



# The Effect of Falun Gong on Health and Wellness as Perceived by Falun Gong Practitioners

## Executive Summary of Research Findings

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<b>Acknowledgements .....</b>	<b>1</b>
<b>I. Executive Summary .....</b>	<b>2</b>
Introduction .....	2
Aims and Scope of the Research .....	3
Literature Review, Research Design, and Methodology .....	3
What Is Falun Gong? .....	5
Framework for the Research .....	5
<b>II. Summary of Findings and Recommendations .....</b>	<b>6</b>
Summary of Findings .....	6
Strengths and Limitations of the Research .....	11
Summary of Recommendations .....	12
Conclusion .....	14

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The researcher wishes to inform readers that a longitudinal study on the health-wellness effects of Falun Gong as perceived by Falun Gong practitioners is a follow-up from this research. Interested individuals should contact the researcher directly for more details.

This is an executive summary providing an overview of the research and its key findings and recommendations. For more information and detailed references, please refer to the doctoral thesis or contact the researcher via email: [margaret.lau@alumni.utoronto.ca](mailto:margaret.lau@alumni.utoronto.ca).

## **I. Executive Summary**

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We must close our eyes and invoke a new manner of seeing, a wakefulness that is the birthright of us all, though few put it to use. (Plotinus, 1975, p. 42)

This executive summary includes an introduction to the research, the aims and scope of the research, five main themes from a comprehensive literature review, the research design and methodology used in this research, the key findings, its strengths and limitations, and an overview of five recommendations.

### **Introduction**

Health and wellness is important to everyone. The promotion of mind-body, health-wellness practices demand on-going consideration by health and counseling professionals as more individuals are seeking alternative and Eastern spiritual meditative practices for their health and wellness needs. Falun Gong presents itself as an ancient Eastern meditative and spiritual cultivation practice that is gaining popularity worldwide, although knowledge of its health-wellness benefits and potential use in the counseling and other helping professions is still lacking. There is a dearth of studies investigating the health-wellness effects of Falun Gong and the demographic profile (excluding mainland China) of Falun Gong practitioners.

This executive summary provides an overview of the findings for this first Australian-based research on the demographic profile of Falun Gong practitioners and the effect of Falun Gong on health and wellness as perceived by Falun Gong practitioners, based on the self-report survey and not corroborated by medical reports. The research investigates the health-wellness effects of Falun Gong on practitioners as compared with non-Falun Gong individuals. This research is a partial fulfillment for the requirements for the Doctor of Counseling degree at the University of South Australia, Australia. Readers, particularly counselors and other health professionals, are encouraged to consider these findings with “a new manner of seeing.”

Health refers to one’s mental or physical condition and being in a state free of illness or

injury. Wellness is defined as the optimal state of physical, psychological, social, economical, and spiritual health for individuals and groups. The two terms used in the research embody the holistic meanings of the definitions. “Spirituality” and “religion” are referred to as spirituality/religion.

### **Aims and Scope of the Research**

The primary aim of this research is to investigate the health-wellness effects of Falun Gong on individuals who practice Falun Gong as compared with those who do not. The secondary aims are to:

- Obtain an international demographic profile of Falun Gong practitioners; and
- Ascertain any differences or similarities between Falun Gong and non-Falun Gong individuals in terms of their demographic profile and health-wellness statuses.

This Australian-based research investigates whether individuals who practice Falun Gong have better health and wellness than those who do not. It is a pioneering study and is the first such doctoral study that involves a comparison group and investigates whether individuals who practice Falun Gong have better health and wellness than those who do not. Other studies on Falun Gong did not have a health-wellness focus. This research does not attempt to measure spirituality/religion or the causality between Falun Gong and health-wellness. It serves to present another perspective of the link between spirituality/religion and health in its focus on Falun Gong (perceived by many as a new religion/spiritual practice) and its possible health-wellness effects.

### **Literature Review, Research Design, and Methodology**

A lack of evidence-based literature on the health-wellness effects of Falun Gong required a search for literature and evidence on meditation and similar practices for comparison to ascertain the benefits and effects of these other mind-body, self-improvement, and self-help practices. Numerous authors noted the emerging popularity of Eastern meditative spiritual practices in the West and that many individuals turned to meditation and Eastern spiritual practices because these practices harmonize with their values, beliefs, attitudes, and holistic wellness lifestyles. Five main themes emerged from the literature review:

- The recognition of the therapeutic potential and wide-ranging benefits of meditation and Eastern spiritual practices by health professionals and researchers;
- The integration and potential diversity in the use of meditation and Eastern spiritual practices in counseling and other health care services;
- Meditation and Eastern spiritual practices as a self-regulation strategy, a self-help, self-improvement, and self-care practice for individuals to address their personal needs for physical and emotional health and wellness;
- The health-wellness effects of Falun Gong, meditation, and other Eastern spiritual and meditative movement practices such as yoga, tai chi, and *qigong*; and
- The positive link between spirituality/religion and health.

