# ATFT UPdate



**OFFICIAL PUBLICATION OF THE ASSOCIATION OF THOUGHT FIELD THERAPY** 

**ISSUE 13, FALL 2009** 

# **FEATURE STORY** *RWANDA:* **TFT & Hope in an Beleaguered Region**-Page 6

**PLUS** *VOLUNTEERISM: Helping At-Risk Youth* Page 14



In This Issue: MEMBER PROFILES | TFT TODAY | FOUNDATION NEWS

# TABLE OF CONTENTS

		UPdate
Member Profiles	Page	Association for
Meet Your ATFT Members	3	THOUGHT FIELD THERAPY
		<b>(ATFT)</b> P.O. Box 1220
Service to our Military		LaQuinta, CA 92247
Freedom R & R's	4	
A Letter from the Battlefield	5	Members of the Board
<b>Feature Stories</b> Rwanda:		<b>Chairman of the Board</b> Roger J. Callahan, PhD
TFT & Hope in a Beleagured Region	6-9	President
Case Notes	10-13	Rhoda Draper, PhD
Volunteerism: Helping At Risk Youths	14-15	<b>Vice President</b> Caroline Sakai, PhD
Treating Medical Problems with TFT	16-21	<b>Secretary</b> Lois Sugarman, RN, PhD, FT, TFT-Adv, RCT
TFT Relieves Bank Robbery Trauma	22-25	<b>Treasurer</b> Joanne Callahan, MBA
		Directors
Testimonials		Herb Ayers, MA, LMHC, TFT Dx Sheila Waye, TFT Dx
Overcoming Fear of Snakes	26	
Lyme Disease Relief	26	
Living Fearlessly with TFT	27	UPDATE PUBLICATION
Foundation News		<b>Managing Editor</b> Joanne Callahan, MBA
Trauma Relief Expands	28	Story Editor
TFT Blog	29	Herb Ayers, MA, LMHC
TFT Today		<b>Proof Reader</b> Phyllis Ann Ayers, BA., Ed.
What's Happening	30	<b>Design/Layout</b> Jane Seil, The Graphic Arts
	50	juie ben, the Graphie Aus

ATFT

# **BOARD SPOTLIGHT**

# **MEET YOUR ATFT MEMBERS...**



Suzanne Connolly, LCSW, LMFT, TFT-Adv

Suzanne Connolly has shared the gift of TFT with thousands of people. She joined the ATFT at its inception and is a charter member. She is cur-



#### Caroline Sakai, Ph.D.

Caroline Sakai, Ph.D. joined the ATFT at its inception. She is currently the ATFT Board Vice-president. She is in full time practice in Honolulu, Hawaii, following her retirement as Chief Psychologist with Kaiser Hospital where she served for 31 years. Caroline holds a Master of Social Work degree, a rently chairperson of the ATFT Foundation Trauma Relief Committee. She practices as a Licensed Clinical Social Worker, a Marriage and Family Therapist, an independent Substance Abuse Counselor and is a Diplomat of Sex Therapy through the American Association of Sex Educators, Counselors and Therapists.

Suzanne's private practice is in Sedona, Arizona.

When she is not running back and forth to Africa helping genocide victims, she is teaching TFT in the U.S., Europe, and the Middle East, and teaches Holistic Social Work in the graduate program at Arizona State University. In January, she will begin teaching trauma treatment tools at

Master of Science degree and Ph.D. in Clinical Psychology. She is a Licensed Clinical Psychologist. She is also a member of the HEA Honolulu Executives Association, Association for Comprehensive Energy Psychology, Pacific Leadership Partners and the Hawaii Psychological Association.

Dr. Sakai has served Rwandan adolescents and adults in 2006, 2007, 2008, 2009 to overcome traumas related to genocide and in training Rwandan community leaders in TFT. While on these missions, she conducted extensive research that awaits publication. She's made 3 trips assisting people in New Orleans following Hurricane Katrina. In addition, Caroline provides pro bono clinics for those without insurance or means to pay for any services along with TFT services and group ASU and Scottsdale Memorial Hospital as part of a holistic certification program. Suzanne is author of, Thought Field Therapy, Clinical Applications, Integrating TFT in Psychotherapy.

In 2006 and 2007, Suzanne assisted Dr. Caroline Sakai in her research using TFT to help street children overcome their symptoms of trauma. In 2008, they conducted a random, controlled study in Rwanda using TFT to help adult survivors of the 1994 genocide overcome their symptoms of trauma. In 2009, they, along with Gordon Barrett, Carmen Carrasco, and Cyndie Quinn, conducted a random controlled study in the Byumba region of Rwanda. (Story is in this issue).

