



Spring Forest Qigong

“a healer in every family and a world without pain”

Spring Forest Qigong Research News

Spring Forest Qigong “**extremely effective**” in treating Depression & Bipolar Disorder

“The health care system is currently in a state of crisis with more than 41 million people uninsured and mental health care is, in reality, a non-issue with insurance carriers,” according to psychologist Dr. Frances V. Gaik. Having worked for many years in the health insurance field Dr. Gaik was intimately familiar with the weaknesses in the system. In 2001, Dr. Gaik began an intensive search for a low-cost complementary treatment that would be effective in helping patients in need of psychological care, while still a doctoral candidate at the Adler School of Psychology in Chicago. Dr. Gaik reports having discovered exactly the type of treatment she was searching for in Spring Forest Qigong.

In the summer of 2002, Dr. Gaik put the Spring Forest Qigong technique to the test in a study with 39 patients suffering from “Major Depression, Dysthymia or Bipolar Disorder.” Upon completion of the study and thorough analysis of the results, Dr. Gaik issued the following statement about Spring Forest Qigong:

“I have done a full and comprehensive study of the various qigong methods and techniques as part of my research for the qigong/depression study. I have found that the SFQ technique which Chunyi Lin has developed is easy for individuals to practice and yet it incorporates a full spectrum of the various movements for health. I have taught the technique in clinical settings as well and found it was well accepted by both patients and mental health practitioners.

The SFQ technique was extremely effective in the treatment of depression, including bipolar subjects, and was especially instrumental in manifesting a greater sense of self and positive connection with the world. I would highly recommend the use of SFQ in the treatment of depression, anxiety, anger management, attention deficit disorder and to enhance self esteem. ”

Frances Gaik, Psy. D., Oak Brook, IL,
Author of “A Preliminary Study Applying Spring Forest Qigong
to Depression as an Alternative & Complementary Treatment” (2002)

In Dr. Gaik’s study, a total of “39 subjects suffering from DSM-IV diagnosis of Major Depressions, Dysthymia or Bipolar Disorder” were taught the Level One Spring Forest Qigong techniques by Master Chunyi Lin in a one-day training session at the end of June 2002. Master Lin met with the subjects again at the end of July and the end of August.

Each subject was also provided with SFQ Level One videotape, manual and audiotapes including the SFQ Small Universe and Self-Concentration meditations. The subjects were directed to practice either the Level One Active Exercises or meditations for at least forty minutes each day and to keep a log of their practice sessions.

Dr. Gaik found that “all subjects improved over the treatment period” and “a very significant level of improvement in the majority of the subjects who were measured at serious levels of depression.”



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Research on Spring Forest Qigong — Depression Study

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The following are excerpts from Dr. Frances V. Gaik’s study: “A Preliminary Study Applying Spring Forest Qigong to Depression as an Alternative and Complementary Treatment” (Adler School of Psychology, Chicago, IL, 2002)

Clinical Implications

The health care system is currently in a state of crisis with more than 41 million people uninsured and mental health care is, in reality, a non-issue with insurance carriers. The current accepted mode of treatment for depression, the most commonly diagnosed mental difficulty, includes cognitive behavioral therapy and medication. The perspective that we are interconnected through an energy field and that this energy can be enhanced and ultimately exchanged in human interactions, whether they be through thoughts, emotions or physical action, is a major shift in paradigm which is not addressed in the current accepted therapies. The qigong exercise is believed to enhance the human energy system of the individual over time, building upon health and a sense of well being. According to qigong principles, the individual subjects learned to cultivate, store and manipulate “energy” or qi which activated symptom relief. The subjects could indeed have learned to mobilize innate healing potential and reverse the negative effects of depression, as well as taking personal responsibility for their health.

An energetic approach to depression offers the opportunity to change our perception about human relationships and how to modulate our own response to “toxic environments” and their effects upon our own energy field. The subjects in this study were not removed from their everyday difficulties, nor were they given psychotherapy; they were trained in how to better cope with and balance their emotional world and to develop a sense of self mastery. A balanced control of their response was the goal rather than a dependency upon medication or the need to see a therapist.

This is the first study to apply qigong as a curative in depression and significant results were observed over the short-term of two months. The subjects learned a technique which offers a lifetime modality for dealing with stress and the negative effects of depression. If the trend continues as expected, they may have learned to mobilize their own healing potential. The technique is cost effective (the price of the video and audio tapes) and there were no reported side effects of the exercise.