This research was designed as a descriptive cross-sectional online survey with a mixed methods approach, which allows comparison between two groups of respondents. The survey method is frequently used in social sciences and counseling research because it is a simple, inexpensive method of data collection, convenient, and easy to administer via the Internet. The online survey was chosen because it was deemed the most effective way to reach out to Falun Gong respondents globally. Two anonymous online surveys were conducted: the Health and Wellness Survey One (HW1) for Falun Gong respondents and the Health and Wellness Survey Two (HW2) for non-Falun Gong respondents. Both surveys comprised self-designed survey questions and the SF-36 Health Survey. The self-report survey provided a valuable demographic profile and other information such as the attitudes, behaviors, values, beliefs, and the health-wellness status of respondents. Self-reporting is pertinent in counseling research since clients' thoughts and feelings are the central focus in therapeutic interactions, in the same way the respondents' perceptions of their own health-wellness status are important, relevant, and valuable to the counselor-researcher. On balancing the benefits and limitations, the self-report method was used to good effect.

The research process comprised three phases: Development phase, data collection phase, and data processing phase, which included analysis, interpretation, and presentation of the findings. Phase One involved framing the research question, selecting methodology and design, designing survey questions, implementing the pilot

study, commencing the literature review, and applying for ethics approval with the University's Human Research Ethics Committee (HREC) to conduct this research. Phase Two consisted of data collection. Phase Three involved data processing, reporting, analysis, interpretation, discussion, and presentation of the findings.

### **What Is Falun Gong?**

Falun Gong, also known as Falun Dafa, is an ancient Chinese spiritual cultivation system for the overall improvement of body, mind, and spirit. It is based on the principles of Truthfulness, Compassion, and Forbearance, and has two distinct components: cultivating the heart and mind and practicing the five simple exercises. Since July 1999, Falun Gong was banned in China due to its popularity, and the severe persecution and inhumane torture of Falun Gong practitioners began. To date, the confirmed death toll is nearly 3500, with tens of thousands yet to be confirmed. Two Canadians, human rights lawyer David Matas Esq. and the Hon David Kilgour, former Secretary of State for Asia Pacific and Member of Parliament (Retired), investigated and compiled a report into the allegations of forcible organ harvesting from Falun Gong practitioners held as prisoners of conscience in mainland China. For more information, visit the following websites: <http://www.faluninfo.net/>, [www.falundafa.org](http://www.falundafa.org), [www.clearwisdom.net](http://www.clearwisdom.net), and <http://organharvestinvestigation.net/>.

### **Framework for the Research**

This research is based on the premise that there is a link between spirituality/religion and health and that this connection plays a positive and beneficial role in the health-wellness of individuals. Spiritual/religious beliefs and practices have a lasting impact on health and wellness. Spiritual/religious individuals are more resilient: They tend to live longer, have healthier lifestyles, better coping skills, stronger immune systems, and possess a more optimistic view of their health-wellness status. Various health professionals have pioneered the integration of spirituality/religion and Eastern meditative practices with counseling and health care. In fact, the self-healing benefits and the health-wellness promoting potential of Falun Gong is one of the reasons for its popularity.

## **II. Summary of Findings and Recommendations**

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### **Summary of Findings**

This section features the findings for the two parts of this research: Part A, the demographic profile of Falun Gong and non-Falun Gong respondents, and Part B, the investigation of the health-wellness effects of Falun Gong as perceived by Falun Gong respondents. The findings were organized into three sections: demographic profile, medical history, and health-wellness status of Falun Gong and non-Falun Gong respondents; respondents' qualitative responses; and comparison summaries across the two groups. Data from the findings was individually transferred and analyzed with the Statistical Package for Social Sciences (SPSS Version 15) software program. Data was reported and analyzed using descriptive statistics and a three-level categorizing or clustering procedure. This research produced three key findings:

1. Falun Gong and non-Falun Gong respondents share many similarities in their demographic profiles;
2. There were noticeable differences in the medical history and lifestyle habits between the two groups of respondents; and
3. Falun Gong respondents reported better health outcomes and more positive self-perceptions of their health-wellness status than non-Falun Gong respondents did.

