Energy Healing and Latter-day Saint Doctrine

Authority, Revelation, Syncretism, Priestcraft, Evidence, and Risk

A comprehensive source-based assessment.

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A comprehensive source-based assessment merging two prior deep-research reports

Assessment date: August 3, 2026

This document distinguishes official Church policy and teaching from reasoned doctrinal conclusions, historical analysis, scientific evaluation, and case-dependent ethical judgments.

Executive Conclusion

As of August 3, 2026, the current General Handbook of The Church of Jesus Christ of Latter-day Saints expressly addresses practices commonly called energy healing. It discourages members from seeking miraculous or supernatural healing from people or groups claiming special access to healing power outside prayer and properly performed priesthood blessings. The Handbook explicitly states: “These practices are often referred to as ‘energy healing.’ Other names are also used.” It also notes that promises of this kind are often made for money. This is not an inference imposed on an unrelated policy; it is the Church’s current, direct treatment of the subject.

The Church has established a recognizable order for seeking healing: competent medical care, faith in Jesus Christ, prayer, and-when requested-an administration to the sick performed according to revealed instructions by worthy holders of the Melchizedek Priesthood. The ordinance consists of an anointing with consecrated oil and a sealing of the anointing; it is performed by priesthood authority, in the name of Jesus Christ, without charge, and in submission to the Lord’s will.

Consequently, a privately developed system that claims to diagnose hidden spiritual causes, receive revelation for clients, detect or clear invisible energies, remove inherited emotions or entities, command a body to heal, or channel “Christ’s healing power” is not made legitimate by Christian vocabulary. Invoking Jesus Christ does not authorize a practice He has not revealed. Sincerity is not a substitute for priesthood authority. A spiritual feeling is not self-authenticating evidence. Christ’s power is not a technique, commodity, transferable energy, or privately controlled force. Matthew 7 expressly warns that invoking Christ’s name and reporting marvelous works do not establish divine approval; the controlling question is whether one does the Father’s will.

This does not mean that every participant is knowingly fraudulent, malicious, or deliberately rebellious. A practitioner may be sincere, compassionate, mistaken, suggestible, self-deceived, commercially influenced, or some combination of these. A session may produce relaxation, comfort, warmth, reduced anxiety, temporary pain relief, emotional catharsis, or a meaningful personal experience. None of those outcomes, however, demonstrates that invisible energies were detected, that ancestral emotions were removed, that an entity was expelled, or that Christ revealed a diagnosis. The National Center for Complementary and Integrative Health states that Reiki has not clearly been shown effective for any health-related purpose and that there is no scientific evidence for the energy field its proposed mechanism presupposes.

> **Latter-day Saint-branded energy-healing systems that claim supernatural diagnosis, revelation for clients, manipulation of invisible power, or a proprietary ability to channel Christ’s healing power depart from the Church’s revealed order. When they imitate priesthood administration or commercialize claimed divine power, they should be recognized as spiritually dangerous counterfeits, not treated as harmless alternative discipleship.**

“Counterfeit” in that sentence is a reasoned doctrinal conclusion, not a quotation from the Handbook. The Handbook itself says members are “discouraged” from such practices; it does not declare that every possible participation has identical culpability, nor does it label every participant fraudulent or formally adjudicate every case as priestcraft. But the official warning, the revealed priesthood order, the limits of personal revelation, and the scriptural prohibitions on purchasing or exploiting spiritual power converge decisively.

The force of that conclusion should not be weakened by collapsing every practice into one category or by treating every participant as equally culpable. Ordinary prayer, compassionate care, lawful professional treatment, relaxation, massage, breathing exercises, and other non-supernatural wellness practices are not condemned merely because they involve touch or calm. The decisive issue is the claim being made: whether a practitioner asserts special access to invisible healing power, revelation for clients, hidden spiritual diagnosis, ritual control, priesthood-like authority, or purchasable divine power.

Where LDS-branded practitioners use substantially the same muscle tests, magnets, hand positions, attunements, proxy sessions, chakra concepts, clearing routines, and certifications used in religiously neutral or non-Christian settings-and the technique is said to work regardless of belief-the most plausible theological description is syncretism:

restored-gospel vocabulary is being combined with a preexisting metaphysical system. This is an analytical inference, not an official Church declaration about every named practitioner.

None of this requires concluding that every participant is dishonest, malicious, spiritually dark, or motivated primarily by money. Many are likely sincere, compassionate, influenced by personal experiences, and convinced by testimonials. But sincere intention does not establish priesthood authority, scientific validity, diagnostic reliability, or ethical safety. The most defensible conclusion is therefore direct but compassionate: Christ-centered energy healing remains unauthorized and doctrinally suspect when its operative claims depend on manipulable invisible energies, supernatural diagnosis, private revelation for clients, imitation of priesthood forms, or commercialization of claimed divine access.

Principal Findings and Confidence

Finding	Classification	Confidence
The current General Handbook explicitly identifies practices commonly called energy healing and discourages claimed supernatural healing methods outside prayer and properly performed priesthood blessings.	Official policy	Very high
Administering to the sick is a revealed priesthood ordinance performed by worthy Melchizedek Priesthood holders according to prescribed instructions and subject to the Lord's will.	Official policy and doctrine	Very high
Mystical healing practices involving curses, divination, entities, or imitation of priesthood power may fall under the Handbook's stronger warning concerning the occult.	Official policy applied to characteristics	High
Personal revelation does not authorize a practitioner to govern, diagnose, or define another person outside legitimate stewardship.	Official teaching	Very high
A proprietary Christ-centered energy ritual claiming supernatural power is incompatible with the revealed order of healing.	Reasoned doctrinal conclusion	High
Selling claimed access to revelation or divine healing power raises grave priestcraft concerns.	Scripturally grounded, case-dependent conclusion	High
LDS vocabulary placed over Reiki-style, chakra-based, proxy, muscle-testing, or similar systems is reasonably described as religious syncretism.	Analytical inference	High when the operational method is retained
Reiki-style fields, trapped-emotion objects, Heart-Walls, remote clearing, or diagnostic muscle responses have been scientifically established.	Unsupported claim	Very low
Every practitioner is consciously deceptive, malicious, or motivated only by money.	Not established; inappropriate as a blanket claim	Low

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1. Current Church Guidance: Differentiated but Unmistakable

Medical and health care. Section 38.7.8 of the current online General Handbook establishes a three-part pattern: competent medical help, faith, and priesthood blessings work together in healing, subject to the Lord's will. It directs members not to use or promote ethically, spiritually, or legally questionable health practices and to consult competent medical professionals licensed in their areas of practice.

The section then addresses the central question directly. Members are discouraged from seeking miraculous or supernatural healing from a person or group claiming a special method of accessing healing power outside prayer and properly performed priesthood blessings. It identifies "energy healing" as a commonly used name and observes that such healing promises are often offered for money. The key policy word is discouraged. That is not identical to a declaration that every imaginable practice carrying the label is automatically a membership offense, but neither is it neutral language or an invitation to proceed according to personal preference. It is a clear Church-wide warning against the described category.

Threshold questions answered by current Church instruction

Question	Answer
Does the Handbook use the expression "energy healing"?	Yes, explicitly. The policy is directed to the category itself, not inferred from an unrelated rule.
Does the policy merely warn against replacing doctors?	No. It separately discourages claimed supernatural access outside prayer and properly performed priesthood blessings.
Is the concern limited to one trademarked method?	No. The Handbook states that other names are also used.
Is charging money relevant?	Yes. The Handbook identifies payment as a frequent feature of the discouraged promises.
Does the Handbook forbid every complementary wellness practice?	No. The warning concerns miraculous or supernatural healing claims and special access to healing power.
Does "discouraged" mean endorsed but optional?	No. It is negative ecclesiastical direction, even though individual culpability and circumstances may differ.

The occult and imitation of priesthood. Section 38.6.12 is stronger. It defines the relevant category as mystical activities not in harmony with the gospel and expressly includes fortune-telling, curses, and healing practices that imitate God's priesthood power. It then directs members not to participate in the occult. Thus, the Handbook does not say that all alternative health care is occult; it identifies particular characteristics-mysticism, curses, divination, and imitation of priesthood power-that move an activity into that category.

This distinction matters. A practitioner giving an ordinary shoulder massage while the client listens to calming music is not thereby conducting a priesthood imitation. A practitioner who raises hands over a client, invokes Christ, claims to discern an invisible spiritual cause, commands an entity or energetic obstruction to leave, and pronounces a divinely powered healing is making a different kind of claim. The second practice resembles the form and claimed spiritual function of an administration even if it is called "facilitation," "clearing," "balancing," or "energy work."

Commercial spirituality and self-awareness programs. Section 38.7.12 warns about private and commercial programs promising rapid improvement in spirituality, self-awareness, family relationships, or emotional well-being. It notes that temporary relief or exhilaration may occur while underlying problems remain. It warns of harmful methods, excessive fees, lengthy commitments, false implications of Church endorsement, and combinations of worldly concepts with gospel principles that can undermine faith. Church leaders are not to promote, endorse, or pay for such groups, and Church facilities are not to be used for them.

This section is particularly relevant to paid levels, mentorships, proprietary revelations, “advanced” spiritual secrets, certification ladders, and repeated sessions marketed through LDS social networks. It does not make every paid self-improvement course wrong. It identifies a cluster of risks: spiritual claims, quick solutions, high costs, implied Church approval, questionable methods, and mixing gospel principles with outside systems.

Authorized administration to the sick. Handbook chapter 18 calls ordinances and blessings sacred acts performed by priesthood authority in Jesus Christ’s name. For administering to the sick, it specifies two parts: anointing with consecrated olive oil and sealing the anointing. “Only worthy Melchizedek Priesthood holders may administer to the sick or afflicted.” Ordinarily two or more participate, although one may perform both parts. The administrator states that he acts by the authority of the Melchizedek Priesthood; in sealing the anointing, he gives words of blessing as guided by the Spirit.

The ordinance is normally requested by the recipient or concerned loved ones, is not to be solicited in hospitals, and is not performed for a fee. That structure marks it as an act under priesthood authority-not a transferable skill obtained through a commercial certification.

