

Five steps to create a healing energy-work treatment.

Signature Energy Work: Accessing, Evaluating and Transforming the Personal Energy Field

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CHAPTER 1

A SHIFTING PARADIGM

“There’s a way to solve every dilemma...Check your premises.”
- Francisco D’Anconia (from Ayn Rand’s *Atlas Shrugged*)

CASE STUDY #1 – NANCY

I had actually known Nancy for years before her accident; I was her chiropractor, so she would come to me for an occasional adjustment to relieve a kink in her neck, or an ache in her back. In spite of these complaints - which she usually dismissed as the normal consequences of a busy life - Nancy always came in with a smile. She would greet everyone with a bright and enthusiastic hello, her robust energy as contagious as her humor and her optimism. After a visit with Nancy, I usually felt better.

As she sits down in front of me now, however, she looks like it hurts just to think. I ask her how she’s doing and she hesitates, as if searching for the energy to respond in her usual Nancy-way. She answers dully, repeating last week’s response: her neck and back are fine, but she still has headaches. It doesn’t take much to see that she’s got a bad one today. When they come—and lately they’ve been coming daily—these headaches seem to absolutely drain her. In the six weeks since her accident they have gradually eroded her natural vitality and left her fatigued, irritable, and discouraged.

Nancy had a car accident. It was a relatively minor rear-end collision, where she sustained a moderate whiplash injury: a strain to the muscles and ligaments of the neck and upper back, with a resulting distortion of the normal alignment of the vertebrae in that

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area. I've been treating her intensely since then with chiropractic adjustments, massage therapy, and neuromuscular trigger point therapy—pretty standard chiropractic fare for this type of injury—and her neck and back pain have responded beautifully, receding gradually and steadily. But her headaches keep returning, with no significant diminution in their intensity or frequency. Each visit her normally hearty energy seems a little paler, slower, more fragile. Her x-rays, taken at the hospital after the accident, didn't show any evidence of fracture or pathology in the neck or back, and she actually didn't sustain any trauma to the head itself. There is no evidence of disc herniation or nerve impingement, and her family doctor has ruled out any systemic reason for her continuing headaches. There just seems to be no logical reason for her to be in so much pain. It's evident, however, that she is.

I ask her to lie down, and she heaves herself on to my treatment table with a punctuating sigh. She's not a small person, Nancy, partly because of her Central American Indian heritage, and partly because of years of hard work. When she came to this country, young and alone with 2 small children, her lack of education pushed her to work in a series of jobs that required a lot of physical labor, always for little pay. Because she was raising her kids on her own, she often worked two jobs at a time. She is currently employed as a nanny, caring long hours for a little boy whose mother left, and whose father is struggling to raise his young son while trying to run a small business. As she relaxes on the table, Nancy closes her eyes, takes a few deep breaths, and waits for me to begin the treatment.

I slide my hands under the back of her head, pressing my fingers under the ridge of the skull where the muscles of the neck and upper back converge onto the bone. Just being touched where it hurts helps her to relax even more, and I relax a little, too. This is one of the humbling moments in a doctor's life, when you have no reasonable idea what is wrong with, or what to do for your

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patient. I have given up many times at this point, telling the patient that I don't know what else I can do for them, and losing them to long-term pain medication or chronic illness. Losing a patient is never comfortable, and that is exactly what has pushed me to know more. It has taken me a long time, but what I have learned is the *value* of not knowing.

As I focus on my own deepening breath, I feel the familiar sense of expansion and connection that comes with touch. It's like a wave of compassion that hits me, and then rolls through me and outward toward my patient, filling the room with a deep silence, a reverence, a profound sense of focus. I settle into the moment gratefully. As difficult a journey as it has been for me to arrive at this moment, I am thankful, if not for the struggle, then certainly for its fruits. This is the moment of not knowing; of surrendering into that which allows me to move past the limitations of the known, and into the finer vibrations of the yet-to-be-known.

Departure from the External Path

This moment represents my departure from the modern western medical model in which I was trained: the practice of medicine based exclusively on the tenets of objectivism, founded on the idea that *consciousness* (the rational mind) *perceives reality*. Objective medicine requires an objective, measurable analysis of the physical mechanism being analyzed, and excludes any consideration of consciousness in this object. The objective observer and the observed are separate and unrelated, and it is the job of the observer to rationally perceive the unchanging nature of the observed. Earth scientist Gregg Braden calls this approach to healing the path of "external technology,"¹ in which both the cause and the cure for illness or discomfort is assumed to come from outside of the patient, from somewhere "out there." Disease,

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deficiency, and injury are something that *happens* to us, and their cure is found through things that we do for the *condition*: drugs, dietary supplements, surgery, even chiropractic manipulation. Mind you, the external technology of modern medicine is something that has proven highly successful and beneficial for many, including myself. This approach, however, requires that I see myself as separate from my patient, both emotionally and physically, which would seem to discourage both touch and empathy. Years of clinical practice have proven to me that an objective physical examination of my patient is both necessary and valuable, but the information it provides is limited. In addition, my experience has shown me that a diagnosis and treatment based solely on objective modalities provides limited results. The proof is in Nancy, who has had a thorough and objective physical examination by three different physicians, has had access to all the available treatments that modern medicine can offer, and yet still has unexplained headaches.

The path of external technology-based medicine has risen from the science of Sir Isaac Newton. The Newtonian model of physical reality views the world as a huge clocklike machine, with interconnecting parts that each have their own separate function, and work together in a precise manner—like “clockwork.” The modern medical system views the human body in much the same way, as a complex biomechanical structure of inert matter—bones, muscles, nerves, organs, etc.—that acts according to a predictable, linear pattern, unrelated to the influence of consciousness or creativity. Modern medical practitioners (and I must reiterate that as a modern chiropractic physician, I fall into this category) approach the treatment of their patients as a clockmaker approaches repairing a clock: first, inspect it to determine which part is not working, and then adjust, clean, repair, or replace said part.