#### classes for incarcerated adults.

Caroline comments that, "ATFT has provided a means of connecting and sharing with other TFT practitioners, and getting inspiration, encouragement and support from fellow prac-ATFT has disseminated titioners. updated information to practitioners on new developments, successful applications, and future directions. The ATFT listserve keeps practitioners all over the globe connected and abreast of the depths and breadths of TFT practice applications. The ATFT Foundation has helped with logistical support to volunteer trauma relief missions, and randomized controlled research projects. The ATFT UpDate Magazines have been helpful in the waiting room, to inform clients about worldwide successful applications of TFT, and utilization of TFT with particular problems and disorders."

# SERVICE TO OUR MILITARY

# Freedom R & R's with Timeshares for Vets

By Joanne Callahan, MBA, President, ATFT Foundation

In late 2008, the ATFT Foundation partnered with Timeshares for Vets to provide our returning veterans and families with an opportunity to enjoy a much earned vacation and have the benefit of TFT for the stress and trauma of their service.

While the process of establishing and building the Freedom R & R's program has been slow, the result is now something we are proud to be a part of and I believe is providing a much needed service for our returning veterans.

I wish to thank those who have dedicated many long hours of hard work. Herb Ayers and the Columbia Basin Veteran's Resource Center have served as the base for our volunteer coaches and mentors, and a resource for our veterans. Sheila Crouser, a vet herself, and our ATFT administrator has put in many long hours working with the vets to find a resort that fits their needs. Chrissy Mayhew has worked with our volunteer web designer, Mark Perry, to design the Timeshares for Vets web site. Roger Callahan, TFT's founder, is donating his book, Tapping the Healer Within and Bob Bray is donating his book, No Open Wounds, to the veterans. They both are also volunteering with coaching help as have many of our other practitioners.

I have been working with legal, structure, press, and organizations to bring in additional media, and funding. We will be working with BuyATimeshare.com to be able to accept full timeshares, have the donations sold and the funds given to the foundation. This will help provide much needed revenue for the travel costs



Left: One of the timeshare facilities in Glacier, Washington, donated for the use our vets and the Freedom R & R program.

Photo by Nathaniel Smith for the program.

I would like to thank our generous timeshare donors: Bob MacMahon, TFT-Dx, JoAnn and Alan Kilpatrick, Lei-Lynne Doo-Horvick, and Randy and Lanet Johnson. They have provided the resort vacations that are making this project a reality.

It was so very gratifying to hear from our timeshare recipient just returning from his week in Glacier, Washington. He went with his girlfriend and said it was so relaxing, he felt he had a total reset. In fact, they were having such a wonderful time, they got married while at their Freedom R & R.

We have veterans and families scheduled to go to some great locations, coming up, Las Vegas, NV, Klamath Falls, OR, Glacier, WA, South Florida and South Lake Tahoe, CA. Applications for our program are increasing all the time. We need more timeshares, so if you have or know anyone who has an unused timeshare, please let them know they can help support and thank our troops and returning veterans with the ATFT Foundation's Freedom R & R's program with Timeshares for Vets. We could also use help with travel for the veterans. If you have airline miles you can contribute please let us know.

For program information and veteran applications, you can go to: www.ATFTFoundation.org.

Timeshare donors can also go to www.TimesharesforVets.com.



# SERVICE TO OUR MILITARY

toms for weeks. Process data is being collected and will be written up in the future. Research is the key to getting an effective treatment modality like TFT accepted in broader circles such as DOD and the Veterans Association. TFT is effective and service members have experienced the benefits in the combat environment.

TFT is in some aspects a bit like doing acupuncture on oneself without needles. Acupuncture had difficulty being accepted in broader circles; however its effectiveness could not be disputed today. Through carefully documented studies and research, acupuncture has become widely accepted. This soon will hopefully be the legacy of TFT as we follow the same path of establishing and strengthening its evidence base.



# A Letter from the Battlefield

By Efland H. Amerson, PsyD Clinical Psychologist on the front lines

It was not long ago that individuals traumatized in combat had to be medically evacuated to receive psychological interventions. More often than not those who seem to have the "psychological break down" may have been deemed unfit for duty or could no longer contribute to their unit's mission. New battlefield philosophies have taken a closer look at those who have become psychologically impaired. These philosophies focus more on keeping an individual in close proximity with his unit to help them recover. From my experience most of these individuals who have been traumatized on the battlefield suffer from lack of sleep, nightmares, day-mares and the spectrum of anxiety.

How does a clinician deploy skills or provide treatment that will expedite the recovery process without compromising the quality of care? In Afghanistan Thought Field Therapy (TFT) has proven to be a solid treatment modality that expedites recovery without compromising the quality of care. It's amazing to see the initial reaction on a service member's face when the treatment process (TFT) is introduced. Conversely, the face of doubt morphs into a state of satisfaction when the same service member experiences symptom relief in one session of TFT after being plagued by the same symp-

## **RWANDA: TFT AND HOPE IN A BELEAGUERED REGION Thought Field Therapy at Izere Center**

Nyinawimana Parish, Byumba Diocese

#### "Every act of charity is an act of peace." Mother Teresa

After the genocide of 1994, Byumba Diocese faced many challenges. Among these were trauma, extreme poverty, a huge number of widows, orphans, disabled individuals, and survivors who had lost all hope of the future. They have 3100 orphans having one parent; 160 HIV/AIDS orphans of whom 61 are living with HIV/AIDS; 850 orphans having both parents; 372 physically handicapped individuals including 125 children; and 1651 widows.