Strength of the Church's wording

- "Discouraged" applies to seeking miraculous or supernatural healing through claimed special methods outside prayer and properly performed priesthood blessings.
- "Should not use or promote" applies to health practices that are ethically, spiritually, or legally questionable.
- "Should not engage or participate" applies when the activity qualifies as occult, including mystical healing practices that imitate priesthood power.
- "Are not to pay for, promote, or endorse" applies to Church leaders dealing with the problematic commercial self-awareness groups described in the Handbook.

It would therefore be inaccurate to say simply, “The Church has banned every complementary therapy,” or, at the opposite extreme, “The Church merely expresses a mild personal preference.” The actual position is differentiated but clear.

Type of activity	Best reading of current Church guidance
Ordinary prayer, fasting, compassionate care, and properly performed priesthood blessings	Affirmed as part of the revealed pattern of healing.
Competent medical, psychological, rehabilitative, or other legitimate professional care	Affirmed; members are directed toward competent, appropriately licensed professionals.
Non-supernatural relaxation, massage, comforting touch, breathing exercises, or stress management	Not automatically condemned; evaluate safety, honesty, evidence, professional scope, and informed consent.
A special method for detecting or manipulating invisible healing power outside prayer and authorized priesthood blessings	Explicitly discouraged under Handbook section 38.7.8.
Mystical activities involving curses, entities, divination, or healing practices that imitate priesthood power	Treated more strongly under section 38.6.12 as occult participation that members should avoid.
Commercial programs mixing gospel language with outside concepts, implying Church endorsement, promising quick spiritual solutions, or demanding large fees and commitments	Warned against under section 38.7.12; Church leaders are not to promote, endorse, pay for, or provide facilities for the problematic programs described.

2. The Revealed Pattern of Healing and Administering to the Sick

The Lord's revealed pattern of healing. James 5 appears in the pastoral conclusion of James's epistle. The afflicted are to pray; the sick are to call for the elders of the church; the elders pray over and anoint the person with oil in the Lord's name; the surrounding verses also emphasize confession, mutual prayer, and righteous community life. It is not presented as an impersonal energy technology or a technique obtainable through attunement.

Doctrine and Covenants 42 was received in February 1831 as part of "the law" for the newly organized Church. It combines tender physical care with priesthood ministry: those without faith to be healed are to be nourished with tenderness, herbs, and mild food; elders are called to pray and lay hands on the sick; and the revelation explicitly acknowledges both healing and death according to divine appointment. The passage resists two opposite errors: rejecting practical care in favor of miracles, and treating healing as mechanically controllable.

Elder Dallin H. Oaks summarized the restored pattern as medical science, prayers of faith, and priesthood blessings. He identified anointing, sealing, faith, inspired words, and the Lord's will as elements of priesthood administration, stressing that even authorized servants cannot produce a result contrary to God's will.

The revealed administration to the sick. The current Handbook says that an administration is ordinarily given at the request of the sick person or someone concerned for that person and according to the recipient's faith. Only worthy Melchizedek Priesthood holders perform it. Normally it has two parts: anointing with consecrated oil and sealing the anointing. When consecrated oil is unavailable, a blessing may be given by Melchizedek Priesthood authority without the anointing.

During the anointing, the officiator places a small amount of consecrated olive oil on the person's head, places his hands lightly on the head, calls the person by full name, states that he acts by authority of the Melchizedek Priesthood, states that he is anointing with consecrated oil for the sick and afflicted, and closes in the name of Jesus Christ. In sealing the anointing, one or more Melchizedek Priesthood holders place their hands lightly on the person's head, call the person by name, state that they are sealing the anointing by Melchizedek Priesthood authority, give words as directed by the Spirit, and close in Christ's name.

Elder Dallin H. Oaks's April 2010 address "Healing the Sick" places these instructions in a larger doctrinal structure. He taught that Latter-day Saints use the best available scientific knowledge, enlist physicians and surgeons, pray in faith, and use priesthood blessings without treating those means as competitors. He identified five elements in priesthood administration: anointing, sealing, faith, the words spoken, and the will of the Lord. Even an authorized priesthood holder cannot produce an outcome contrary to God's will.

Doctrine and Covenants 42 gives the same integrated pattern. The sick are to be nourished and cared for; those without faith to be healed are still to receive tender care, including appropriate remedies; elders are called to pray and lay hands upon the sick in Christ's name; and promised healing remains qualified by faith and the Lord's determination concerning life and death. The passage neither teaches passivity toward medicine nor grants unrestricted control over divine power.

James 5:14-16 reinforces an ecclesiastical and communal order: the sick call for the elders of the church, the elders pray over the person and anoint with oil in the Lord's name, and the prayer of faith is offered. It does not describe a self-certified practitioner learning to scan chakras, interrogate a body through muscle resistance, extract ancestral emotions, or direct an impersonal force.

Necessary distinctions

Category	What it is	What it does not authorize
Praying for someone	Petitioning God directly, privately or with others, in humility and faith.	Inventing an ordinance, announcing a guaranteed outcome, or claiming governing revelation over the person.
Exercising faith in Christ	Trusting Christ, obeying Him, asking for help, and submitting to His will.	Treating faith as a technology that compels a result.

Category	What it is	What it does not authorize
Possessing a spiritual gift	A manifestation given by God, as He wills, for the benefit of His children.	Ownership, certification, guaranteed activation, proprietary transfer, or sale of the gift.
Receiving personal revelation	Guidance within one's life, family responsibilities, covenant duties, or authorized stewardship.	Defining another person's hidden sins, diagnosis, ancestry, entities, destiny, or treatment without stewardship.
Medical or mental-health care	Professional services grounded in education, scope, evidence, informed consent, ethics, and accountability.	Claiming divine certainty merely because the provider is religious.
Massage or ordinary relaxation work	Physical touch, movement, breathing, comfort, and attention without supernatural representations.	Claiming invisible blocks, cords, entities, or revelations have been objectively identified and removed.
Administering to the sick	A revealed priesthood ordinance performed by authorized Melchizedek Priesthood holders according to Church instruction.	Substitution by a private ritual, visualization, pendulum, proprietary code, certification, or energy-clearing sequence.

The decisive distinction is not whether a person uses hands, cares deeply, prays, or experiences inspiration. It is whether the person claims a supernatural office, diagnosis, mechanism, or ritual result that the Lord has not authorized.

3. Authority, Priesthood Power, Christ's Name, and Revelation

Using Christ's name does not confer authority. Matthew 7:21-23 is directly relevant because the people described appeal to prophetic acts, exorcisms, and mighty works performed in Christ's name. Jesus does not accept the invocation of His name as proof. He contrasts verbal and miraculous claims with doing the Father’s will. The passage should not be used to pronounce final judgment on particular living practitioners, but it decisively defeats the argument that Christian language or reported wonders authenticate themselves.

Matthew 24 likewise warns that impressive signs can coexist with deception. Its immediate subject is eschatological deception by false Christs and false prophets, not a technical classification of every alternative treatment. Its legitimate application here is narrower but important: unusual experiences and apparent wonders are not sufficient tests of divine authorization.

A person who says, “Jesus is the healer; I am only the instrument,” may be expressing sincere humility, but the statement does not answer the authorization question. Every priesthood ordinance is ultimately Christ’s work, yet the Church still requires the correct authority and revealed procedure. Christ’s supremacy does not make human order irrelevant; it is the reason His order matters. Elder Oaks taught that even authorized elders act through priesthood authority and remain subordinate to Christ’s will rather than controlling an automatic force.

Priesthood power is not metaphysical energy. Official Church teaching distinguishes priesthood authority, priesthood keys, priesthood power, ordinances, covenant access, and spiritual gifts. Authority is conferred or delegated in the Lord’s order; keys direct the use of priesthood authority; ordinances are formal sacred acts performed by authorization; and the powers of heaven are inseparably connected with righteousness and cannot be controlled for status, compulsion, or personal dominion.

Doctrine and Covenants 121:34-46 is especially incompatible with the idea that divine power is an impersonal substance mastered through technique. Priesthood rights are connected with heaven and may be handled only according to righteousness. Persuasion, long-suffering, gentleness, meekness, love, and pure knowledge replace coercion and domination. A course cannot make heaven contractually responsive; a certification cannot guarantee revelation; and a practitioner cannot possess Christ’s power as inventory.

Alma 13 describes priesthood in terms of divine foreordination, calling, preparation, a holy calling, and ordination through a holy ordinance in the order of God. Whatever interpretive questions attend the chapter's treatment of premortal preparation, the chapter does not portray authority as a discoverable human technique. Official teaching materials also contrast Alma's holy order with Nehor's priestcraft and self-appointed religious economy.

Personal revelation has boundaries. Elder Oaks taught that personal communication with God is essential for personal choices and family governance, but it does not operate independently of the priesthood line, authorize competing doctrinal systems, or excuse disobedience to revealed order. He warned that people may claim divine permission to disregard commandments or priesthood counsel while misidentifying the source of their impressions.

Current official teaching summarizes the principle as receiving revelation "in our own lane": individuals do not receive governing revelation for persons over whom they have no stewardship. Only the President of the Church receives revelation for the whole Church, and revelation does not properly contradict scripture, prophetic teaching, or the Church's established order.

Can personal revelation authorize a new healing ordinance? Personal revelation can guide a person in caring, praying, studying, seeking treatment, or serving within an assigned stewardship. Official Church teaching says revelation for the Church comes through the prophet, while individuals receive revelation for their particular needs and responsibilities. Doctrine and Covenants 28 emerged precisely from a dispute involving claims to revelations and commandments for the Church outside the prophetic order.

A person may feel inspired to comfort a neighbor or pursue a particular lawful profession. That is different from claiming God revealed a repeatable supernatural method, gave the person diagnostic access to other people's subconscious minds, or authorized a ritual resembling an ordinance. Private revelation does not override current Church policy or create an ecclesiastical office.

