Assessing the Effects of Relaxation Guided Imagery on Maternal Stress and Cancer
The Spirituality of Feeling: An Interview With Michael Jawer
Michael Jawer is coauthor of The Spiritual Anatomy of Emotion (Park Street Press, 2009) and has written extensively on a variety of subjects for trade and professional associations and for the US government. Jawer has spent the past decade exploring the physiological underpinnings of feeling, how it may underlie consciousness, how various individuals process feelings, and whether that processing plays a role in psychosomatic conditions such as migraine headaches, synesthesia, chronic fatigue, and posttraumatic stress disorder (PTSD). Mr Jawer’s collaborator and medical editor is Marc Micozzi, MD, PhD, adjunct professor of physiology and biophysics at the Georgetown University School of Medicine, Washington DC, and editor of the first US textbook devoted to complementary medicine (Elsevier, 1996).

Advances: Please tell us about your background and how you became interested in mind-body medicine.

Mr Jawer: My interest in mind-body medicine was kindled in the early 1990s. I was working for the Building Owners and Managers Association, which was helping the US Environmental Protection Agency develop guidance on preventing so-called “sick buildings.” Your readers may be familiar with sick building syndrome.

The tricky thing about sick building syndrome is that when it’s alleged in any particular building, the question that invariably crops up is how much of the situation is due to the built environment—things you can readily identify mechanically and so on—and how much is due to the nature of the individuals who are being affected. In almost all cases, a few people in a given building are affected, not an entire building population.

As I interviewed people who believed they had been made ill by their workplace environment, I began to suspect that what they were reporting wasn’t based entirely on external factors. Several individuals related to me that they had long been sensitive to various things: smells, sounds, lights, video display terminals, even appliances in their homes. Some of them also confided that they’d had apparitional experiences and had for a long time. It could easily be said that these people were hypochondriacs or had an overactive imagination, but what I suspected was that they might have an environmental sensitivity threshold much lower than the rest of us.

In order to investigate this, around 1995, I started working on a survey to identify the factors that might be involved in extraordinary forms of sensitivity. This was completely on the side and not connected with my professional endeavors. One of the people who helped me was William Roll, PhD, a psychology professor at the State University of West Georgia, Carrollton, who’s well known as a parapsychologist. Our idea was to question, in a systematic way, the people I’d interviewed who claimed to be environmentally sensitive. In addition to Dr Roll, several environmental physicians helped me to refine the survey. The National Capital Area Skeptics, an organization in the Washington, DC area, was open-minded enough to take a look at the project, and they agreed to offer up a control group, so we could compare and contrast the responses we got from the sensitive group and from the controls. The results of this survey are what led to the book Dr Marc Micozzi and I have written, The Spiritual Anatomy of Emotion, which delves into emotion, environmental sensitivity, and body mind connectedness.

Advances: What do you mean by the spiritual anatomy of emotion, and why did you and Dr Micozzi decide to write the book?

Mr Jawer: The title is intended to convey the key elements that intersect in the book. We’re looking at anatomy, physiology, and neurobiology. We use the word anatomy as shorthand for those other disciplines. We examine what’s happening in the brain and the rest of the body when people feel, when they emote, or when they don’t emote and they don’t express their feelings, even though they are in fact feeling something. The spiritual side is the empathetic connections between people and how people feel moved to express who they are or what they’re feeling.

As to why we decided to write the book, when we began our collaboration about 7 years ago we were aware that science was making progress on understanding many incompletely understood perceptions and conditions. Take synesthesia, the term used to describe conjoined or overlapping senses, such as tasting a shape or seeing a sound. For hundreds of years, science wasn’t sure that synesthesia was anything more than a poetic or a metaphorical way of expressing things. With advances in brain imaging technologies, such as functional magnetic resonance imaging, it has become clear that people who are synesthetes actually live these perceptions.

It’s the same with hypnosis. It’s not just a game or a trick. Certain people are just more highly suggestible. Likewise, not too long ago chronic fatigue syndrome was derided as the “yuppie flu” until the US Centers for Disease Control conducted a
landmark study that, in a very meticulous way, documented that there is very likely a genetic predisposition among certain people to develop chronic fatigue syndrome. It has to do with the hypothalamic-pituitary-adrenal axis, which is basically the body’s stress-handling system. When it becomes overloaded, people who are genetically predisposed contract this illness.

We thought it was time to consider whether anomalous perceptions may have a physiological basis in the same way these other conditions do.

**Advances:** What in your training formed the basis for your interest in the mind-body connection between environmental sensitivity and apparitional experiences?

