

EMOTIONAL FREEDOM TECHNIQUES (EFT)

(Gary H Craig, 19xx -)

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Brief history

Emotional Freedom Techniques (EFT) is the popular name for a therapeutic approach that combines the well proven techniques of exposure and cognitive restructuring with a crucial new component; namely simultaneous somatic stimulation. In EFT, this somatic stimulation takes the form of tapping certain electromagnetically sensitive points on the body while at the same time focusing conscious attention on the issue presented for therapy. The procedure is unconventional, yet frequently produces empirically demonstrated improvements with profound psychological and/or physiological consequences in only one session. It also often works where other approaches do not.

EFT was developed in the 1990s by Stanford engineer Gary Craig after a 40 year search to find the best tools for building self-confidence and emotional health. EFT is derived from Thought Field Therapy (TFT), developed in the 1980s by psychologist Roger Callahan. Craig not only simplified TFT, making it more accessible to the lay person, but he also made detailed instruction and thousands of case reports freely available on the internet for more than 10 years. And he supplemented these by 150 hours of low cost video recordings of client sessions and instruction, leading to a rapid rise in the approach's popular use worldwide.

EFT, TFT and many other similar techniques are classified under the general heading of Energy Psychology, which in turn forms part of the broader field of Energy Medicine ([Eden, 2008](#)). In common with traditional Chinese and Hindu/yogic medical practices (and indeed the medical practices of many ancient cultures closer to nature than we in the West), such techniques treat the mind/body as an 'energy system', and somatic stimulation is generally focused on points on the skin (acupoints) which coincide with the endpoints of acupuncture or acupressure 'meridians'. EFT thus has its roots in medical practices dating back more than 5,000 years.

Despite growing acceptance of acupuncture by the Western medical establishment in recent years, related techniques such as EFT have yet to be embraced to the same extent by mainstream practitioners. There are believed to be two main reasons for this. Firstly, EFT has to some extent become a victim of its own success in credibility terms over the last decade or so as wide application of the techniques has leapt ahead of scientific explanation and research evidence. And perhaps more importantly, the levels of success claimed for EFT in anecdotal reports can be difficult to believe when seen through the lens of conventional medical and psychotherapeutic experience, causing some practitioners to consider the claims exaggerated. Nevertheless, since EFT is non invasive and appears to have no known side effects in a clinical setting, increasing numbers of physicians, psychologists and psychotherapists worldwide are beginning to incorporate and integrate techniques such as EFT into their work ([Feinstein et al, 2006](#)), often with startling improvements in the speed, efficacy and durability of treatment. In common with acupuncture, potential applications include virtually the whole range of psychological and physiological disorders, including the amelioration/alleviation of chronic and acute pain and the symptoms and side effects of illness and its associated medical treatment. EFT is also used to good effect to treat limiting beliefs

associated with sports and business performance. The motto of EFT's founder, Gary Craig, is: "Try it on everything".

Basic assumptions

EFT is not based on any particular theoretical model or set of assumptions concerning the human psyche, but rather on the serendipitous discovery of the efficacy of certain treatments. The principles and assumptions of EFT are thus highly empirical, based on observation and experimentation.

Origin and maintenance of problems

Implicit in EFT's procedures and protocols is the assumption that the original cause of most limiting beliefs and psychological/physiological distress is life trauma, particularly in early childhood. Such trauma may result from one or more major life shocks or represent the cumulative effect of many apparently less dramatic events ([Scaer, 2005](#)). Depending upon one's genetic inheritance and life experience, what is traumatic for one person may not be for another, and the associated negative effects may be quickly discharged or may persist for a whole lifetime if left untreated.

Many authors have described the biological and psychological mechanisms of such trauma and conditioning. For example, [Scaer \(2005\)](#) provides a detailed description of the full spectrum of trauma from the perspective of a neurologist/traumatologist, and [Feinstein \(in press\)](#) presents a thorough review of the research literature concerning the mechanisms thought to be involved. Whilst none of this relies on the existence of an 'energy system' per se, in recent years the latest developments in quantum physics and the implications of the 'new biology' (particularly the emerging science of epigenetics, 'the study of the molecular mechanisms by which environment controls gene activity' ([Lipton, 2005, p26](#))) have begun to build a bridge between Eastern philosophy and mainstream Western science ([Lipton 2005](#), [Church 2007](#), [Braden 2007](#), [Sheldrake 2009](#), [Edwards 2010](#)). Pending the development of a clearer and more objective understanding of the processes involved, the negative effects of trauma are simply referred to in EFT as a 'disruption' in the mind/body's energy system ([Craig, 2008](#)). However it is not necessary to understand or even accept this premise in order to apply EFT successfully.