Claims that exceed stewardship

Claim	Doctrinal evaluation
"The Holy Ghost told me what is wrong with you."	The claimant has moved from personal prompting to asserted revelation governing or diagnosing another. Without authorized stewardship, the claim lacks ecclesiastical authority.
"Your body gave me permission to release this emotion."	A body is not a recognized revelatory steward. Muscle response, intuition, or ideomotor movement does not create consent or divine knowledge.
"Jesus showed me an inherited trauma."	A private impression does not establish an objective ancestral event, diagnosis, or treatment requirement.
"I can feel a spiritual attachment."	The feeling may be subjectively genuine, but it does not verify the asserted entity or attachment.
"Your illness is caused by trapped energy."	This is a medical and metaphysical causal claim requiring evidence; spiritual confidence does not supply that evidence.
"Christ taught me this healing system."	A claimed private revelation cannot authorize a Church-wide or client-governing system contrary to the Church's express warning.
"My gift lets me clear generational spiritual problems."	Spiritual gifts are dispensed by God as He wills; scripture does not establish a proprietary clearing office or guaranteed generational procedure.

These conclusions do not deny that a person may feel prompted to call a friend, offer comfort, encourage medical help, pray, provide a meal, or ask whether a priesthood blessing is desired. The objection concerns converting an impression into an asserted supernatural diagnosis or ritual jurisdiction over someone else.

4. Spiritual Gifts, False Manifestations, Women, and Historical Complexity

Spiritual gifts. In 1 Corinthians 12, Paul addresses spiritual gifts within the order and unity of Christ's body. Gifts, administrations, and operations differ, but they come from the same Spirit and are distributed according to divine will; no member possesses every gift. The emphasis is mutual edification, not independent spiritual entrepreneurship.

Doctrine and Covenants 46 likewise arose in a Church-meeting context. It warns against deception and false spiritual claims, teaches that gifts are distributed by the Spirit for the benefit of God's children, names faith to be healed and faith to heal as distinct gifts, and assigns Church leaders a responsibility to discern professed gifts "lest there shall be any … not of God." Requests made in the Spirit remain according to God's will.

Spiritual gifts are therefore not limited to priesthood officeholders. Women and men can possess gifts of faith, discernment, comfort, wisdom, testimony, and healing. President Russell M. Nelson has urged women to discover and cultivate their spiritual gifts. The existence of such gifts, however, does not erase the Church's rules governing priesthood ordinances or create a right to turn an alleged gift into a proprietary diagnostic system.

Spiritual gifts are real but are not proprietary systems. First Corinthians 12, Moroni 10, and Doctrine and Covenants 46 affirm gifts of faith, healing, miracles, wisdom, knowledge, prophecy, discernment, and other manifestations. They also impose boundaries that proprietary systems often obscure: the gifts come from the same Spirit; they are distributed as God wills; they exist for the common benefit; they operate within the body of believers; and they must be accompanied by charity, gratitude, holiness, and submission to God's will.

Moroni 10 does not teach that a person can select a gift from a catalog, purchase activation, complete certification, promise repeatable access, or sell a protocol that mechanically produces the gift. It says gifts come from God, through the Spirit, severally according to His will, and only for what is expedient in Christ.

Doctrine and Covenants 46 explicitly connects gifts with avoiding deception. The revelation teaches Saints to seek gifts without being deceived, to recognize that not everyone receives every gift, and to ask and act according to God's will. Official commentary emphasizes that professed manifestations require discernment; the mere assertion "this is my gift" does not settle the question.

Doctrine and Covenants 50 addresses false spiritual manifestations and teaches that what comes from the Spirit of truth edifies. Official Church teaching associated with the section warns that emotional impulse, enthusiasm, or counterfeit manifestations can be mistaken for the Holy Ghost. "I felt something powerful" is therefore evidence of an experience, not conclusive evidence of its interpretation.

Doctrine and Covenants 129 supplies revealed keys for distinguishing certain kinds of heavenly messengers. Its direct scope should not be exaggerated: it is not a general laboratory test for every intuition, nor does it authorize muscle testing or pendulums. Its relevant principle is that claimed spiritual encounters require revealed discernment and are not self-validating merely because they seem supernatural.

Doctrine and Covenants 50 in context. Section 50 answered confusion involving dramatic spiritual manifestations and false spirits among early Saints. Verses 13-24 are specifically framed as the Lord reasoning with ordained elders about preaching and receiving truth through the Comforter. The phrase "some other way" should not be extracted as a proof text declaring every non-Church health intervention evil. The contextual principle is that claimed spiritual ministry must be grounded in truth, the Holy Ghost, divine appointment, mutual understanding, edification, humility, and light.

Applied to energy healing, the passage raises legitimate questions: Was the claimed supernatural role appointed by God through the order He established? Does it teach truth, or unverifiable metaphysical speculation? Does it edify without fear, compulsion, boasting, or dependency? Does it conform to revealed Church order? Calling a technique "Christ-centered" does not by itself answer those questions.

Joseph Smith and false spirits. Official Church teaching materials describe Joseph Smith's concern that Saints distinguish the Holy Ghost from false spirits, emotional excess, and counterfeit manifestations. Doctrine and Covenants 50 arose in a setting where unusual religious behaviors were being attributed to divine influence, and Doctrine and Covenants 129 preserved specific revealed tests concerning messengers. The historically responsible

conclusion is not that every unexplained event is demonic. It is that early Restoration teaching rejects the assumption that every extraordinary spiritual-seeming experience comes from God.

Women, covenants, gifts, and ordinances. Women's access to God's power should not be diminished to defend priesthood order. Official Church teaching affirms that women and men who make and keep covenants receive priesthood power in their lives, receive personal revelation, exercise spiritual gifts, minister with divine help, and act with delegated priesthood authority in Church callings and temple service.

Historical evidence also shows that nineteenth-century Latter-day Saint women sometimes participated in healing practices by faith. Official historical treatments explain that these women generally did not understand themselves to be exercising an ordained priesthood office; Church direction gradually regularized the practice, and by the early twentieth century leaders directed members toward the scriptural pattern of calling the elders. Current Handbook instructions specify worthy Melchizedek Priesthood holders for administering to the sick.

That history deserves neither erasure nor misuse. It demonstrates women's faith and the historical development of practice; it does not authorize present-day substitute ordinances involving chakras, pendulums, inherited-emotion codes, attunements, entities, or paid revelation. A historical prayer or blessing of faith is not automatically equivalent to a proprietary metaphysical system.

A woman may pray for the sick, exercise faith, receive personal revelation, minister with spiritual power, offer inspired comfort, and possess gifts of the Spirit. None of those truths creates authority-whether for a woman or a man-to announce a new ritual by which Christ's power is channeled, hidden spiritual conditions are diagnosed, or healing energy is controlled. Covenant access to God's power is not a license to manufacture ordinances.

Historical women's healing practices. The Church's Gospel Topics essay on women and priesthood explains that Joseph Smith taught that the gift of healing could follow believing women and men. Nineteenth-century Latter-day Saint women sometimes laid hands on the sick and blessed them by the prayer of faith, understood at the time as a spiritual gift rather than exercise of priesthood office. Eliza R. Snow explicitly distinguished acting in Jesus' name from acting by virtue of priesthood. The practice declined as leaders directed members toward calling the elders, and current policy reserves administration to the sick to worthy Melchizedek Priesthood holders.

This history should neither be hidden nor misused. It establishes that women may exercise faith, pray for healing, receive inspiration, and possess spiritual gifts. It does not establish historical precedent for chakras, auras, proxy muscle testing, magnets over meridians, Heart-Walls, paid attunements, or divination for clients.

> **This history deserves neither erasure nor misuse. It affirms women's faith, covenant access to God's power, personal revelation, and spiritual gifts. It does not authorize either women or men to manufacture a proprietary metaphysical ordinance, diagnose hidden conditions by supernatural means, or sell claimed access to Christ's healing power.**

Scriptural synthesis

Passage	Teaching	Application and limitation
James 5:14-16	The sick call for the elders, who pray and anoint in the Lord's name; the prayer of faith matters.	Establishes an ecclesiastical healing pattern; it does not describe proprietary energy diagnosis.
Matthew 7:21-23	Invoking Christ's name and claiming mighty works do not prove obedience to God.	Christian terminology is not self-authenticating; it does not authorize final condemnation of named individuals.
Matthew 24:24	Signs and wonders can accompany deception.	Reported wonders cannot be the sole test; the passage's direct context is last-days deception.
Acts 8:9-24	Simon offers money for power associated with laying on of hands; Peter condemns purchasing God's gift.	Direct warning against commodifying divine power; not a ban on ordinary payment for legitimate labor.

Passage	Teaching	Application and limitation
Acts 19:11-20	Christ's name cannot be used as a formula by self-appointed operators.	Invoking Jesus does not automatically confer authority.
1 Corinthians 12; D&C 46; Moroni	Gifts come from one Spirit, for common benefit, according to God's will.	Gifts are divine distributions, not branded possessions or mechanically activated techniques.
D&C	The Spirit of truth edifies; counterfeit or misunderstood manifestations exist.	Emotional intensity and unusual phenomena require discernment rather than automatic acceptance.
D&C 121:34-46	The powers of heaven are inseparably connected with righteousness.	Divine power cannot be packaged, commanded, franchised, or controlled as an impersonal force.
D&C 129:1–9	The Lord supplied specific keys for discerning certain messengers.	Shows the need for revealed discernment; it does not authorize improvised diagnostic tests.
D&C	God works openly and condemns priestcraft for gain and praise.	Especially relevant when special spiritual status or access is marketed.
2 Nephi 26:23-31	The Light of Christ enables moral discernment and judgment by enduring fruits.	A pleasant or peaceful feeling is relevant but not the entire test.
D&C 50:13–24	Tender care, appropriate remedies, elders' administration, faith, and submission to God are integrated.	Rejects both medical neglect and guaranteed ritual control.
D&C 42:43-52		

5. The Light of Christ and the Misuse of the Word Energy

Can the Light of Christ be directed as energy? The Church's own definition permits the word energy, so it would be inaccurate to insist that the term can never be used. The decisive issue is the rest of the definition. The Light of Christ proceeds from God, fills immensity, gives life, governs creation, manifests in conscience, influences people toward good, and prepares them for the Holy Ghost. No official source reviewed here teaches a technique for scanning, transferring, channeling, measuring, clearing, or balancing it.