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At this moment I am starkly aware that the reductionist Newtonian model of medicine, and therefore the scope of my traditional professional training and knowledge, has taken me—and my patient—as far as it can. There's nothing left but to admit that I don't know what is causing Nancy's headaches. The fact that none of her other doctors seem to know either is soothing to my ego, but it's not helping Nancy. It's clearly time to take a broader look at the problem, and this necessitates including the subjective viewpoint, my own as well as Nancy's. Obviously the traditional chiropractic therapy that I've been performing has given her temporary relief, which is probably what has kept her coming to me, but temporary relief becomes expensive, and eventually it just becomes discouraging. It's really no way to live. It's my willingness to *not* know what Nancy needs, to recognize the limitations of my objective knowledge, that allows me to relax my ego, expand outward beyond the limits of my five senses—beyond the limitations of objective physical reality—and connect to the subjective.

Subjective Reality – The Internal Path

“There is no objective reality!”² according to Dr. Candace Pert, the biophysicist who researched how our thoughts and emotions affect our health. She points out that our brains can only assimilate so much sensory information at one time: left without some kind of filtering system for the constant barrage of sensory stimulus coming at us from all sides, our brains would quickly go into overload, with mental chaos as the result. The system for filtering information from our environment is our emotions. Our emotions prioritize what information is important to us, and what can safely be ignored. As a result, our perception of reality, our personal understanding of “truth,” is constantly being modified and

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interpreted through the organizing structure of our emotions. The objective scientific “truth” of Newtonian physics is based on the idea that there is only one truth, which can be objectively measured, and whose measurements can be replicated experimentally. The discoveries of modern quantum physics, however, show that the measurer himself influences the outcome of every experimental measurement he performs, by virtue of his own unique subjective observation of the experiment, and his measurements.

Our subjective aspect extends well beyond the mechanistic world of Newtonian science, and into this “quantum realm” of modern physics. As Stephen Hawking, the eminent quantum physicist of our time says, “...apparently common sense notions work well when dealing with material things like apples and/or comparatively slow moving things like planets; they don’t work at all for things moving at the speed of light.”³ Such as thoughts, emotions, information. The quantum realm is the realm of thought and emotion, the realm of pure energy, where everything is still held in potential, and nothing has yet congealed into form. Our subjective aspect is the aspect of our selves that is fluidly connected to all energy, all knowledge, and all potential. It’s the realm of the mind, the higher self, spirit, soul. It is the realm where consciousness *creates* reality.

The Quantum Realm

A *quantum* is defined as a “discrete quantity of electromagnetic radiation,”⁴ and “the lowest denomination of energy.”⁵ As the physicists who followed Newton studied the nature of matter, they focused on progressively smaller parts in a search for the essential building block of matter, eventually reaching the level of subatomic particles. They found that as the particles get smaller,

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they move faster; eventually the smallest subatomic particles approach the speed of light. And this is where things get interesting. At these extreme high speeds, the particles take on the characteristics of light. A quantum, then, is a subatomic particle that is essentially a very short burst of light (an extremely fast electromagnetic vibration) that contains a small byte of information. Albert Einstein theorized (in his Unified Field Theory⁶), and quantum physicists have demonstrated, that our entire world consists of these bursts of light clinging together, rapidly firing in synchronized groups, to form fields of light that appear to our eyes as something solid, very similar to how a digital photograph is formed by tiny pixels coming together to form a picture. Our physical world, then, is created by the actions of these nonphysical light/information particles gathering together into fields, vibrating at different speeds; the slower vibrating fields appear denser, like rocks and metal, the faster vibrations appear as living things like plants and people, the really fast vibrations make up non-physical things like radio waves, vibrating so fast that our eyes can't see them.

Researchers have extensively (and objectively) studied non-physical human energy fields - the electro-magnetic energy fields associated with the human body—using measurements taken with specialized electronic equipment.⁷ Physiologist Valerie Hunt found that every material substance, living or inanimate, has a unique field of energy surrounding it that vibrates at its own unique vibratory level, what Dr. Hunt calls the “vibratory signature”⁸ of an object. The human energy field has been measured at a range of vibratory levels, some as high as 200,000 cycles per second.⁹ The lower levels of vibration in the human energy field are associated with the physical structure of the body: the cells, bones, organs, etc. In fact, Gregg Braden noted that each organ of the human body has its own distinctive vibrational frequency, what he calls the “signature frequency”¹⁰ of the organs:

for example, a healthy human heart resonates at a signature frequency of about 7.8 Hertz. (Interestingly enough, Braden, in his work as an earth scientist and engineer, pointed out that the equivalent signature frequency of the planet Earth is also 7.8 Hertz.) The higher levels of vibration in the human energy field are associated with the non-physical aspects of the human being, what Hunt calls the “mind-field” – the energy field of the mind.

Quanta, these bursts of light/information that are the basis for everything—human mind as well as human body—have not only a particle nature, but also a wave nature. As I understand it (and with my apologies to all quantum physicists out there), quanta hang out in waves, what physicists call waves of possibility. A quantum is like a single picture. A bunch of unrelated or non-sequential pictures aren’t much good, so the pictures tend to arrange themselves in a certain order of appearance that form something like a movie—a wave of pictures. The pictures, if directed by some sort of intelligence, could be rearranged into an infinite number of movies, just by bringing them together in a different order. So the “waves of possibility” are possible movies formed by the arrangement and rearrangement of these pictures. All movies are a possibility, until someone decides to bring the pictures together to form a particular one: to change a possibility into a reality. Or, in the language of physicist Amit Goswami, “Quantum objects exist as a superposition of possibilities until our observation brings about actuality from potentiality, one actual, localized event from the many potential events.”¹¹

So who brings the pictures together to form a particular movie? We do, merely by *observation*. “Quantum possibilities do not become actuality until we, sentient beings, look at them and choose.”¹² We actually do, according to the laws of physics, create our own reality. We choose a possibility from the quantum realm—where all possibilities are milling around, talking amongst themselves, so to speak—and the possibilities “collapse” from the

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quantum realm into the physical realm. Energy coalesces into form—the pictures come together to form a movie.