Readers must bear in mind that this is an executive summary of findings of the research and that greater knowledge of and insight into the teachings and practice of Falun Gong can be obtained through reading the teachings of Falun Gong.

### **Key Finding 1: Falun Gong and non-Falun Gong respondents share many similarities in their demographic profiles.**

The demographic profile of the respondents was presented across their gender, age range, relationship status, ethnicity, country of birth and residence, first language, highest education level, and occupation. The total sample size (n=590) comprised 360 Falun Gong respondents and 230 non-Falun Gong respondents. The discrepancy in numbers between the two groups did not influence the findings of this research. The

Falun Gong and non-Falun Gong respondents were mainly females, married, from diverse ethnic backgrounds, with tertiary education qualifications, and a professional career. The average age range of both groups was from 30 to 39 years and from 40 to 49 years, closer to the 40-49 years age range. This is not a definitive average age, but it indicates that the average age of respondents is below 50, younger than those in the mainland China surveys<sup>1</sup>, which reported that over 62% of the total sample size from the five health surveys, was above 50 years old.

Findings also showed that Falun Gong (FG) respondents were mainly Chinese/Asians whose first language is not English, with most of them residing in Australia and New Zealand, or Canada and the USA. Likewise, most non-Falun Gong (NFG) respondents resided in Australia and New Zealand or Canada and the USA, but they were more likely to have English as their first language. Table 1 presents a summary of the demographic profile of the two groups, highlighting the similarities between them.

**Table 1:** Summary of demographic profile of the two groups

Summary of Findings Between FG Respondents and NFG Respondents	
<b>Gender</b>	There were more females than males in both groups: FG respondents: Females (n=206, 57%) and Males: (n=151, 42%) NFG respondents: Females (n=146, 63%) and Males: (n=81, 35%)
<b>Age Range</b>	The mean between the two groups were 3.72 and 3.74 for FG and NFG respondents respectively. The typical age of respondents would be in the 30s and 40s.
<b>Relationship Status</b>	Both groups comprised mostly married individuals or those never married. FG respondents: Mostly married 61% (n=218); Never married 24% (n=85) NFG respondents: Mostly married 48%; (n=110); Never married 31%; (n=72)
<b>Ethnicity</b>	Diverse and wide-ranging for both groups: A total of 37 and 33 different ethnicities were identified for FG and NFG respondents respectively.
<b>Country of Birth</b>	Diverse and wide-ranging for both groups: 45 different countries of birth were identified by FG respondents; 37 by NFG respondents. <u>FG Respondents:</u> Highest: Born in mainland China (28%) Second: Born in Asia (24%) Third: Born in Australia & NZ (19%) <u>NFG Respondents:</u> Highest: Born in Australia & NZ (40%) Second: Born in Asia (21%) Third: Born in mainland China (10.1%)
<b>Country of Residence</b>	More than three-quarters of FG and NFG respondents resided in two regions of the world: Australia and New Zealand; Canada and the USA.

<sup>1</sup> For information on mainland China surveys, visit this webpage: <http://www.falunau.org/healthsurvey.htm>

Summary of Findings Between FG Respondents and NFG Respondents							
	<table border="0"> <tr> <td>Highest: Australia &amp; NZ (43%)</td> <td>Highest: Australia &amp; NZ (66%)</td> </tr> <tr> <td>Second: Canada &amp; US (32%)</td> <td>Second: Canada &amp; US (15%)</td> </tr> <tr> <td>Third: Asia (14%)</td> <td>Third: Asia (11.5%)</td> </tr> </table>	Highest: Australia & NZ (43%)	Highest: Australia & NZ (66%)	Second: Canada & US (32%)	Second: Canada & US (15%)	Third: Asia (14%)	Third: Asia (11.5%)
Highest: Australia & NZ (43%)	Highest: Australia & NZ (66%)						
Second: Canada & US (32%)	Second: Canada & US (15%)						
Third: Asia (14%)	Third: Asia (11.5%)						
<b>English as the First Language</b>	Nearly two-thirds (63%) of FG respondents reported English is not their first language whereas more than half (57%) NFG respondents reported that English is their first language.						
<b>Highest Education</b>	The mode for both groups was an undergraduate degree: 33% for FG respondents and 34% for NFG respondents. However, 30% of FG respondents (n=107) have Master's or PhD/Doctorate compared to 15.7% (n=36) for NFG respondents.						
<b>Occupation: Top 3 Categories</b>	Respondents from both groups were well educated with business/finance or computer information technology as their most popular occupation. Category 6 (Arts, media, social science, and miscellaneous professionals) was equally popular for FG respondents.						