An LDS-authored metaphysical system may assert that chi, zero-point fields, chakras, consciousness, biophotons, and the Light of Christ are different labels for the same substrate. That is a private synthesis, not an official doctrinal conclusion. One book marketed as an LDS interpretation of energy medicine explicitly makes those comparisons and adds auras, chakras, distance healing, crystals, inherited issues, trapped emotions, and evil spirits. Its existence documents the syncretic claim; it does not establish Church endorsement or scientific validity.

The official Church description of the Light of Christ does use the phrase "divine energy, power, or influence." But it defines that light as God's life-giving, law-governing influence, manifested in conscience and leading people toward truth and the Holy Ghost. It does not teach that the Light of Christ is a therapeutic substance that trained practitioners can scan, channel, transfer, meter, unblock, balance, sell, or direct through chakras, magnets, pendulums, muscle tests, or proprietary rituals. The latter ideas are additions to, not conclusions established by, the official definition.

The word energy is therefore not a doctrinal blank check. Official teaching uses it within a specific definition: the Light of Christ is God's pervasive, life-giving, law-governing influence, manifest in conscience and leading people toward truth and the Holy Ghost. The reports found no official source teaching that the Light of Christ is a therapeutic substance that trained practitioners can scan, meter, channel, transfer, unblock, balance, delete, or sell through chakras, crystals, magnets, pendulums, nonstandard muscle testing, or proprietary rituals.

A private author may equate the Light of Christ with chi, zero-point fields, consciousness, biophotons, chakras, or universal life force. Such an equation is a private metaphysical synthesis. It is neither an official Church conclusion nor a scientific finding. Familiar gospel language may make an outside theory feel spiritually safe, but familiarity is not revelation and religious vocabulary is not evidence.

Christ is the source of all genuine truth and healing. That premise does not make every mutually incompatible energy theory doctrinally correct merely because its advocate attributes the method to Him.

6. Priesthood Imitation, Certification, Commercialization, and Priestcraft

Does invoking Christ make an energy practice authorized? No. Invoking Christ may reflect faith and good intent, but it is not the same as receiving priesthood authority. Authorized priesthood blessings also use Christ's name, yet the Handbook separately requires the proper priesthood office, worthiness, prescribed ordinance, consecrated oil where available, and explicit exercise of Melchizedek Priesthood authority. Christ's name is essential to Christian ministry but is not a stand-alone credential.

Prayer before an activity can be appropriate without validating every assertion made during that activity. A surgeon can pray before surgery; a therapist can pray privately for wisdom; family members can pray together. But prayer does not prove that a pendulum communicates divine answers, that weak muscles reveal inherited trauma, that a practitioner can scan an aura, or that magnets erase emotional energy.

Can priesthood power be reduced to technique? Doctrine and Covenants 121 says the powers of heaven cannot be controlled or handled except through righteousness. President Nelson teaches that priesthood keys govern how priesthood is used. The Handbook establishes who may administer and how. That pattern leaves room for inspiration but not for an independent technology transferable through commercial credentials.

A technique promises procedural control: follow the steps, ask the body, obtain the answer, clear the item, confirm the release. Priesthood administration instead combines authorized service with faith, humility, and explicit submission to God's will. Even a worthy apostle or elder cannot guarantee healing.

When does a practice imitate priesthood administration? No single physical gesture settles the question. Placing a hand near someone is not inherently an ordinance; nurses, massage therapists, parents, and friends may touch appropriately. The analysis should consider the entire structure:

Functional comparison: authorized administration and supernatural analogue

Feature	Authorized administration to the sick	Supernatural energy-healing analogue	Principal problem
Source of authority	Melchizedek Priesthood authority under the Church's revealed order.	Private revelation, innate gift, lineage, attunement, certification, or proprietary training.	Self-authorization.
Physical action	Anointing and laying on of hands under prescribed instructions.	Hands on or above the body, sweeping, tapping, scanning, visualization, pendulum, magnet, or coded sequence.	Ritual imitation without revealed authorization.
Invocation	The ordinance is performed in Jesus Christ's name.	Christ's name is used to validate the method.	The name is treated as a spiritual endorsement stamp.
Diagnosis	Medical diagnosis belongs to competent care; the ordinance need not identify hidden causes.	The practitioner identifies blocks, cords, entities, trapped emotions, ancestral trauma, or spiritual darkness.	Unverifiable supernatural diagnosis.
Words	A blessing as the Spirit directs, subordinate to God's will.	Commands to the body, energy, spirit, cells, ancestors, illness, darkness, or entities.	Claimed control beyond stewardship.
Outcome	Entrusted to faith and the Lord's will.	A clearing or release is announced as completed, sometimes quantified.	Presumption and nonfalsifiability.
Payment	Priesthood blessings are given without charge.	Session, package, activation, certification, or advanced course fee.	Commercialization of claimed spiritual access.

Feature	Authorized administration to the sick	Supernatural energy-healing analogue	Principal problem
Accountability	Church authority, Handbook order, and pastoral accountability.	Founder doctrine, testimonials, private impressions, or brand certification.	A proprietary parallel authority structure.

The closer a practice comes to invoking divine authority, detecting hidden spiritual causes, commanding unseen forces, pronouncing healing, and reproducing the gestures of a sacred administration, the stronger the case that it imitates priesthood power-especially when the operator lacks the authority and follows a private ritual.

Family prayer, spiritual gifts, and therapeutic care. Any member may pray for another person, fast, read scripture, offer comfort, listen, prepare meals, accompany someone to a doctor, and exercise faith in Christ. Women and men may possess spiritual gifts. A licensed clinician may use appropriate touch, evidence- based assessment, or professionally accepted treatment within scope and with informed consent.

The doctrinal problem begins not with kindness or touch but with the added claim: "I possess a special supernatural method that can identify and clear invisible causes, and I can use it for you." Such a claim requires both theological authorization and reliable evidence. Christian terminology does not supply either automatically.

Certification and authority. In the restored gospel, priesthood authority is received through ordination or authorized callings and assignments under priesthood keys. In energy-healing systems, authority is often represented by courses, levels, attunements, proprietary manuals, supervised portfolios, badges, directories, and mentorships. These systems can establish that someone learned an organization's procedure; they cannot establish priesthood authority, divine approval, or medical competence.

Discover Healing, for example, presently advertises sequential Emotion Code, Body Code, and Belief Code certifications. Its materials teach students to use muscle testing to communicate with the body's "innate intelligence," identify trapped emotions and Heart-Walls, release them through energy and intention, and conduct sessions by proxy at a distance. Its marketing promotes practitioner directories, income opportunities, and fees commonly charged per session.

The organization's response to the Church Handbook argues that its practitioners are not performing miracles or supernatural healing but removing imbalances so the body can heal itself; it also says the Body Code was discovered through prayer. That is an important fair statement of its position. Yet the same organization's instructional materials describe pure emotional energy, subconscious communication through muscle testing, inherited energies, distance work, magnets deleting energetic information, and confirmation that a release occurred. Whether the label "supernatural" is disclaimed does not resolve whether the underlying claims are supernatural in substance.

Charging money. Payment is not inherently evidence of priestcraft. Physicians, psychologists, physical therapists, massage therapists, educators, and clergy employed in legitimate roles may be paid for time, education, regulated expertise, facilities, and ordinary labor. Professional compensation becomes spiritually concerning when the service marketed is special access to divine power, hidden revelation, removal of spiritual entities, or a supernatural method unavailable without purchasing levels or sessions.

Acts 8 rejects the purchase of divine authority. Second Nephi 26 warns against making oneself a spiritual light for gain and praise rather than seeking Zion. The Handbook likewise contrasts priesthood blessings, which are not sold, with supernatural healing promises often given for money. These sources do not authorize judging every practitioner's heart, but they make commercialization a serious diagnostic question.

Money and priestcraft. Second Nephi 26:29 defines priestcraft in terms of people setting themselves up as a light to the world to obtain gain and praise rather than seeking Zion's welfare. The surrounding passage emphasizes that God works openly, invites all to partake freely, and does not command secret works of darkness. This does not mean every religious author, counselor, employee, or professional who receives compensation commits priestcraft. It does mean that monetizing a claimed position as a special spiritual light or conduit is scripturally dangerous.

Acts 8:9-24 provides an even sharper warning. Simon had been regarded as a possessor of great divine power and, after observing apostolic authority, offered money to obtain the capacity to confer the Holy Ghost by laying on hands. Peter condemned the premise that God's gift could be purchased. The passage does not forbid ordinary payment for labor; it rejects the commodification and acquisition of divine power.

- Paying a physician for examination, surgery, or medical expertise is payment for professional labor subject to training, evidence, regulation, informed consent, and accountability.
- Paying a licensed counselor for psychotherapy is payment for a defined professional service, not purchase of revelation.
- Paying a massage therapist for soft-tissue work, relaxation, or comfort is payment for a physical service.
- Paying someone to "hear the Holy Ghost for you," clear an entity, activate Christ's power, reveal ancestral trauma, remove a curse, or certify others to transmit divine healing is payment entangled with claimed supernatural access.

Not every fee proves priestcraft. A fair doctrinal judgment requires examining what is actually being sold. But selling claimed access to revelation or divine healing power raises grave concerns about priestcraft, especially when the practitioner's status as a spiritually gifted conduit is central to the transaction.

> **Not every fee proves priestcraft. The controlling question is what is actually being sold. When the paid product is claimed access to divine revelation, hidden spiritual knowledge, priesthood-like power, or supernatural healing, priestcraft concerns are not rhetorical exaggeration; they arise directly from the scriptural warnings in 2 Nephi 26 and Acts 8.**

7. Religious Syncretism and the LDS Rebranding of Portable Metaphysical Systems

What the primary materials show. The Energy Healing Conference's own description lists Qi Gong, foot zoning, kinesiology, craniosacral therapy, Quantum Touch, Healing Touch, Eden Energy Systems, sound healing, acupuncture, Reiki, and the Emotion Code. Presenters include naturopaths, massage therapists, chiropractors, Reiki practitioners, light therapists, coaches, and other holistic providers. The conference also explicitly defends payment for energy workers as compensation for education and expertise.