The results provided a significant improvement in all subjects. In applications of a new treatment, only a few events of sufficiently high significance can be enough to assert that a new phenomenon exists with a high level of confidence; this study indicates a very significant level of improvement in the majority of the subjects who were measured at serious levels of depression. The qigong exercise has been differentiated from meditation and visualization through EEG activity (Ueda, et. Al.,1997), which cannot merely account for the



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significant levels of improvement seen in this study. The qigong exercise is not comparable to physical exercise, in that it is not exertive to the levels necessary to release endorphins.

Given the theoretical acceptance of the concept that the human system has energy transformers called chakras and that we are affected by the flow of this energy through the meridian system, speculation on the results may be considered in light of energetic theories posited by Kunz and Peper (1983). Dora Kunz was one of the originators of Therapeutic Touch which is widely taught and used by nursing staff.

A decrease of energy is a common factor of depression and there are complex factors involved. Normal mood changes of anxiety, disappointment and sadness may be an incipient factor in shutting down or closing of the solar plexus chakra, responsible for the main energy flow intake, according to Kunz. As the whole system is energetically recharging at a lower rate, the individual is expending more energy through dealing with turbulent feelings, and consequently less energy is available. Anxious and depressed individuals tend to breathe in a shallow pattern, and this will also affect the flow of oxygen and energy into the body. The qigong exercise encourages a deep and measured breath, increasing oxygen to the organism.

(“A Preliminary Study Applying Spring Forest Qigong to Depression as an Alternative and Complementary Treatment,” Frances V. Gaik, Psy. D. pg 87-89)

Anecdotal Reports

Specific reports of somatic and symptom relief were reported which deserve to be mentioned: 1) one woman stated that the ringing in her ear had disappeared immediately after the first qi emission treatment. She reported that she had consistently experienced this ringing for a period of nine years; 2) another woman stated that she had reduced her insulin levels; 3) another woman with numerous physical problems stated that she no longer needed to take Vicodin to sleep at night, and she began a job after a long period of not working; 4) another woman stated she had cut her anti-depressant medication in half; 5) another woman stated that she found she could get answers to her problems while doing the qigong exercise.

(ibid. pg. 81)

Research Results

The results were most successful in that the subjects reported significant and substantial relief of symptoms connected with DSM-IV guidelines and there were no reported negative side effects of the treatment.

The researcher and all three practitioners noted that physical presentation and appearance of the group was markedly different and improved at the end of the treatment period than when they first presented two months earlier. There was a noticeable difference in the affect and presentation of the subjects. The practitioners commented on their original concern at the first meeting about how “serious” and sad the subjects looked. By the last session, the subjects displayed an enthusiastic attitude and their affect was markedly changed to a more responsive and animated level. They were genuinely curious about the qigong technique and made inquiry about advanced levels of practice. Although the study treatment period lasted only two months,



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the trend of improvement may continue to be experienced with continuation of the exercise as length of practice indicates that greater change can occur over time, especially after 12 months. (Kawano, 1997; 1998) (“A Preliminary Study Applying Spring Forest Qigong to Depression as an Alternative and Complementary Treatment,” Frances V. Gaik, Psy. D. pg. 83)

ABSTRACT

A pilot study with 39 subjects suffering from DSM-IV diagnosis of Major Depression, Dysthymia or Bipolar Disorder were treated with the Eastern Traditional Chinese Medicine technique of qigong. Treatment included qi emission treatment by qualified practitioners, and subjects were required to practice qigong exercise for a two-month period. Significant improvement was observed, especially in the first month on the measurements of Beck’s Depression Index-Revised (BDI-R) (.0000) and Symptom Checklist -90 R (SCL-90-R) Depression Index (.00003), Interpersonal Sensitivity (.00003). SCL-90 Somaticism indexes as well as three criteria from DSM-IV guidelines are also reported on indicating an overall trend of improvement over time. All subjects improved over the treatment period and it is determined that the qigong exercise is a highly effective complementary and alternative treatment modality for depression and should be considered as an adjunct to psychotherapy treatment. No significant difference was seen in those subjects treated with qi emission.

For more information on Dr. Gaik’s study “A Preliminary Study Applying Spring Forest Qigong to Depression as an Alternative and Complementary Treatment” contact the Adler School of Professional Psychology where her complete research results and dissertation are on file.

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