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Post-traumatic Growth and Quality of Life among Metropolitan Cebuanos Living with HIV/AIDS: A Correlational Study

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ABSTRACT

Cases of HIV/AIDS have been rampant all over the globe, with almost 37 million individuals being infected. With the advancement of medications, the development of antiretroviral therapy gives them new hope in life. With this, the researchers have decided to study the posttraumatic growth and quality of life among metropolitan Cebuanos Living with HIV/AIDS.

This study aims to measure the levels of the domains of posttraumatic growth and quality of life, and the relationship between the two constructs. A total of fifty-three respondents were given two questionnaire surveys: the Posttraumatic Growth Inventory and the World Health Organization's Quality of Life for HIV, Brief Version. The researchers were able to determine the levels of the variables' domains using the mean scores of each domain. The Pearson R Correlation was used to assess the relationship between the two variables. The results and calculations indicate that there is a significant moderate positive relationship between posttraumatic growth and quality of life. This means that the higher the level of posttraumatic growth, the higher the quality of Life, and vice -versa. In conclusion, the respondents experienced positive life changes, resulting in high evaluations of posttraumatic growth and quality of life.

The researchers recommend that future studies can explore and consider other factors such as socio-economic status and respondents' personalities when conducting a study.

Keywords: Acquired Immune Deficiency Syndrome, Human Immunodeficiency Virus, Posttraumatic Growth, Quality of Life

The Impact of Internet Addiction and Perfectionism on Procrastination Mediated by Self-efficacy among University Students in Thailand: A Conceptual Model

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ABSTRACT

- Procrastination is a prevalent issue among students, often arising from the fear of failure and a tendency to postpone tasks. This proposed study aims to investigate the effect of perfectionism, and Internet addiction on procrastination with a focus on the mediating role of self-efficacy among university students in Thailand. Currently, there is a scarcity of studies examining how Internet addiction and perfectionism collectively influence procrastination through the mediation of self-efficacy, particularly within the context of university students in Thailand. The paper proposes a conceptual model derived from the literature reviewed. The proposed study will employ a quantitative method with path analysis. This conceptual research proposal underscores several implications for university counselors, professors, and students. Specifically, the findings may guide interventions aimed at enhancing self-efficacy, curtailing Internet usage, and mitigating perfectionistic tendencies to ultimately reduce procrastination. This conceptual exploration contributes to the broader understanding of factors influencing academic procrastination among university students in Thailand.

KEYWORDS: Internet addiction; perfectionism; procrastination; self-efficacy; university students

INTRODUCTION

- In the present times, digital technology has a significant impact on every aspect of human life, especially among students. The Internet has free access to tremendous amounts of information. Moreover, the pressure to excel academically has a complicated role when one has perfectionistic tendencies which often leads to the phenomenon of procrastination. The present research intends to explore the intricate relationship dynamics of procrastination, Internet addiction, perfectionism, and self-efficacy. Internet addiction is a growing concern all over the world, especially among youth, considering the impact it has on academic performance and psychological well-being. Perfectionism tends to increase procrastination, which can have a very detrimental effect on academic performance or quality of life in a world where there are high performance standards and competition. Self-efficacy is an important concept in social cognitive theory that appears to be crucial. Self-efficacy among students can be a significant determinant of their academic performance.

One of the many types of procrastination tendencies is academic procrastination, which describes students who willingly put off completing their academic assignments (Khairul Anam & Hitipeuw, 2022). Academic procrastination is a condition that is becoming more and more common. People who procrastinate in social, professional, personal, and relational domains exhibit many forms of addictions. Procrastination may now be an outcome behavior of Internet addiction. People might have an increased tendency to use the internet in an attempt to get over the anxiety associated with delaying their behavior. During this phase, the user's dependence on the Internet for all postponed activity increases and the usage of the Internet has the potential to become addictive (Küçükal & Sahranç, 2022).

Internet addiction is categorized as an impulse control disorder, according to Young (1999). To be classified with an addiction, a person must have five of the eight criteria, which include being obsessed with the Internet, requiring extra time to use the Internet, ongoing efforts to cut back on Internet use, withdrawal when cutting back on Internet usage, having trouble controlling time, being uncomfortable in one's social, academic, or professional setting, lying about one's online activities, and using the internet to change one's mood (Young, 1998; Malik & Rafiq, 2016).

In recent years, the Internet has grown in importance as people's daily needs and responsibilities have increased. Everywhere people are using the Internet more and more, people are spending most of their time on it, which has an impact on their social responsibilities. People's attitudes, values, and communication styles can all be impacted by prolonged Internet use, which can also alter their thoughts, feelings, and behaviors. One benefit of having the Internet is that it makes our daily lives more convenient. We can quickly complete many of our personal and professional tasks with a mobile phone. However, there are also negative effects of technology addiction, such as behavioral control issues, emotional and intellectual imbalances, and misuse of technology. The ability of the Internet to solve issues, fulfill demands, and keep updated with society causes its usage to rise. While 72.9% of people used the Internet in 2018, that number rose to 75.3% in 2019, with the majority of users being in the 16–24 age range (TÜİK, 2019). As per Cengizhan (2005), Ceyhan (2008), and Doğan (2013), the rise in Internet usage in comparison to previous years facilitates the onset of addiction earlier in life and is considered an important

risk factor for the fast progression of addiction. Numerous studies have reported that adolescents' general development characteristics tend to make them more dependent on the Internet. This could result in a variety of psychological symptoms.Research has shown that excessive Internet use causes low rates of positive emotions and a high level of emotional isolation in people. Other effects include anxiety, shyness in adolescents, and loneliness. The following have been reported recently: depression, attempted suicide, fear of missing developments in social settings, increased violence, social appearance anxiety, sitting disorders, eye disorders, sleeplessness, severe loss of will that results from life's meaninglessness, and excessive exhaustion, poor academic performance, difficulties with eating, weakened immune systems, mental illnesses, and a decline in work performance (Traş & Gökçen, 2020).

As stated by Pacht (1984), perfectionists set high standards for themselves, which makes it impossible that they could accomplish them. When the causes of perfectionism are taken into consideration, it seems that the individual experiences excessive self-criticism and failure, sets unrealistically high standards for themselves, and uses excessive energy to try to reach these standards. Empirical research reveals that perfectionists frequently show postponing behaviors because of their fear of being judged and of failure (Delibalta, 2020). As stated by Hewitt and Flett (1991), perfectionism has social and personal components, and that the structure needs to be assessed in a multidimensional way. "Self-oriented perfectionism" is a type of perfectionism that falls under the personal area. This dimension is characterized by the self-imposition of relatively high standards, a critical evaluation of one's performance and activities, acceptance of the all-or-none concept, and a focus on success or failure in terms of completed tasks. This kind of perfectionism encourages a person to aim for excellence while also having the desire to stay away from mistakes. Conversely, the interpersonal dimension of perfectionism is known as "other-oriented perfectionism." This dimension includes focusing on people who are considered vital to high standards and emphasizing their compliance. This kind of perfectionism is connected with judging others strongly and holding negative emotions against them. "Socially-prescribed perfectionism" refers to the third and social aspect of perfectionism, which is directed at one's own expectations of others. The ability to live up to the standards and expectations that others have established and that they consider necessary is a part of this dimension. This type of perfectionism is the belief that one must live up to the high standards set by others in order to be pleased with oneself. Research has shown the association between perfectionism and many different kinds of psychopathologies as well as conflicting behaviors. It is interesting to point out that the link between procrastination and perfectionism is one of the bad characteristics that research has confirmed. Students at universities appear to recognize this. Research indicates that college students exhibiting perfectionist tendencies tend to postpone dealing with academic matters more (Çapan, 2010). It will be interesting to see the role of self-efficacy among these variables. The researchers were interested to see if self-efficacy could mediate the relationship between perfectionism and procrastination among university students, and also the researchers were interested to see if self-efficacy could mediate Internet addiction and procrastination among university students.

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Self-efficacy can be defined as the belief that one feels that they can finish a specific activity, and they approach it more thoughtfully and calmly. Self-efficacy was described by Bandura (1997) as a belief that one can "organize and execute the courses of action required to produce given attainments" (p. 3). Self-efficacy may vary between, and within, “activity domains” (Bandura, 1997, p. 42), and it is frequently operationalized under the label

"academic self-efficacy" in academic domains. The belief of a student that they can "successfully achieve educational goals" is known as academic self-efficacy. Usually, it is assessed at the task-specific level (Hitches et al., 2022). Among the other variables, academic procrastination was found to be most strongly predicted by academic self-efficacy (Howell et al., 2006). Procrastination was identified by Chu and Choi (2005) as a sign of a lack of academic self-efficacy for self-regulated learning. Additionally, the findings demonstrated that the association between academic procrastination and self-esteem was totally mediated by academic self-efficacy. Problematic Internet use has been shown to lower levels of self-efficacy and self-regulation. As a result, people tend to put off academic assignments as their confidence in their ability to plan their learning and finish a task effectively declines (Karakaya Özyer & Altınsoy, 2023). Overuse of the Internet by students can lead to a loss of time tracking and management skills, which might appear as an inability to plan ahead or a failure to complete started plans. Future issues with learning, task planning, and time conceptualization may result from this. Additionally, academic procrastination was positively correlated with self-efficacy for self-regulated learning, indicating that the degree of academic procrastination declines as self-efficacy for self-regulated learning rises.

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- Hence the researchers proposed a model that can be tested using a path analysis. The researchers explore the association between Internet addiction and perfectionism on procrastination mediated by self-efficacy. Internet addiction and perfectionism are discovered to have a direct effect on procrastination; however, this effect is possibly mediated by self-efficacy. The objective of this paper is to show a conceptual model that is suitable for Thai counselors, students, and professors.

Proposed Model

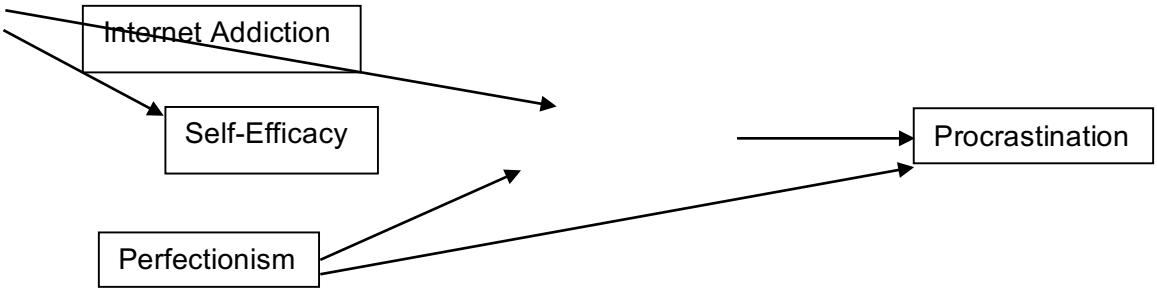

Figure 1: *The Proposed Conceptual Model*

Each arrow in the model represents the association between the predicted variables based on the empirical and theoretical review.

discussion

As has been demonstrated, perfectionism is connected to self-efficacy (Alexandra Beauregard, 2012; Chufar, 2013; Hart et al., 1998; Karaman et al., 2020; Stoeber et al., 2008; Yu et al., 2016), self-efficacy is connected to procrastination (Arias-Chávez et al., 2020; Batool et al., 2017; Ferdian Farhan, 2020; Hernández et al., 2020; Kiamarsi & Abolghasemi, 2014), and perfectionism is related to procrastination (Akbay & Delibalta, 2020; Çapan,

2010; Flett et al., 1992; Yao, 2005; Yen et al., 2021). It logically follows that self-efficacy can be mediator in the association between perfectionism and procrastination (Seo, 2008). Also, as has been shown, Internet addiction is related to self-efficacy (Agbaria & Bdier, 2022; Berte et al., 2019; Gazo et al., 2020; Iskender & Akin, 2010; Odacı & Celik, 2017), and Internet addiction is related to procrastination (Ayadi et al., 2021; Kim et al., 2017; Küçükal & Sahranç, 2022; Malik & Rafiq, 2016; Saleem et al., 2015; Tras & Gökçen, 2020), it logically follows that self-efficacy could be a mediator in the association between Internet addiction and procrastination (Li et al., 2020; Özyer & Altinsoy, 2023).

methodology

Research Design

This study is quantitative in nature and will employ a correlational design via path analysis to establish the effect of the independent variables (Internet addiction and perfectionism) on the dependent variable (procrastination) mediated by the mediating variable (self-efficacy). The path analytic framework (via multiple regression analysis) will allow for the investigation of the sequential direct and indirect effects of Internet addiction and perfectionism on procrastination, mediated by self-efficacy.

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- Two multiple regression analysis will be carried out. The first regression analysis will be carried out with Internet addiction, perfectionism, and self-efficacy as the independent variables and procrastination as the dependent variable. The second regression will be carried out with self-efficacy as the dependent variable and perfectionism and procrastination as the predictor variables. Mediation effect will be calculated based on Andrews Hayes Process Macro.
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- **Sample/Participants**

The participants will consist of university students in Thailand. Convenience sampling will be used to select the participants. Multiple regression analysis will be used to test the proposed path model. The required sample size will be determined by the power of the statistical test, the effect size of the predictor variables, and the number of predictor variables in the model. In multiple regression analysis, power denotes the probability of finding a particular level of *R*-square or a regression coefficient at a specified significance level as statistically significant (Hair et al., 1995). Effect size refers to the likelihood of the predictor variables having a real effect in predicting the dependent variables in the regression model. The application used for determining the sample size is the statistical program G*Power 3.1.9.4. Setting the significance level at 0.05, power at 0.8, and effect size at 0.15 (medium) for a total of three predictor variables, the required minimum sample size is determined to be 77.

- **Research Instruments**

The first part of the questionnaire will be constructed to gather general background information on participants. It comprises of age, gender, educational level, and nationality.

The second part of the questionnaire will be Young's (1998) 20-item Internet addiction test

(IAT) which will assess Internet addiction. Every item is evaluated on a five-point Likert scale. Young suggested a revised cut-off point many years after the IAT was first developed. Individuals who receive a score of more than 50 on the IAT seem to be frequently disturbed by their Internet usage. If an individual's score is higher than 80, then using the Internet is believed to significantly lower their quality of life (Chanthasin et al., 2021). The IAT scale has a Cronbach's alpha ($\propto$) of 0.94, indicating strong internal consistency (Chung et al., 2019).

The third part of the questionnaire will be the Procrastination Assessment Scale-Student (PASS; Solomon & Rothblum, 1984) which assesses level of procrastination, fear of failure, aversiveness of task, difficulty making decisions, dependency, lack of assertion, risk taking, and rebellion against control. Higher scores indicate higher levels of self-reported procrastination. The scales had good reliabilities. Cronbach's Alpha reliability score for PASS was 0.686, indicating high scale reliability (Saleem et al., 2015). With significant correlations to the Beck Depression Inventory, Ellis Scale of Irrational Cognitions, Rosenberg Self-Esteem Scale, and Delay Avoidance Scale, the PASS has excellent concurrent validity. Additionally, significant associations were discovered between the total number of self-paced quizzes completed and PASS scores as well as between PASS and overall grade point averages (GPAs) (lower GPAs were associated with higher PASS scores) (Corcoran & Fischer, 2000).

The fourth part of the questionnaire will be the General Self-Efficacy Scale (GSE; Schwarzer & Jerusalem, 1995) The GSE has 10 items based on the Likert scale ranging from 1 to 10 where 1 represents “never”, and 10 represents “always” This unidimensional scale evaluates an individual's overall self-efficacy in managing stress. This scale has been used in several previous studies and has a good validity index and Cronbach's alpha of 0.87. According to a previous study, this scale has a good reliability score with a Cronbach's alpha of 0.91 (Morales-Rodríguez & Pérez-Mármol, 2019). The GSE is linked to emotion, optimism, and work satisfaction. Depression, stress, health complaints, burnout, and anxiety all had negative coefficients (Schwarzer & Jerusalem, 1995).

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The fifth part of the questionnaire will be the Multidimensional Perfectionism Scale (MPS; Hewitt et al., 1991) which is a 45-item self-report assessment of perfectionistic habits. It evaluates three dimensions: (1) self-oriented perfectionism; (2) other-oriented perfectionism; and (3) socially prescribed perfectionism. On a seven-point scale, respondents must indicate how much they agree with each item. Greater perfectionism is reflected in higher scores. There is increasing evidence that the MPS is multidimensional and that the psychometric properties of its subscales are adequate (Flett et al., 1992).

conclusion

This paper specifically examines the association between Internet addiction and perfectionism on procrastination mediated by self-efficacy among university students in Thailand. This paper presents a new conceptual model that is based on a review of theories and empirical research. It can help influence future studies in Thailand on procrastination.

4.1 Implications for Research

This paper will help counselors better understand the factors that lead to procrastination and the better interventions can be designed. Also, this study will help students better understand the reason why they procrastinate. It might aid them in gaining self-awareness and minimizing their procrastination. Moreover, this research might help students understand the reason why they always use the Internet to escape from their uncomfortable feelings. They might increase their self-awareness and curtail their Internet usage. Furthermore, this paper might help students understand themselves and the reason why they pursue perfection. They might increase their self-awareness and mitigate perfectionistic tendencies. Lastly, this study will likely help students who have low self-efficacy understand that low self-efficacy is connected to high procrastination.

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Interesting occurrences at the end of life and their spiritual impact: An introduction to terminal lucidity

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ABSTRACT

Interesting things can happen at the end of life. Across time and culture, reports of those on the brink of death suddenly regaining previously lost abilities, including movement and memory, have been documented for more than 250 years. While those working in palliative care attest to their frequency of occurrence, these unusual occurrences remain little understood and have only recently been given the name "terminal lucidity" (TL). Defined as unusually enhanced mental clarity characterised by spontaneous and often animated changes in verbal and/or non-verbal behaviour, these unexpected surges of mental clarity have been mostly reported during the last minutes, hours, or days before a person's death. Often reported in those of older age who have dementia, TL is also very common in children who are terminally ill. Despite recent surges of scholarly interest in TL, limited information about this phenomenon is available in academic literature. This presentation will provide an overview of TL, including some case reports, and highlight two studies that are currently being conducted on TL in children and TL in adults. It will conclude by highlighting the spiritually transformative impact these experience tend to elicit in those who witness them.