Archived promotional material associated with this conference ecosystem has included titles such as "Energy Healing in LDS Lingo," "A Christian Approach to Energy Healing," generational releasing, and instruction on seeing or feeling energy. Contemporary reporting also documented a St. George gathering promoted as Christ-centered energy healing. These materials show an effort to translate broadly circulating energy practices into an LDS or Christian vocabulary.

The International Center for Reiki Training states that Reiki does not require a person to surrender or change prior religious beliefs and that people of many religions practice it. It reports that Christian practitioners often understand Reiki as drawing them closer to Christ and the Holy Spirit. Thus, adding Christian attribution to Reiki is not unique to Latter-day Saints; the system is explicitly designed to operate across religious commitments.

Emotion Code materials similarly state that the technique can help people "from any background," has no religious prerequisite for entry-level certification, and can be conducted in person or by proxy at a distance. The operational method-muscle test, identify a trapped emotion, use intention and a magnet or equivalent action, confirm release-does not depend on LDS priesthood ordination or Church authorization.

Why non-LDS association is not the argument. Truth is not determined by whether nonmembers, atheists, agnostics, New Age practitioners, or people of other religions also use an idea. Latter-day Saints accept truth in medicine, mathematics, art, science, and moral wisdom from people of all faiths and none. Jesus Himself cautioned His disciples against reflexively forbidding every outsider acting in His name.

The deeper question is methodological: if precisely the same gesture or test is said to work whether its explanation is Jesus Christ, Reiki, chi, universal consciousness, vibration, psychic intuition, subconscious intelligence, or no deity at all, then the technique is not operationally dependent on restored priesthood doctrine. LDS language becomes one optional interpretation placed over a religiously portable system.

Syncretism. Religious syncretism means combining elements from different religious or metaphysical systems into a new synthesis. In this context, the evidence for syncretism becomes strong when a practitioner:

- Retains chakras, meridians, auras, universal energy, proxy healing, trapped emotions, frequency concepts, attunements, pendulum diagnosis, or similar metaphysical components.
- Reinterprets those components as the Light of Christ, priesthood power, spiritual gifts, ministering angels, the Holy Ghost, or revelation.
- Uses a certification, lineage, or method originating outside Church authority.
- Presents the combined system as LDS-compatible, Christ-centered, or an extension of restored-gospel healing.

The LDS-oriented book description examined here does this explicitly, identifying zero-point fields, chi, consciousness, and the Light of Christ as parallel descriptions while adding chakras, auras, distance healing, crystals, generational issues, trapped emotions, and evil spirits.

It is reasonable to infer that this is restored-gospel terminology grafted onto an outside metaphysical framework. That inference does not mean every element is morally corrupt or every practitioner is consciously blending religions. Syncretism can occur sincerely, gradually, and without awareness- especially when familiar gospel words make an outside theory feel spiritually safe.

Why attribution still matters. A practitioner may respond that the technique works because all truth and healing ultimately come from Christ. The theological premise that Christ is Creator and source of all genuine goodness does not establish that every explanatory system invoking universal energy accurately describes His action. Otherwise, any incompatible metaphysical theory could become doctrinally legitimate merely by asserting Christ as its ultimate source.

The relevant tests remain: Does the proposed doctrine agree with revealed teaching? Is the spiritual authority recognized by the Church? Are the health and diagnostic claims supported? Does the practice imitate an ordinance? Does it invite dependence on a practitioner? Does it generate fear of unseen entities or blocks? Is it being sold as access to spiritual power?

Why religious portability matters

The argument is not that an idea becomes false merely because non-Latter-day Saints, New Age practitioners, agnostics, or people of other religions also use it. Latter-day Saints accept truth from every legitimate source. The problem is methodological: when the same gesture, muscle test, pendulum response, attunement, proxy session, chakra map, or clearing sequence is said to work equally under explanations involving Jesus Christ, Reiki, chi, universal consciousness, psychic intuition, subconscious intelligence, or no deity at all, the operational method is not dependent on restored priesthood doctrine. LDS language has become an optional religious overlay.

This is why attribution to Christ does not settle the question. Every competing system can claim that its power ultimately comes from the Creator. The relevant tests remain whether the doctrine agrees with revealed teaching, whether the authority is recognized by the Church, whether the health and diagnostic claims are supported, whether the practice functionally imitates an ordinance, whether it creates dependence or fear, and whether spiritual access is being sold.

8. Scientific and Medical Evaluation

Three separate scientific questions.

First, do some people report feeling calmer, more hopeful, or less distressed after energy-healing sessions? Yes. Such reports are plausible and should not be mocked. The NIH describes placebo effects as beneficial outcomes arising partly from anticipation that an intervention will help; provider interaction itself can produce positive responses independent of a treatment's specific mechanism. Quiet surroundings, focused attention, supportive touch, meaning, rest, expectation, and the passage of time can all affect subjective symptoms.

Second, do the specific techniques reliably outperform credible sham treatments, ordinary supportive attention, rest, expectancy, or established care? For most energy-healing modalities, the evidence is inconsistent, methodologically weak, or insufficient. Some reviews and individual trials report improvements in subjective outcomes, but positive findings are often limited by small samples, inadequate blinding, heterogeneous methods, selective outcomes, publication bias, or poor replication.

Third, is there evidence for the proposed invisible mechanism-an aura, chakra network, universal healing field, trapped-emotion energy, Heart-Wall, remote force, or muscle-mediated access to the subconscious? The strongest authoritative sources reviewed here do not validate those mechanisms. NCCIH expressly states that there is no scientific evidence for the energy field proposed in Reiki.

Evidence by practice or claim

Practice or claim	Best-supported assessment
Reiki	NCCIH concludes that Reiki has not been clearly demonstrated effective for any health-related purpose; the literature is inconsistent and often low quality, and the proposed energy field lacks scientific support. Newer reviews reporting possible subjective benefits do not establish the mechanism.
Therapeutic Touch and Healing Touch	Some reviews report possible improvements in subjective pain or anxiety, but methodological quality remains a persistent problem. In a blinded JAMA test, practitioners did not reliably detect the purported human energy field above chance.
Applied kinesiology for diagnosis	Reviews find insufficient evidence for diagnostic accuracy, therapeutic specificity, or validity of challenge-based muscle tests. Some controlled testing has found results unreliable or no better than chance.
Ordinary manual muscle testing	Clinicians may legitimately test actual strength, neurological function, pain inhibition, and rehabilitation progress. This does not validate asking muscles yes-or-no questions about foods, spirits, memories, organs, ancestry, trauma, or truth.
Emotion Code and Body Code	No independent high-quality evidence identified in the reports validates trapped emotions as discrete energy objects, Heart-Walls, subconscious muscle communication, magnets deleting energetic information, or remote proxy clearing.
Remote or distance healing	Reviews have reported mixed, heterogeneous findings; more rigorous updates have not established effects beyond placebo.
Aura reading and chakra balancing	These concepts are established in several metaphysical traditions, but the reviewed scientific literature does not establish a clinically measurable aura or chakra system that trained practitioners can reliably diagnose and correct.
Pendulum diagnosis	Pendulum movement is vulnerable to the ideomotor effect and is not an accepted medical or revelatory diagnostic instrument. Using it to obtain hidden spiritual or health information also resembles divination.
Frequency or vibration healing	The word frequency is meaningless without a defined physical quantity, device, dose, target, mechanism, and testable outcome. Evidence for regulated medical technologies cannot be transferred to vague claims about thoughts, crystals, stickers, music, or unmeasured vibrations.
Tapping or EFT	Some reviews report possible benefit for anxiety-related symptoms, but ordinary mechanisms such as exposure, breathing, attention, repetition, and cognitive reframing remain plausible. These findings do not establish supernatural meridians or divine energy release.
Spiritual release, curses, cords, entities, or generational blocks	These claims lack validated diagnostic standards and are difficult or impossible to falsify. Agreement is treated as confirmation while skepticism may be labeled resistance or blindness, making the system self-sealing.

What the methods claim. Reiki and related practices generally involve a practitioner placing hands lightly on or above the recipient with the stated aim of directing or facilitating a healing energy. Therapeutic touch and similar systems use comparable language about assessing or balancing an energy field. Some newer branded systems add muscle testing, emotion codes, inherited-emotion concepts, frequency language, spiritual attachments, or proprietary clearing sequences.

Evidence for the proposed mechanism. NCCIH reports that there is no scientific evidence supporting the existence of the energy field said to play a central role in Reiki. This does not prove that no presently unknown biological phenomenon could ever be discovered. It means the specific healing-field mechanism has not been established through reliable detection, measurement, reproducibility, and causal testing.

No reliable evidence identified in this review establishes that practitioners can discern another person's hidden emotions, ancestral trauma, spiritual attachments, divine permissions, or metaphysical blocks through hovering hands, pendulums, intuitive scanning, or nonstandard muscle testing. Such outputs typically depend on practitioner interpretation and lack independent, blinded verification.

Evidence for outcomes. NCCIH concludes that Reiki has not clearly been shown effective for any health- related purpose, describing the research as inconsistent and often methodologically weak.

Recent reviews provide an appropriately nuanced picture. A 2026 systematic review of Reiki and therapeutic touch in palliative populations found some reported improvements but only a small, heterogeneous evidence base, with very low certainty and insufficient support for firm efficacy conclusions. A 2025 meta- analysis reported a small average improvement in quality-of-life outcomes across eleven studies, but substantial heterogeneity and study limitations prevent that result from demonstrating either broad clinical efficacy or the proposed energy mechanism.

A modest subjective benefit, even when statistically real, answers a different question from whether an invisible field was detected or manipulated. A trial may show that a caring, structured session changes reported anxiety or comfort while leaving the supernatural explanation entirely unproven.

