Channeling healing energy: The value of compassion in the chiropractic clinical setting, Part one

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Abstract: Compassion is about what we leave for others during these brief magically moments we are alive, it is about trying to have compassion for my shadow and that of others, and realising that we are all doing the best we can. By bringing these insights into the clinical encounter with kindness, compassion, and caring then our patients can feel safe and we can focus on our patient’s optimal wellbeing and better channel our healing energy.

Indexing Terms: chiropractic; chiropractor; compassion; patient-focussed care.

Often the term ‘channeling healing energy’ is seen as being ethereal, abstract, and/or spiritual. However this article, which is the first of a series, will focus on tangible, distinct, and important characteristics a doctor should strive to attain in their clinical practice. I believe that using my suggestions will help turn a good doctor into a healer and this will enhance patient outcomes, which should be our focus at all times. While I continually have things to learn, after over 4 decades of clinical practice I believe I have ‘practice wisdom’ of value to share with doctors in practice.

I think my journey started when I was 19 years old, leaving undergraduate college in my junior year and moving across the United States to Los Angeles, to create a business with my older brother. There were more monumental challenges facing me than I could have considered, such as loss of the community of my friends, starting a new business, and moving to a new city. After a couple years I couldn’t have predicted that my business venture wouldn’t work out and I was left feeling helpless and hopeless. With this backdrop, I sought a psychologist (1) during that time for help and guidance.

My therapist was in her late 60s and I was about to turn 20 years old. I had no idea what psychotherapy might be but I had hopes she could help me, even though she was so ‘very old’ (about my age now), from my 20 year old point of view. I remember the first thing she said to me when I sat down in a chair opposite her: She said ‘Charles, what do you want to accomplish in your lifetime?’
I took a long pause since I felt I had my whole life ahead of me. I thought 'Who thinks of a lifetime at 20 years old?' With careful consideration and thinking that if I was going to have a good relationship with this therapist I should be truthful I said 'I would like to have loads of girlfriends, get a lot of money, and do a bunch of drugs'. After all in the early 1970s in the United States that seemed like most young men's dreams. All she said to me was 'Uh huh'.

So I asked her 'What is it that you want to accomplish in your lifetime?' She stopped a moment and then slowly and with consideration she said 'I would like to think that I might be able to help at least one person with my therapy and that by helping that person I made the world a bit better than it was when I entered it'. I remember smirking to myself and thinking 'What a Pollyanna ridiculous statement, however I guess I am glad she is my therapist'.

Now fast forwarding over 4 decades and I think about what she said to me at that first session, 'What a powerful selfless thing to consider and how important this type of selflessness is for doctors treating patients'. Patients come to their healthcare provider usually naïve, helpless, and hoping/expecting that the doctor has their best interests in mind. The reality to many doctors is that often there is an uncomfortable dance between paying bills and helping patients. In the best case scenario the doctor can focus solely on the patient and the requisite financial remuneration will follow.

A few years later in my therapy experience I had another powerful insight. By over 2-3 years in psychotherapy with my therapist we had a good back and forth rapport, so it wasn't unusual for me to debate her on concepts she proposed that just didn't seem right to me. I remember one time when I was having a conflict with a student in my chiropractic class. I don't really remember why, but we both had a very intense dislike of each other. I was telling her about what a terrible person he was when she asked me 'What is it about him that you have within yourself that you have trouble dealing with?'

I replied 'That he was a terrible person and there was nothing about him that I had within myself'. She then responded again 'What is it about him that you have within yourself that you have trouble dealing with?' By that time she was hovering around 70 years old, so I presumed she might be getting senile, so I replied 'Didn't you hear what I told you? I am nothing like that person!' She just lowered her glasses and took a long look at me, then closed her eyes and rested her head back on the chair cushion where she was sitting. When I realised she wasn't going to say anything I said 'I guess you think I have something within me similar to my classmate but I don't know it?' She just sat there quietly and maintained her silence.

So I thought and I thought, it was the longest quiet time we had in therapy, maybe 10 minutes, though it felt like an hour. As I tried to consider her question I kept feeling like there was a cloud or curtain keeping me from seeing something I wanted to see. Finally I said to her 'Maybe this is something'. I then spoke about something I said to a friend of mine when I was 12 years old and how I was very embarrassed for my insensitive behaviour. I then realised that type of insensitivity was what I felt from my classmate and it had touched a sensitive chord within me.

After that I remember her saying to me 'Charles, 12 year olds do many things they regret later in life. You wouldn't do that now to anyone, would you?' As I thought about her question I did realise that indeed I was a different person than I was when I was 12, but that memory was secreted away in what Carl Jung called the 'Shadow'. (2, 3, 4) When I recognised that trait in someone else it would unconsciously get my hackles raised, even though I had never attributed that behaviour to something I did in my past. Interestingly the following day in class it was as if my classmate had been in the therapy session with me, because we never had conflict again.

However there still was a lingering feeling of guilt for my insensitive remarks that I said to my friend when I was 12 years old. It really wasn't all that terrible in retrospect but it felt terrible to me when I was in my early 20s and trying to be a caring adult.

This began another series of debates with my therapist that started when she tried to console me by saying 'At that time you did the best you could and in fact everyone is doing the best they can'. I
completely disagreed and over the course of 4-5 sessions with her I argued that I should have done better. She would say to me ‘How could you have done better?’

After a few sessions I realised that I needed to go through all my prior experiences to understand what I understood at that time. I simply couldn’t know what I had learned in my early 20s, when I was 12 years old. All the experiences I had and the experiences of others have taken us to where we are at the current moment. I had one last gasp effort to win the debate and said ‘Well if that is the best I could have done, then that is pretty sad’. She paused and then replied heart-fully to me with ‘Yes it is, but that is how we learn and grow’. I then stopped my internal judgment and felt my heart open up with compassion for myself and others.

For me it is all about what we leave for others during these brief magically moments we are alive, it is about trying to have compassion for my shadow and that of others, and realising that we are all doing the best we can. By bringing these insights into the clinical encounter with kindness, compassion, and caring then our patients can feel safe and we can focus on our patient’s optimal wellbeing and better channel our healing energy.

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About

Charles L. Blum, DC is in private practice Santa Monica, California and past president of SOTO – USA, now their research chair. Adjunct research faculty at Cleveland Chiropractic College, associate faculty at Southern California University of Health Sciences and Palmer College of Chiropractic West teaching the SOT Elective. Dr. Blum is a Certified SOT Cranial Practitioner, and on the peer review board of the Journal of Craniomandibular and Sleep Practice (CRANIO), Association of Chiropractic College Conference Peer Review Committee, and Journal of Chiropractic Medicine. He has lectured nationally and internationally, has written various SOT related texts, compiled SOT and cranial related research, and has extensively published in multiple peer reviewed indexed journals and at research conferences from 1984 to the present.

Editor’s note

This theme will continue in the Journal over the months to come. We are grateful to Dr Blum for sharing his personal experiences.