Keywords: spiritual experiences, Māori, indigenous psychology

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Embodying Islamic Spirituality for Psycho-Spiritual Healing/Therapy: An Ethnographic study of British Muslim women's engagement in Sufi practices of *Dhikr* and *Sema* with lived experience of recovering from eating disorders

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ABSTRACT

Objective/Outcome of Presentation: This paper draws from ongoing ethnographic research being conducted in England amongst Muslim women who engage in embodied Sufi practices of *dhikr* (remembrance/invocation) and the performative ritual of *sema* (turning) for long-term healing and recovery from eating disorders. There is a body of literature that suggests the strong relationship between spirituality and mental health. Amongst the psychological disorders, eating disorders tend to be one of the most difficult to treat and overcome; recovery rates in the West remain low and relapse remains high. Extensive studies conducted on women with eating disorders indicate a positive correlation between spirituality and mental health, especially when incorporated into treatments such as CBT-E (cognitive based therapy –enhanced) and somatic therapy. More importantly, when spirituality is practiced in daily life, people recovering from eating disorders report higher rates of recovery and lower rates of relapse. Most of the empirical studies on the role of religion/spirituality in eating disorder recovery tend to be from the perspective of Christian spirituality and the experiences of white women with anorexia. There are few studies that examine the lived experiences of Muslim women in England and the long-term psycho-spiritual benefits of Sufi praxis and the utilisation of embodied spirituality as a source for healing and recovering from eating disorders and body image issues. Based on semi-structured interviews and participant observation, I explore the subjective experiences of British Muslim with Sufism and the mind/body healing experienced through *dhikr* and somatic expressions of *sema*, respectively. I also explore how Sufi psychology influences these women's understanding of their illness. I argue that Sufi practice of *dhikr* and *sema* enable Muslim women to make new meaning in their lives and reimagine notions of self-hood. The theoretical aspect of my research draws on phenomology and bodily practices, articulated in the works of Merleau-Ponty (1963) and Bourdieu (1977). These theories are framed within Muslim feminist scholarship on gender, performativity, and the notion of the divine feminine in Sufi cosmology, discussed in the works of Wadud (1992), Mahmood (2005) Shaikh (2012), and Schimmel (1979).

Key words: Islamic psychology, Islamic spirituality, Sufism, British Muslim women, eating disorders, soul, heart, dhikr

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Bridging Religion + Metaphysics To Answer "What Happened, & Who Am I?" After Loss of self

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ABSTRACT

This paper is to evaluate the global epidemic of inauthenticity through the lens of loss of self, and how through a negative event, life transition, or PTSD, one can overcome, realign with their essence, and live a life of value. The purpose is to expose the deficiencies in areas of growth within the Mental Health umbrella, while uplifting holistic potentials of healing with The 8 Levels of Love™, The Dimensions of Wellness, Maslow's Hierarchy of Needs, and Maslow's Motivational Model, to understand one's loss of self. In researching how loss of self is currently individualized, in conjunction with my personal stories, the human being as physical and spiritual, ruled by love, and striving for authenticity, supports the bridging of Religion + Metaphysics in Theocentric-Holistic Metaphysics™, clarifying the purpose of events within life so one can reconnect with their essence. The result of this research is the imputing fact that Spirituality is the aspect of self that is missing, which deprives individuals the ability to fully heal, and therefore continues cycles. In conclusion, to create a more positive society, the ability to heal, and live authentically, one must clarify truths, accept spiritual journeys, and reconnect with one's essence by healing inner child wounds, and changing perspective of life. This paper is to educate, inspire, and motivate those to make a conscious effort to provide holistic quality service to their life, and the lives of others in order to create a more peaceful and harmonized reality for all races and ethnicities.

KEYWORDS: mental, emotional wellness, holistic wellness, metaphysics, spirituality, religion

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INTRODUCTION.

Everyday, people walk around dying, confused on who they are, why they are here, and where they are going. Many are lost on their identity because they have been told or for so long, being "them" becomes scary and unfamiliar. Loss of self is referenced in many individual forms- loss of identity, soul loss, grief, depersonalization, motherhood, divorce, trauma, disassociation, etc.- but it is the root of Mental, Spiritual, and Physical Health issues. Loss of self is when a person goes through a negative event, life transition, or experiences Post Traumatic Stress Disorder (PTSD), and the result is feeling lost, unloved, stuck, broken or without life's light. It is the state of disconnect from one's spiritual essence to its being, in order to live, cope, or maneuver within the physical world the human body resides in.

The reason this has become a focal point of my career, is that I discovered and experienced loss of self from childhood through adulthood, and began my journey of healing as an adult. When I studied and brought myself closer to God, I recognized that people are spiritually dead, and that is hindering the world from becoming a better place. My parents divorced when I was 5 years old, and I had to assimilate to two socioeconomic groups, as well as my ethnic diversity- mixed with black and white. I desired to be equally accepted in both races, but when I failed, I became more engaged with connecting to being black, as I was not being seen in that light. By age 15, I was experimenting with alcohol, and by 21, I walked into Alcoholism because of going to parties, social normalization, and the false realities of friends and fun from each of my experiences. When I was 16, I discovered what love was, and wanted it, but I did not understand the difference of being loved and loving back. So, through that desire, plus the misunderstandings that I gave myself of love while growing up, I ended up with low self-value and toxic relationships. Right before I realized I had Alcoholism, I finally decided to come back to God, and after eight plus years of wearing a cross, but living a physical/ego based lifestyle, I wanted change. At 22, the start of my full recognition of what loss of self was, and is, I wanted to love back, and this is where the terminology, "loss of self" emerged within my life.

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DISCUSSION.

Many do not understand small, individual, life events can create true impact, but the human being is Holistic- a mind, body, spirit/soul- and when these facets are divided, a true understanding or solution can be made. In my life, I have always been connected to the Spiritual Realm, as I have seen time stop, heard angels speak, watched my body heal a wound within seconds, in addition to hearing the story, my mother shared, or I saw her deceased mother as I was lost in a store. In loss of self, one loses this connection with one's pure essence or authentic life, due to fear, confusion, survival, or just to make life make sense. From my experience, one's essence, knows life should be peaceful, happy, and full of positive experiences, but because life has shown the physical body fear, shame, guilt, negative feelings or energy, the essence hides, and lets the ego (attitude, character, and mannerisms) take over to manage the world around, through the physical body.

This pure essence, or authentic life is the spirit within that lives and feels positive emotions, as well as grows as a child, to become an inner child, and finally the human body grows to be a grown up child with an inner child. If healing does not occur during this process, pain resides, triggers harbour, and the physical-ego based personality develops the conforming lies needed to feel safe again. Many people may recognize situations such as abuse, suicide, addiction, death, or anxiety as negative events because they are publicized, but other means for this inner child to gain wounds can be a distant parent, family conflict, body issues, feeling unseen, feeling unloved, or even rejected. These events and emotions are normally considered "easy" to overcome, but since more than not, a grown up child has learned shame or guilt, they fear others will not understand them, so they repress or self-reject their wounds. This is how growth around an unhealed essence, authentic life, or inner child is able to teach the lies that one is alone, unloved, or cannot live their dreams. In healing from loss of self, each inner child needs reconnecting, with their grown up child, and trust with the world around, but life has taught them negativity,and the connection dissipates, the desire to share love drops, and in living a subpar life, Emotional, Mental, Spiritual and Physical Health declines.

Mental Health is the overall umbrella term that encompasses Mental and Emotional Fitness, it "includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices.[1]" (Centers For Disease Control and Prevention, 2023). Mental illness though

from, PhiDeltaTheta.org, is “functioning below expectations and significant distress that may be caused by biological, psychological, and/or social factors. Can be temporary or long term.” (*Mental Health and Wellness: Basic Definitions*. (n.d.); and as the CDC states there are over 200 mental illnesses (Centers For Disease Control and Prevention, 2023). Based on the definition, Mental Health only focuses on mind, body, and society, but what about “self” as a whole? Holistic Wellness is currently viewed as an approach or lifestyle choice, but considers one as mind, body, spirit/soul within the various facets of life. One major advantage is Holistic Wellness not only covers the Emotional, Psychological, and Social well-being of one, but it looks at one with loss of self as a whole, to determine a best path to realign all areas of the individual with their spiritual essence. The eight Dimensions of Wellness that society strives to balance are: physical, intellectual, emotional, social, spiritual, vocational, financial, and environmental (Stoewen, 2017), these are parallel with The 8 Levels of Love™. The 8 Levels of Love™ are my proprietary order and definitions of the eight types of love, explaining the importance of love, as well as how to attain a more elevated mentality; these love types are: Agape (The Sefless Love), Storge (The Parental Love), Philautia (The Self-Love), Philia (The Social Love), Pragama (The Long-Lasting Love), Ludus (The Flirtatious Love), Eros (The Bodily Love), and Mania (The Obsessive Love) (CONFIDENCE + FAITH & Santiago, 2024) - as seen in Table 1.

Table 1- Parallels of Dimensions of Wellness and The 8 Levels of Love™

The Dimensions of Wellness	The 8 Levels of Love™ (in proprietary order)
Spiritual	Agape: The Selfless Love
Emotional	Storge: The Parental Love
Intellectual	Philautia: The Self-Love
Social	Philia: The Social Love
Environmental	Pragama: The Long-Lasting Love
Vocational/ Time	Ludus: The Flirtatious Love
Physical	Eros: The Bodily Love
Financial	Mania: The Obsessive Love

In my discovery of these mutually interdependent and dependent parallels, the clarity for root(s) of a stumbling block, and a proper solution for one’s life becomes obvious as The 8 Levels of Love™ and the Dimensions of Wellness are joined: Agape: The Selfless Love to

Spiritual Wellness, Storge: The Parental Love to Emotional Wellness, Philautia: The Self-Love to Intellectual Wellness, Philia: The Social Love to Social Wellness, Pragama: The Long-Lasting Love to Environmental Wellness, Ludus: The Flirtatious Love to Vocational/Time Wellness, Eros: The Bodily Love to Physical Wellness, and Mania: The Obsessive Love to Financial Wellness. As Mental Health "includes our emotional, psychological, and social well-being" (Centers For Disease Control and Prevention, 2023), the Spiritual/Selfless, Environmental/Long-Lasting, Vocational/Time/Flirtatious, Physical/Bodily, and Financial/Obsessive Wellness and Love facets of each grown up child are not clearly spoken for, if at all.

In loss of self, feeling stuck, unloved, broken, or without life's light means that it bleeds into other areas of life. Having these five other facets taken into consideration would increase the ability to achieve healing as people are able to process their spiritual deaths, fake environments, and social stigmas from an open mind. Through the natural processes of transformational education, self-reflection, and personal growth, fewer individuals would need superficial materials, or substances to "heal". Since loss of self can happen at any age within the Five Stages of Growth, people that hurt others, are normally hurt themselves (grouport, n.d.), and do not not have a gender preference, wounds can begin during Infancy (0-1years), Toddler (1-5years), Childhood (3-11years), Adolescence (12-18years), or Adult (18+years) years. It can happen when one trusts another, are in a comfortable situations, within acts of rage, or when one takes something through forceful manipulation or lies.

As I taught myself to heal, I found that if I bridged Religion and Metaphysics into what I call Theocentric-Holistic Metaphysics™ (THM™), my perspective and foundation of thought became vaster than most and more unique. Since I combined a God centered approach to viewing a human being as mind, body, spirit/soul, while considering all that is or is not, I designed a niche healing process that fully reflects people. In blending Religion/Spirituality and Science, it improves how to understand a negative event, life transition, or PTSD from the aspects of Love, Wellness, Motivation, and Needs. In Table 1, these unique parallels support my unique perspective of THM™ by highlighting Spirituality at the top of the list, meaning that these life events and facets are not individual connections, but a spiderweb of context, creating a beautiful person. I learned in my loss of self healing that each person whom is choosing to overcome, needs to answer what has happened, re-identify who they are, and align with their inner child essence to live in authenticity. As one harmonizes the Physical and Spiritual perspectives, strength from an event can be recognized,

a victim can become and overcomer, self-awareness is enhanced, empowerment flourishes, and this open minded thought process permits one, the confidence to share their story or wisdom with another who needs it.

Mental Health looks to explain "...how we think, feel and act. It also helps determine how we handle stress, relate to others, and make healthy choices." (Centers for Disease Control and Prevention, 2023). In a Mozafaripour (2024) article on Mental Health Statistics, "17% of adolescents 12-17 [years old] experienced a major depressive episode", "33.5% of adults with a mental illness also have a substance use disorder", and about 50% of individuals start to have mental illness symptoms by age 14, 75% by age 24, and in the range of age 18 to 25, 33.7% commonly have Mental Illness. Mental Health is growing larger in the limelight with the 988 Suicide Hotline, but after loss of self, hearing, "just get over it" from society does not highlight the need for one's healing. In my loss of self, when I realized I was angry with my parents' divorce, I went to counseling, and it helped, but when that counselor left, the instability of trusting and rehashing my life with a new person was not worth it. I struggled on my own because I needed consistency, not only to handle my anger, but to approach how it reflected into other facets of my life. I needed outlets, consistent expression of feelings, scheduled follow ups, being asked how I was doing overall, and moving myself towards embracing my event, to find strength, and give my essence the ability to see what the world still had left to offer. In healing, starting with better "quality service" for yourself and others is key.

As I struggled with loss of self, my quality service to myself and others has not always been the best. I worked to inauthentically survive, and as one needed help, and I needed the job I hated, loss of self continued to survive within my situation. This projected friction because of the simultaneous hard experience to be happy, the cognizant thoughts of quitting, and the one needing the help sensing my dislike of my job. This created a negative experience and thought while trying to gain help. Through THM™ I am able to understand that both persons are on interconnecting journeys that create the spiritual actualization of the highest heavenly love, Agape: the God-like, and Selfless Love. As one wants to escape the disliked portions of their reality, "quality service" to ourselves and others allows the God-like love of Agape to be fulfilled through the love that God has for us, and that we have for God, nature, and others (CONFIDENCE + FAITH & Santiago, 2024). Each interaction is a test, and in focusing on where the feelings stem from, through THM™, I found that insight is provided when one looks at the impact of external interactions just as much as the impact of

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internal interactions.

In religion, God spoke the world into existence. If these words carried love and creation, our ability to recognize the value of words today can help one understand how important is is for loss of self, to consistently and truthfully express oneself. For example, I went to a priest to discuss my intense crying reaction to being in church, but when I left, I found myself angry because the priest said I had a terrible childhood. Some people would disregard the church and God based off of what he did did, but God did not say it. He did allow that experience, but the priest had the free will to choose different words. His "compassion" was received filled with judgment, and because of this experience, my reaction, I did not heal at that time. Like the person who hates their job, the initial thought options are: why did this happen to me, why did I do this to myself, or why did God do this, but eventually, blaming will not work and answers are needed. In life, most do not know how to reunite with their essence because living in survival or coping becomes a cycle, but when one expands their mind into recognizing that there is a life lesson in the chaos, they can question: what they can do to forgive themselves how, to reunite with loved ones, or if they have a new child, how to love that child without connection to their past. In loss of self, it is never a clear answer why it happened at first, but God spoke this world into existence from love, so love is why these experiences happened. If I gained the strength that comes after the healing, to provide encouragement and hope to others, that may have been the purpose of my loss of self, and through my discoveries, I found that in loss of self, the majority of the situations are to help refine someone.

Many need help in sharing love, so to create channels of love, events are used to change ego, or outer self characteristics. Our negative events, life transitions, and PTSD are all a means to get us to connect with those around, but the essence will run when there is no clarity on how to move from loss of self. As I was trying to become a new person after loss of self, I struggled after counseling because it was just me and some books, deciding what to change was hard because it created a completely new environment, cut out old friends or habits, as well as rejected the lies I identified with, but through supporting questions, such as: who played what role(s), what role did I play, and what stopped me from getting out sooner, I was able to elevate emotions, motivation, and personal reflection. At times one may reach a point of not caring, they may go further into addiction, anger, or negative emotions, but like with that priest, there is another choice. When I began to heal, I used THM™ to figured out how was I gong to fit in to society again. I endured excavating of my past, developing of my

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mind, and accepting refinement daily to stay emotionally tuned to the needs of my inner child. I became depressed, saw the world as inauthentic, I self-isolated, and called on God. I began to understand the root causes of my loss of self were my inner child (and life) wounds. I reflected on how it was affecting my present life, and as I engaged more with Holistic Wellness, to reiterated how necessary it is to reconnect one's spiritual essence and physical body.

Bringing life to the dead through spiritual authenticity means changing perceptions, interactions, creating societal awareness of deficiency, and through the connections I found in The 8 Levels of Love™, the Dimensions of Wellness, Maslow's Hierarchy of Needs and Motivational Model (Mcleod, 2024) are critical. In the the use of Thoecentric-Holistic Metaphysics, one is bound in ethics for holistic purpose and reasons for all that is physical and spiritual, so as spiritual essence in physical bodies, loss of self has to be healed in duality as well. In table 2, if one takes the CDC's focus for Mental Health (emotional, physical, and social) the core of each human being is separated, along with self intellect as all part of Maslow's Motivational Models' categorization for growth (Mcleod, 2024). At the point of separation from growth (Cognitive Needs, Love and Belonging, Philia: The Social Love, and Social Wellness) and deficiency (Esteem Needs, Love and Belonging, Pragama: The Long-Lasting Love, and Environmental Wellness) the difference in healing in Holistic Wellness is where you you look for strength to react.