**Key Finding 2: There were noticeable differences in the medical history and lifestyle habits between Falun Gong and non-Falun Gong respondents.**

The Falun Gong respondents had very healthy lifestyle habits and experienced better health-wellness than non-Falun Gong respondents. Most of them did not visit medical practitioners, took no medications, and spent very little money on medical and health expenses. They reported better lifestyle habits: Nearly all were non-smokers, did not drink alcohol, nor use recreational drugs. Whereas non-Falun Gong respondents were healthy with moderate lifestyle habits, but they consulted medical practitioners more often, took more medication, remedies, and supplements, and spent more money on medical expenses and health supplements than Falun Gong respondents.

Non-Falun Gong respondents had more medical conditions than Falun Gong respondents: They reported 47 instances of two or multiple listings of medical conditions compared to three cases from FG respondents. Nearly 50% of those non-Falun Gong respondents who consumed alcohol or used recreational drugs reported no plans to stop. Table 2 displays a summary of findings reflecting the observed differences between the two groups.

**Table 2:** Summary of Findings - Medical History and Lifestyle Habits

Items	Summary of Findings Between FG Respondents and NFG Respondents
<b>Doctor Visit</b>	<ul style="list-style-type: none"> <li>88% of FG respondents (n=316) did NOT consult a medical practitioner compared with 28% of non-FG respondents (n=65).</li> <li>8.3% (n=30) of FG respondents visited a medical practitioner 1-3 times compared to 55% of non-FG respondents (n=127).</li> </ul>
<b>Reason for Visit</b>	<ul style="list-style-type: none"> <li>FG respondents reported fewer medical conditions and visited a medical practitioner less frequently than NFG respondents.</li> <li>10% of FG respondents (n=37) consulted medical practitioners compared to 68% of NFG respondents (n=156).</li> <li>2.8% FG respondents (n=10) visited a medical practitioner for minor health issues compared to 32% NFG respondents (n=73).</li> <li>No FG respondent visited a medical practitioner for severe non-life threatening or life-threatening illness compared to 5.3% of NFG respondents (n=12).</li> </ul>
<b>Use of Medication and Supplements</b>	<ul style="list-style-type: none"> <li>95% of FG respondents (n=341) did NOT use any form of medication, remedies, multivitamins, or health supplements.</li> <li>Nearly two-thirds of NFG respondents reported using medication, remedies, and supplements. Most of them used a combination of medication and remedies.</li> </ul>
<b>Medical/Health Expenses</b>	<ul style="list-style-type: none"> <li>8% FG respondents (n=30) reported spending money on medical and health expenses while 92% (n=330) did NOT spend any money, whereas</li> <li>67% NFG respondents (n=153) spent money on medical and health expenses.</li> </ul>
<b>Alcohol Consumption</b>	<ul style="list-style-type: none"> <li>97% of FG respondents (n=349) reported NOT consuming any alcohol compared with 37% of NFG respondents (n=85)</li> <li>60% of NFG respondents (n=138) reported consuming alcohol.</li> </ul>
<b>Recreational Drug Use</b>	<ul style="list-style-type: none"> <li>99.7% of FG respondents and 92% NFG respondents reported NOT taking any recreational drugs. One FG respondent who reported drug use was not using recreational drugs. Half of those NFG respondents who took recreational drugs had no plans to stop.</li> </ul>

**Key Finding 3: Falun Gong respondents reported better health outcomes and more positive self-perceptions of their health-wellness status than non-Falun Gong respondents.**

Findings from Part B of this research revealed differences between individuals who practice Falun Gong and those who do not. Falun Gong respondents reported better health-wellness outcomes. They were more likely to report excellent health, display more optimistic self-perceptions, and have a more positive regard for their health-wellness status than non-Falun Gong respondents. Pearson chi-square calculations were done for the SF-36 items to verify whether the differences between the two groups were

statistically significant or not. The chi-square results indicated that the differences between Falun Gong and non-Falun Gong respondents were all statistically significant at  $p < 0.001$ . There is a one-in-a-thousand probability that the difference in their health-wellness status is due to chance alone, which suggests that Falun Gong could be the reason for the health-wellness differences between Falun Gong and non-Falun Gong respondents. However, findings cannot ascertain a causal link between Falun Gong and a health-wellness effect. It is beyond the aim and scope of this research to examine other variables or factors that could cause a health-wellness difference between the two groups. However, it can be suggested that Falun Gong has a positive health-wellness effect and that the practice elicits a more positive self-perceived health-wellness status for Falun Gong respondents. Table 3 highlights the differences between the two groups for four of the SF-36 items.