Applied kinesiology and muscle testing. Manual muscle testing can have legitimate physical-assessment uses when clinicians evaluate actual neuromuscular function. That should be distinguished from applied- kinesiology "challenge" procedures in which changes in resistance are treated as answers about foods, organs, emotions, truth, ancestry, spiritual permission, or hidden pathology. A recent systematic review found highly variable reliability and concluded that nonmusculoskeletal challenge procedures had nonexistent reliability and should not be recommended for clinical use.

Muscle resistance is affected by positioning, leverage, fatigue, pain, instruction, expectation, examiner force, and subtle conscious or unconscious cueing. Turning that variable physical response into an oracle -"your body said yes," "the Holy Ghost confirmed through the muscle," or "this weakness identifies an inherited emotion"-adds an interpretation the physical response has not validated.

Why clients may genuinely feel better. Touch and supportive human contact can have measurable effects. A large preregistered meta-analysis covering 137 studies and nearly 13,000 participants found that touch interventions can reduce pain, anxiety, and depressive symptoms in some contexts. Such evidence supports the reality of nonspecific benefits from caring touch; it does not establish a metaphysical field.

Other plausible contributors include quiet rest, regulated breathing, expectancy, focused attention, emotional validation, warmth, reduced muscle tension, spontaneous symptom fluctuation, regression toward the mean, concurrent medical treatment, and placebo-related effects. Open-label placebo research suggests that subjective self-reported symptoms may improve even when participants know a placebo is involved, while objective measures may show much smaller or no corresponding change.

Therefore, it would be inaccurate to say every improvement is imaginary. The person's comfort or pain reduction may be real. The logical error occurs when the improvement is treated as proof of a specific causal story-such as removed cords, corrected chakras, expelled entities, cleared ancestral emotions, or transmitted Christ-energy.

Suggestion, nocebo, and false memories. Expectations and authoritative suggestions can also worsen symptoms. Experimental nocebo research shows that verbal suggestion, conditioning, and social observation can produce or amplify adverse symptom reports. A practitioner who tells a vulnerable person that an entity, ancestral curse, spiritual darkness, or dangerous block has been discovered may therefore create fear and symptom vigilance even when no such cause has been demonstrated.

Research on suggestive interviewing and imagery also shows that personalized suggestion can induce false beliefs and, in some settings, false memories. This does not mean every recovered memory is false or that every energy session creates one. It does mean that leading questions, confident ancestral narratives, visualization, repeated

"confirmation," and claims of spiritually revealed trauma carry a genuine risk of constructing conviction without reliable historical evidence.

Testimonials and apparent results. A person may improve after an energy-healing session because of natural recovery, concurrent medical treatment, reduced stress, regression toward average symptom levels, expectation, attention, lifestyle changes, or the nonspecific benefits of feeling heard. None of these possibilities implies that the improvement is imaginary. They show why a before-and-after story cannot isolate the operative cause.

Testimonials are especially weak when unsuccessful cases are not collected, clients receive several interventions at once, outcomes are subjective, practitioners select their best stories, or the system explains every failure as resistance, hidden layers, insufficient sessions, or lack of faith. The FTC requires objective health claims to be truthful, nonmisleading, and supported by competent and reliable scientific evidence; testimonials do not substitute for that evidence.

Evidence does not adjudicate all theology. Science cannot experimentally determine whether God sometimes answers prayer, grants spiritual gifts, or performs miracles. Those are theological claims that may involve singular divine acts rather than repeatable natural mechanisms. Science can, however, test a practitioner's assertion that a reproducible method detects a field, accurately diagnoses hidden conditions, works remotely, or produces reliable clinical outcomes. The failure to distinguish miracle from technique allows an unverified commercial procedure to be shielded from ordinary testing while still being advertised as reliably effective.

Measured medical energy is not metaphysical energy healing. Medicine uses electrical stimulation, electromagnetic imaging, ultrasound, heat, laser light, and ionizing radiation in precisely defined ways. These have measurable physical properties, instruments, dosages, indications, contraindications, mechanisms, and empirical outcomes. For example, cancer radiation therapy uses quantifiable high-energy radiation to damage cellular DNA and is delivered according to controlled treatment plans.

The shared word energy creates no evidentiary bridge. A radiation oncologist's calibrated dose does not validate chakras. Magnetic resonance technology does not validate muscle testing as revelation. Electrical stimulation of nerves or muscles does not show that a practitioner can transmit Christ's power. These are category errors.

What is not condemned. This report does not condemn competent medicine, psychiatric care, psychotherapy, physical therapy, massage, compassionate touch, breathing exercises, relaxation, ordinary meditation, exercise, sleep hygiene, nutrition, pastoral care, prayer, or supportive conversation. A complementary practice that accurately describes itself as relaxation or comfort care, makes no supernatural diagnosis, does not promise to manipulate invisible spiritual power, stays within lawful professional scope, and does not displace necessary care is not equivalent to the practices the Handbook warns against.

9. Risks: Medical, Psychological, Spiritual, Financial, and Relational

Risks and ethical concerns. The most serious physical risk is not necessarily the hand movement, magnet, or quiet session itself. It is the possibility that an unvalidated interpretation displaces proper diagnosis or treatment. The FDA warns that unproven health claims can waste money, delay diagnosis and treatment, and contribute to serious or fatal harm. NCCIH advises patients to discuss complementary practices with their health professionals and to evaluate each practice's safety and evidence individually.

False diagnosis is a related problem. Telling a person that a weak arm reveals parasites, organ dysfunction, inherited trauma, a curse, an entity, or a Heart-Wall can create confidence without valid evidence. A disclaimer that the practitioner "does not diagnose disease" may not eliminate the practical effect if the client is nevertheless told the alleged hidden cause of symptoms.

Psychological and spiritual harms can include:

- Fear that ordinary distress is caused by curses, cords, entities, inherited emotional contamination, or invisible blocks.
- Nocebo effects in which threatening suggestions worsen pain, anxiety, symptom vigilance, or bodily distress.
- Scrupulosity or spiritual anxiety about being impure, spiritually blocked, or unable to receive divine healing.
- Dependency on the practitioner for repeated scans, clearings, confirmations, and private revelation.
- Self-blame, blame of the sick person, or accusations of inadequate faith when improvement does not occur.

- Family conflict when skepticism is treated as lack of faith, spiritual insensitivity, resistance, or darkness.
- Erosion of confidence in ordinary personal revelation, scripture, medicine, or authorized local Church counsel.
- False beliefs or memories generated by suggestive questioning, imagery, repeated confirmation, and confident ancestral narratives.

The prevalence of these harms specifically among Latter-day Saint energy-healing clients has not been established by strong population studies. They are best described as plausible and recognizable risks arising from the structure of the claims, not as proof that every client experiences them.

Financial and professional risks include escalating session packages, paid levels, proprietary apps, affiliate marketing, pressure to become certified, and the assumption that an energy certificate qualifies someone to treat trauma or medical illness. Current Emotion Code materials advertise multiple levels, required portfolios, practitioner directories, remote clients, and income opportunities. A private credential may document completion of that company's curriculum, but it is not a state license in medicine, psychology, social work, nutrition, or physical therapy.

Licensed professionals who incorporate unvalidated spiritual systems into practice face additional duties involving informed consent, scope of competence, confidentiality, documentation, conflicts of interest, and avoidance of misleading claims. A therapist's license does not automatically validate an added energy diagnosis, just as an energy certificate does not expand a legal clinical scope.

Principal risk matrix

Risk	How it can occur	Evidentiary status
Delayed diagnosis or treatment	The practitioner claims the true cause is energetic or spiritual and recommends repeated clearing rather than competent evaluation.	Recognized risk of unproven health practices; consumer-health agencies advise against postponing proven care.
Financial exploitation	Repeated sessions, escalating course levels, certifications, required tools, apps, directories, or fear-based upselling.	Documented general pattern in health scams; whether a particular business is exploitative requires case-specific evidence.
Dependency	The client is taught that only the practitioner can identify or clear recurring hidden problems.	Reasoned psychological risk, especially when claims are nonfalsifiable.
False memories or beliefs	Suggestive questioning generates narratives of ancestral trauma, abuse, entities, curses, or hidden events.	Supported risk under suggestive procedures, though not an inevitable outcome.
Nocebo and spiritual fear	The client is told that darkness, curses, cords, entities, or dangerous blocks are present.	Plausible and evidence-supported through expectation and suggestion mechanisms.
Blame and shame	Illness is attributed to sin, inadequate faith, family contamination, resistance, or unwillingness to release an emotion.	Doctrinally and psychologically dangerous; conflicts with submission to God's will and can burden sufferers unjustly.
Confusion about authority	A ritual resembles laying on of hands and invokes Christ without priesthood authorization.	Strong reasoned doctrinal conclusion based on the Handbook and ordinance instructions.
Assumed revelation about the client	Practitioner impressions are presented as statements from God.	Conflicts with official teachings on revelation and stewardship.
Medical misrepresentation	Subjective change is presented as proof that disease or pathology has been removed.	Unsupported unless verified through appropriate clinical assessment.
Family conflict	Unverified claims assign trauma, abuse, curses, spiritual defects, or hidden wrongdoing to relatives or ancestors.	Plausible consequence, especially when the claim is treated as revealed fact.

The strongest harms are not necessarily caused by the hand movement, magnet, quiet room, or breathing exercise. They arise when an unvalidated interpretation is treated as revelation, diagnosis, authority, or a reason to delay care, fear unseen causes, purchase more sessions, distrust family members, or surrender judgment to the practitioner.

10. Strongest Defenses and Direct Responses

The following defenses should be answered fairly but directly. A valid premise must not be allowed to carry an invalid conclusion.