Table 2: Comparing all models in proprietary order

(Dimensions of Wellness have no proprietary order)

Dimensions of Wellness	The 8 Levels of Love™ (in proprietary order)	Maslow's Hierarchy of Needs	Maslow's Motivation Model
Spiritual	Agape: The Selfless Love	Self-Actualization	Transcendence (growth)
Emotional	Storge: The Parental Love	Self-Esteem	Self-Actualization (growth)
Intellectual	Philautia: The Self-Love	Self-Esteem	Aesthetic Needs (growth)
Social	Philia: The Social Love	Love and Belonging	Cognitive Needs (growth)
Environmental	Pragama: The Long-Lasting Love	Love and Belonging	Esteem Needs (deficiency)
Vocational/ Time	Ludus: The Flirtatious Love	Safety and Security	Belonging & Love Needs (deficiency)
Physical	Eros: The Bodily Love	Physiological Needs	Safety Needs (deficiency)
Financial	Mania: The Obsessive Love	Physiological Needs	Physiological Needs (deficiency)

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When one moves down from Esteem Needs, Pragama: The Long-Lasting Love, and Environmental Wellness it becomes earthly because are asks for external esteem to fulfill, heal, or support happiness, which can create obsession. It causes a lack of empowerment, the desire to reconnect to essence, and drives the need to gain the "happy" feeling. The external security, validation, and aid are sought to overcome in comparison, to when one raises from Cognitive Needs, Philia: The Social Love, and Social Wellness. This is growth as it asks for internal connections of cognizance from an inner circle, internal confidence of self love, parental love, and God's love to overcome the mental, physical, or social reactions of life. As Agape is the God-like Selfless love, by understanding who God is, one can further simplify the daily experiences and thoughts of loss of self. From *Move Forward In Faith*, "God is the collective unit of higher energy that created all good, whom wants the world to be loving, while allowing people to choose how they live, so that they do not function out of duty, but of will." (Santiago, 2023). Since life is an active and passive experience, in using this definition of God, one can understand that there has to be good in the past's shadows, as well as in the future's light. In my loss of self experience, having this perception helped me look further than my physical world. God allows each person to actively choose how to become the best one wants to be through meaning, connection, and sentiment. In Proverbs 8, female passive Wisdom states, "I, wisdom, dwell in (good) counsel; and I am among learned thoughts. The dread of the Lord hateth evil; I cure boast, and pride, and a shrewd way, and a double-tongued mouth. Counsel is mine and equity (or fairness); prudence is mine, and strength." it continues to say that "From without beginning I was ordained...I was making all (these) things with him", and "He that findeth me, shall find life; and he shall draw health of the Lord." (Wycliffe & Purvey, ca. 2018).

In loss of self, thoughts of *I did it alone* will lead to ego insecurity, resulting in feelings of a deeper pit, as one fears they may not be in control, will fail, are not, were not, or never will be good enough. This mindset can lead to corruption to prove insecurity wrong or the ego right, but prudence, "the mother of emotional health...beautiful character" (MCMANAMAN, 2006) is purposefully controlled to passively teach. In Proverbs, Chapter 9, the male active Wisdom asks that "if any man has little (in wit), come he to me.", and continues, "Forsake ye young childhood (or foolishness), and live ye; and go ye by the way of prudence" (Wycliffe & Purvey, ca. 2018). In the book of John it says, "but that Holy Ghost, the comforter, whom the Father shall send in my name, he shall teach you all things..." (*John 14:26 (WYC)*, n.d.), and in Proverbs 8, states, "Listen, for I have trustworthy things to

say" (Wycliffe & Purvey, ca. 2018). The Holy Spirit, or Holy Ghost, is in the Godhead Trinity, but as I viewed it with a THM™ lens, I also found the Trinity in the Kabbalah. As God/Kether is Omniscience, the Holy Spirit/Chockmah is wisdom, and Jesus/Binah is understanding, which is compassion. In my further understanding of loss and self as a whole, one has to also look to the Biopsychosocial Model of Biology, Psychology, and Social aspects which contribute to one's healing process (Mozafaripour, 2024a). In my experience, the world does treat your differently by the way you look. External appearances causes a sense of fear or safety, allows people to gain more help or be told it is out of reach, or even be spoken to with dignity or insult.

In considering that everyone is on the spiritual journey, with learned lessons, one can gain an understanding of others, and therefore compassion, but through physical realities, the drive of progress, love, and elevation does not exist. During integration, someone I loved, shared how the educational system failed black students in quality service to the point that the grading system had to be changed, so they would not fail. This same person was was called a monkey due the color of their skin, and from my own life I saw how I was not able to blend fully into either race (white or black) because I did not fit into another's box. Currently, there are multiracial groups encouraging healing with "mixed people are 'enough' of all the cultures that make up their identity'", and "we cannot judge the legitimacy of a mixed person's identity based on their appearance." (Mixed_In_America, ca. 2024). According to Mozafaripour (2024a), "those who identify as mixed race or multiracial, approximately 34.9 percent have a mental illness.[18]". In exemplification of how a THM™ lens elevated an active response, when I worked at a premium store I was helping a woman who shared her family was looking for a new SUV. I brought up the Cadillac Escalade, she said that though they liked it, it had become too urban, so they were looking at another vehicle. I chose in that moment to realize that she was speaking to me through a physical appearance lens, and my job was to maintain my double persona to keep my employers and clients "comfortable". Those who feel the pressure to work in a split persona, are normally more urban, may be shielding from racism or colorism, and their educational level does not matter because society is focusing on the audible and physical realities.

In loss of self, one may be triggered at any time, but answering "What Happened, & Who Am I?", creates the ability to accept another's journey. The layers of any person are derived from one's presented environment, and possible future environment- meaning parents

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and family, one's inner circle, self-value, falling in love, feeling attractive or lusted, becoming intimate, and gaining what one wants is important. It is our responsibility to recognize our self-value, not solely from expressive individualism nor diversity ideology, but as a whole, "That means resisting tendencies to define individuals primarily by artificial or surface group identities and having a proper understanding of how Americans ought to live our their liberties while fulfilling their concrete responsibilities to others." (Gregg, 2022). Jane Elliott, exemplifies the fact that no matter who one is, what they hear and see impresses upon them as a child (*Jane Elliott*, n.d.), and therefore carries through as wisdom into adulthood. As we are subliminally taught about appearances, my reality of subliminal messaging came more in high school, and added to my loss of self story. As I was walking down the street one day, saw a black man with shorter hair cut, that was not near or looking at me, and I became uncomfortable. I instantly felt ashamed of myself because I felt I rejected myself, and because I was consciously aware of what had taken place, I learned the world had become a part of me. Students have been punished with withholding graduation of high school because of braided hairstyles (Bell, 2023) (*Children Don't Graduate Due to Hairstyles in USA*, n.d.), and a 15 year "No Sagging" Law was in Florida (Smith, 2020), presenting to children and adults, that acceptability, and future status opportunities are valued through appearance- biological or not.

If these examples may seem minuscule, review the implications to a child based on dominating sports players, race majority on a sports team, musical lyric content, characters on TV, the names and actions of a character in a book, arrests, or any other areas of society- race is seen. Experiences such as protesting when a classmate said "nigger" in class, going to a game for cheerleading, and hearing, "don't look them in the eyes", being asked, "Is she black?" as my boss looked at a resume where the applicant skipped around on jobs, or being told that an ID was needed to see a hotel room because toilet paper had been stolen recently, are ones I have experienced, so I can say, the small moments impact individuals, communities, and the next generation. In loss of self, if everyone is repeating, assimilating, and conforming to ensure their acceptance, the expressive individualism of promoting one's desires as realized "self" is dismantled, and the connection of the human race lowers. In the Capital-D(iversity) Ideology, the prioritizing group identity over human individuality (Gregg, 2022) wounds and spreads through internalized events of appearance value, where prejudice, racism, over generalization, discrimination, or bias is created. Now, for one to look and see if the subliminal messages of ideologies are present, one must look into their inner circle (a

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growth motivation), and listen to description differences of certain people to evaluate their personal feelings toward their reaction, and see if they are contributing to another's loss of self because living in acceptance, through extrinsic motivation is living inauthentically.

Extrinsic Motivation causes one to do something only to avoid punishment (MSEd, 2023), and in my experiences and belief, integration, Affirmative Action, and the pushes for equality were successful due to this, but the mentalities of those during that time, did not change. Those rested in resentment, lacking compassion for others' journeys, and did not heal, raised the next generation. In my loss of self story, my paradigm of experiencing racism is in being called a cracker by my black cousin, and being convinced to call my black boyfriend a nigger. These experiences provide my ability to truly understand how an environment plays a vital role in life. Loss of self can come to "persons who observe their former self-images crumbling away without the simultaneous development of equally valued new ones. As a result...these individuals suffer from (1) leading restricted lives, (2) experiencing social isolation, (3) being discredited and (4) burdening others" (Charmaz, 1983). As communication is our first understanding of life, nobody should fear rejection and feel as a burden, so the quality service we give ourselves and others needs to be a focal point. In "a reflection of the medical racism, bias and inattentive care that Black Americans endure. Black women have the highest maternal mortality rate in the United States — 69.9 per 100,000 live births for 2021, almost three times the rate for white women, according to the Centers for Disease Control and Prevention." (Stafford, 2021), also, a "Nigerian-born would-be neurosurgeon started teaching himself to illustrate, using Black skin to depict various medical conditions and procedures." (*The Creator of a Viral Black Fetus Medical Illustration Blends Art and Activism*, 2022). During a pre-diagnosis, Physicians can discredit one's definitions of self when seeking help for early troubling symptoms, and this leads to an *involvement of only few members of the immediate family on the issue, then it can progress to feelings of being a burden on others, having unpredictable emotions, limiting life and activities, potentially quitting work, and finally loss of self becoming all-consuming (Thomas, 2016). The* implications of "Holistic" and "Inclusive" should not be about what someone does in their personal rooms, but our collective conscious decision to connect to the "self" as a whole. Standing up for others, teaching wisdom to children sooner, and deciding what it means to live authentically starts giving hope of a better future as the world is trying to let it be.

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As I learned, the option of life is more than the experience that one has, so to gain a deeper understanding for life in loss of self, one has to know how to help others Move Forward In Love!™. One may be debilitated through fear, caution, and insecurity, and react, like myself with defensive, protective, and shut off ways, but through THM™, one can look deeper than the physical, ask what happened from an unbiased point, and find an identity full of strength. One can look at life roles and their own journey with an open mind, and realize that even thought there is no backwards, one can Move Forward In Love!™ by answering "What Happened, & Who Am I?". In the use of THM™, the authentic self can emerge as one can see gifts like wisdom, knowledge, faith, healing, miracles, prophecy, discerning spirits, speaking in tongues, interpreting tongues, administration, and helps (Deibert, 2023), in addition to synchronizations, psychic abilities of "clair-", intuition, different empathy forms, light worker, light warrior, etc. as options for understanding. Daily, people experience the Spiritual realm, but say *that it was a coincidence,* rejecting these facets of self, and remain disconnected from their essence. In Table 2's comparison, at the top of the Wellness, The 8 Levels of Love™, and Maslow's list there is Spirituality, Agape, which is Self-less love, and Transcendence (Mcleod, 2024). There is no mistaking that Spirituality is at the top of the list because people are derived from spiritual essence into the human body, as Bible states, "her soul was departing", "let this child's soul come into him again", and "not able to kill the soul" (Page, n.d.).

In healing from loss of self, the foundational thought change is that life, and human beings are not just physical because that is run through the body's involuntary functions, but spiritual as it is experienced through spiritual essence. So, in Mental Health or healing from loss of self, using information only when it is relevant, explainable, and comfortable is why most struggle through negative situations, feeling stuck, unloved, broken, or alone- they do not know what is true. To provide the answers for those with loss of self more readily, Religion or Spirituality needs to be considered as a new perspective of whole. For example, if our eyes see the world upside down, and then our brains convert it right-side up (Hendry, 2016), why do we not recognize that the world is upside down? In saying that gravity is holding our feet to the earth, reality is misconstrue, so the potential of answering "What Happened & Who Am I?" stays misconstrued until one begins to review oneself and live in truth. As I answered who I was after my loss of self, I came to a point where my ideologies had to change. As I derived from a Christian foundation, I expanded my understanding of God, and who He wanted me to know Him into how I viewed the world He created. I

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analyzed, found a multitude of information backed within the Bible, and I realized that in aligning with my essence of peaceful, happy, and positive experiences, I had to accept my Spiritual Intellect, Spiritual Gifts, and means of learning. I refined my understanding of the importance of love, and found that Einstein (*A Letter From Albert Einstein to His Daughter, 2016)* and Greek Philosopher, Empedocles of Acragas (*Theories of Love in the Ancient World · Science of Love · Special Collections and Archives*, n.d.), both agreed with me in that love is the connecting, greatest force, and as I say, the guiding rational principle of the universe. Bridging Religion and Metaphysics in Theocentric-Holistic Metaphysics (THM™) truly impacted my loss of self questions from a holistic perspective, and allowed me to see that welcoming various thought processes, listening to a speaker, and bridging information, creates the connections that results in love, healing and living an authentic life.

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CONCLUSION.

In my life, and the lives of those that I have helped, it seems that the our mindsets hold us back. Many get stuck because they focus on the physical form of life (what they can see), as others are worried about losing the world they are spiritually dead within. The desire for people to want to change is just as much a part of the healing process as a doctor or counselor providing a medicine, or their time. The main question when it comes to answering "What Happened, & Who Am I?" is, is one ready to change, let go of the pain, or live a life of reinvention? To create an authentic life is all in one's ability to expand the possibilities of the mind.

When healing in loss of self, one may consider starting with one focal point to find the root and change the environment. Like a Placebo Effect, one in loss of self believes it, but because they want to stand authenticity and indefinitely, the implications of being alone, or an outsider per counter-cultural ideals does not phase them. Those healing from loss of self want to and will live a better life because they have realigned with their spiritual essence to the point that they, and their peace is the only thing that matters. Overcoming is not to say that one does not continue to evolve, but through THM™, it provides a birds-eye view of situations to create the opportunities to react differently.

In bridging Religion and Metaphysics, the healing process from loss of self becomes easier because there is a higher focus on the spiritual and physical facets of life. A myriad of videos are now advocating for this potential insensitivity, and for a child's natural nature of exploration in education, as it is paralleled to prisons (astralnavigator_, 2023). Our ability to live in truth is what heals, and those with loss of self must share the wisdom of connections in life. Through understanding healing is truly reachable, one can begin to define "What Happened?" through self-reflection, and answer "Who Am I?", but by understanding the content of this paper. One can also help others with eyes of compassion, while guiding them as more than a single symptom issue, but a holistic solution. Misery likes company(ies), and healing threatens the capitalistic society that is currently in place. As I am promoting to the world, it is time to change, our approach to life and love can enhance the overall wellness, customer service of communication to ourselves and others, as well as raise the world's positivity through experiences, and cognizant reaction for peace and harmony.

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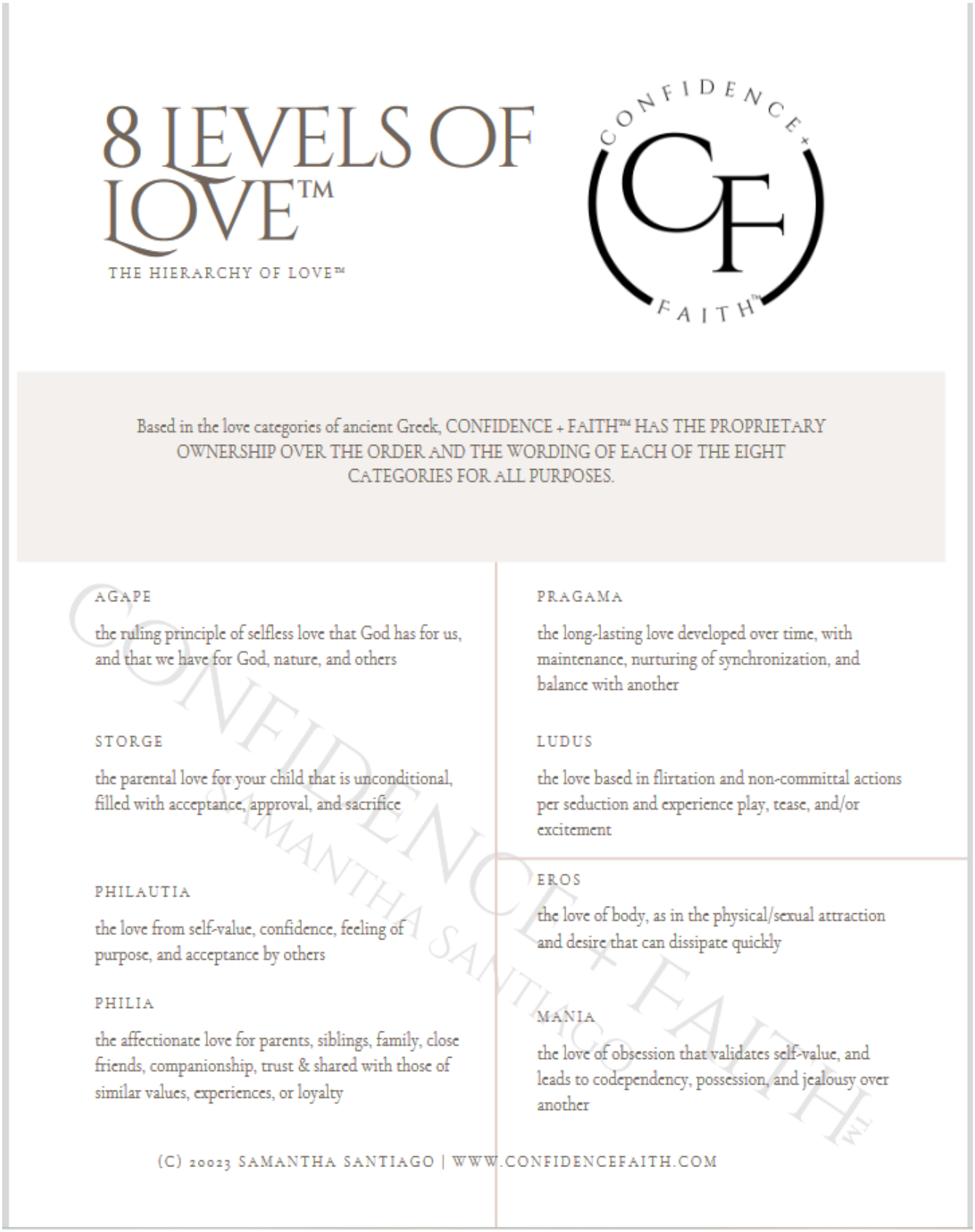

Exhibit 1: The 8 Levels of Love™ in proprietary order with definitions

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Interpretation of exceptional experiences by mental health workers in Aotearoa New Zealand: Spiritual or not?