**Mr Jawer:** It’s been a circuitous route. As I mentioned, I came to my fascination with the overlap between environmental sensitivity and apparitional perceptions via my work with the office building industry. In my discussions with people who believed they’d been affected by poor indoor air quality, I started to see some commonalities and those commonalities intrigued me.

**Advances:** How did you meet Dr Micozzi, and how did you two decide to collaborate to flesh out your survey’s results in book form?

**Mr Jawer:** That’s an interesting story, and truly serendipitous. I happened upon Marc because I had his name in my database, and I was looking through it as a favor to a friend of mine who had some questions about alternative medical treatment available in the Philadelphia area. Marc then was head of the Myrna Brind Center for Integrative Medicine at Thomas Jefferson University Hospital. At the time, I was far enough along on the book project that I had compiled a fairly extensive database of people who were knowledgeable about subjects that were germane to what I was studying. I contacted him, and in the course of conversation, we started discussing my research interest. He said, “Oh, really?” It progressed from there.

**Advances:** Did you have any idea that your professional life was going to take this new direction?

**Mr Jawer:** None whatsoever. But there’s the old adage about the prepared mind. I’ve always had an interest in things that are unexplained, that need to have some additional investigation, and apparitional perceptions are among the most intriguing and perplexing that people have. It clearly gets to something at the core of our humanity, and it did surprise me that in the course of investigating sick building syndrome, I found that people were reporting environmental sensitivities and anomalous perceptions at the same time.

**Advances:** In your research, how have you and Dr Micozzi found that spirituality fits into the mind-body continuum?

**Mr Jawer:** Your readers are no doubt aware that there’s a large and growing body of research on the physiological basis of emotion. Our book became an exploration of the connection between feelings and sensitivities, and ultimately, spirituality because spirituality is all about feeling. Soul, if you will, is all about feeling.

Let’s look at it linguistically. If words are clues to concepts, perhaps spirituality or the soul has to do with the quality of feeling we recognize in ourselves and in others. For example, when listening to music that’s described as soulful, people will often say they’re moved by it, that it has a certain “feel.” When people describe someone’s eyes as soulful, they’re saying they perceive a great deal of feeling in them. The soul or the spirit is a quality that’s inherent in human beings as feeling creatures.

There’s a study we mention in the book that is fascinating in this regard. It was done in 2006 in Israel. The researchers found that there appears to be a genetic predisposition among certain people to express their feelings by dancing. The dancers studied were found to possess variants of two particular genes whose activity has been linked to both spiritual experience and social communication. These genes appear to activate the brain chemicals serotonin and vasopressin. We might someday find a similar genetic foundation in other forms of artistic expression. Spirituality derives from feeling, and feeling is both emotional and physical.

**Advances:** You suggest in your book that feelings are intimately connected with the body. Can you explain what you mean by feelings?

**Mr Jawer:** We take our cue from author and philosopher Guy Murchie, *Song of the Sky*, Houghton Mifflin, 1954; *Seven Mysteries of Life*, Mariner Books, 1978) who enumerated 32 different categories of sensory perception. We call a subset of those sensory perceptions “feelings,” which may or may not be conscious. People tend not to be aware of these feelings unless something in the body is going wrong or a bodily function is exaggerated for some reason. For example, a feeling can be an awareness of pressure and vibration on your skin or in the air around you. It can also be a sense of weight or balance. Feelings can be related to physiological things like appetite or thirst. People say, “I feel hungry,” “I feel thirsty,” or “I feel drowsy.” It’s these types of rudimentary, bodily anchored sensations that we categorize as feelings. We also categorize as feelings such sensations as pleasure, pain, a sense of time passing, and more intuitive experiences: for example, the feelings engendered by art and music. We experience all of these feelings all the time. They’re autonomic.
Also, and I think this is important, a given feeling may occur so fleetingly that it never registers. But it happens nevertheless, and it’s based in the body. That’s the key to our thesis: the feelings are always there, even if they’re out of view.

An emotion, on the other hand, is a feeling that makes itself known and tends toward expression—by laughing, crying, shouting, jumping, dancing, fighting, fleeing, hugging—you get the idea. Actually, most of what people generally consider feelings we would characterize as emotions. We draw from the work of energy therapy pioneers such as psychiatrists Wilhelm Reich, Alexander Lowen, and John Pierrakos in this way.

We also believe that the mind and the body are more than connected; they’re unified. In our book, we refer to “bodymind,” rather than “body-mind,” because, as disciplines like psychoneuroimmunology and neurogastroenterology are evidencing, all of the systems and elements of the body are in constant communication. Our nervous system, our endocrine system, our immune system, our psyche and soma are all communicating continuously. We propose that feelings allow us to mind the body. That’s a phrase borrowed from Antonio Damasio, the well-known neuroscientist.