And how do we choose a possibility? With our brain. Or, more exactly, with our mind.

Human Mind: Human Body

In the external technological view of conventional Western medicine, the brain and the mind are one and the same. Until recently, science has told us that the mind is contained within the physical structure of the brain, but philosophers and healers have been positing for centuries that the mind goes far beyond the physical body. The ancient Greeks—Pythagoras, Plato, and Socrates, among others—commented about the exact nature and location of the mind. In ancient China, the Taoist view presented the brain as merely a physical organ through which the human mind—the temporal aspect of the formless, boundless, immortal primordial spirit—exerts control over the body. According to Daniel Reid, a practitioner of Chinese medicine and author of multiple books on the subject, “Primordial spirit is formless, boundless, and immortal, but in order to function in the temporal material world it must manifest a temporal aspect, which is called the ‘human mind’, including emotions and thoughts...The brain is a two-way terminal by which the mind exerts command over the body, and the state of the body influences the state of the mind.”¹³ The Chinese originated the idea that mind and body create each other, a concept that gave rise to the term coined by author Diane Connelly: *bodymind*. This is the integration of the external and internal paths, and implies what quantum physics confirms, that *consciousness creates reality through perception*.

According to the ancient Hawaiians (in their psycho-religious system, called Huna)¹⁴, the physical body and brain are

both controlled by non-physical intelligences: by both a “lower self” and a “middle self.” The lower self is the intelligence of the physical body; it services the needs of the body based on non-logical, survival-imperative thinking, similar to the “subconscious mind” of modern psychology. The middle self is a non-physical intelligence that takes up temporary residence in the physical body, as the guest of the lower self, and regulates thoughts and feelings based on the logical thinking of the “conscious mind”—the human mind. The Kahuna, the ancient Hawaiian practitioners of Huna, believed that our lower and middle selves also interact with a non-physical “Higher Self.” The Higher Self employs conceptual thinking, insight, and imagination to govern what psychologist Abraham Maslow called our “meta needs”¹⁵: the need for truth, beauty, wisdom, justice, and humor—our spiritual needs. The Higher Self is equivalent to the “superconscious mind,” or what Valerie Hunt calls the “Infinite Mind”: the mind of the cosmos.

Hunt sees the human mind and the cosmic mind like “two massive holographic computers,” each holding the reservoirs of information and experience of man and the universe, respectively. Neurophysicist Karl Pribram explored the idea that the human mind contains a memory hologram—a memory bank of *all* human memory, sometimes referred to as *collective reality*¹⁶: the collection of all human consciousness. Pribram eventually won a Nobel Prize for the idea. Physicist David Bohm described a similar memory-hologram for the universe, containing the memory of every physical event that has occurred in the universe.¹⁸ And experimental physicist/engineer Bob Beck found that when tuned to a specific brain wave frequency (at approximately 7.8 cycles per second), the human mind hologram actually interfaces with the cosmic mind hologram.¹⁹ The concept of a human-cosmic interface is nearly identical to the ancient Hawaiians belief that the lower and middle selves—the human brain and the human mind—interact with the Higher Self. Dr. Candace Pert confirmed, in her

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research at the National Institutes of Health, that the physical brain is not the director of information to the body, but merely a receiver of information from the mind. She found that the brain is just one more stop on “a vast superhighway of internal information exchange taking place on a molecular level.”²⁰ In other words, the mind networks with the brain *and* the body, communicating at a molecular level via a vast messenger system of peptides and peptide receptor sites throughout the body. Pert contends that the intelligence that directs the brain (the intelligence that is the human mind) originates in the non-physical realm. Because information has an unlimited capacity for expansion, “it cannot belong to the material world we apprehend with our senses, but must belong to its own realm, one that we can experience as emotion, the mind, the spirit—*an inforealm!*”²¹ Others call this “inforealm” the mind-field, the quantum realm, the quantum self.

If the intelligence of the mind is what creates matter, if our human consciousness indeed creates our reality, based on our perceptions, then why, you may ask, don’t we seem to be *aware* that we are creating our reality while we’re creating it? If our reality truly *is* a matter of choice, surely many of us would choose a different reality!

Again according to Goswami, we don’t often find ourselves in a state of consciousness that encourages us to choose freely. “It happens when we are creative, for example, when we experience deep compassion for another being, when we get moral insights, or when we are in communion with nature...I call [such a state] the quantum self because of its connection with the complete freedom of choice in quantum measurement.”²² Our sense of self in this state is expansive. It goes beyond the normal personal boundaries of our ego, and seems to encompass, and unite us with, the universe.

The trick, then, to choosing a reality that is not based solely on the perceptions of our ego—that is, on our fears, our

conditioning, or our past—is to choose from a higher state of awareness, from the level of the *quantum self*. This is the level of perception where the human mind and the cosmic mind interface, where the lower and middle selves communicate with the Higher Self. It's the state that I attempt to access in Signature Energy Work.

Valerie Hunt states that, “Ultimate reality is contacted not through the physical sense of the material world, but through deep intuition...Living is a transaction, an interaction with other force fields, with an element of choice. This is a domain beyond time, space, and mass where only vibrations exist.”²³

NANCY (continued)

I break into the relaxed silence between us, by telling Nancy that I believe—and I emphasize the words “*I believe*” so that she understands that this is my own frame of reference, and that she doesn't have to buy it—that the human being is much more than what meets the eye. In fact the physical aspects of the human being—the parts we can see—are just the tip of the iceberg. Scientific research, I explain, indicates that we humans are composed of physical, as well as mental, emotional, and spiritual aspects, and that these aspects inter-relate. This means that for every physical condition we experience, like headaches, there is the potential for an equally important emotional, mental, or even spiritual level of cause for that condition. I point out to Nancy that, until now, we have been working only on the physical level of her condition, and that her neck and back pain have completely resolved with that. But not her headaches. I suggest that perhaps her headaches have more to them than just the physical, and that in order to make more progress, we need to explore the other levels.