Defense	What is valid	Direct response
"Jesus is the real healer."	Christian doctrine affirms Christ as Creator, Redeemer, and healer.	It does not follow that every method invoking Him is authorized. Matthew 7 makes clear that Christ's name and claimed works are not self-authenticating.
"I never claim priesthood authority."	A practitioner may sincerely disclaim priesthood office.	The Handbook discourages special supernatural-healing methods outside prayer and properly performed priesthood blessings, not only those who explicitly claim priesthood.
"This is only a spiritual gift."	Women and men may possess genuine gifts of healing and faith.	Calling a repeatable, branded, certified procedure a gift does not prove that it is one. Gifts are distributed by God as He wills, not purchased or guaranteed.
"Women healed people in early Church history."	Nineteenth-century women sometimes blessed by prayer of faith and exercised spiritual gifts.	That history does not establish authority to invent current proprietary energy ordinances. Current instruction reserves administering to the sick to worthy Melchizedek Priesthood holders.
"I received personal revelation to do this."	Personal revelation is essential within one's life and stewardship.	It does not override the Handbook, create a Church-wide healing system, or grant diagnostic and governing authority over clients.
"My clients feel the Spirit."	Clients may feel peace, hope, love, gratitude, catharsis, suggestion, or spiritual emotion.	The feeling does not independently prove every diagnosis, mechanism, ancestral story, entity claim, or authority assertion supplied by the practitioner.
"It works, so it must be from God."	Some clients sincerely report improvement.	Subjective benefit can arise from touch, attention, expectancy, rest, natural fluctuation, concurrent treatment, lifestyle changes, or placebo-related mechanisms. Signs alone can deceive.
"I charge only for my time."	Payment for ordinary labor and professional skill can be legitimate.	The question is whether the paid service includes claimed access to divine power, revelation, supernatural diagnosis, or spiritual clearing.
"Doctors use energy too."	Medicine uses measurable energy in radiation, ultrasound, electrical stimulation, lasers, and imaging.	Those technologies have units, instruments, mechanisms, doses, risks, and testable outcomes. They do not validate metaphysical fields or revelation through muscles.
"The Handbook only discourages it; it does not call it a sin."	Discouraged is the precise policy term for the described category.	The wording should not be exaggerated, but it must not be neutralized. The Handbook expressly directs members away from the practice; individual culpability may vary.
"I am not replacing priesthood blessings."	A client may also request a priesthood blessing.	A parallel supernatural ritual can still conflict with the revealed order. Addition is not automatically harmless.
"Muscle testing lets the body reveal truth."	Manual muscle testing has limited legitimate physical-assessment uses.	Evidence does not validate using muscle resistance as an oracle for hidden emotions, spiritual permission, ancestry, doctrine, or truth.
"This method removes inherited trauma."	Families transmit genes, behaviors, environments, narratives, and stress patterns.	That does not prove a practitioner can identify and erase a specific ancestral emotion through an invisible-energy ritual.
"The Holy Ghost confirms the diagnosis."	A person may feel strong spiritual confidence.	Certainty is not a substitute for evidence, stewardship, and revealed order. A claimed confirmation about another person cannot be imposed as authoritative.
"The Light of Christ fills the universe, so it can be accessed as energy."	Official teaching describes the Light of Christ as divine energy, power, or influence.	Official sources do not teach that practitioners can scan, channel, transfer, balance, clear, or sell it. That added mechanism is private speculation.
"God reveals truth outside the Church."	Truth and goodness exist throughout the world.	Religious portability is not disproof, but LDS vocabulary cannot be treated as evidence that an independently developed metaphysical mechanism is true or authorized.

Defense	What is valid	Direct response
"I merely facilitate the body's own healing."	The body has genuine self-regulatory and healing processes.	The label facilitator does not answer whether the practitioner falsely claims to locate hidden causes, communicate with the subconscious through muscles, or clear problems remotely.

11. Discernment Checklist and Faithful Alternatives

A single “yes” does not always settle the matter, but an accumulating pattern-especially supernatural claims combined with imitation of an ordinance and payment-should trigger serious concern.

Questions that should trigger serious scrutiny

Discernment question	Why it matters
Does the practitioner claim supernatural knowledge or power?	This moves the service beyond ordinary wellness into claims requiring doctrinal and evidentiary scrutiny.
Is the method found in scripture or authorized Church instruction?	A privately revealed ritual cannot be assumed to carry Church authority.
Does the practitioner claim revelation that diagnoses, governs, or defines another person?	Revelation is bounded by stewardship.
Does the session resemble an ordinance or blessing?	Hands, invocation, commands, pronouncements, and claimed spiritual changes can create a functional imitation.
Is Christ's name used to validate an otherwise unrevealed method?	Matthew 7 shows that using His name does not establish His approval.
Is invisible energy treated as something the practitioner can scan, command, transmit, delete, or clear?	The Handbook specifically warns against claimed special access to supernatural healing power.
Are spiritual claims being sold?	Monetized access to supposed gifts, revelations, entities, or divine healing raises priestcraft concerns.
Are results guaranteed or strongly implied?	Even authorized priesthood blessings are subject to God's will.
Is competent medical or mental-health care discouraged?	Delay can cause serious harm.
Are clients taught to depend on repeated practitioner interpretation?	Dependency can replace agency, clinical judgment, and direct relationship with God.
Are unverifiable spiritual causes assigned to illness?	Such explanations can produce fear, shame, blame, and false belief.
Would the practice remain persuasive without testimonials and religious vocabulary?	This tests whether evidence or suggestion is carrying the claim.
Does the practitioner accept correction from scripture, the Handbook, and authorized Church teaching?	Genuine humility includes willingness to abandon a claim that conflicts with revealed order.
Does the method blur personal prayer with priesthood administration?	Prayer is universal; ordinances require authorization.
Are muscles, pendulums, tingling, warmth, or intuition treated as objective revelation?	These experiences have ordinary alternative explanations and are not validated diagnostic channels.
Does a founder or certification body function as a parallel spiritual authority?	Private systems can create alternative authority structures.
Are ordinary benefits used to prove extraordinary metaphysical claims?	Relaxation or pain relief does not establish the asserted mechanism.
Can the client disagree without being labeled resistant, dark, blocked, or faithless?	A claim protected from every possible disconfirmation is not trustworthy.

Expanded warning signs

- Claims special access to Christ's healing power, angels, priesthood power, the Holy Ghost, or the Light of Christ.
- Says divine energy can be channeled, directed, scanned, transferred, cleared, balanced, or deleted through a learned method.
- Uses muscle testing, pendulums, auras, chakras, sensations, or intuition to diagnose hidden physical, emotional, ancestral, or spiritual conditions.
- Claims to detect or remove trapped emotions, entities, curses, cords, generational blocks, spiritual attachments, invisible toxins, or inherited energetic contamination.
- Commands illness, darkness, emotions, cells, ancestors, or entities to change in language resembling an administration.
- Places hands on or over a person while claiming to transmit divine power, activate healing, or seal a result.
- Promises healing, implies predictable results, or claims to identify the hidden cause of nearly every problem.
- Suggests conventional testing cannot identify the real problem or subtly discourages medicine, therapy, medication, or evidence-based care.
- Claims personal revelation about a client's body, health, ancestry, relationships, sins, deceased relatives, or spirits.
- Uses priesthood, temple, angelic, or prophetic vocabulary without Church authorization.
- Sells escalating sessions, certifications, attunements, levels, apps, directories, tools, or advanced spiritual secrets.
- Implies Church, temple, apostolic, or General Authority endorsement without an official source.
- Relies primarily on testimonials, dramatic stories, certainty, and before-and-after feelings rather than controlled evidence.
- Explains failure by blaming doubt, resistance, impurity, insufficient faith, hidden layers, or unwillingness to buy more sessions.
- Discourages questions, second opinions, independent evaluation, or discussion with competent clinicians and authorized Church leaders.
- Uses fear of entities, curses, inherited energies, spiritual blindness, or consequences for refusing treatment to retain clients.
- Operates outside professional licensure, lacks informed consent, or blurs pastoral, therapeutic, sexual, financial, and confidentiality boundaries.

The faithful alternative is not therapeutic nihilism. It is the integrated pattern the Church actually teaches:

- Seek competent medical or mental-health evaluation and evidence-based treatment with informed consent.
- Pray personally and as families; fast when appropriate; exercise faith in Jesus Christ without trying to compel an outcome.
- Ask trusted members to pray and request a properly performed priesthood blessing when desired.
- Receive ministering, practical service, meals, transportation, companionship, and emotional support.
- Continue appropriate treatment rather than interpreting a blessing as permission to disregard medical advice.
- Submit the outcome to God without blaming the sick person, family members, or priesthood holders when healing does not occur.

A concerned family need not accuse a practitioner of fraud or speculate about demonic influence. It can say, accurately and firmly:

> **“We do not accept claimed revelation about our bodies, ancestors, spiritual condition, or treatment. We will not participate in a ritual that claims to manipulate invisible power or imitate a priesthood blessing. We will seek competent care, pray, exercise faith, and follow the Church’s revealed order.”**

The doctrinal boundary should remain unmistakable. The Lord’s established order cannot be bypassed by relabeling an energy practice as Christ-centered. A practitioner cannot create an alternative healing ordinance by combining Christian vocabulary with metaphysical methods. Practices that imitate laying on of hands while claiming supernatural authority should not be treated as harmless wellness exercises.

12. Final Doctrinal Warning

The Church's position is not that medicine excludes faith, that women lack spiritual power, that miracles have ceased, or that every meaningful healing experience is fraudulent. Its position is more disciplined: competent care, prayer, faith, spiritual gifts, and authorized priesthood ordinances each have their proper place. God distributes gifts; He establishes ordinances; He defines stewardships; He holds priesthood keys; and He determines outcomes.

Energy-healing systems become doctrinally incompatible when they claim privately controlled supernatural access, substitute ritual procedures, revelation for clients, invisible spiritual diagnosis, or the ability to direct Christ's power. The addition of Jesus's name does not cure the defect. The disclaimer "I am only an instrument" does not confer authority. A paid certification does not bestow a gift of the Spirit. A tingling sensation does not establish a metaphysical field. A client's tears do not verify an ancestral narrative. A temporary improvement does not prove that an invisible blockage was removed.

Where such systems commercialize claimed divine gifts or spiritual knowledge, priestcraft concerns are not rhetorical exaggeration; they arise from 2 Nephi 26 and Acts 8. Where they assign hidden causes, entities, curses, or inherited trauma without evidence, they risk fear, false belief, dependency, disrupted relationships, and delayed care. Where they imitate administration to the sick, they obscure the distinction between personal faith and authorized ordinance.