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ABSTRACT

A lack of empirical evidence differentiating exceptional experiences (EEs) from the spectrum of pathological syndromes means there is considerable overlap between EEs and mental illness symptomology. For example, auditory and visual "hallucinations" (e.g., communicating with unseen presences), feelings of separation from the physical body, and a conviction that one has been cursed or possessed, are similar to symptoms present in schizophrenia, dissociative disorder or psychosis. However, within some cultures, such as the Indigenous Māori of Aotearoa New Zealand, there are socially accepted structures to reference EEs against, and these experiences are often interpreted in relation to te taha wairua (the spiritual realm). Yet, Māori are disproportionately over-represented in national mental health statistics. We believe a limited understanding about EEs and a lack of congruency between the underlying philosophical foundations of the mental health system in Aotearoa New Zealand and Māori notions of EEs and their relationship to mental well-being are major contributing factors to this over-representation. This presentation discusses the findings of a study that utilised an experimental case-vignette design to explore how EEs were interpreted by a sample of 112 mental health workers (MHWs), of whom 35% identified as Indigenous Māori, while 67% identified as non-Māori. Findings indicated Māori and non-Māori MHWs interpreted the same EEs in different ways. We conclude categorisation of mental illness is based on culturally referenced *interpretations*, implying current criteria for diagnosing mental illness in Aotearoa New Zealand should be revised in light of conceptualisations of EEs and their spiritual meaning.

Keywords: spiritual experiences, Māori, indigenous psychology

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Beliefs about Exceptional Experiences Scale. Construction and Implications of Preliminary Findings in Aotearoa New Zealand

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ABSTRACT

Despite marginalization within popular and scientific discourse, non-ordinary or exceptional experiences—sometimes referred to as psychic, supernatural or paranormal experiences—are experienced by approximately 97% of the general population. Several scales measuring beliefs relating these experiences have previously been developed, yet most are based exclusively on Western understandings and perspectives, introducing linguistic and conceptual biases. This presentation discusses the development of scale for use among the Aotearoa New Zealand population – a diverse multicultural society with two prominent ethnic groups, Māori (Indigenous peoples) and Pākehā (New Zealand European). A total of 39 items were developed through an intensive literature review and face-to-face interviews with 15 Māori participants, and subsequently piloted with 325 participants. Exploratory Factor Analyses (EFA) produced a three-factor 19-item solution, with excellent internal consistency. Preliminary findings indicated Māori were significantly more likely to endorse EEs than Pākehā. Given EE's can be interpreted as either 'spiritual' or 'anomalous' events according to cultural background, these findings have important implications for how such experiences are addressed in wider society and mental health settings specifically.

Keywords: exceptional experiences, spiritual experiences, Māori, indigenous psychology

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AN INTEGRATIVE MODEL FOR THE EFFECTIVENESS OF BIOFEEDBACK INTERVENTIONS USING THE IMMUNE MODULATION ALLERGY ELIMINATION TECHNOLOGY (IMAET) FOR TREATMENT OF MENTAL HEALTH DISORDERS AND CHRONIC DISEASE REGULATION: REPORT

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ABSTRACT
KUADRA Consulting Service is a psychotherapy practice that provides holistic mental health care to individuals overcoming mental health and pain management for chronic diseases. The purpose of this study was to examine the effectiveness of biofeedback interventions using the IMAET technology. Using case studies of five patients seeking treatment at a mental health clinic for a wide variety of ailments related to mental health and chronic health issues, we explored-a non-evasive effective treatment that integrates the IMAET quantum biofeedback technology and holistic therapies into traditional mental health care. Results showed-overall improvements in mental health and reduction of chronic symptoms after ten sessions of IMAET biofeedback sessions. Visual information from the IMAET machine may confirm and track the nature of healing sessions over time for individuals with mental health and chronic disease problems. Practitioners, along with their clients, can examine all facets of a client's situation and become more educated about their overall health. Together, this information may provide a more holistic and successful approach to treatment for chronic disease management and mental health disorders.

INTRODUCTION

Biofeedback technology has been shown to be a promising tool for mental health treatment and has been approved by various international medical and mental health boards for the treatment of chronic health problems and mental health issues; however, several theoretical and practical limitations have prevented widespread adaptation until now. With current technological advances and the increasing interest in the use of quantum technology to improve mental health, we argue that this is an ideal time to launch a new wave of bioenergetic training. In this case study, we reflect on the effectiveness of the IMAET biofeedback technology in treating mental health issues and chronic health conditions of five patients seeking mental health care. Subsequently, we supply the results of IMAET treatments after eight to ten sessions. Finally, we present a set of detailed guidelines based on the integration of our model with the mechanics and mechanisms offered by emerging interactive technology to encourage a new phase of research and implementation using biofeedback. There is a great deal of promise for future biofeedback interventions that harness the power of epigenetic quantum tools to help people regulate their overall health in a way that feels engaging, personal, and meaningful.

PROBLEMS

The U.S. healthcare system has proven to be increasingly disintegrated and fragmented in its approach to holistic healing. Patients now must navigate a very complex system that requires specialized care depending on the various parts of the human body, and even more frustrating is that these specialized care systems do not do enough to work collaboratively. Patients are entrusted with multiple decision-makers to make healthcare decisions that are often contradictory depending on the specialty. According to a Harvard study, the average patient in the United States sees two physicians and five specialists a year, and those with chronic illnesses see an average of thirteen physicians a year, “each focused on the discrete symptoms and/or body parts within their jurisdiction” (Elhauge, 2010). Professors Cebul, Rebitzer, Taylor, and Votruba cite similar evidence that the median Medicare patient sees eight physicians in five distinct practices, and if they have coronary artery disease, the numbers increase to ten physicians in six distinct practices. The result of disintegration results in the decline in the health of the overall U.S. population (Fang & Gavazza, 2011).).

According to the National Institute of Mental Health (NIMH) (2023), mental illnesses are common in the United States. NIMH estimates more than one in five U.S. adults live with

a mental illness (57.8 million in 2021). https://www.nimh.nih.gov/health/statistics/mental-illness -:~:text=It%20is%20estimated%20that%20more%20than%20one%20in,with%20a%20mental%20illness%20%2857.8%20million%20in%202021%29.While the percentage of U.S. adults receiving mental health treatment increased from 19.2% in 2019 to 21.6% in 2021, 42% of U.S. adults with a diagnosable condition reported in 2023 that they could not afford to access the treatment they needed. Anxiety disorders such as generalized anxiety, obsessive-compulsive disorder and panic disorder are some of the most diagnosed mental health conditions in the United States, affecting 42.5 million adults. Then, 21 million U.S. adults are living with depression, while 3.7 million people ages 12 to 17 experience major depression and 2.5 million people ages 12 to 17 experience severe depression. There are 12 million U.S. adults living with post-traumatic stress disorder (PTSD). Over 3.3 million U.S. adults have a bipolar disorder diagnosis. Around 1.5 million U.S. adults have a diagnosis of schizophrenia (NIMH, 2023).

Data from the Centers for Disease Control (CDC) data reveals that six in ten Americans live with at least one chronic disease, such as heart disease, stroke, cancer, or diabetes. These and other chronic diseases are the leading causes of death and disability in America, and they are also a leading driver of healthcare costs (CDC, 2023).

There is another challenge with patients who have chronic diseases and mental health diagnoses. According to the CDC, 51% of Parkinson's patients, 42% of cancer patients, 27% of diabetes patients, 23% of cerebrovascular patients, 17% of cardiovascular patients, and 11% of Alzheimer's patients also have depression (Fernandez, 2021). Joseph Gallo, MD, MPH, a professor whose research focuses on the intersection of physical and mental health said, "There's ample clinical and epidemiologic evidence that shows the risk for depression and other mental health issues is higher among those who suffer from chronic illnesses" (Fernandez, 2021). While there is a growing recognition of the connection between mental and physical health, there are no systems in place for the integration of mental health, primary care, and specialty care services.

BACKGROUND

KUADRA Consulting and Counseling Service, LLC is a San Antonio, Texas-based psychotherapy practice founded by Khadijat Quadri, serving clients from ages 4 to 99 years old. Clients are routinely referred through primary care physicians, in-patient psychiatric care, the Department of Defense, and self-referral for assistance with a variety of issues,

including PTSD, depression, anxiety, grief and loss, personality disorders, chronic pain and disease, and substance abuse disorders. In addition to routine counseling and talk therapy, Reiki, Hypnotherapy, Gas Discharge Visualization (GDV), Polarity Therapy and Biofeedback IMAET machine, aura imaging is provided to all clients unless the services are declined. Quadri is a licensed counselor who specializes in mental health issues, children's issues, and marriage counseling. She, along with support staff, provide quality outcome-based services that enhance emotional strength and promote creative healing processes, which is achieved in several ways.

Along with psychotherapy, the practitioners use natural healing modalities. In practice, these modalities have been found to be beneficial to the healing and long-term well-being of clients. During sessions, clients may receive IMAET treatments, Ionic foot detoxification, Scalar frequency Nuvision Scan Tool, hypnotherapy, Reiki, sound healing, biofeedback aura imaging sessions, and/or guided meditation, and affirmation-based tools to use and practice at home. Home-based healing allows the clients to take further responsibility and mindfulness for their well-being beyond the psychotherapy session. Steps to wellness are based on counseling, intervention, prevention, and education to resolve personal and interpersonal issues through evidence-based and specialty services. The practitioners at KUADRA conduct research, identify, evaluate and respond to community needs, and encourage community collaboration and partnerships through leadership and advocacy. KUADRA promotes quality of care and best practices in the community by providing innovative services, consultation, education, and training.

Psychotherapy

According to the American Psychology Association (APA, 2016), psychotherapy is a collaborative treatment based on the relationship between an individual and a psychologist. Grounded in dialogue, it provides a supportive environment that allows a person to talk openly with someone objective, neutral and nonjudgmental. The client and the psychologist work together to identify and change the thought and behavior patterns that keep the clients from feeling their best and achieving their fullest potential. In psychotherapy, psychologists apply scientifically validated procedures to help people develop healthier, more effective habits. Several approaches to psychotherapy help individuals work through their problems, including cognitive-behavioral, interpersonal, and other talk therapy.

Hypnotherapy

Hypnotherapy is a technique where practitioners help individuals relax and focus their

minds, which puts a person in a state that makes him or her more receptive to suggestions from a practitioner (American Psychological Association, 2016). Many conditions may be treated successfully with hypnosis.

Milton Erickson, a leader in hypnosis practice and theory, thought of hypnosis as communication (self-communication) and a way to concentrate on personal thoughts, memories, and beliefs (NYSEPH, 2016). He found that the trance state is active unconscious learning with a shift of attention from the external to the internal reality, with highly focused attention directed toward one experience at a time. Milton's technique focused on the engagement and interaction of the client during the hypnosis session and set the outcome depending on the client's capability about their condition (NYSEPH, 2016). According to Tiffany and Conklin (2000), cues from the brain's automatic processing may trigger relapse in alcohol users, not cravings, as previous research suggests. Hypnotherapy, then, maybe the most successful treatment for drug and alcohol addiction in part because it produces the quickest results for changing habits. Thus, the outcome of sobriety may be more long-term than with other treatments due to the assistance with automatic behavior change.

Reiki

In many healing centers around the world, the use of Reiki practitioners has become a complementary therapy to the practices of physicians and clinical specialists (International Association of Reiki Professionals, 2016). Reiki, Japanese for life energy, is a touch-healing modality. This "life energy" is referred to in China as "Chi," in India as "prana," and in Ancient Egypt as "Ka." Reiki practitioners are "attuned" to multiple levels of Reiki that span Level I (physical), Level II (emotional and distance), Advanced Reiki Techniques (ART), and Master and Master Teacher. Master Mikao Usui is credited with the discovery of Reiki energy, and from him, Reiki was brought to the Western world through a Hawaiian-born Japanese American, Hawayo Takata (Singg, 2009).

Researchers have found it difficult to study Reiki objectively, as its exact treatment methods make replication difficult and, thus, difficult to classify these studies as scientifically rigorous (Nield-Anderson, 2000). Despite this limitation, some research suggests that Reiki therapy is beneficial for various conditions, such as pain management, anxiety, illnesses, oncology, and for an overall sense of calm and peace (Catlin & Taylor-Ford, 2011; DiNucci, 2005; Dressen & Singg, 1999; Tsang, Carlson, & Olson, 2007). In fact, DiNucci (2005) found that in 2002, there were more than 50 hospitals and clinics offering Reiki to patients. More recently, the Center for Reiki Research (CRR), founded by William Lee Rand,

collected a list of 76 hospital interviews where Reiki is a normative healing modality offered to patients. CRR has additionally gathered every known research-based project that assessed the efficacy of Reiki treatment and analyzed the research through a rigorous process to affirm the quality of Reiki treatment. The interviews suggest Reiki is among the top three natural healing modalities in the United States. Columbia University Department of Surgery also employs Reiki experts to be present in operating rooms with patients who are undergoing mastectomy surgery (Keyes & Feldman, 2016). According to Keyes and Feldman (2016), Reiki practitioners help patients emotionally with difficult problems associated with breast cancer, such as losing a breast. Helping patients at the emotional level also assists their healing on the physical level. The positive impact on healing after surgery may be pronounced. While addiction research has evolved over the years, some researchers have concluded that addiction affects the body, the mind, and the spirit. Along with treatment tools based on psychological, physical, and social needs, spirituality has long played a role in recovery from addiction. This focus stems in large part from the influence of the "12-Step" program popularized by Alcoholics Anonymous, one of the country's oldest recovery programs, which specifically calls for spiritually based actions such as meditation, prayer, conscious contact with a "power greater than ourselves," and personal searching (Valverde, 1998)

The Ionic Foot Detox cleanse

The soles of the feet are especially porous, so ionic foot baths have become a popular method of detoxification. An ionic foot bath uses ions to charge the water and draw out toxins from the bottom of the feet. One ionic footbath company measured levels of glyphosate (Round-up) in urine before and after following a footbath protocol (Kennedy et al., 2012). Objective assessment of an ionic footbath (Ion Cleanse): testing its ability to remove potentially toxic elements from the body. Journal of Environmental and Public Health, 2012. Their data shows the footbath helped with glyphosate, cadmium, and lead excretion. However, testimonials of improvement in children have proven to be the most compelling when considering the use of ionic foot baths. Before purchasing, please make sure you buy from a company that grounds all wires for safety.

NuVision

NuVision is a quantum scanning device that works to identify body and psyche issues keeping individuals from well-being, which can be called 'computerized kinesiology.' Once

identified, the practitioner can then work with the patient to provide a strategy for moving forward. A part of this strategy is using the devices in their other dimension - what can be called 'computerized homeopathy.' This, together with information about diet, lifestyle, supplements, and herbs, can set one on the path to healing.

NuVision helps uncover the imbalances and underlying causes of ill health. That information may be herbal, nutritional, or mental/emotional. What if the long-standing physical symptom is because of what the individual believes or says to himself? What if it is because of the job or relationship? What if it is because the individual lives in the past and that individual is still holding on to old relationships, guilt, or regrets? What if fatigue is something simple, like being low in minerals? What if the individual has parasites? In the traditional healthcare model, these are not even considered, and drugs are readily prescribed to mask symptoms, but the drugs never fix the underlying problem. NuVision enhances the field by identifying information from the subject submitted to the software— a subject's holographic token is created. From then on, the practitioner can read the relevant issues the subject reflects on his or her field, choose the relevant work sets that match holographically with the subject's field and activate "reconnects." Once set in motion, these reconnects are information pockets that can trigger potentially beneficial influences on the subject's information field.

Muscle Testing

Muscle Testing, also known as Applied Kinesiology, is a noninvasive technique that acts as the gateway to the subconscious mind. With this technique, healthcare practitioners can effectively evaluate physical and mental health. Generally, muscle testing is a way of questioning the body, and it will respond with the answers in the natural feedback system. It is based on the principle of kinesiology with roots back in the early 1900s when R.W Lovett started kinesiology to improve the patient's movement. Later in 1920, Frank Chapman designed the neuroleptic reflex system for the diagnostic process of the body. Muscle Testing: What It Is and How It Helps with Treatment | Psychreg

METHODOLOGY

With the more current incorporation of IMAET quantum bioenergetic feedback into the modalities employed by KUDRA, the scrutiny of therapeutic efficacy becomes essential. KUADRA used a grounded theory approach to examine how the IMAET system can be integrated into the psychotherapy treatment of an individual recovering from mental health

and diagnosed chronic diseases. Using Glaser and Strauss's (1967) grounded theory approach of letting the data reveal a theory as opposed to examining data against an existing theory made the most practical sense for this pilot case study conducted in a counseling office. The limitations of the study are its size and the difficulty of exact replication, as Nield-Anderson (2000) suggested. Participant and Informed Consent Participation criteria for this study was a referral for addiction counseling services at KUADRA Consulting and Counseling Service, LLC. It is routine practice for KUADRA to obtain consent and confidentiality agreements in compliance with the U.S. Health Insurance Portability and Accountability Act of 1996 (HIPAA) before assessing and treating a client.

Each participant was chosen for this initial study as a client referred to the practice for mental health counseling treatment. During the initial intake assessment, KUADRA obtained a signed consent form from the participants, permitting them to participate in this case study. The participants received detailed information about the study and a leaflet about the IMAET therapy. There are no risks associated with using the IMAET system. Therefore, there were no risks to the participants. The participants were also offered free IMAET therapy and counseling sessions monthly for their participation, which they accepted.

The initial intake assessment collected information from the participant regarding demographics, physical health, mental health, history of drug use, psychological assessment Symptom Checklist-90-SQL-90, and use of psychotropic medication. Each client received ten sessions of psychotherapy and IMAET treatment on a weekly basis for ten weeks. Each client received both a psychotherapy session and an IMAET treatment weekly for over ten weeks.

The BioScan results were interpreted using the IMAET Systems instructions and user guide manual. The practitioner received permission to conduct an IMAET session before proceeding. When the participant agreed, the practitioner guided the participant by using the IMAET harness, scanning for allergies, the chakra systems, meridian systems, complete biofield, lymphatic system, and more and interpreting impressions from the different results in each section and conducting a biofeedback to harmonize the issues that came up. The IMAET feedback treatments include protocols that work with the body as well as the psyche and spirit, but the therapies are neither intended to replace medical care nor constitute a medical treatment.