I use the analogy of the physical body as a lamp. Some lamps are prettier than others, some bigger, some brighter, but all lamps are designed to plug into an energetic system, wherein, if we

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flip the switch to the lamp, it should light up. (The lamp is part of an *electrical* energy system, whereas the physical body is part of a much more multidimensional energy system, but the relationships between the body/lamp and their respective energy systems are similar.) When we flip the light-switch and nothing happens, or the lamp shines only dimly, this is an indication that something is wrong, although the problem is not necessarily with the lamp itself. The problem may just as likely be somewhere else in the electrical system. I believe that Nancy's headaches, like any illness, are her body's way of trying to get her attention, to tell her that something is wrong. I believe that pain is our body sounding an alarm, indicating the need for change. Sometimes there *is* something wrong with the lamp—change is needed only at a physical level, like adjusting the spine or changing our diet. But it's just as likely that the problem is not with the lamp but the wiring, or perhaps the fuse—the change needs to be at another level of the electrical system. We can make alterations on any level: at the emotional level, by changing how we deal with our feelings; at the mental level, by changing beliefs and ideas; or at the spiritual level, by altering how we pursue the themes and purposes of our life.

Pain and illness are not our body betraying us, but rather attempting to assist us in growing. If we look at it that way, we can work *with* the pain, rather than resist it. If we trust that our body is trying to communicate with us, rather than hurt us, we will listen to it. It has been my experience, in 20 years of listening to bodies, that when we get the message, the body stops sounding the alarm.

Nancy nods her head. Perhaps she's just too tired to question my explanation, but it looks like she's following me, so far. We know that Nancy's headaches mean that a problem exists, we just haven't found out where in the system the problem is located. Is the light bulb burned out, or the wiring frayed? Is the lamp plugged in? Is there power to the switch?

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I explain that beyond our physical body—through which we see, touch, smell and hear—lie the emotional, mental and spiritual bodies; collectively known as the “energy body”. This is the system of energy that surrounds our physical body, and is invisible to the naked eye. It contains all of our thoughts and beliefs, is organized by our emotions, and is directly connected to the power source for our potential and our purpose. This multidimensional system, or “field,” of energy is like the house that surrounds, and is connected to, the lamp. Our physical body lies within the energy body, and is constantly influenced by its energies. And because these energies are not in physical form, they fluctuate and change as our thoughts, feelings, and self-understanding changes. In addition, these energies have an effect on the people who come into contact with our field; anyone who enters our house is influenced by its ambiance. Research indicates that the human energy field extends anywhere from a few inches to several feet away from our physical body²⁴, so anyone who comes within a few feet of us has entered our energetic “home”. Just as the lighting and color and furniture arrangement in each room of our home creates a distinct feeling for anyone who enters, each of our thoughts and beliefs, each of our habitual emotional reactions gives off its own characteristic energy frequency. Anyone who enters our energy field can feel it. These signature frequencies can be measured scientifically, and can be seen psychically. The sum total of all of the electromagnetic signatures of every thought, feeling, and belief that we have ever had, as well as the signature frequencies of every organ, tissue, cell, and molecule in our physical structure, are what make up our energy field. You can easily see that the result is a distinctly different energetic pattern for each human being, a pattern as unique as our fingerprint or our handwriting. This overall pattern is what identifies us as individuals; it’s our signature in the universal language of energy. I call it our signature energy.

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Nancy looks at me thoughtfully. Lately she's been very uncomfortable in her energetic home, especially in the room that is her head.

CHAPTER 2

A SIMPLE PATHWAY THROUGH THE PARADIGM

“The best description of healing refers to the activation of the body’s energies toward dynamic equilibrium, growth, and evolution.”

Dr. Valerie V. Hunt

The Structure of the Human Energy Field

From the simplest form of matter to the most complex cosmic event, everything is composed of light/information/vibration organized into fields of energy. Energetic fields, whether biological or cosmic, have an internal organization that allows each field to interact with other fields. Dr. Valerie Hunt’s research demonstrated that human energy fields have a range of frequencies. The extremely low frequency fields are associated with basic human biological processes, and the patterns of these low frequency fields are similar for all humans. Each molecule in our bodies gives off an electromagnetic field, as does each cell, tissue, and organ. A liver cell gives off a different frequency of field than does a kidney cell, but all healthy liver cells give the same characteristic frequency in all people.

The extremely high frequency human energy fields are associated with the mind, and higher levels of awareness. Hunt concluded that the patterns of these high frequency human energy fields are not at all similar from one person to the next, in fact she found that each person’s mind-field consisted of clusters of energy

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interspersed with gaps along the frequency scale, forming a distinctive pattern of energy-cluster-to-gap that was absolutely unique for each person. The clumps of energetic output are associated with emotional states, and the pattern of habitual emotional states—what Hunt calls the individual emotional signature—are formed by the individual’s responses to events and stimuli over the course of a lifetime, or even many lifetimes. Our emotional signature is what organizes our awareness into the unique vibratory pattern that is our human mind-field, and our human mind-field is what interfaces with the cosmic mind-field. The light/information that flows from the cosmic mind-field, channeled through our human mind-field, funnels down to our brain-body network to direct the formation of our physical reality. Our physical reality is formed, then, from our thoughts; and is shaped by our emotions. Energy precedes form.

Healers and mystics from ancient and indigenous cultures—the ancient Hindu Vedic texts, the Kabbalah of mystic Judaism, the Tibetan, Indian, and Japanese Zen Buddhists, among many others—have spoken for centuries about energy, and the human energy field. John White, in his book *Future Science*²⁵, enumerates 97 different cultures that refer to the human energy field using 97 different names: aura, energy field, energy bodies, subtle bodies being just a few. Many cultures describe the makeup of the human energy field, and while the terms vary, the basic structure is almost universally described as being composed of levels, or layers, of energy expanding progressively farther outward from the physical, to form what looks like concentric shells of energy around the body. Barbara Brennan, a NASA research scientist, psychotherapist, and practicing healer, describes the layers of the human energy field, as well as the history of scientific investigation into the human energy field, in her book *Hands of Light: A Guide to Healing through the Human Energy Field*. Brennan has developed what she calls “high sense

perception”—the ability to see higher vibrations of energy—and describes the human energy field as having layers composed of increasingly higher vibrational frequencies of energy – physical, emotional, mental, and spiritual energies. “Each succeeding layer interpenetrates completely all the layers under it, including the physical body...Actually, each body is not a ‘layer’ at all, although that is what we may perceive. It is, rather, a more expansive version of our self that carries within it the other, more limited forms.”²⁶ Brennan explains that in order to perceive each level, the practitioner must raise his consciousness to each successively higher vibrational frequency level, the lowest level being the vibrations of the gross physical body, which we perceive through our five physical senses.