**Table 3:** Highlights of differences between the two groups for the SF-36 Health Survey

Items	FG Respondents	NFG Respondents
<b>General Health Status</b>	Excellent=53% (n=192)	Excellent=10% (n=24)
<b>Positive Feelings &amp; How Things Had Been</b>	Full of Life: 81% all or most of the time Calm/Peaceful: 83% all or most of the time A Lot of Energy: 82% all or most of the time Happy Person: 84% all or most of the time	Full of Life: 55% all or most of the time Calm/Peaceful: 44% all or most of the time A Lot of Energy: 44% all or most of the time Happy Person: 64% all or most of the time
<b>Negative Feelings &amp; How Things Had Been</b>	Very Nervous: 86% None or little of the time Down in the Dumps: 73% None of the time Downhearted & Blue: 92% None or little of the time Worn-out: 87% None or little of the time Tired: 78% None or little of the time	Very Nervous: 71% None or little of the time Down in the Dumps: 49% None of the time Downhearted & Blue: 69% None or little of the time Worn-out: 43% None or little of the time Tired: 39% None or little of the time
<b>Perceptions of Their Health-Wellness Status</b>	87% and 90% reported <u>definitely false</u> for these two statements respectively. 1. "I seem to get sick a little easier than other people." 2. "I expect my health to get worse." 65% and 76% reported <u>definitely true</u> for these two statements respectively. 1. "I am as healthy as anybody I know" 2. "My health is excellent"	47% and 37% reported <u>definitely false</u> for these two statements respectively. 1. "I seem to get sick a little easier than other people." 2. "I expect my health to get worse." 31% and 19% reported <u>definitely true</u> for these two statements respectively. 1. "I am as healthy as anybody I know." 2. "My health is excellent."

Overall, Falun Gong respondents' self-perceived general health reports were excellent and much more positive than non-Falun Gong respondents.

**Strengths and Limitations of the Research**

This research has the following strengths:

- Australian-based Falun Gong research and the first with a global focus (excluding mainland China);
- International pilot study for research integrity;
- Adopted the mixed methods research approach often used in counseling and social sciences research;
- Efforts made to match Falun Gong with non-Falun Gong respondents to reduce variability, and additional endeavors undertaken to eliminate researcher bias;
- Use of technology to benefit the research process; and
- Reporting of all findings, including adverse, for authenticity and transparency.

The findings of this research should be considered within the context of its limitations.

Despite meticulous care and consideration, this research has limitations, which include:

- Possible selection bias of non-Falun Gong respondents that comprised family members, friends, or colleagues of Falun Gong respondents;
- Reliance on self-reports and self-assessment and the susceptibility of self-reports to conscious or unconscious misrepresentation by respondents;
- Issues arising from the use of the Internet-based survey, such as the researcher's difficulty to validate the authenticity of the self-reports, Internet security, technical and Internet access glitches (browser freeze, server crash, and double entries), possible interceptions of online survey responses, and database hacking;
- Respondents' computer literacy skills and proficiency with English; and
- The concern of whether or not the sample is representative of the target group.

Steps were taken to manage the risks although certain issues were beyond the control of the researcher. The researcher endeavored to maintain transparency throughout the entire research process. Conscious attempts were made at the onset in the choice of methodology and design, and all throughout the research process. Besides these efforts, the researcher held to the HREC's ethics requirements for the research and endeavored to emulate the Falun Gong qualities throughout.

## **Summary of Recommendations**

The recommendations arising from this research are categorized into five main themes: acquisition of knowledge, integration and best practice policy, future research, individual and public health-wellness promotion, a resource for individuals and health professionals. Five key recommendations are identified.

### **1. Have a working knowledge of Falun Gong and Falun Gong practitioners**

Counselors and other health professionals need to have a working knowledge and understanding of Falun Gong to achieve effective therapeutic interactions with individuals from multicultural backgrounds who practice Falun Gong. This will help to demystify Falun Gong and minimize misconceptions of individuals who practice it. Often barriers such as discomfort, ignorance, and lack of knowledge hinder health professionals' interactions with clients in terms of their spiritual beliefs and practices. Having a working knowledge of Falun Gong will help to facilitate a more culturally aware and spiritually appropriate counseling and health care service for individuals who may be practicing Falun Gong or other similar Eastern meditative movement practices.