Immune Modulation Allergy Elimination Technology (IMAET) Biofeedback Quantum Healing System

The IMAET is an elite biocommunication technology that provides the body with

cellular balance for wellness. This software uses both scalar and electromagnetic waves and contains 70,000 frequencies. While the IMAET System contains twenty-seven support panels, the software can create custom remedies and imprint these frequencies into vials of distilled water-and bracelets with printable digital chips. The IMAET utilizes cutting-edge bioenergetic communication technology and proprietary algorithms to deliver unmatched wellness support. A person's bioenergy field can be scanned using a harness system and an interface box or remotely operating through quantum waves, also known as Tesla waves, which interface with the body and collect energetic signatures that reflect current imbalances and wellness needs. Using the energetic signatures collected during the BioScan, the IMAET compiles a "snapshot" of the body's functional bioenergetic status. The practitioner can then use the provided default feedback or customize a unique and comprehensive wellness support session based on the "snapshot" provided by the program, which is also called a custom treatment basket. The effects of the session are reportedly often experienced immediately and are even more effective after multiple sessions. Sessions are cumulative in harmonizing complex epigenetic disharmonies.

The SHOW Method

Dr. Bernard Straile created the SHOW Method as a protocol to be used with the Allergen Profile of the IMAET (Straile, 2023). It integrates epigenetic science and Bioenergetic Communication with ancient Chinese medicine, tapping procedures and kinesiology (MRT) into a precision energy medicine technique, which aims at harmonizing the metabolic stressors created by SNP (Single Nucleotide Polymorphisms), mutations and genetic variants. The SHOW Method is a non-medical, precision bio-energetic healing technique. It focuses on cellular communications to determine miscommunications and quirks in the metabolism that generate inflammation and pain. The SHOW Method and its database also obtain information about the status of the immune system and detoxification system. Cellular communication equals bioenergetic energy, which equals Qi energy (SHOW Method Handbook). The ultimate holistic approach to the body, assessing all 100 trillion cells and their function in real-time.

APPLICATION

Participant One was a thirty-six-year-old married male with three children who self-referred for therapy. He considered himself financially secure with a successful career. He

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reported job satisfaction and the enjoyment of a variety of hobbies that included hunting and collectible items. Participant One was seeking therapy because his wife had threatened him with a divorce. He self-reported difficulty getting along with others and managing disagreements. He overthinks things and is easily annoyed, and over-thinking and being easily annoyed were still other issues. Getting pains in his heart and chest has caused him to visit urgent care for rapid heartbeats and trouble breathing, for which he was diagnosed with anxiety and panic attacks. He reported extreme distrust of people, getting his feelings hurt easily, and feeling like people disliked him. He also reported obsessive thoughts about getting fired from his job, even though his boss had never indicated that he was dissatisfied with his job performance. He reported urges to beat and injure others, break and smash things, and get into frequent arguments with others. He reported feelings of worthlessness and never feeling close to anyone.

When prompted, Participant One reported digestive issues, a phobia for using public restrooms, and getting nervous in public places like restaurants and movie theatres. Participant One suffered from gluten intolerance, allergies to dairy products and unexplained extreme stomach pains. He sought medical care for these issues, and the doctors offered to remove his gallbladder, but he refused. He took various medications for stomach pains, acid reflux, and bloating, but none of them seemed to work.

Spiritual Issues

Participant One reports out-of-body experiences where he gets visions of himself in a casket and, on multiple occasions, sees his wife and children at the dinner table without him. He reported seeing his grandfather, who died before he was born, from the corner of his eyes, and he has solved complex puzzles without knowing how he did it. His elderly grandparents have often mistaken him for his diseased grandfather, who died in a car accident. Participant One reports seeing things before they happen, like car accidents and knowing what people are thinking before they say it. He shares that this ability has landed him in arguments as he feels people cannot be trusted.

Astrological Constellations

Participant One had Moon, Chiron, and Lilith in the 8th house, indicating extreme sensitivities to spiritual undercurrents and possible obsessions with fear of death. He was sensitive to the emotional undercurrents in many situations and tended to attract dark elements of society, including issues related to lust, ghosts, gambling, and paranormal phenomena.

Prior to beginning IMAET sessions, Participant One received three hypnotherapy and energy healing sessions, to release negative energies from his field and to close his aura. Psychotherapy was still needed to heal traumas and to change belief systems and behavior patterns.

Session One

Participant One received his first IMAET session in person at the Kuadra office. He received the harness over his forehead, which is part of the treatment protocol to scan the participant when not using the remote feature. His demographic information, such as name, date of birth, place of birth and picture image, was entered into the system. The IMAET allergy panel was used to find indications of problems existing in his biofield. The result of the first scan indicated energetic reactivity to dairy, fungus overgrowth, liver anger/frustration, compulsion, and small intestinal parasites. Additional protocols using the SHOW Method protocol, such as mind-body balance, vitamin B, spring pollen, gluten, dairy milk, and basic molds, were added to the feedback treatment, which lasted for one hour. The participant was encouraged to pay attention to any changes in his symptoms or issues that may arise throughout the week.

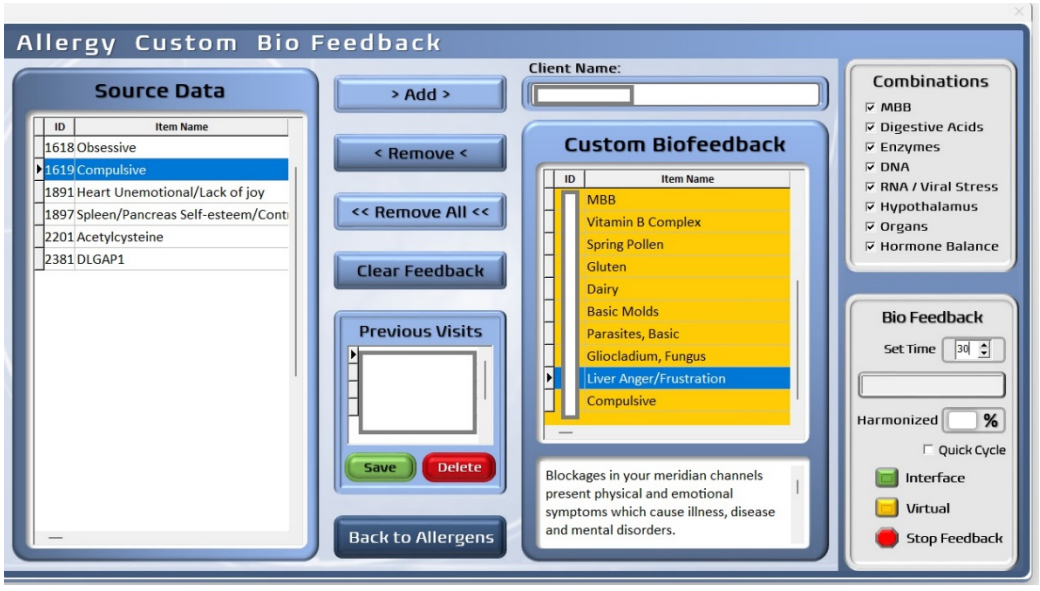

Figure 1. Participant's biofeedback IMAET reading during the first session

Session Two

Participant One was seen a week later for his session and was asked if he experienced any issues or changes after the first biofeedback session. Participant One reported a significant reduction in diarrhea and stomach pains. He indicated having more energy and motivation and felt more patient with his family. A second IMAET bioscan and

psychotherapy were conducted using the harness and allergy panel. Sensitivities included peanut dust, arterial plaque, dishonor, food chemicals, tuna, stress, corpus callous, kidney meridian, large intestine meridian and Crohn's disease. Feedback was repeated until all items in the treatment basket had been harmonized from at least eighty to one hundred percent.

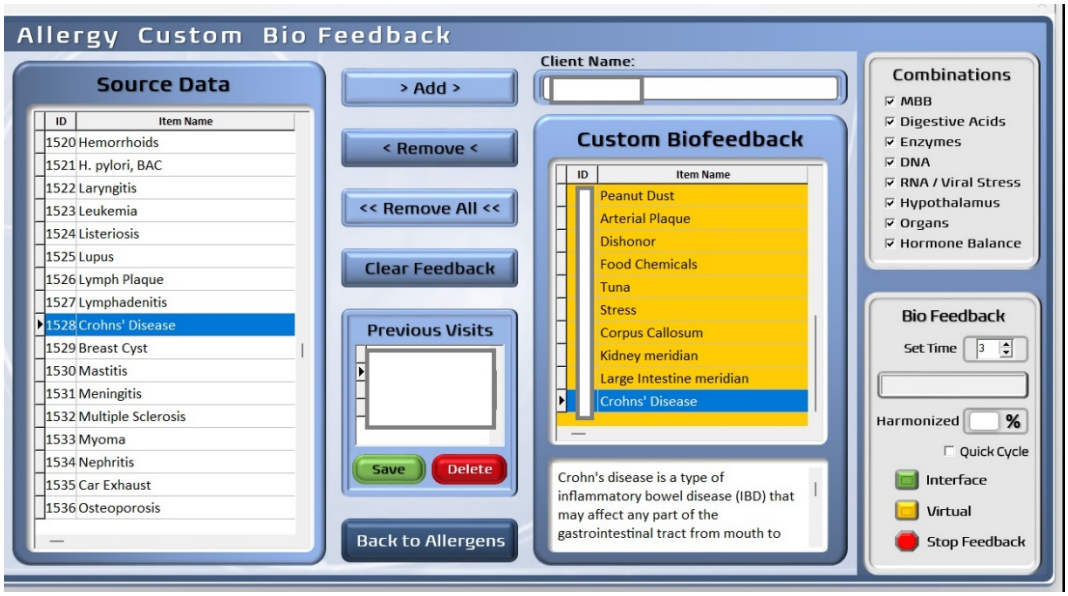

Figure 2. Participant One's biofeedback IMAET reading during the second session

Session Three

Participant One was seen a week later for his third session and was asked if he experienced any issues or changes after the first biofeedback session. Participant One reported eating out at a restaurant and not having any stomach pains or reactions. He reported feeling more alert, lively and less sluggish. A third IMAET Bioscan and psychotherapy session was conducted using the harness and allergy panel. Additional protocols from the IMAET SHOW method were included in the treatment basket. BioScan revealed spleen, folic acid, eggs, iodine, minerals, animal proteins, ABCA1, Vitamin B17, CD28/B7-1 receptors and compulsive. Feedback was repeated until all items in the treatment basket had been harmonized.

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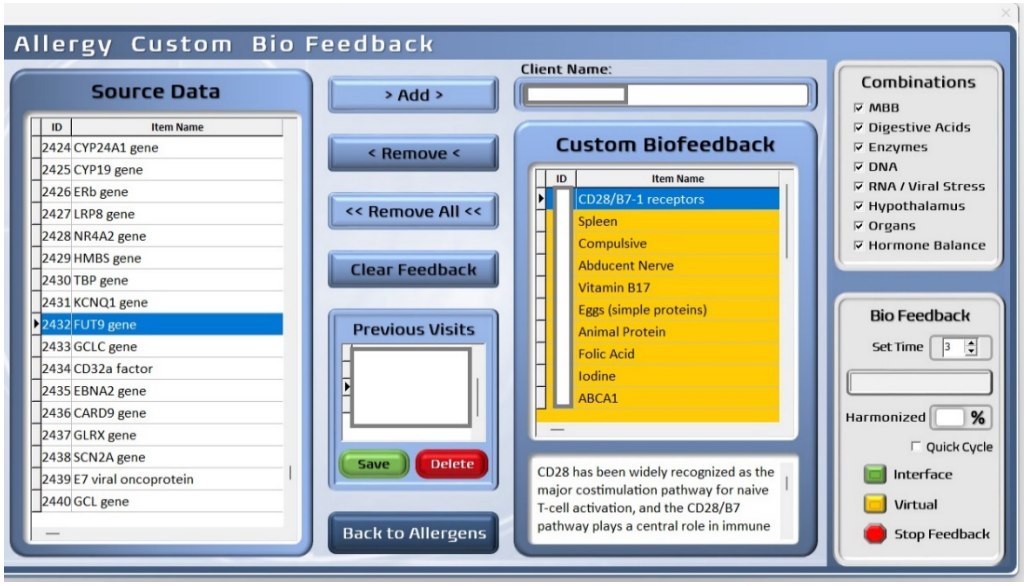

Figure 3. Participant's biofeedback IMAET reading during the third session

Session Four

Participant One was seen a week later for his fourth session and was asked about any issues or changes since his last biofeedback session. Participant One reported not having any stomach pains but noticed mood swings and irrational fear that something bad was going to happen. A fourth BioScan and psychotherapy session was conducted using the harness and allergy panel. Additional protocols from the IMAET SHOW method were included in the treatment basket. An emotional panel was used to scan what might be the root of his mood swings. Feedback was conducted to clear the energy field and balance negativity, mood swings, and fear something bad will happen. BioScan revealed reactivity to sugars, spleen anger/frustration, adrenal gland, instability, and genes connected to digestion. Feedback was repeated until all items in the treatment basket had been harmonized to eighty percent to one hundred percent.

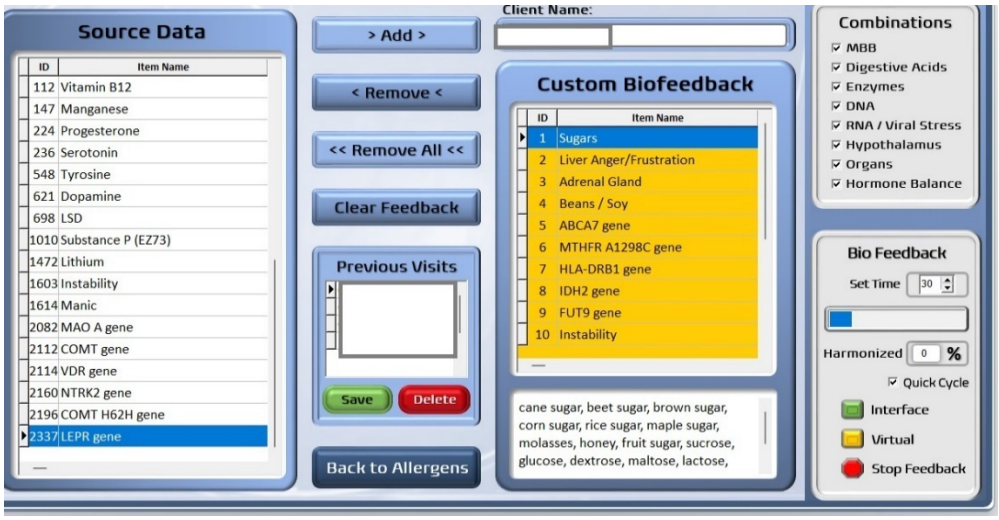

Figure 4. Participant's biofeedback IMAET reading during the fourth session.

Session Five

Participant One was seen a week later for his fifth session and was asked if he experienced any issues or changes after the first biofeedback session. Participant One reported not having any stomach pains, reduced anxiety and reduced panic attacks and noticed improved sleep. A fifth scan and psychotherapy were conducted using the harness and allergy panel. Additional protocols from the IMAET SHOW method were included in the treatment basket. This time, we scanned for hormones and conducted feedback on his testosterone. Feedback was repeated until all items in the treatment basket had been harmonized to eighty percent to one hundred percent.

Session Six

Participant One was seen a week later for his sixth session and was asked if he experienced any issues or changes after the first biofeedback session. Participant One reported not having any stomach pains, reduced anxiety and reduced panic attacks and noticed improved sleep. He continues to experience improved mood and feels more patient. He received a hypnotherapy session prior to his IMAET scan to assist with progressive relaxation and breathwork exercises. A sixth scan and hypnotherapy were conducted using the harness and allergy panel. Additional protocols from the IMAET SHOW method were included in the treatment basket. This time, we scanned for hormones and conducted feedback on his lymphatic system. Feedback was repeated until all items in the treatment basket had been harmonized to eighty percent to one hundred percent.

Session Seven to Session Ten

Participant One was seen a week later for his seventh session and was asked if he

experienced any issues or changes after the first biofeedback session. Participant One reported detoxification symptoms such as increased bowel movements but felt better afterward. He continued to experience improved mood and felt more patient. He received three sessions of the AMD Ionic foot detox bath session along with IMAET feedback on the lymphatic system. Feedback was repeated until all items in the treatment basket had been harmonized to eighty percent to one hundred percent. A foot detox bath indicates detox of the gallbladder, liver, and lymphatic system.

Participant Two

Participant Two was a thirty-nine-year-old single female. She was an active military personnel and had engaged in multiple tours of duty throughout her twenty-year military career. She had a series of mental health and chronic health issues for three years with no resolution prior to seeking services. She self-reported multiple diagnoses that included high blood pressure, executive dysfunction, polycystic ovarian syndrome (PCOS), chronic pain, fibromyalgia, pre-diabetes, high cholesterol, depression, anxiety disorder, Attention Deficit Hyperactivity (ADHD), carpal tunnel and sciatica. Participant Two was on twelve different pills for the different diagnoses but reported no improvements in her symptoms. Her symptoms included migraine headaches, blurred vision, fatigue, insomnia, poor memory, brain fog, and digestive issues. Participant Two denied a history of drugs or alcohol but had a traumatic childhood growing up in a very violent city in the United States. She had to care for her mentally ill mother and schizophrenic sister since the age of eleven and reported living through multiple crises and traumatic situations with family and at work. Participant Two reported traumatic experiences of racism and discrimination in the workplace, which had increased her stress levels and ability to heal in a toxic work environment. She was offered IMAET treatment sessions, and she agreed to try this method.

Initial Impressions

Participant Two has the negative personality of a martyr, which seems to sabotage her healing process. Her energy and vitality are low mainly due to giving her energy away and not having healthy boundaries with others. She is an empath and is deeply affected by other people's pain. She learned at a young age to absorb other people's traumas into her energy field. This behavior pattern of absorbing other people's issues is the main root cause of her health issues. Her Nuvision Bioscan showed issues with her low iron and thyroid hormone, but she denied any medical diagnosis that pointed to her having thyroid issues, which were

affecting her energy levels and sleep issues. She found out two months later from her primary care doctor that she did indeed have thyroid issues.