The first *non*-physical level of the human energy field, according to Brennan, is called the *etheric* level, or *etheric body*. This layer sits closest to the physical body, and is associated with the autonomic functions of the physical body such as breathing, digestion, cellular growth and repair. The second layer is the *emotional* level, associated with feelings and emotional life, and the third layer is the *mental* level, associated with rational, linear thinking. These first three levels all process energies related to our physical world, and comprise what is commonly referred to as the mind, or more specifically, the personal human mind. Brennan describes a total of seven layers of the human energy field, and indicates that the upper three levels relate to the energies of the *spiritual* world – what I have referred to as the Universal (cosmic) mind, or quantum realm. The fourth level is the middle layer between the upper and lower three layers; it’s the interface layer between the physical and spiritual worlds, or we could say, between the personal human mind and the Universal mind. Brennan states that this fourth layer processes the energy of love.

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Evaluating the Individual Energy Field

The energy field of any individual can only be examined by taking into consideration all of the elements that contribute to their energetic signature: the entire storehouse of that person's emotions, thoughts, and spiritual beliefs. I contend that these less tangible aspects of the signature energy cannot be assessed accurately, if assessed only by the usual scientific objective means. After all, how am I to understand the feelings of my patient if I am prohibited from connecting with her emotionally, from engaging my own emotions? If I hold myself at an "objective distance" from my patient, how can I gain insight into what she believes, and the context for these beliefs? In assessing the truth about a patient, I must understand her truth, not just my truth about her. Parker J. Palmer, in his book, *The Courage to Teach*, states that the purely objective approach to knowledge is grounded in fear—fear that if we get too close to the thing we wish to examine (in this case, the true nature of my patient's problem), the "impure contents of our subjective lives will contaminate the thing and our knowledge of it."²⁷ We, as modern medical practitioners, are afraid to get too close to our patients—to touch them, listen to them, relate to them—because we are not comfortable with our own subjective nature. We are afraid of "contaminating" our patients with our own, subjective viewpoint. In addition, as individuals engaged in our own self-healing journey, we are afraid of being contaminated by the subjective viewpoint, the imperfect energy, of our patients. And finally, we are afraid, as individuals charged with the responsibility of creating our reality, of looking too deeply at the imperfection of our own signature energy.

Signature energy work requires the development of a method of knowing that takes into account the subjective energies of both doctor and patient: the observer and the observed. This

subjective sense, the sixth sense, if you will, is what allows us to perceive the mind-field—the personal and collective human mind-field as well as the cosmic mind-field. In the standard medical world, the subjective is avoided, and even considered something to be overcome. The result is medicine in the masculine model, based on detachment, objectivity, a narrowing of focus on specific parts: the power of the intellect. Signature energy work is based on a more wholistic model, which *builds* on this masculine foundation and adds—rather than denies—the feminine mode of knowing, based on resonance, affinity, expansion of focus to encompass the whole: the power of empathy, compassion, and intuition.

Our fear of the “impure contents”²⁸ of our subjective perceptions is banished when we come to the table with the assumption that *all* of our perceptions are valuable, that both our objective *and* subjective perceptions contribute to our understanding of the whole – the whole patient: her physical being as well as her feelings, memories, and beliefs. By letting go of the assumption that our subjective perceptions can only “contaminate” the object of our assessment, an opening is created for interaction, an interaction between the subjective nature of the examiner and the examined, patient and doctor. By moving past the assumption that it is inappropriate for us to be open to our patients, to becoming willing to be changed by our interaction with them, a resonance is formed between the healer and the one who seeks to be healed. The phenomena of resonance²⁹ suggests that it is the affinity between the contents of my signature energy, and the contents of my patient’s, that allows me to consciously identify her signature energy, and in the process, to become conscious of my own. In the resonant state, the thoughts, feelings, and physical sensations of the perceiver and the perceived add together, expanding the range of perception for both. If we allow all of our perceptions in this expanded state to have meaning, then we have created the experience of intuition.

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NANCY (continued)

I explain to Nancy that while scientists have found ways to document and measure the signature energy, using sensitive and sophisticated electronic equipment, only those people who have a very well developed clairvoyance can actually *see* energy. I'm not one of those people, so I have created my own method for assessing the signature energy of my patients. I explain that I will use the same method of muscle-testing that, until now, I've been using to determine which vertebra or muscle group needs attention during her treatment. But this time I'll use the muscle-testing to find out how her signature energy might be involved with her headaches, and how best to work with the signature energy in order to eliminate her headaches. I reiterate that I'm going to be asking questions silently, using the strength and resistance of her hand muscle as a yes-or-no answer. But in addition to checking her spine, as she has experienced so often during the course of her chiropractic treatments, I am also going to test various reflex points on her head, neck, abdomen and legs, as well as some points that are actually off the body, in her energy field. I promise that I'll explain to her what I find, once I put it all together, and that all she needs to do now is hold the two fingers of her hand together in the usual "O-ring" configuration³⁰, and resist my attempts to pull open the "O".

Muscle-Testing: The Interface of Mind and Body

"The individual human mind is like a computer terminal connected to a giant database. The database is human consciousness itself, of which our own cognizance is merely an individual

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expression, but with its roots in the common consciousness of all mankind. This database is the realm of genius; because to be human is to participate in the database, everyone, by virtue of his birth, has access to genius. The unlimited information contained in the database has now been shown to be readily available to anyone in a few seconds, at any time and in any place. This is indeed an astonishing discovery, bearing the power to change lives, both individually and collectively, to a degree never yet anticipated.”

