

Shelter for the Spirit

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TO: House Committee on Behavioral Health

Chair: Tawna Sanchez

FROM: Rev. Theresa Gevurtz, MDiv.

RE: Testimony in Opposition to House Bill 2493

Chair Sanchez and members of the committee, my name is Rev. Theresa "Rivka" Gevurtz. I am an ordained interfaith minister, chaplain, spiritual director, and also a Reiki practitioner. I am writing to urge you to vote no on HB 2493. This bill is not only exceedingly vague and broad, but would, in my opinion, represent a dangerous overreach by the legislative and medical establishments to regulate spiritual practice. This breach blatantly oversteps the separation of church and state by directing the OR Health Licensing Office to establish and maintain a "voluntary" alternative practitioner registry of individuals who provide alternative well-being care. While it says voluntary, this bill would require practitioners to pay fees and be subject to fines for practices that are not medical in nature. Indeed, not all forms of "well-being" are within the scope of medicine or mental health.

Specifically, Section 1, Article 2 (a) (B) states "The application of techniques and intervention such as energy work, hypnotherapy, life coaching, philosophically based disciplines and spiritually based disciplines (bold and italics, mine) relevant to the particular approach of the registered alternative provider to support change in emotional, relationship or attitudinal conflicts or to modify behavior that interferes with effective emotional, social, relationship, health, work or spiritual functioning of the individual or group of individuals to whom the alternative therapy or care is provided.

I find it troubling that this broad listing of activities would be lumped together, in general, but what I wish to speak to is the intersection of energy work and spirituality. To begin with, there are many forms of energy work, certainly not all equivalent in scope or philosophy. I have been practicing Reiki since 1992 and during that time I have seen much misunderstanding and misinformation put forth about it. To be clear, Reiki is a spiritual practice not dissimilar to meditation. Like meditation, Reiki can provide a sense of peace and calm, allowing a person to better cope with what challenges they face. While it can complement medical or mental health care it should not be categorized as either. Most of us do not presume that prayer replaces those clinical methodologies. But Reiki, like prayer, can facilitate a person's ability to access hope, which in turn has been witnessed to cause miracles that defy science.

I'd like to share a couple of examples. Before I became a practitioner myself, I worked in an interfaith palliative residence for People with AIDS, in the 1980s. At a time when that pandemic was an assured death sentence, I witnessed those patients who received the support of Reiki to have had a much more peaceful dying process

than those who did not. They reported that the use of Reiki helped them cope with the effects of the drug therapies and provided them with a peacefulness which allowed them the clarity to come to terms with their impending deaths.

Much more recently, I was supporting a family in my capacity as a hospital chaplain. For this family, as for many people, Reiki was their only form of spiritual practice and belief. While the patient, (a young mother who had been in a terrible car accident), was being triaged, the mother of the patient asked for my support to meet their spiritual needs. The mother was a Reiki practitioner and asked for my assistance in this moment of uncertainty. While I provided a ministry of presence, she prayerfully utilized her Reiki skills in hope of her daughter's survival and that the doctors would be successful in caring for her daughter. This was no different than witnessing a patient or parent pray or meditate. Reiki was the spiritual resource which brought hope and healing to this family.

Unlike some of the modalities listed in the bill, the National Institute of Health has determined and states on their NIH/NCCIH website that, "Reiki hasn't been shown to have any harmful effects."

The inclusion of spiritually based disciplines within this categorization is genuinely concerning. A broad reading of this bill could also be applied to pastoral care and spiritual direction, which rightly are under the auspices of ministry. Would this body presume to regulate as mental health that which has been under the purview of spirituality and religion for centuries? I would hope not.

As a spiritual director, I may sit in conversation for an hour with a client in a way that might look like that of a mental health practitioner, but which is quite different in actuality. We are discussing that person's experience of the Divine in their life and how that informs their meaning making. We discuss different types of spiritual practices which might be useful to them, ranging from meditation to labyrinth walking to reading scripture, to Reiki. Spiritual directors do not diagnose (and neither would I as a Reiki practitioner.) Indeed, we refer clients to mental health professionals if something is outside the scope of spiritual care. The Oregon Health Licensing Office does not regulate me as a minister, nor do they regulate any other rabbi or priest. They cannot and should not be regulating what specific spiritual practices Oregon citizens utilize.

I urge this committee to oppose House Bill 2493.