Session One

Participant Two was given information and education about how the IMAET worked. Although not intended to diagnose, but it provides information about what is resonating in her energy field and provides biofeedback to harmonize these issues. Participant Two was given a harness around her forehead, which is a protocol for scanning her energy field. The first impressions on the scan were hemoglobin, cholesterol, Candida, and mold toxicity. She also received vitamin B brain balance as part of the SHOW method protocol. Participant Two confirmed that she had been working in a mold-infested building and had a series of yeast infections. She also had a fungus overgrowth on her toe. Participant Two was put in a zero-gravity recliner chair with healing sounds during her feedback and encouraged to relax and engage in meditation during her feedback session. She was encouraged to pay attention to any physiological changes that may occur after the feedback and throughout the week and be ready to report for the next week, which is encouraged so participants can track their recovery and confirm if the IMAET sessions were actually working for them.

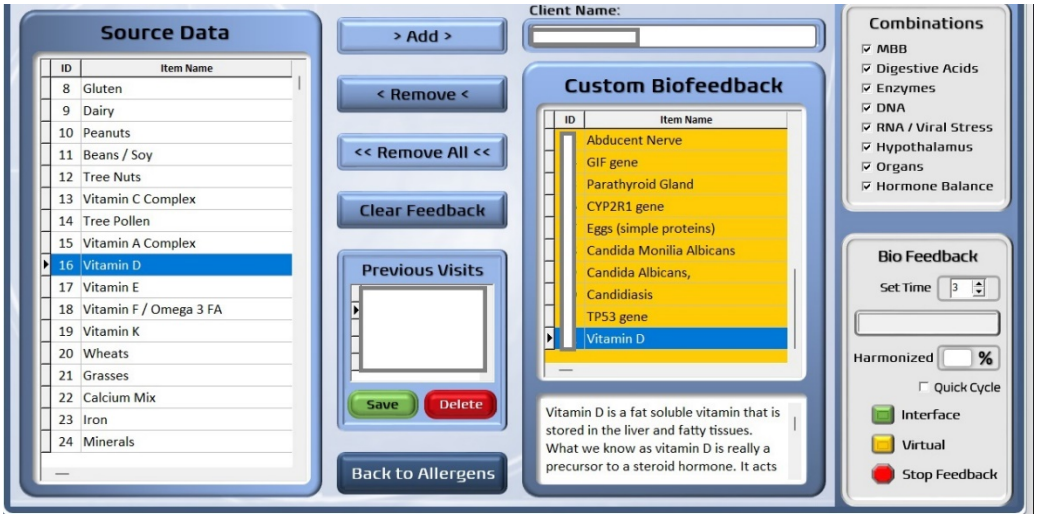

Figure 1. Participant Two's biofeedback IMAET reading during the first session.

Session Two

Participant Two was seen a week later for her second session and was asked if she experienced any issues or changes after the last biofeedback session. She reported having a herxheimer reaction (H.R.). Specifically, she reported having body aches, headaches, increased hypertension, nausea, and felt exhausted. Dhakal et al., 2023 define Herxheimer reaction (JHR) as a transient clinical phenomenon that occurs in patients infected by

spirochetes who undergo antibiotic treatment. It is simply an immune system reaction to the endotoxins released when large amounts of pathogens are being killed off, and the body does not eliminate the toxins quickly enough. The symptoms do not indicate failure of the treatment; in fact, usually just the opposite. It indicates that parasites, fungi, viruses, bacteria. or other pathogens are being effectively killed off. The reaction can occur within 24 hours of antibiotic treatment of spirochete infections, including syphilis, leptospirosis, Lyme disease, and relapsing fever. H.R. usually manifests as fever, chills, rigors, nausea and vomiting, headache, tachycardia, hypotension, hyperventilation, flushing, myalgia, and exacerbation of skin lesions. Jarisch-Herxheimer Reaction - StatPearls - NCBI Bookshelf (nih.gov).

Another IMAET session was conducted to include detoxification support such as detox genes, inflammation, and lymphatic stimulation. Additional protocols from the IMAET SHOW method were included in the treatment basket. Feedback was repeated until all items in the treatment basket had been harmonized to eighty percent to one hundred percent.

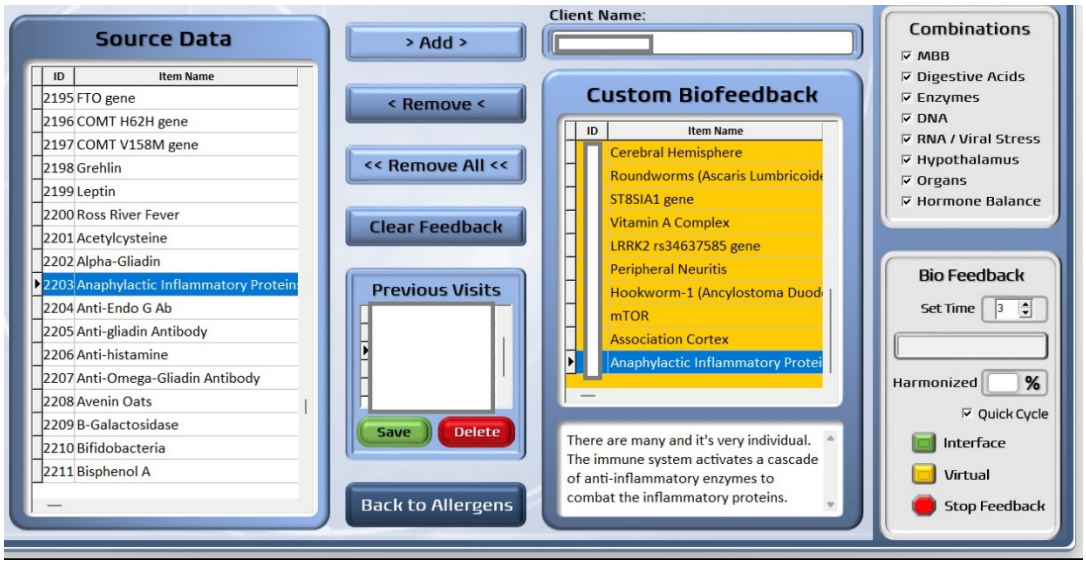

Figure 2. Participant Two's biofeedback IMAET reading during the second session.

Session Three

Participant Two was seen a week later for her third session and was asked if she experienced any issues or changes after the last biofeedback session. She reported that her blood pressure reduced to 103/69, which was the first time in four years that her blood pressure was normalized. She also reported that her weight had reduced from 233 to 226 pounds. Participant Two reported increased bowel movements from once a day to three times a day. She felt more energy and motivation and has been more productive. When prompted about any negative symptoms, Participant Two reported increased itchiness around the

rectum and various parts of her skin. She stated, “I am sold on this treatment! I have not felt more energized or felt better until I began the IMAET treatment.” Participant Three received her third IMAET session, this time focusing on the lymphatic system. She was encouraged to pay attention to any emotional or physiological changes and report back at the next session.

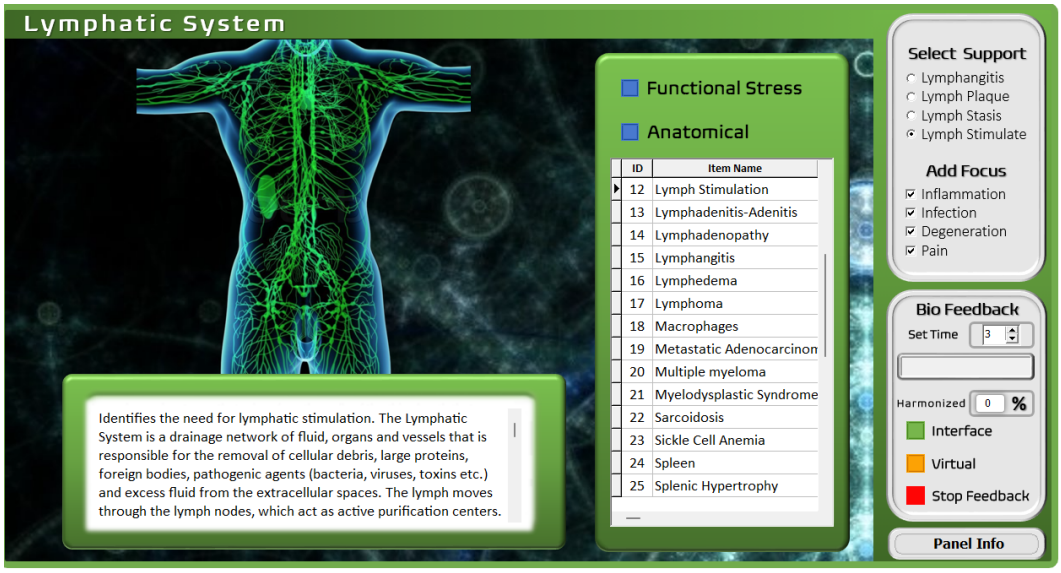

Figure 3. Participant Two’s biofeedback IMAET reading during the third session.

Session Four

Participant Two was seen a week later for her fourth session and was asked if she experienced any issues or changes after the last biofeedback session. She reported that symptoms of migraines, and spine and nerve issues had resurfaced. She reported that she had stopped taking her anti-depressant, ADHD medication and sleep medication. The participant was never advised to quit her medication. She felt she might be having some withdrawal symptoms from stopping her medication and was advised to always check with her doctor before making such a medical decision. Participant Three was given another treatment of the IMAET and received a frequency sweep for a herniated disk and sympathetic and parasympathetic stim. These panels do not scan for problems but provide biofeedback frequencies. Items for feedback can be determined via muscle testing.

Session Five

Participant Two was seen a week later for her fifth session and was asked if she experienced any issues or changes after the last biofeedback session. The participant report she had lost ten pounds and had increased energy. She has remained off her prescribed medication and confirmed that she had spoken to her doctor about not taking her medication. She informed her doctor that she would prefer to go the alternative medicine route and would

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maintain her biofeedback sessions. The participant requested to focus on her lymphatic system. She also received an Ionic foot detox bath.

Sessions Six to Session Ten

Participant Three received weekly lymphatic system support to release the effects of inflammation, infection, lymph plaque, lymph stasis, lymph stimulation, congestion of the spleen and lymphedema. She also received an Ionic foot detox in conjunction with the IMAET treatment.

Figure Four: Before and After Photos of Participant Two. She had lost thirty-eight pounds by the end of the ninth session.

Participant Three

Participant Three was a forty-five-year-old male who self-referred for mental health services. He reported having a stable source of income and being happily married. He felt stressed out with work and reported unresolved traumas from childhood. He reported a history of depression, stress, and chronic fatigue. He had a diagnosis of lymphedema, diabetes, hypertension, weight issues, high cholesterol, insomnia, and allergies. Participant Three had four different specialists, including an immunologist, psychiatrist, cardiologist, and endocrinologist. He was on twelve different medications and reported problems with fatigue, headaches, depression, heartburn, brain fog, night sweats, unable to sleep and managing his diabetes. Participant Three reported having obsessive thoughts about death and dying. An initial Nuvision scan showed that he had side effects from drug interactions, low serotonin,

cardiovascular stress due to lack of exercise, side effects from vaccines, gut and respiratory tract cells, extreme fear of diabetes (Diabetophobia), a past life experience related to wrongful and premature death, electromagnetic radiation, parasites in his colon and his illness being related to an unbalanced environment. When prompted, Participant Three reported working in a toxic work environment with significant exposure to technology. Participant Three was offered the opportunity to participate in the IMAET case study. He was given information about the IMAET and how it works and he accepted being part of the study.

Session Two

Participant Three received his first IMAET scan and biofeedback. His initial allergy report indicated the adrenal gland, organs, vitamin D, Candida yeast, parasites, blood, heart meridian, cerebellum and detox gene. SHOW Method treatment protocols were also included in the basket and items by his request. That included money, happiness, and good luck, which was a rather large basket of items, and all items could not fit in one screenshot and have been divided into two.

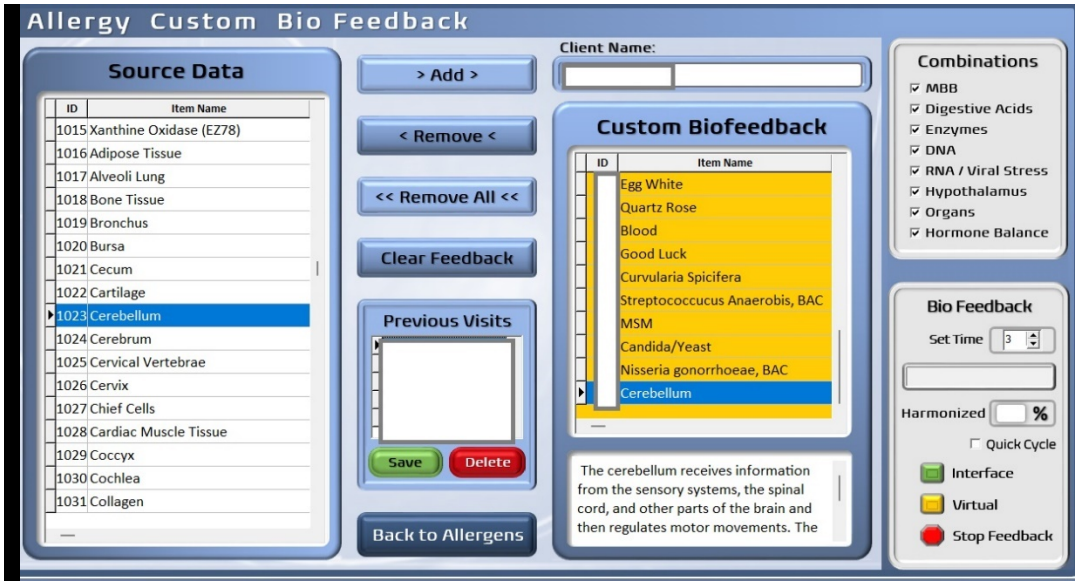

Figure 1. Biofeedback IMAET Treatment Basket for Participant Three/Session One.

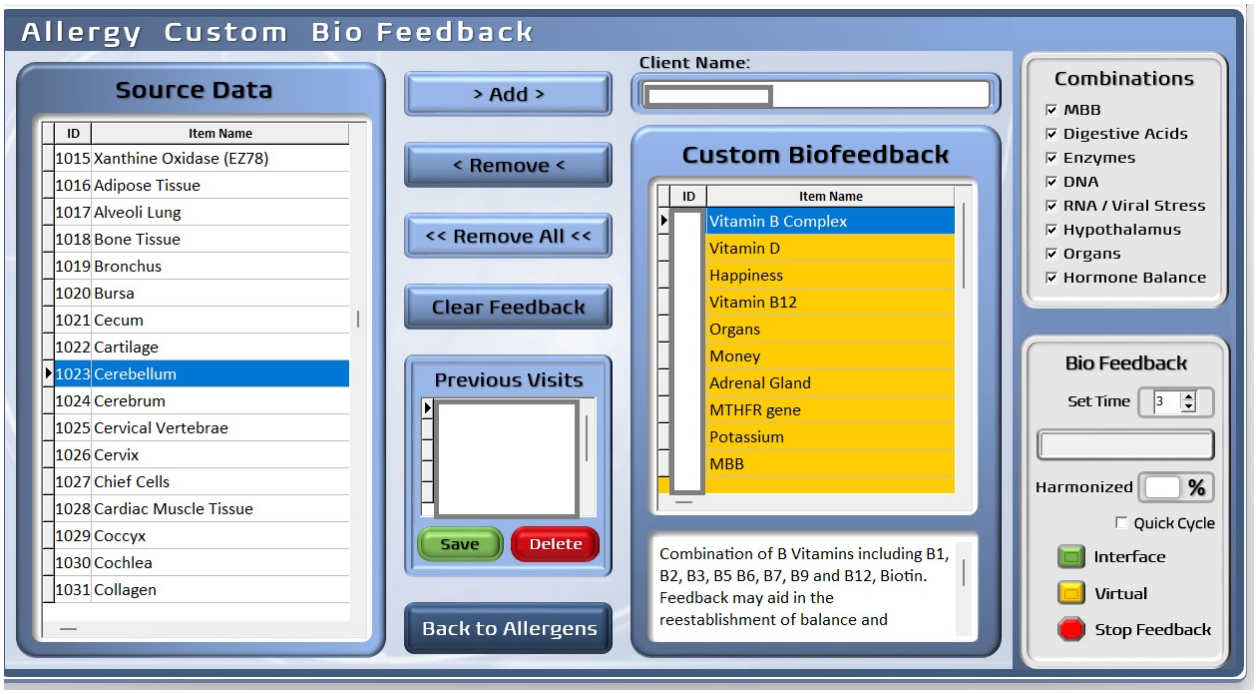

Figure 1b. Biofeedback IMAET Treatment Basket for Participant Three/Session One.

Session Three

Participant Three was seen a week after his second session and was asked about any physiological and psychological changes. He reported more energy, increased optimism, and a clear mind. He reported vomiting after the first session and increased bowel movements. He was not experiencing back pain or aches as he used to, and his leg was not as swollen. He also noticed that he did not have blurred vision, and his appetite had reduced. The items below were included in his treatment basket along with the SHOW method treatment protocol. The participant was encouraged to pay attention to any physiological changes and report any declines or progress.