Dr. David Hawkins³¹

Muscle-testing has been used for decades (if not longer) as a mechanism to determine subjective truth: a tool for accessing the “database” of human consciousness. The modern definitive study on muscle-testing was published in 1971 by three physical therapists, Kendall, Kendall, and Wadsworth.³² A chiropractor, Dr. George Goodheart, developed his own work with muscle-testing into a system called Applied Kinesiology, in which he showed that the strength or weakness of each muscle in the body is associated with the function of a specific corresponding organ and acupuncture meridian. In 1976 Dr. Goodheart began teaching his work to his colleagues. I myself studied Applied Kinesiology in my chiropractic post-graduate classes. The techniques became popular with many types of holistic practitioners as a method to detect and treat disease, based on the clear demonstration that muscles become weak when exposed to stimuli that can cause disease in the corresponding organ system, and become stronger when exposed to therapeutic substances.

I have to admit that for about the first 9 years after I learned Applied Kinesiology, I didn't use it in my clinical practice. I really didn't believe it; it seemed impractically complex and, yes,

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unbelievably subjective. Then I came upon the work of Dr. John Diamond, a psychiatrist who used muscle-testing to diagnose and treat his patients in a system he called “behavioral kinesiology.”³³ Dr. Diamond worked with psychological stimuli, using a simplified version of muscle-testing to study the effects on his patients. Dr. Diamond demonstrated that any muscle of the body will be instantly weakened by the presence of unhealthy emotional attitudes or mental stresses. This concept electrified me. It was a perfect explanation for why patients like Nancy don’t respond to standard western medical treatments—to *my* treatments—and it transformed my dormant Applied Kinesiology training into a tool for exploring first-hand the mind-body concept: how my patients’ emotional and mental patterns related to their physical complaints.

More recently, I found the writings of Dr. David Hawkins, a psychiatrist who conducted a 15 year-long study using muscle-testing, and reported his conclusions in his book, *Power vs. Force*. He found that a person’s responses to muscle-testing are “completely independent” of the person’s “...intellectual opinions, reason, or logic.”³⁴ This study confirmed what I have experienced in my own practice: muscle-testing is a mechanism that can be used to ask questions beyond the conscious levels of the body-mind, the subconscious as well as the superconscious levels. I can, in effect, ask any question, and use the resistance of any normal muscle to provide an answer.

When I ask a question, I then test the resistance of a muscle to see if that muscle is “strong”—able to maintain resistance—or “weak” in response to my question. The strong response indicates a “yes” answer to my question, the weak response indicates “no.” I ask questions silently so that the conscious mind has no chance to interfere with the answer. It is the energetic patterns that are held beyond the level of consciousness that are usually the reason behind illnesses that have no physical explanation. Bringing these patterns to our conscious awareness, and understanding how these

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patterns limit our growth, allows us to gain control of them: to choose differently.

Surrendering the Ego, Surrendering Doubt

The most difficult aspect of using muscle-testing in my practice, for me, is that muscle-testing not only circumvents the conscious mind of the patient as a source of information, but it also circumvents the practitioner's. The information accessed through muscle-testing is coming from beyond the conscious aspects of the patient; from beyond their intellect, and from beyond mine. In doing so, I am eliminating my individual ego, my limited knowledge and intellect, as the authority. That may sound easy, if a little new-agey, but wait until you try it.

If you are going to ask questions of the quantum realm via muscle testing, you have to accept the answers that you are given, *and act on them*. This requires a certain amount of humility (and/or desperation.) Having always been something of an intellectual snob, I found it very difficult to subordinate my intellect to the intelligence of the quantum realm; after all, I have college degrees! I had proudly—and successfully, thank-you-very-much—conducted my practice for years, relying on my training and my education; that is, on my well-developed ego. But patients like Nancy brought me inevitably up against the limits of my objective knowledge. Repeatedly. Only in the most desperate circumstances would I “resort” to muscle testing as a diagnostic tool. This became an annoyingly common cycle for me, and I did it again and again, each time just the tiniest bit less arrogantly than the last. Finally at some point I began to embrace the humility option, and started to trust the information that I got through muscle-testing. Actually, I started to notice that the information was correct. When I went with it, it worked. I gradually, *gradually*, trusted the

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quantum realm enough to actually use it out of choice, rather than need. I gradually learned to use muscle testing *first*, to access the quantum level, and then use my intelligence to help me interpret the information I received there. This step, as obvious as it sounds, was the hardest. It required wrestling down my self-doubt.

Doubt is the biggest obstacle to connecting with our quantum self, and self-doubt is the primary form. We are socialized from an early age to believe that we are incapable of surviving, or of being loved, just as we are. When we are young enough, we are, in fact, incapable of surviving alone, without the care and attention of those around us. We are dependent on our caregivers, so we learn how to please them: what to do, when, and how, in order to insure their love. In our minds, love and survival become inextricably linked, and neither one is guaranteed. We come to believe that we must be something else, something more than our natural selves, if we are to survive, which inevitably leads us to doubt what we are, what comes naturally to us. So we project a persona that is better—prettier, stronger, braver, in my case smarter—than we think we are in order to hide our inadequacy, in order to be loved, and in order to live. This “better” persona is our ego, and while it does, in fact, help us survive, it often gets out of hand. Especially as we become adults. As we come to rely on the ego, the mask of our “better self,” we become so identified with it that we forget who we are. We start to think that we *are* the mask, that we *need* to be the mask; the ego dominates.

When the ego dominates, we spend the bulk of our lives trying to protect ourselves from our inherent weaknesses. In doing so, we cut ourselves off from our inherent strengths. Our natural gifts are left behind, unexplored and abandoned. Self-expression—the cultivation and expression of our gifts, our natural strengths—is squelched in favor of performance, the performance of the ego. Relying on muscle testing means relying on the truth that is revealed at the quantum level, the truth of our higher self, not our

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parents' truth, not our ego's truth. Relying on the truth of our quantum self means allowing the higher self to dominate, which forces the ego to surrender its constant doubt and to confront its relentless fear of not being enough. In our modern medical culture, where objective facts are valued, and the wisdom of the higher self is unacknowledged, this is asking a lot.

