wan Wong) for data collection and preliminary data analysis.
Appendix 1: Interviewees’ profile

<table>
<thead>
<tr>
<th>Center of Practice</th>
<th>Name of Practitioner</th>
<th>Where did they learnt about Reiki</th>
<th>Reiki Level</th>
<th>Physical improvements</th>
<th>Emotional improvements</th>
</tr>
</thead>
<tbody>
<tr>
<td>SoulCenter</td>
<td>Cecelia Watson</td>
<td>Advertisement in Expat Living Magazine</td>
<td>2</td>
<td>Used to have hand and leg aches. Recovers from stuttering problems.</td>
<td>More aware of herself and feels happier.</td>
</tr>
<tr>
<td></td>
<td>Mary Jo Maffi</td>
<td>Advertisement in Expat Living Magazine</td>
<td>1</td>
<td>Less stomach and legs problems.</td>
<td>Becomes more proactive and listens more to herself.</td>
</tr>
<tr>
<td></td>
<td>Lim Si Yun</td>
<td>Learnt about colour therapy in Lifestyle magazine</td>
<td>3</td>
<td>N.A.</td>
<td>Has more control over her emotions and becomes more confident.</td>
</tr>
<tr>
<td></td>
<td>Rebekka Zafarbakshian</td>
<td>Heard about Reiki from friends and googled it to understand more about it.</td>
<td>2</td>
<td>Recovers from flues</td>
<td>More positive about life.</td>
</tr>
<tr>
<td>Miracle Gardens</td>
<td>Yeo Lee Nah</td>
<td>Heard about Reiki from friends</td>
<td>N.A.</td>
<td>Feels warmth flowing through the body.</td>
<td>N.A.</td>
</tr>
<tr>
<td></td>
<td>Xiao Yuin</td>
<td>Met Ms Tan Hwee San at a holistic living bookshop.</td>
<td>3</td>
<td>Less migraines</td>
<td>More positive about life.</td>
</tr>
<tr>
<td></td>
<td>Koh Jinglin</td>
<td>Xiao Yuin brought her Reiki sharing session</td>
<td>2</td>
<td>Feels more energetic and is able to wake up for work.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Tess Woo</td>
<td>Holistic Living festival and took her brochure and subsequently knew more about Reiki Healing in Miracle Garden’s website.</td>
<td>2</td>
<td>Depends less on medication.</td>
<td>Calm herself down.</td>
</tr>
</tbody>
</table>

References


健康傳播另類療法: 分析靈氣治療之認知與說服

林翠絹
助理教授
廣播電影研究系
黃金輝傳播與信息學院
新加坡南洋理工大學
trishalin@ntu.edu.sg

摘要

本研究以創新決策過程模式(Rogers, 2003)檢視靈氣治療使用者經歷的各階段，以及靈氣組織或師傅如何透過多種傳播管道與策略呈現此健康新概念，以說服潛在使用者。本研究方法採用影像民俗學法(video ethnography)，訪問新加坡靈氣大師與使用者，同時觀摩當地靈氣治療過程。研究發現靈氣大師使用隱喻法(metaphor)，將靈氣治療能量聯想為大自然力量，藉此讓抽象概念得以被瞭解與信服。報紙與雜誌被使用於廣為傳播此療法增進受眾認知(awareness and knowledge);而人際傳播，如試用及同儕影響，則在說服階段(persuasion)較具影響力，可克服受眾的偏見。網站能推廣靈氣治療與品牌認知，而部落格有利於互動與解答疑惑。

Keywords: 靈氣治療，另類療法，創新決策過程，影像民俗學法，健康傳播