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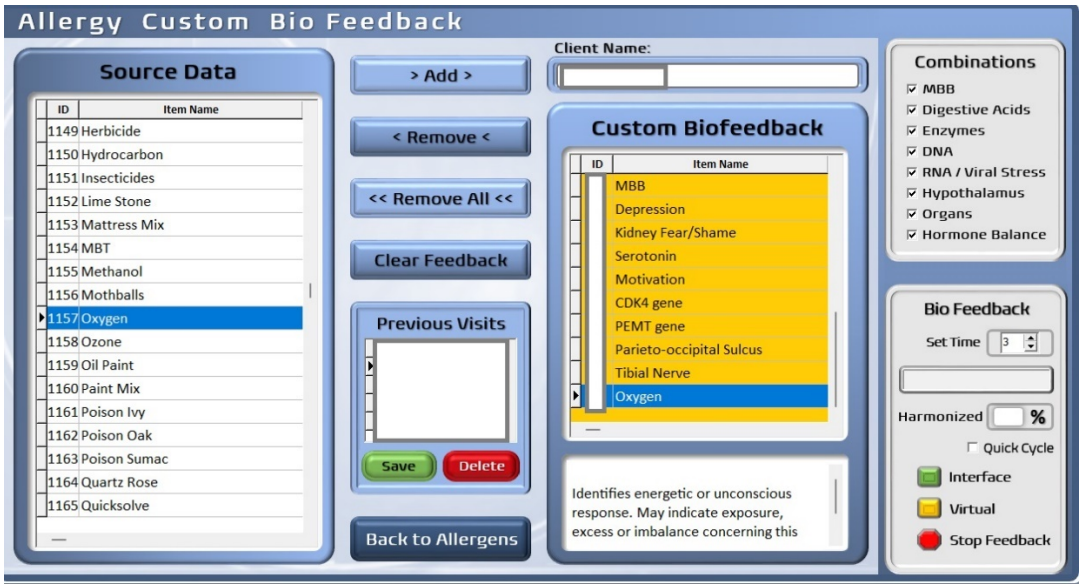

Figure 2. Biofeedback IMAET Treatment Basket for Participant Three/Session Two.

Session Four

In the fourth session, Participant Three reported feeling fatigued and experiencing sleep disturbance. The participant received additional feedback on serotonin, association cortex, thyroid gland, iodine, pancreas, sugar, stem cells, minerals, vitamin e, melatonin, and gluten.

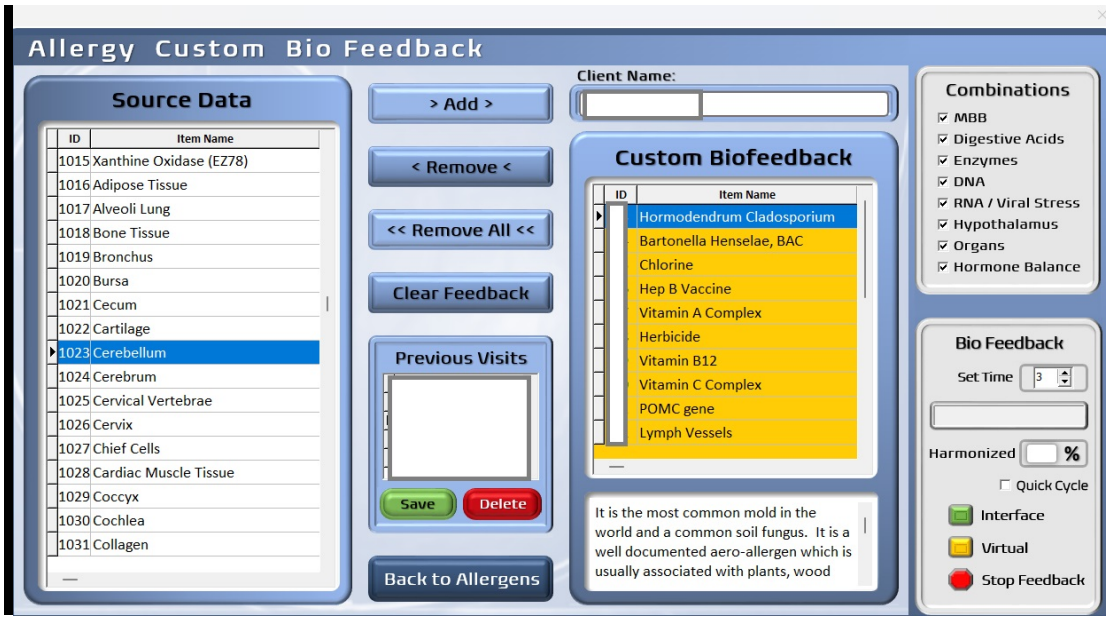

Figure 3. Biofeedback IMAET Treatment Basket for Participant Three/Session Three.

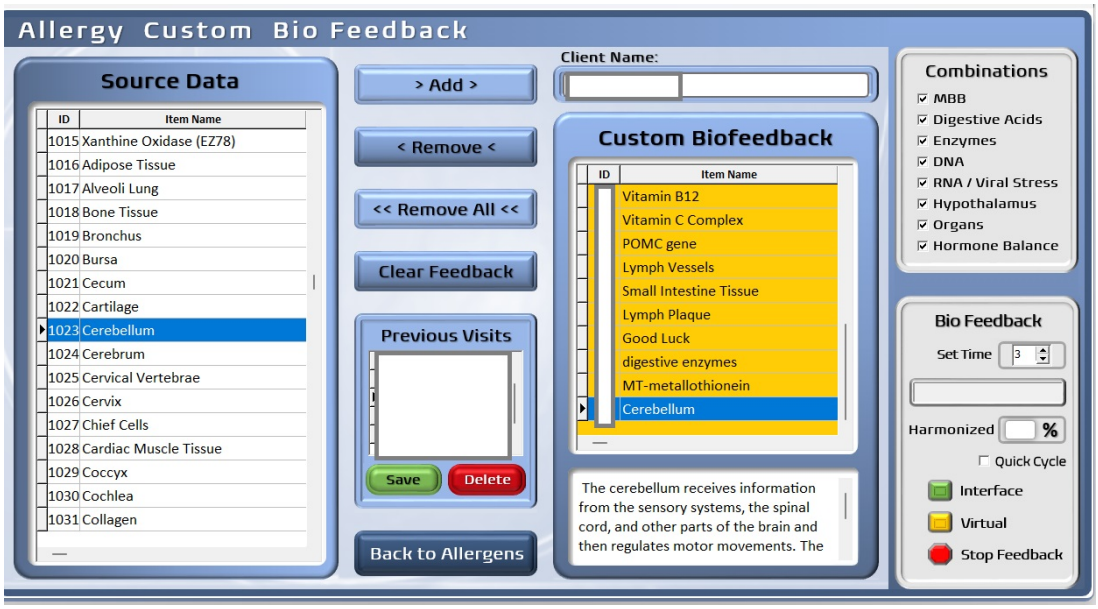

Figure 3b. Biofeedback IMAET Treatment Basket for Participant Three/Session Three.

Session Five

Participant Three reported at the session that he had lost twenty-three pounds in the last thirty days of receiving IMAET treatment. He also reported that his levels including blood pressure, blood sugar, and cholesterol, were at all normal levels. When asked about his medications, Participant Three reported that he was still taking his medications but had been on them for five years with no real results. He feels his weight loss, clarity, and energy levels were attributed to the IMAET sessions. This Fifth session was focused on the lymphatic system, acupoint meridians, congestion of the spleen, lymph plaque, lymph nodes, and lymph stimulation.

Session Six

Participant Three reported that since his last IMAET session, one week prior, he had experienced increased energy levels, his mood had stabilized, and he was now walking and exercising more. He no longer had the urge for sugar products, his blood sugar had remained steady, his appetite for healthy foods had increased, and he was back wearing clothing two sizes smaller. Participant Three received another lymphatic treatment.

Session Seven to Ten

Participant Three continued to stabilize his blood pressure, sleep, energy levels, and mood. He continues to receive IMAET sessions on a bi-weekly basis with a focus on the lymphatic system and the Ionic foot detox bath.

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Participant Four

Participant Four was a forty-year-old female who was an active military personnel. She was a single mother of two with a history of Post Traumatic Stress Disorder (PTSD) and Major Depressive Disorder and was recently diagnosed with Bell's Palsy. She reported not feeling herself and crying often. She had high blood pressure despite taking various medications. She felt her stomach was always in a knot. She had alopecia and nerve pain. Participant Four did not want to look at herself in the mirror and felt she was obsessing about her death. She was taking a cocktail of medications for depression, anxiety, high blood pressure, and nerve pain. Due to her medications, she developed kidney problems and had surgery to remove her gallbladder.

Participant Four reported having excruciating headaches, fatigue, a lump in her throat, insomnia, diarrhea and constipation, poor memory, brain fog, heart palpitations, and poor memory. Participant Four had no history of alcohol or substance abuse. She reported a history of childhood traumas and three tours of duty, which have resulted in PTSD and night terrors. She reported a new symptom where she had lost the ability to grab items with her hands going numb. After complaining to her doctors that she was not getting better under their care for the last four years, she was referred for mental health treatment. Participant Four was invited to participate in the IMAET treatment. She was given information about the treatment, signed consent forms, and requirements for participation and limitations of the study was explained to the participant.

An initial Nuvision scan was conducted, and the impression received was high levels of Candida, electromagnetic pollution, perverse energies, facial nerve, left cerebellum and issues with her muscle.

Session two

Participant Four received her first IMAET allergy panel scan, and impressions included cytomegalovirus, VIR 9, vagus nerve and parasite infestation, and Candida. SHOW Method protocols were also included for biofeedback. Participant Four was offered a relaxing chair and meditation music alone in a darkened room while she received feedback treatment. Feedback was continuous until all items for treatment had been harmonized between eighty percent and one hundred percent. The participant was then encouraged to take note of any physiological and psychological reactions to the treatment and be prepared to share by the next session.

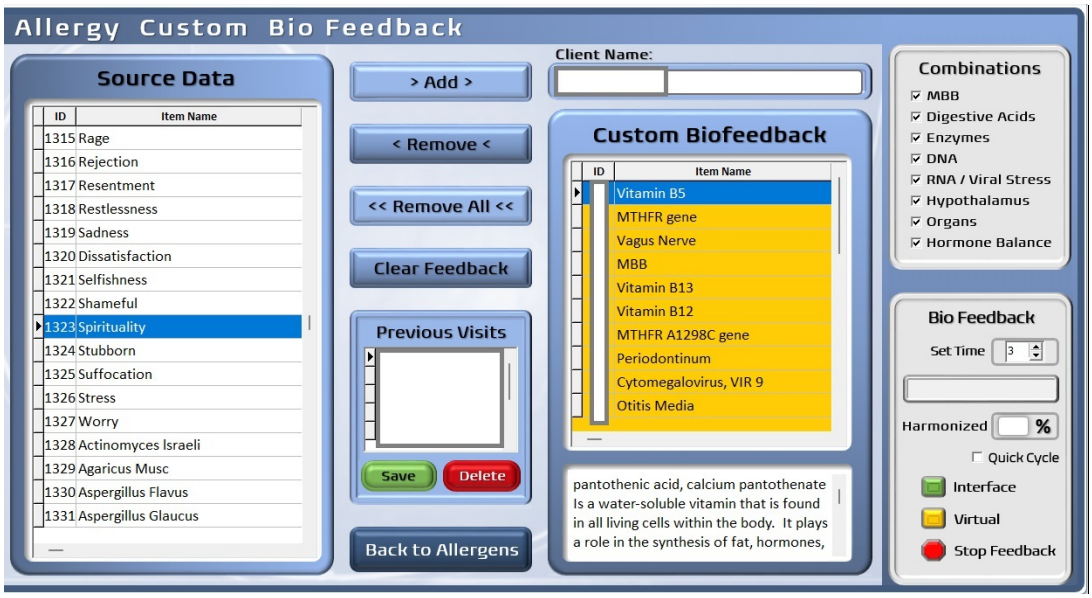

Figure 1 Treatment Basket for Participant Four

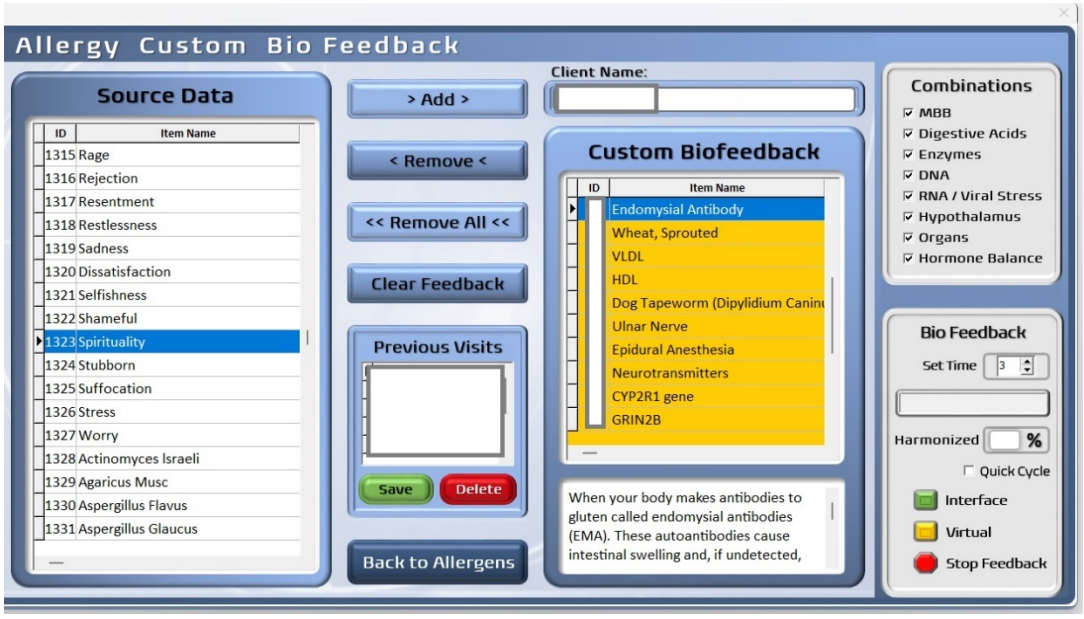

Figure 1b Treatment Basket for Participant Four

Session Three

Participant Four received another session one week after her first IMAET session. She reported feeling more relaxed, was sleeping better and her blood pressure had improved significantly. She reported that she had not seen her blood pressure in the normal range for a very long time. She felt calmer and was not as short-tempered, given the amount of stress she was experiencing at work. Participant Four reported that the left side of her face that was affected by Bell's Palsy had relaxed, and she was feeling more movement in her eye and left side of her face. The allergy panel was scanned, and a treatment basket for biofeedback was

created. The participant was asked to relax on a comfortable couch with soft music in a darkened room as she was receiving her biofeedback. After her feedback session, the participant reported experiencing tingling sensations and felt very relaxed. She was encouraged to pay attention to any physiological and psychological changes and be prepared to report her experiences the following week.

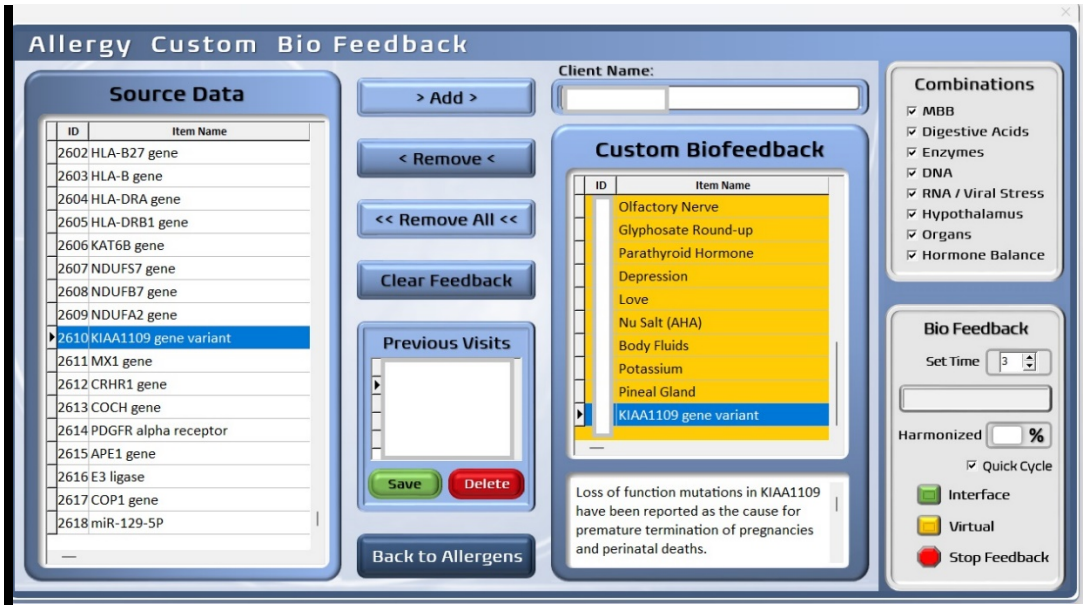

Figure 2 Treatment Basket for Participant Four

Session Four

Participant Four continued to maintain weekly IMAET sessions and reported feeling much better than she had felt in a long time. She reported that her blood pressure had reduced significantly from the dangerous zone that in the past had earned her multiple hospitalizations to the normal range. She reported feeling significantly better. She expressed how she was crying all the time prior to her first visit, experiencing suicidal thoughts, and now no longer has those thoughts. She also reported that her sleep had significantly improved. Participant Four reported having stomach issues, specifically tightness and constant pain. A biofield scan was conducted, and a treatment basket was created Chromosome 4-P, Cells of Lendig, Chromosome 13-Q, Heavy Metals, POMC gene, fungus, overworked, neutropenia, Gliocladium, face toning and Crohn's Disease. The participant was asked to relax on a comfortable couch with soft music in a darkened room as she was receiving her biofeedback. Feedback was continuous until all items in the treatment basket had harmonized to eighty to one hundred percent. After her feedback session, the participant reported experiencing

tingling sensations and feeling very relaxed. She was encouraged to pay attention to any physiological and psychological changes and be prepared to report her experiences the following week.