The Mechanics of Muscle-Testing

Kinesiologic testing can be performed on any muscle, and is often used as a diagnostic tool in orthopedic and neurological medicine to evaluate the level of weakness of an injured muscle, or a muscle innervated by a damaged nerve. In Signature Energy Work I choose a normal muscle to test with, using it as a tool to access and read the signature energy. Many kinesiologists muscle-test using a combination of arm muscles. I prefer to test on one single muscle at a time, and I usually like to use the adductor muscle of the thumb, the "O-ring" muscle, simply because it results in less work for both me and the patient during repetitive testing. Here is how it works:

1. I ask the patient to hold the tips of the thumb and pinkie finger of one hand together firmly, forming an "O" with the hand.
2. I test the normal strength of this muscle by attempting to pull these two fingers apart, using each of my own index fingers placed inside the "O" and pulling outward. Normally, the patient is able to maintain the "O" against my pull. This is the "yes" mode in my question/answer process.
3. I ask the patient to hold the "O" together, and then silently ask to be shown the "no" mode, while again

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pulling outward on the patient's fingers with my own. A "no" answer is demonstrated by the patient's inability to sustain his thumb and pinkie held together against the pull of my fingers.

Muscle-testing should not be a life-and-death struggle, so I instruct my patient to hold his fingers together firmly against my resistance, but not to throw his whole body into it. My resistive pull is firm also, but not so firm that I am always pulling the patient's fingers apart. I will repeat the 3 steps above until I get a feel for a particular patient's muscle tension and strength, and I find the right amount of pull to use in order to get a consistently clean "yes" or "no" response on that patient. Everyone is different, so I have to be willing to play with it a little.

If my patient is not able to hold his fingers together, because of injury to the hand, overall weakness, inability to comprehend the muscle test mechanism, etc., or if I am unable to register a clear "yes" versus "no" response on the patient, I may choose another muscle to conduct my testing on, or I may move to surrogate testing. Surrogate testing can be performed by using another person to muscle-test, as a stand-in for the patient. I often use surrogate testing when examining small children: I ask an adult (usually the mother or father) to hold or embrace the child/patient while I muscle test using the adult's hand muscle, but asking questions about the child. This works well for two reasons: small children tend to be intimidated by strange doctors, and they are often too young, or too squirmy, to focus on sustaining a muscle-testing mode for more than a minute or so.

I also use myself as a surrogate for my patients when necessary. This requires mastering the fine art of muscle-testing on one's self. I usually self-surrogate like this:

1. Ask a yes-or-no question.

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2. Form the “O” with thumb and pinkie-finger of the non-dominant hand (in my case, this is my left hand).
3. Use the thumb and index finger of the dominant (my right) hand to push apart the “O”.
4. If I can push open the “O” with my other hand in response to a question, this is a “no” response to my question. If the “O” stays closed, this is a “yes”. (Weak=no, Strong=yes)

Self-surrogate testing opens up another avenue of signature energy work: self-testing. This means using myself as a surrogate for myself. I can follow the 4 steps above, while asking questions about myself, as the patient. This moves me in a most interesting direction: self-healing, the exploration and repair of my own signature energy.

Compassion: Key to Intuition

Ah, you say! Didn't we establish earlier that muscle-testing bypasses the conscious mind, the intellect? And didn't I say that I always ask my muscle-testing questions silently, in order not to bias the conscious mind of my patient? Yes, indeed. Then how, you may ask, can I muscle-test on myself, without bias?

Sometimes I can't. Sometimes I can. What makes the difference between the two is neutrality. If I can be completely neutral, I can test without bias: if I can test from a place of complete openness to receive any answer that comes, total acceptance of my not-knowing what the answer should be, then I can get out of my own way enough to receive accurate answers. And if you think about it, that is really the only way I can get

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accurate answers about my patients. If I have a bias toward a certain answer when I am muscle-testing a patient, if I am prejudiced toward a particular outcome, I am not going to be able to receive information that is clear and true. This open, accepting, receptive state is the state of higher consciousness that Dr. Goswami was referring to when he spoke about connecting with the quantum realm. Goswami called this the state of compassion; he used the term “deep compassion.” Valerie Hunt refers to this state - the opening between the human and cosmic mind-fields—as “deep intuition.” Barbara Brennan refers to this as love; the energy of the fourth layer of the auric field, the layer related to the heart, “...the transforming crucible through which all energy must pass when going from one world to the other.”³⁵

Compassion, then, is acceptance of the idea that there is an answer, a reason, for everything; even the things we don’t understand, even the things we don’t like, even pain. Intuition is the openness to receiving and understanding these higher answers. Neutrality, the optimum state for muscle-testing, for healing work, and most importantly for self-healing, is the level of consciousness that opens us to compassion and intuition. It is a suspension of disbelief that allows for connection with the quantum realm. It is the state of surrender, of trust. It is the state of not-knowing, the state of grace.

CHAPTER 3

WALKING THE PATHWAY

*“Great leaps in levels of consciousness are always preceded by surrender of the illusion that ‘I know’.”*³⁶

NANCY (the final piece)

I test through a series of energetic points on Nancy, looking for the non-physical sources of her pain, and am shown that the problem is in her nose. Now intellectually, this makes no sense because Nancy didn't have any trauma related to her nose in the car accident. And why, exactly, would her nose cause headaches? Knowing better, at this point, than to question the answers I've been given, I go with it. I ask Nancy to tell me what happened to her nose.

Nancy's next breath comes as a hiss, as if the question literally stings. She hesitates for a long, heavy moment, and then she begins to cry. She cries for a long time, unable to answer my question, unable to stop the flow of tears. It feels like I've tapped into a veritable sea of unshed tears, the force of which, confined in the relatively small area of her nose, has created an unbearable pressure. Hence the headaches. The energy of these tears is potent; as I sit quietly, holding Nancy's head in my hands, I feel their sadness, anger, betrayal, and fear come pouring outward. I feel my own eyes welling up, just from the pure intensity of emotion streaming around me.