Faithful Latter-day Saints should therefore reject claims that a private practitioner can activate, channel, command, transmit, package, certify, or sell Christ's healing power. They should seek competent care, pray in faith, receive properly performed priesthood blessings when desired, minister compassionately, and leave the outcome humbly in Jesus Christ's hands.

The combined evidence supports a conclusion that should be stated without evasion. Latter-day Saint-branded energy-healing systems are not harmless simply because they use the name of Jesus Christ, begin with prayer, include scripture, or are practiced by sincere Church members. When their operative claims depend on manipulable invisible energies, supernatural diagnosis, revelation for clients, entities or curses, priesthood-like ritual, proprietary certification, or commercial access to claimed divine power, they depart from the Church's revealed order and should be rejected.

The word counterfeit is a reasoned doctrinal conclusion, not an official Handbook quotation. It is warranted when an unrevealed private system performs the same claimed spiritual function as an authorized ordinance while substituting self-authorization, metaphysical technique, founder doctrine, certification, and payment for priesthood keys, ordained authority, revealed form, and submission to God's will. The closer the imitation, the stronger the conclusion.

Likewise, the word syncretism is an analytical conclusion, not an accusation about every practitioner's intent. It becomes the most plausible description when Reiki, chi, chakras, auras, meridians, proxy work, trapped-emotion concepts, pendulum diagnosis, frequency theories, and outside certification structures are retained but renamed as the Light of Christ, priesthood power, the Holy Ghost, angels, or spiritual gifts. Gospel vocabulary does not transform a portable metaphysical system into restored doctrine.

A compassionate judgment of people must not become a weak judgment of claims. Many participants are sincere. Some may have experienced genuine comfort, relaxation, hope, or symptom improvement. Those facts do not establish supernatural authority, scientific validity, diagnostic reliability, or ethical safety. A caring intention cannot authorize an ordinance. A powerful feeling cannot prove an entity. A weak muscle cannot reveal an ancestor. A certification cannot confer a gift of the Spirit. A fee cannot purchase revelation. Christ's power is not inventory.

Faithful Latter-day Saints should reject claims that private practitioners can activate, channel, command, transmit, package, certify, or sell Christ's healing power. The faithful alternative is not disbelief in miracles. It is the revealed pattern: competent care, prayer, fasting when appropriate, spiritual gifts as God wills, compassionate ministering, properly performed priesthood blessings when requested, and humble submission to the Lord's wisdom, timing, and will.

13. Annotated Source Guide and Bibliography

The following source guide consolidates the principal Church, scriptural, historical, scientific, regulatory, and practitioner materials used in the two underlying reports. Official Church sources control the description of Church policy and doctrine. Peer-reviewed and government sources inform the scientific and risk analysis. Practitioner and commercial sources document what particular systems claim; they do not establish Church endorsement or scientific validity. Commercial pages and pricing may change.

Controlling and highly authoritative Church sources

- **General Handbook, chapter 38, sections 38.6.12, 38.7.8, and 38.7.12.** The controlling current policy source: the occult, medical and health care, energy healing, and self-awareness groups. Source
- **General Handbook, chapter 18, especially administering to the sick.** Establishes who may perform the ordinance and the prescribed pattern of anointing and sealing. Source
- **Dallin H. Oaks, "Healing the Sick" (April 2010).** Modern apostolic exposition of medicine, prayer, faith, anointing, sealing, inspired words, and the Lord's will. Source
- **Dallin H. Oaks, "Two Lines of Communication" (October 2010).** Authoritative explanation of personal revelation, priesthood order, ordinances, obedience, and competing claims. Source
- **Gospel Topics: Priesthood.** Defines priesthood authority and power within the Church's revealed order. Source
- **Gospel Topics: Light of Christ.** Defines the Light of Christ as divine energy, power, or influence without teaching a therapeutic manipulation technique. Source
- **Gospel Topics: Revelation.** Explains personal and Church revelation and the prophetic order. Source
- **Gospel Topics Essay: Joseph Smith's Teachings about Priesthood, Temple, and Women.** Essential historical context for women's prayer-of-faith healing practices and current distinctions. Source
- **Russell M. Nelson, "Rejoice in the Gift of Priesthood Keys" (April 2024).** Current teaching on priesthood keys and covenant access to God's power. Source
- **Church Historian's Press, The First Fifty Years of Relief Society.** Historical documentation of Relief Society and women's practices, properly distinguished from current policy. Source

Scriptural sources

- **James 5** - text
- **Matthew 7** - text
- **Matthew 24** - text
- **Mark 9** - text
- **Acts 8** - text
- **Acts 19** - text
- **1 Corinthians 12** - text
- **2 Nephi 26** - text
- **Jacob 6** - text
- **Alma 13** - text
- **Mormon 9** - text
- **Moroni 7** - text
- **Moroni 10** - text
- **Doctrine and Covenants 28** - text
- **Doctrine and Covenants 42** - text
- **Doctrine and Covenants 46** - text
- **Doctrine and Covenants 50** - text
- **Doctrine and Covenants 121** - text
- **Doctrine and Covenants 129** - text

Scientific, medical, psychological, and regulatory sources

- **NCCIH, Reiki.** Government overview: unclear evidence of effectiveness and no scientific evidence for the proposed Reiki field. Source
- **NCCIH, The Placebo Effect.** Background on expectation, treatment context, and placebo-related outcomes. Source

- **NCCIH, Are You Considering a Complementary Health Approach?.** Consumer guidance on safety, evidence, and coordination with health professionals. Source
- **FDA, Health Fraud Scams.** Warnings concerning unproven products, delayed diagnosis, and treatment harm. Source
- **FTC, Health Products Compliance Guidance.** Standards requiring objective health claims to be truthful, nonmisleading, and supported by competent evidence. Source
- **FTC consumer alert on false health guarantees.** Consumer-facing warning about unsupported health claims. Source
- **Lee, Pittler, and Ernst, systematic review of Reiki trials.** Earlier review finding inadequate evidence for clinical effectiveness. Source
- **Rosa et al., "A Close Look at Therapeutic Touch," JAMA.** Blinded test in which practitioners did not detect the proposed field above chance. Source
- **Hall et al., review of applied and specialized kinesiology.** Review finding insufficient evidence for diagnostic validity. Source
- **Haas et al., manual muscle testing and applied kinesiology.** Distinguishes ordinary muscle assessment from applied-kinesiology challenge procedures. Source
- **Controlled study of applied kinesiology as a diagnostic tool.** Randomized testing of applied-kinesiology diagnostic claims. Source
- **Astin, Harkness, and Ernst, systematic review of distant healing.** Mixed findings with major heterogeneity and limitations. Source
- **Ernst, update of distant-healing review.** Later review shifting the weight of evidence against effects beyond placebo. Source
- **Large preregistered meta-analysis of touch interventions.** Evidence that caring touch can reduce some subjective symptoms without establishing metaphysical energy. Source
- **2026 systematic review of Reiki and therapeutic touch in palliative populations.** Small and heterogeneous evidence base with very low certainty. Source
- **Recent review of applied-kinesiology reliability.** Reports highly variable reliability and serious problems with nonmusculoskeletal challenge procedures. Source
- **Wager and Atlas, neuroscience of placebo effects.** Scientific account of how context and expectation influence experience. Source
- **International Association for the Study of Pain, placebo and nocebo.** Clinical importance of expectations and patient-provider interaction. Source
- **Research on suggestion, nocebo, and induced beliefs.** Sources used in the second report to evaluate fear, suggestion, and false-conviction risks. Source
- **Research on false memories and suggestive procedures.** Additional evidence concerning personalized suggestion and false belief or memory. Source
- **NCI, Radiation Therapy to Treat Cancer.** Example of measurable medical energy with defined mechanism and dosage. Source
- **Systematic review of Emotional Freedom Techniques for anxiety disorders.** Evidence that should be interpreted without assuming an energy-meridian mechanism. Source

Practitioner and organization primary materials

- **Discover Healing, "How Does the Emotion Code Work?".** Documents the organization's own explanation of trapped emotions, muscle testing, intention, and release. Source
- **Discover Healing, Frequently Asked Questions.** Documents proxy work, practitioner claims, and program descriptions. Source
- **Discover Healing, certification levels.** Documents sequential Emotion Code, Body Code, and Belief Code certifications. Source
- **Discover Healing, webinar and commercial offer.** Documents current commercial training and offers at the time reviewed; pricing can change. Source
- **Bradley Nelson, response to the 2020 Handbook.** Provides the organization founder's defense that the method removes imbalances rather than performing miracles. Source
- **International Center for Reiki Training, Frequently Asked Questions.** Documents Reiki's religious portability and Christian interpretations. Source
- **Energy Healing Conference, About Us.** Documents the conference ecosystem, modalities, presenters, and commercial defense of energy work. Source
- **Christ-centered energy-healing conference reporting.** Documents promotion of a Christ-centered energy-healing gathering. Source
- **Stan Gardner, Healing Arts - A Gift from God.** Retail synopsis documenting an LDS-oriented synthesis of the Light of Christ with chi, chakras, auras, distance healing, crystals, trapped emotions, and related concepts; not a Church or scientific source. Source

Source-use limitations

- Official Church policy and doctrine should be stated from official Church sources rather than from practitioner descriptions, news reports, or private books.

- Historical practices must be described as history and not treated as automatic authorization for current ordinances or private systems.
- Scientific evidence can test repeatable mechanisms, diagnostic accuracy, reliability, and outcomes; it does not experimentally settle whether God may answer prayer or perform a singular miracle.
- Practitioner materials establish what an organization teaches or sells. They do not validate its theological authority or scientific claims.
- Commercial pages, certification structures, prices, and marketing language can change; the assessment reflects the materials reviewed for the two reports as of August 3, 2026.
- The reports did not establish that every energy-healing participant experiences harm or that every practitioner acts with conscious deception. The analysis evaluates claims, structures, evidence, and doctrinal compatibility.