Session Five

Participant Four arrived for her fifth session, reporting sharp pains in her arms, slow processing of her thoughts and short-term memory issues. She had visited emergency care within that week, and all her tests and vitals came back normal. Her doctors encouraged her to continue taking her blood pressure medications. They attributed her sudden normal range to the medications and were not asked about any other treatments she was engaging in. They had no explanation for her unusual symptoms. We proceeded to conduct another allergen panel scan, and the major issue that came up was neurotoxins. Neurotoxins are synthetic or naturally occurring substances that damage, destroy, or impair the functioning of the central and/or peripheral nervous system. Neurotoxins may damage neurons, axons, and/or glia, resulting in loss of specific nuclei and/or axonal tracts or demyelination. They may also cause metabolic imbalances that can secondarily affect the central nervous system (CNS). Additional impressions on the BioScan included colitis, intestinal antigen-antibody, trochlear nerve and goitrogenic food. Further investigations in conjunction with the Nuvision Scan pointed to side effects of a prescription medication. Participant Four received feedback therapy and additional items such as Vitamin C, Vitamin F, Omega 3, minerals, iodine, thyroid gland, tonsils of the cerebellum, egg yolk, small intestine and detox genes- ABCA1, ABCA7 and Sulcus. She was left in a darkened room with meditation music and a relaxing chair while she received feedback treatment. All items in the treatment basket were harmonized to one hundred percent. Participant Four was advised to speak with her doctor about medication side effects.

Session Six

Participant Four arrived for her sixth session in physical pain. She reported pain in her arms, her blood pressure had gone back up, and her hands were tired. She no longer had suicidal ideations, and her mental health had stabilized. Participant Four received behavioral therapy and stress management by exploring ways to deal with stress without becoming a stressful person. Biofeedback focuses on the areas of pain by using the muscle panel and nerve panel. Nutrition panel impressions indicated the need for vitamin E, Magnesium, Vitamin D3 and Vitamin B12. Muscle testing confirmed the need to consider nutritional support for these vitamins.

Session Seven

Participant Four came into her session excited to share that all her symptoms had gone away. She reported that she had run out of her blood pressure medication and was unable to get her prescription refilled for seven days. She stated that she had not taken the medication for five days, and her symptoms went away. She believed her blood pressure medication was responsible for her symptoms. She informed her doctor that she felt that the medications may have given her dangerous side effects, but she was promptly dismissed and referred for mental health. Participant Four began detox biofeedback using the detox panel and the Ionic foot detox bath.

Sessions Eight to Ten

To release the effects of medication, inflammation, pain, degeneration, and radiation, Participant Four received weekly detox, frequency, and Ionic foot detox.

Feedback from Participant Four after Ten Sessions

"IMAET treatment has been different than any other treatment that I have received because it looks closely at what's going on inside my body. It's like having a super personalized guide that shows exactly what's not working right. This special attention helps fix not just the things that bother me but also the reasons behind them.

IMAET understands that my body, mind, and feelings are all connected. It's like having a plan that makes sure everything is in harmony. For the first time in my life, I feel like my whole self is being taken care of.

No More Side Effects:

I have had a long history of taking medication and have had horrible side effects. But with IMAET, it's different. It only works where it's needed, and for me, that means no more feeling horrible from unnecessary medication – just feeling better without any problems on the side.

IMAET has given me hope. It has looked at the things causing the trouble and helped manage them better. It's like having a friend who knows exactly how to handle the tough stuff so I can focus on being happy.

IMAET treatment has changed my health story completely, and I a forever grateful for the treatment I have received and continue to receive from Quadri.

Participant Five

Participant Five was a sixteen-year-old female with a history of anxiety, depression, and social skills problems. She had been hospitalized in psychiatric care on multiple occasions due to attempted suicide and suicidal ideations and was subsequently diagnosed with schizophrenia. Participant Five's mother reported that Participant Five was extremely paranoid and antisocial and refused to interact with her peers at school. She was reported as having multiple personalities and alters (A person with Dissociative Identity Disorder (DID)) or a similar form of Other Specified Dissociative Disorder (previously called Dissociative

Disorder Not Otherwise Specified, or DDNOS-1). She has a fragmented personality. A person with DID experiences himself or herself as having separate identities, known as alters or alternate identities, previously known as personalities. Alters take over control of the person's body or behavior at various times (Öztürk & Sar, 2016). Each can function independently. All the alters together make up the person's whole personality. Alters typically develop from dissociation caused by prolonged early childhood trauma, although attachment problems and persistent neglect in early childhood are also known factors (Pica, 1999).

Participant Five was on a cocktail of six different medications but reported that she had noticed no improvement. Instead, she had gained over forty pounds and had developed a fatty liver due to the medications and had homicidal and suicidal thoughts despite taking anti-psychotic medications. Although the medications were not helping and possibly causing more problems, Participant Five's mother said she couldn't stop giving her the medications as the doctors threatened her that they would call Child Services if she stopped the medications. Participant Five was failing in school and unable to concentrate or complete a semester without ending up in psychiatric care. On occasions, Participant Five would dress up like a five-year-old and regress in her behavior. At our first meeting, she never made eye contact and seemed easily agitated.

The initial diagnostic impression was autism. Participant Five may have been misdiagnosed, and this may be the reason none of her medications or prior treatments have worked. She had been dismissed from therapy by multiple counselors who were unable to get a word out of her. Since there were little to no treatments available to sixteen-year-old autistic patients, I offered to assist with utilizing the IMAET biofeedback sessions. The mother agreed, and they were provided a treatment plan that would incorporate hypnotherapy, energy healing and the IMAET biofeedback.

Initial Nuvision impressions indicated medical malpractice, polarity imbalance, hereditary parasite information stress, pituitary imbalance, low bile production, Epstein-Barr Virus VCA antibody, and gut infection.

Spiritual Issues

From her astrological chart, Participant Five had a past life experience of alienation owing to her south note in Virgo in the twelfth house. She had a Jupiter in Scorpio in the first house, making her deeply focused on herself and needing attention from others. Her charts also made her very introverted, intuitive, and prone to escapism. She felt intense insecurity

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around groups and reacted negatively to preserved forms of rejection. Participant Five reported that she had an innate distrust of emotions and reported not being able to express her feelings. A major spiritual lesson for her would be to let go of the desire to escape into fantasy and develop a productive life.

Participant Five received three sessions of hypnotherapy and three Reiki Healing. Healing was focused on general well-being, cognitive restructuring, self-confidence, and releasing stuck emotions. Energy healing focused on clearing her energy field and restoring her auric field.

IMAET Biofeedback Sessions

The IMAET system has twenty-seven support panels and seventy-thousand frequencies. Muscle testing allows the practitioner to determine which panel to use for the session. Due to Participant Five's autism diagnosis and emotional and social skills problems, Participant Five received brain harmonic balance, brain wave tuning, emotional balancing, and detox biofeedback. The brain panel can test for levels of Attention Deficit Hyperactivity Disorder (ADHD) and Attention Deficit Disorder (ADD).

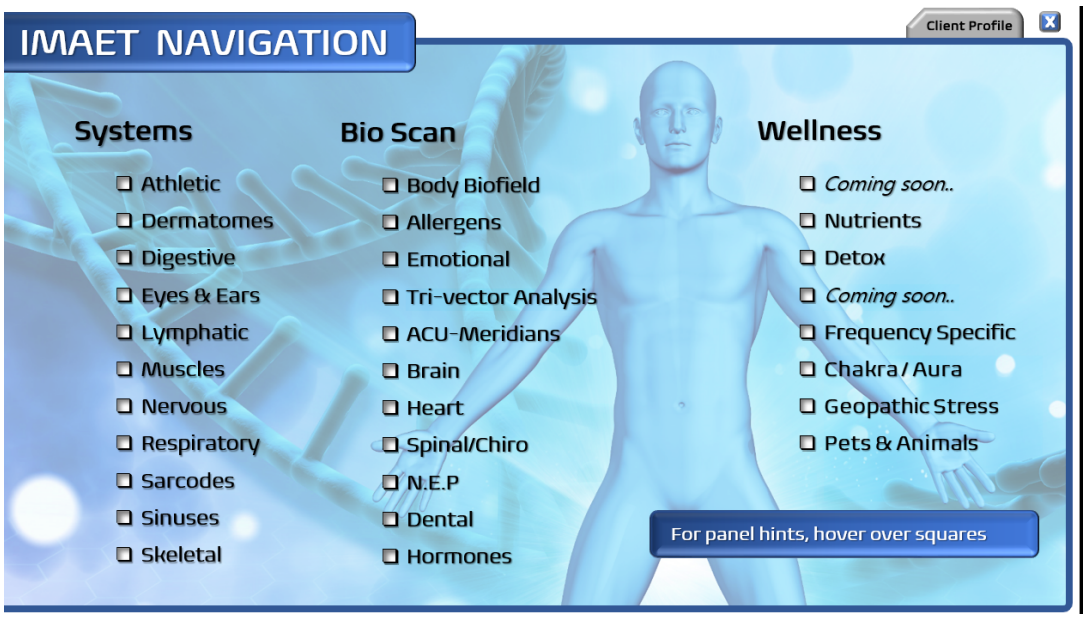

Figure 3 IMAET Navigation Support Panels

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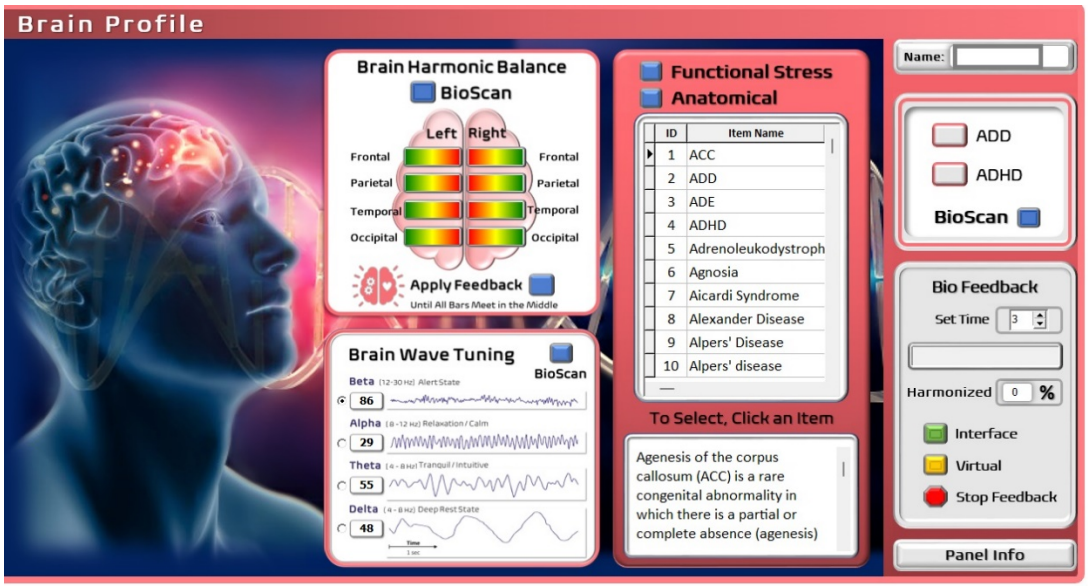

Figure 4 IMAET Brain Wave Tuning, Brain Harmonic Balance Support Panels

Figure 5 Emotional Panel scan and clearing the energy field.

Figure 6 Parasite Detox Panel

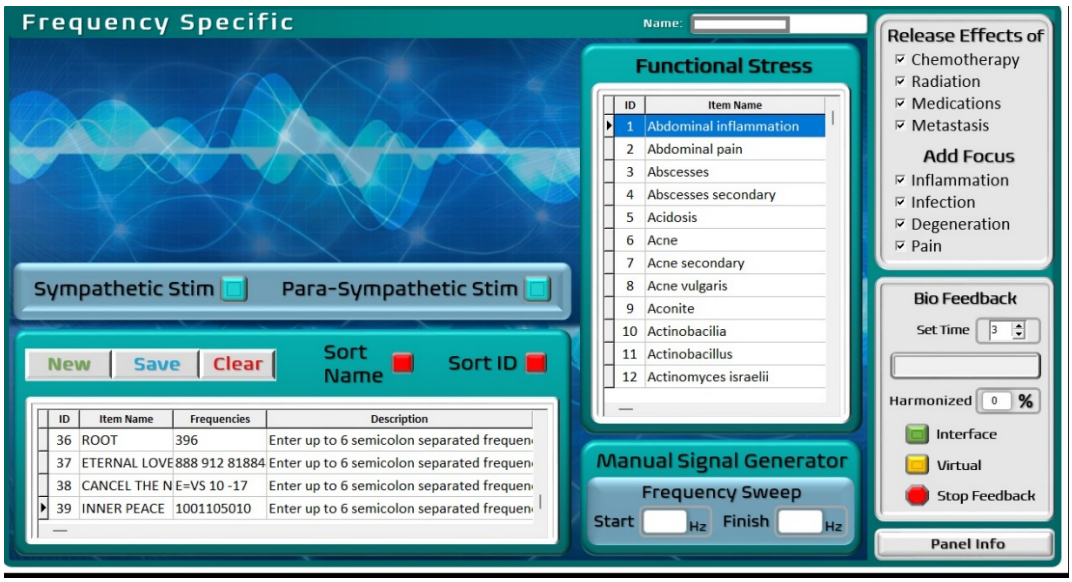

Figure 7 Frequency Sweep

In total, Participant Five received forty-eight sessions that included psychotherapy, energy Reiki healing, hypnotherapy, and biofeedback therapies. By the end of her sessions, she had lost fifty pounds and was completely off her medications. She had not been hospitalized for suicidal ideations or attempts throughout being in care at Kuadra Counseling. She was expressing herself and making new friends. She even attended a school prom and formed close relationships. Participant Five would be graduating high school and plans to attend a nearby college to become a veterinarian.

Feedback from the Parent of Participant Five

"There are so many illnesses in this world. Many have treatment plans with long successful

rates that all doctors agree to use. However, in the mental health realm, there are so many factors that intertwine that need to be addressed, making it hard to cure someone struggling with mental health, in my opinion. The mind can be like Pandora's box. You need to really find a treatment that deeply looks into what's going on inside All of You.

"My daughter started seriously struggling with anxiety, paranoia, and depression when she was fourteen years old. She was taken to mental hospitals seven times in one year. The most she could stay in school was three hours before I would get a call to pick her up. Several doctors/psychiatrists evaluated her throughout the two years. Each doctor had his opinion on the diagnosis, but oddly, my daughter's medication stayed the same from the beginning, even if there was no significant progress. The only things the medicines really did for my child were keep her zoned-out, gain weight, and cause fatty liver and diabetes, among other things. Each time I spoke up, my opinion didn't count. I was devastated because I didn't want her to suffer now or later from the side effects. There seemed to be no light at the end of the tunnel until I found Kuadra Consulting and Counseling Service, LLC, near my daughter's third year of struggling.

"Here, a refreshing treatment plan was put in place. My daughter was introduced to a new form of therapy that involved an interesting machine. It's based on IMAET Technology where a person's body is evaluated from the inside to assist a licensed therapist/doctor better to counsel on your overall health. I am a true believer that the mind, body, and spirit need to be healthy and coordinated. Each session consists in addressing issues my daughter speaks about, and what the IMAET Technology machine points out she needs help with. The machine has correctly pointed out physical health issues my daughter had/has and is being treated. She has significantly progressed and feels more comfortable in her body and mind. Her feeling of being zoned-out and depressed has faded. She even speaks more in therapy. She has more inner strength to fight for her mental stability and has shown doctors that she doesn't need to be categorized and be heavily medicated. She shocked/impressed her psychiatrist and primary doctor with her overall health progress. She hasn't been taken to a mental hospitals in over a year. She will definitely continue to benefit from IMAET Technology.

"She is now a strong seventeen-year-old girl soon to go to college!"

Figure 7 Participant Five Before Treatment Participant Five After Treatment

Summary of Treatment Results from All Participants

	Depression	Diabetes	Schizophrenia	Stress	Hypertension	Insomnia	Digestive Issues	Chronic Pain	OCD	Weig Loss
P-1	x			x			x	X	x	
P-2	x	x		x	x	x		X		x
P-3	x	x		x	x	x	x	X		
P-4	x			x	x	x	x	X	x	
P-5	x		x	x					x	x

Table 1 Summary – X represents issues resolved with the IMAET.

SUMMARY AND CONCLUSION

Before the first sessions and prior to treatment, all five participants had experienced various mental health and chronic disease issues and had been in the care of medical professionals and specialists for their various conditions for more than two years. They all reported not getting better even with treatment, and some reported adverse effects from treatment. All the participants had agreed to try the holistic approach of the IMAET biofeedback treatment along with holistic modalities offered at Kuadra Counseling. The

approach to healing at Kuadra is often described as holistic, intuitive, and creative. It incorporates methods that explore the spiritual, psychological, and physical aspects of a person to find true energetic causes and bring harmony and balance to the individual. All the participants received multiple IMAET feedback sessions and reported getting better and staying better. Given the sweeping declining health and wellness in the United States, it would be beneficial for healthcare systems to consider other noninvasive tools that can promote wellness and restore the health of individuals. The IMAET is an epigenetic and bioenergetic healing tool. Bioenergy is expressed as Prana in Hindu culture, and in Chinese traditional culture, it is called Qi and is defined in meridians and acupoints. IMAET merges these traditional pearls of wisdom with modern scientific knowledge of body biochemistry and epigenetics and allows us to enter a new universe of understanding health and disease. We are entering the cyberspace of the body. Gaining this new understanding becomes a matter of information analysis. Peter Fraser called it "Decoding the Human Biofield" and NIH labelled it "Interacting Fields of Energy and Information that surround living systems."

The healthcare system of specialists and subspecialists has created a nightmare for individuals seeking wellness and makes it more difficult to navigate an increasingly disintegrated system. As the system disintegrates, so does the individual, as they are left to piece together the various treatments and medications given to them by multiple specialists. The mechanisms for holistic wellness require the joining of hands of the spiritual, emotional and behavioral in such a way that the individual is getting a holistic view of his or her problems, and solutions appear less complicated as the medical system makes them out to be.

Kuadra incorporates quantum healing and intuitive models with emerging interactive technology to encourage a new phase of research and implementation of biofeedback. There is a great deal of promise for future biofeedback interventions that harness the power of epigenetic quantum tools to help people regulate their overall health in a way that feels engaging, personal, and meaningful.

ACKNOWLEDGEMENTS

I want to thank all my clients who agreed to participate in the study and shared their deepest secrets with me and who have permitted me to share the stories about their own progress so this knowledge about healing opportunities could be presented to the readers and others seeking holistic solutions to their health challenges. I would also like to thank Dr. Carolyn Flanary and Dr. Bernard Straile for their technical support and training.

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CONFLICT OF INTEREST

The author declares no conflict of interest.

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