**Advances**: How do you see practitioners incorporating what you explore in your book, especially the part about feelings?

**Mr Jawer**: It’s the part of the book that deals with the concept of energy. I suppose, that may provide a good deal of information, especially for physicians trained in the Western medical tradition. We differentiate types of people based on what we call boundaries. This is a concept taken from Dr Ernest Hartmann, a psychiatry professor at Tufts University in Boston. During his research on the physiology of dreams, he came to categorize people according to whether they had “thin boundaries,” “thick boundaries,” or something in between. Thin-boundary people, he found, have much more colorful and vivid dreams and are more likely to experience nightmares. And we believe they’re also more environmentally sensitive. In other words, thin-boundary people are going to be more likely to present certain kinds of conditions; for example, fibromyalgia, migraine headache, and PTSD. We’ll amplify this hypothesis in our next book. The bottom line is that we’re trying in this book and the next one to enable people to recognize what makes a thin-boundary person and what makes a thick-boundary person and appreciate what’s going on to contribute to the particular somatic complaints each may have.

**Advances**: Some have said your discussion of anomalous phenomena is the most controversial aspect of your research. Do you agree?

**Mr Jawer**: It depends on who’s saying it’s controversial. Our view is that it’s not necessarily controversial as much as it’s a new way, a novel way, of looking at things. Let’s acknowledge that nothing in mind-body medicine wasn’t controversial at one time—and maybe still is. Science progresses and, as I said before, it wasn’t that long ago that science dismissed hypnosis, synesthesia, chronic fatigue syndrome. What we’re proposing is to take a fresh look at these sensitivities that people have and relate them to the rapidly progressing understanding of emotion that mainstream science is developing. If a significant segment of the population is reporting mystical, spiritual, or anomalous perceptions and they’re puzzled by that, let’s take that seriously and try and get a handle on it. It’s really nothing more or less than a push for respect for what has been termed the paranormal. We argue that paranormal perceptions are not—in most cases—pathological. They are often experienced by well-adjusted, spiritually questing people. They ought not to be marginalized.

We open one of our book’s chapters with a quote from a letter to *Newsweek* about an article that appeared in the magazine in 2004 on the paranormal. It reads, “I am a psychic. This is not something I’ve ever looked for. I’ve suppressed and denied it. And, I’ve argued about it endlessly, but only with myself. I am convinced that there is a silent group of psychics in our culture, ridiculed and confused, lacking reproducible data and waiting to come into the spotlight.”

In that same chapter, we also quote Nietzsche: “Those who were seen dancing were thought to be insane by those who could not hear the music.” It’s a remarkable quote, and it lends itself to the idea that some people are manifestly more sensitive than others. They’re the ones who are so sensitive to everyday sensory stimuli that they get more easily overwhelmed. They’re the ones who have migraines, allergies, chronic fatigue, chronic pain, irritable bowel syndrome, PTSD, and so forth. And many of these people also perceive presences and have anomalous or psychic experiences.

There is probably a mix of nature and nurture underlying this. We have tried to document a great deal of evidence that these experiences have a common basis, specifically in the way we process feelings—as thick- or thin-boundary people. So if we look at these differences and we take seriously what highly sensitive people are saying and have been saying for generations, we stand to learn a great deal. After all, asking these questions in an open-minded way is what science is all about.

**Advances**: In addition to writing *The Spiritual Anatomy of Emotion*, you’ve founded the Emotional Gateway Research Center. What is it, and does it figure in to any future projects you may have on the horizon?
Mr Jawer: The Emotional Gateway Research Center (www.emotiongateway.com) is really my attempt to brand the research I’ve been working on for the past 15 years on the neurobiology of emotion and its value as a “gateway” toward improved understanding of personality differences. It’s intended to capture that pursuit as much as the title *The Spiritual Anatomy of Emotion* is intended to capture the essence of the book.

Dr Micozzi and I intend to continue this exploration. Toward that end, we have another book on the horizon. The working title is *Mind Type*. It delves more deeply into how having thicker or thinner boundaries relates to different types of health challenges. We’re going to focus on the individual’s bodymind type—the biological underpinning of personality—more than the particular illness or the particular symptoms that person has. We’ll then suggest which alternative or complementary therapies may be most effective for the different kinds of people. This is a missing link in integrative medicine right now, and our hope is that the book will represent something of a breakthrough, in addition to being more pragmatic and more self-help-oriented than our current book.