Change

Almost anyone can use EFT to good effect as a self help tool. But for complex issues, or to approach the 86-90% success rates in only 6 sessions recorded in recent trials of EFT for war veterans suffering from PTSD ([Church, Hawk et al, in press](#)), it is usually more productive to work with a skilled practitioner. Following successful treatment with EFT, the mind/body is normally able to hold the previously troubling thought (or be in the previously troubling circumstance) without the unwanted emotional response.

Rather than trying to diagnose which energy meridians are 'disrupting', EFT works on the principle of overhauling *all* known elements over and over again (each application takes less than a minute) until the emotional charge is seen to subside. Craig refers to this as the '*100% overhaul principle*'.

Although psychotherapeutic factors such as insight, positive expectation and the quality of the relationship can play a role in therapeutic change, particularly when working with complex issues

requiring multiple sessions, the often startling success of EFT in comparison to conventional talk based therapies is attributed principally to the direct electro-biochemical consequences of somatic stimulation when combined with appropriate imaginal exposure and cognitive restructuring. These effects include rapid changes in brain electro-biochemistry, as measured by MRI, SPECT and PET scans and EEG brain wave monitors, and equally rapid changes in the expression of stress related genes (particularly 'immediate early genes') as confirmed by gene assays, which can be used to assess the instantaneous expression of any combination of genes in the human body during any given activity. [Feinstein and Church \(in press\)](#) hypothesise that treatments such as EFT can serve to reduce or eliminate exaggerated limbic response to innocuous stimuli, correct distortions in learning and memory, help restore balance to the autonomic nervous system (including the promotion of cardiac coherence), balance the expression of stress and anti-ageing hormones and boost the functioning of the immune system. [Feinstein and Church \(in press, p 11\)](#) go on to speculate that careful measurement of factors such as these, particularly via gene assays, could offer 'a new framework for assessing the effects of psychotherapy'.

As to the scientific mechanism of change in EFT, [Feinstein and Church \(in press, p 19\)](#) speculate that:

'the exposure increases arousal while the simultaneous acupoint stimulation reduces arousal. These conflicting inputs are resolved, assuming nothing aversive occurs in the environment, with arousal being reduced. The triggering cue then becomes associated with a neutral emotional state. This leads to conditioned fear pathways being overridden ... or depotentiated ... eliminating long-standing signal transmissions between neurons'.

Although this candidate mechanism of change and its associated measurable physiological effects have been well documented in the treatment of anxiety related disorders, the electro-biochemical and epigenetic mechanisms of change for the many other apparently successful applications of EFT (particularly related to physical illness) appear as yet to be less well understood.

Skills and strategies

The '*basic recipe*' for EFT is described by [Craig \(2008\)](#), noting that practitioners should master this simplest form of EFT before moving on to more complex variations. In essence, the process begins with a number of repetitions of an acceptance statement such as: '*Even though I feel so angry with the driver of the car, I deeply love and accept myself anyway*', followed by reminder phrases such as '*this anger*', all accompanied by tapping on appropriate acupoints. Progress on any particular issue is monitored using a Likert-type scale (from 0 (min) to 10 (max) referred to as *subjective units of distress* (SUD)) as the work progresses, and it is normal to test the results with a suitable challenge (for example, presentation of a real spider in the case of spider phobia) to ensure that the emotional charge has really declined to zero. Amended wording is used as SUD levels reduce.

Although in its simplest form EFT may be applied mechanically with good success by almost anyone with minimal training (even a young child), in the hands of a qualified and experienced practitioner it can become more of an art form. Central to high success rates with complex issues is the ability and willingness of the practitioner to allow intuition to guide the words used, accepting that the healing comes *through* you, not *by* you. The practitioner should also be focused on excellence of process rather than be invested in any particular outcome. In EFT parlance, this is referred to as '*getting yourself out of the way*' and generally involves a lifetime practice of personal development by the

practitioner to ensure that neither counter-transference nor a practitioner need to fix the client interferes negatively with intuition or the therapeutic process.