Finally, Nancy can speak.

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When I was 13 years old, I lived in a small town, in my country, which was very simple and very poor. One day, my father told me that we were going to see a doctor. My mother died when I was very young, so my father was the one who took care of me. We had to ride the bus to the city, which was about an hour away. When we arrived to the doctor's office, I was taken, alone, into a small surgical room where the doctor performed surgery on my nose. Apparently, my father had decided that my nose made me look too Indian, and that if I wanted to find a husband, my nose needed to be smaller. He only explained this to me afterward. The doctor was apparently a friend of my father's, and so he was doing the surgery as a favor. He told me absolutely nothing about what he was going to do to me; he just told me to lie down on the table, he injected me with some type of local anesthetic, and then pulled out the scalpel and started cutting. His one instruction to me was that I must not, under any circumstance, move or cry during the procedure. I was terrified, so of course I obeyed.

I am stunned. Nauseated. I am a chiropractor for many reasons, but one of them is that just the thought of blood and open wounds and exposed bones and such, turns my stomach. I could never be a surgeon. I ask Nancy if she experienced any pain during the surgery.

Not pain, but I could feel the scrape of the knife, and hear the dull tap of the hammer against my face bones. I wanted to scream, or run away, but I couldn't so I just lay there wondering if I was going to die. I didn't move, and I didn't cry.

I relate to Nancy my impression of unshed tears, and all of the trapped and stagnant emotional energy that had been stored up behind her nose. The intense nature of these emotions, and the amount of time they had been festering there, made them very

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toxic. No wonder she was suffering with headaches. Allowing herself to cry, and to talk about her experience will go a long way toward alleviating the pressure, and relieving the headaches. But I have to wonder, if this horrific experience occurred when Nancy was 13 years old, why she never had headaches until recently—until her car accident?

No Accidents

As trite as this may sound, I don't believe in accidents. Of course the person who rear-ended Nancy didn't do it on purpose, and I'm sure that Nancy didn't plan, much less want, to have an accident. Nonetheless, I think that there is reason for everything. In fact, I think there is good reason for everything. We waste so much of our time and energy in life wondering, "Why me?" This implies that we are the victims of our circumstances, and that there is something wrong with what has happened to us, or worse, that there is just something wrong with *us*. The result is life from the negative perspective. This is one option, and there are essentially two others, as I see it. The second option is the zero perspective: we are not victims, and there is nothing wrong; it's just that "shit happens", as they say. This is certainly a less stressful choice than constant victimhood, but not all that satisfying, you have to admit. The third option is the positive perspective: everything that comes to us is *for* us, according to some benevolent plan, some invisible law of physics that says that everything must grow, must evolve in a direction that is meaningful, purposeful, and inevitably good. Every experience has something to be gleaned from it that will help us evolve. Which of these three options you choose is up to you entirely, since you could argue the validity of all three, but never definitively prove the truth of any one. Except perhaps to yourself.

Working With the Energy

I ask Nancy if there is any situation going on in her life now that is similar in dynamic to her experience as a 13 year old, reminding her of the basic themes behind the emotional energy that was causing her headaches: powerlessness, domination/betrayal by men, inability to move (trapped) or to cry (emotional repression), just to name a few. She nods. I can see the gears whirring in her head for a moment, as a slow smile lights up her face.

It's good to see Nancy smiling.

We talk about her life now. She tells me that her employer is a good man, but he expects more of her than she can give. He wants her to function as a stand-in mother to his son, asking her to live in their home for weeks at a time while he travels on business, frequently (ever so coincidentally) to her native country. When he is gone, she carries all of the responsibility of a mother, but has none of the power; she is expected to care for all of her young charge's needs, but has no authority to make decisions related to those needs. Exhausted and frustrated, but not wanting to upset the little boy, she has been keeping it all to herself. She has thought about looking for another job, but doesn't want to leave the little boy, knowing as she does what it feels like not to have a mother. Of course she hasn't spoken to her employer about the situation, being reluctant to confront him. I think she realizes, as she speaks, how much this has been bothering her.

So she had an accident. Again, I don't actually think she wanted to have an accident, but she really needed to stop and take a good look at the direction she was headed, and choose otherwise. She had herself all tied up in the same situation as her 13 year old self: powerless, unable to move, unable to express herself. And so the persistent headaches. Her higher self gave her a clear,

unignorable signal that she needed to address these emotions, and the beliefs that hold them in place: we feel powerless because we believe that others are more powerful than us, we are afraid to move away from, or express dissatisfaction with our circumstances because we believe that it is not safe to do so. Or that we don't deserve to do so. We fear that we are less than, inadequate, wrong in some way.

Oh yeah, that ego thing again.

I ask Nancy to relax and breathe deeply once again. I instruct her to envision the energy that has been trapped in her head moving out with each breath, using the breath as a sort of a pump. As she exhales, the sadness, anger, and fear move out of her body. As she inhales, she draws fresh energy into the same area. I ask her to put her intention into each breath, and draw into her head energy of a higher quality. Think about it: if you evict sadness, anger, and fear, what energy would you want to replace it?

Choose that.

I can feel her whole body smiling now, drawing in the positive energy, and embracing the idea that she can choose her own signature energy. When she's ready, I give her the chiropractic adjustment that she came in for, sure now that it will have an effect.

Nancy comes in again a week later, headache free. She returns for her final evaluation 2 weeks after that, still with no headaches, but with a new job. She is now working as an aide to an elderly woman. The work is much easier, she says, both physically and emotionally. She had a long conversation with her former employer, and then helped him find someone to replace her. She had a long talk with her boy too. They cried together, and then worked out an arrangement where she goes to visit him regularly, but not to work, just to play.

Five steps to create a healing energy-work treatment.

Signature Energy Work: Accessing, Evaluating and Transforming the Personal Energy Field

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