### **2. Integrate Falun Gong with counseling and other health services**

Integration can be achieved with Falun Gong and non-Falun Gong clients in four ways:

- As an alternative self-help mind-body intervention strategy;
- As an adjunct to counseling and therapy;
- Having knowledge and understanding of Falun Gong; and
- Embodying Falun Gong principles of Truthfulness, Compassion, and Forbearance, and applying these qualities in therapeutic interactions.

Findings have indicated that Falun Gong respondents have very healthy lifestyle habits and seldom visit medical practitioners or require many other health services. However, for those Falun Gong practitioners who occasionally require some form of counseling or health services, techniques that involve cognition and rationalization of behavior, thought, and feeling patterns can be integrated into therapeutic interactions.

### **3. Promote Falun Gong in local community settings**

The third recommendation pertains to the health-wellness potential of Falun Gong, its health cost savings, and the provision of Falun Gong in community settings. Although health-wellness promotion is not the ultimate goal of the practice, Falun Gong can be encouraged in local community centers, like other meditative movement practices such as yoga, tai chi, and meditation, for individuals referred by health professionals or others seeking a self-help practice for overall mind-body spiritual health-wellness improvement. Findings indicated that many respondents who reported better health-wellness status were busy professionals in high-stress jobs like business/finance, computers technology, and the media. Falun Gong can be ideal for companies seeking to help their employees, as calm and healthy individuals are happier and more productive in the workplace.

### **4. Future Falun Gong health-wellness research**

Future Falun Gong studies can have a spirituality health-wellness focus and investigate any link between Falun Gong, spirituality, and health-wellness. Randomized controlled trials will be required to determine causality and, in particular, the basis for the kinds of health/wellness differences found in this research. This research has established a foundation for further and more in-depth, qualitative studies. A likely future research can focus on phenomenology and longitudinal studies, which considers age and gender differences, lived experiences of Falun Gong practitioners, and grounded theory research to explore the multi-dimensions of the health-wellness effects of Falun Gong. Future studies could include assessing the effects of the proposed six-step process.

### **5. A counseling or self-help resource: The six-step process**

The six-step process comprises: 1) Defining the problem or difficulty; 2) Externalizing feelings and thoughts; 3) Identifying presenting issues; 4) Cultivating wellness: assess and support; 5) Examining strategies and making plans; and 6) Achieving commitment to facilitate change. It is a synthesis of Carl Rogers' person-centered counseling skills, James & Gilliland's Crisis Intervention Model, blended with a working knowledge of Falun Gong. The six-step process offers a systematic approach and provides a logical

sequence for identifying and overcoming issues such as anxiety, fear, stress, and worries. Nevertheless, it is not a replacement or an alternative technique to the teachings and practice of Falun Gong for current and future Falun Gong practitioners.

## **Conclusion**

This executive summary presents an overview and the key findings of the research. The findings provided a demographic profile of Falun Gong respondents and found they are not unlike non-Falun Gong respondents. Falun Gong respondents are married with families, have tertiary education qualifications and hold occupations in society like other “normal law-abiding citizens,” with the exception of their spiritual beliefs and practice that offer them health-wellness benefits. Just as we all have different beliefs that make each one of us unique, findings indicated that Falun Gong respondents are no different from non-Falun Gong respondents. More significantly, this research helps to clarify many misconceptions about Falun Gong respondents that they might be demographically different and deviant from non-Falun Gong respondents.

Falun Gong respondents have better health-wellness status and are more likely to report excellent health-wellness status compared to non-Falun Gong respondents. They have more optimistic perceptions of their health than non-Falun Gong respondents. These are positive attributes that non-Falun Gong individuals can aspire to, with lessons learned from having a strong spiritual belief and faith in Falun Gong that offers health-wellness benefits and spiritual improvement. Findings have highlighted a positive link between Falun Gong and health-wellness although no causal relationship can be established. Findings and recommendations offer a resource for counselors and other health professionals to understand Falun Gong in its cultural, health, and healing contexts, and better equip them with a working knowledge and understanding to offer appropriate, effective, and sensitive support services to individuals who practice Falun Gong. This research hopes to encourage more individuals to think with a new perspective about Falun Gong and Falun Gong practitioners.

Words are things, and a small drop of ink falling like dew upon a thought produces that which makes thousands, perhaps millions, think. (Lord Byron, cited in *The Melody of the Heart*, Author Unknown, 1911, p. 113)