It has generally been found much more effective to apply EFT to specific events than to generalities. For example, instead of working with a thought such as: *“My mother was bad to me”*, it is generally more effective to work with specific memories such as: *“The time my mother screamed at me in front of my friends at my 6th birthday party”*. Allied to this, a client’s unwanted thought, feeling, emotion or behaviour may be simple in nature, but equally it may have numerous aspects associated with it. For example, a phobia may simply involve the look of spiders, or it may be much more complex, involving traumatic memories of specific incidents as well as a wide variety of emotions, thoughts and physiological reactions. In EFT it is important to treat each of these aspects individually, often helping the client to become mindfully aware of physiological responses to the emotion as well as cognitive interpretations. The positive effects of EFT are generally found to be permanent. If the unwanted emotion, thought, feeling or behaviour returns, it is usually because one or more aspects have been neglected in the treatment.

Imaginal exposure is a key element of the work, often using a mental movie of the traumatic event or feared experience followed by positive visualisation once the negative emotional charge has been released. However, in contrast to some other approaches involving exposure, it is possible with EFT to ‘creep up’ slowly on the presenting issue, dealing with and neutralising each sub-aspect or event or cognition step by step, thus limiting the risk of emotional flooding or abreaction. On the rare occasions when this does occur, continuous tapping without words usually restores equilibrium in short order. Persistence is the watch word with EFT, together with unshakeable practitioner belief in the process; interestingly, healthy client scepticism seems to have no effect on efficacy.

Cognitive restructuring is another key element. Skilled practitioners are at pains not to lead the client in such reframes, but to allow and encourage the cognitive shifts to emerge by osmosis during the dialogue. When properly done, such reframes are client driven, and generally hold firm over time, provided the emotional charge of the original aspect(s) has been dissolved with EFT.

When EFT does not seem to be working, it is often because a mechanism such as *‘psychological reversal’* is interfering with the process. Although the *basic recipe* includes a routine treatment for this, it is sometimes necessary to look for issues that may be standing in the way of progress such as secondary gain, or issues of safety, identity, deserving or possibility, and apply EFT directly to these first. Alternatively, the presenting issue may sometimes be a smokescreen for a subconsciously held core issue that is the real cause of the client’s emotional discomfort. It can take considerable detective work to discover, ‘creep up on’ and subsequently apply EFT to this maintaining core issue, which may for example be an old suppressed memory, trauma or gestalt.

In addition to the procedures described in such detail by EFT’s originator Gary Craig, other skilled practitioners are continually adding to the power of EFT with new ideas and procedures. Notable among these are the *‘choices method’*, *‘matrix reimprinting’*, *‘imagineering’* and *‘deep state repatterning’*. Details of these and numerous other important innovations in EFT as described by their originators are now available in one volume ([Bruner and Bullough \(eds\), 2009](#)).

Clearly the potential for integrating EFT with other psychotherapeutic modalities is considerable, particularly CBT and EMDR which already contain similar elements. In a review of TFT and its

derivatives, [Mollon \(2007, p127\)](#) concludes that combining acupoint tapping with talk therapy ‘vastly enhances the effectiveness of psychotherapy’.

Research evidence

Although studies of EFT related techniques have been ongoing for a number of years, the number of randomised controlled trials with peer review is limited as of yet. However, based on a review of existing trials, [Feinstein \(2008, p199\)](#) states that in his opinion:

‘energy psychology has reached the minimum threshold for being designated as an evidence-based treatment, with one form having met the APA Division 12 criteria as a “probably efficacious treatment” for specific phobias; another for maintaining weight loss. The limited scientific evidence, combined with extensive clinical reports, suggests that energy psychology holds promise as a rapid and potent treatment for a range of psychological conditions.’

In a more recent review of clinical trials, [Feinstein and Church \(in press\)](#) conclude that progress with EFT in anxiety disorders can be significantly faster than with other psychotherapeutic approaches (including CBT), and may be more durable when reassessed at follow-up. Co-morbid conditions such as depression and insomnia can also show marked improvement even though not worked on specifically, and EFT appears to offer much reduced risk of retraumatisation in cases of PTSD.

Based on the results and analysis presented in this article, further scientific research is clearly warranted across a wide range of presenting issues in the interests of bringing the potential of EFT to the attention of a wider proportion of health professionals worldwide. (2,466 words)

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