The Izere Center was established to provide counseling for trauma

and other psychological problems, nutritional education, education of disabled children, peace building, conflict prevention, resolution and management. They provide orphans with school fees, supplies, and lunch during school days and holidays.

The Izere Center was struggling with lack of enough therapists and effective treatments to manage the overwhelming number of trauma cases. Father Jean Marie Vianney (JMV) Dushimiyimana, the principle priest of Nyinawimana Parish, invited Suzanne Connolly, Caroline Sakai, Gordon Barrett, Carmen Luz Carrassco, and Cyndie and Gary Quinn of the Association For Thought Field Therapy Foundation to Byumba to train 36 community leaders with Thought Field Therapy (TFT). Fr. Vianney had learned about TFT through Raphael Katanga, who had been trained in prior years at the Catholic Relief Services in Kigali by Suzanne Connolly. Father Vianney selected a wide cross section of community leaders from psychology, social work, marriage and family therapists, education, police, military, business, government service, priests and students to be trained with TFT.

Suzanne Connolly, Dr. Caroline Sakai, and the ATFT Foundation Trauma Relief contingent trained the 32 therapists in the Algorithm Thought Field Therapy (TFT) treatment level with the assistance of 4 translators, who also trained to become therapists: they are, Christian Muhawenimana, Joseph Ishimwe, Prosper Ishimwe, and Jean Baptiste Karegeya. These 36 therapists in turn treated 200 genocide survivors during the two weeks of the training, testing and treatments. They also assisted the survivors with their Post-traumatic stress disorder (PTSD) assessments, since all but one could not read at the level of the standardized translated assessments in Kinyarwanda.

Left: On tour of the farm at Izere Center: Cyndie Quinn, Caroline Sakai, Father Jean Marie Vianney Dushimiyimana, the principle priest of Nyinawimana Parish, Bishop Servillien Nzakamwita, the Bishop of the Byumba Diocese, and Suzanne Connolly. Photo by Suzanne Connolly.

*Right:* Non-study participant being treated. Photo by Suzanne Connolly.



# RWANDA: TFT AND HOPE

The ATFT Foundation team treated over 75 additional Rwandans who had sought to be in the study but exceeded the number that could be accommodated with the shoestring budget with which the team was operating. After learning of the additional Rwandans who were very disappointed at not being included, the team felt it was the right thing to do to provide treatment to these individuals also. The participants eagerly came to the 6 a.m. Mass, and waited patiently to be treated on the church grounds all day.

This group included some children with special needs-including intractable rage and tantrums which prevented a primary school student from being in classes, and a toddler with marked coordination and concentration difficulties which medical assessments had previously indicated were not amenable to treatment. Also included were some adults who had not been able to even talk about the genocide tragedies previously nor participate in the annual genocide remembrance activities. One broke down into intense sobbing while doing the assessments, and another had agitated movements, rolling of her eyes, yelling, guttural utterances responding to the constant voices

# RWANDA: TFT AND HOPE

she was hearing, stabbing pains in her stomach and chest, and intense body sensations that caused her to stomp her feet, wave her arms, tilt backwards, grit her teeth and spit, and went in and out of dissociative states as she recalled the horrors of the genocide experiences she and her family of 13 children endured.

The transformative results were often immediately apparent as forlorn, depressed, even vacant countenances sparkled with renewed energy, hope and faith, with the release of 15 years of painful haunting and disturbing images from the horrors of their genocide experiences. Many had brutally lost many of their family and relatives. Many had escaped after being beaten, threatened with death, and subjected to atrocities. One had to dig her way out from



under a pile of corpses. One was horrified at the stoning to death in the pit latrine of her spouse. Many had witnessed the brutal bashing of babies, and killing of their children and loved ones. As the painful flashbacks receded into the past, feelings of rage, outrage and revenge, shifted to thoughts of peace and reconciliation and unification again as a nation. Wide grins and cheers of "praise the Lord" and tears of joy and release, replaced frowns and cries of agony and tears of unremitting grief.



In keeping with their customs, the Rwandans were thanking the team, even as the ATFT Foundation team was thanking them for their participation in the lengthy assessments. They waited patiently for their turns. Father Jean Marie Vianney did an outstanding job organizing the parishioners to be treated, and they were mostly there early, eagerly waiting, attentive and cooperative. Bishop Servillien Nzakamwita of the Byumba Diocese gave his blessings to the trauma relief project at the official launching at the Izere Center in Nyinawimana Parish, and later hosted a dinner at his home after the training and treatments to appreciate the ATFT Foundation team.

While it may be a while before the pretest, posttest and no treatment control tests, and control group post-treatment tests are scored and analyzed by an independent university group, the SUD (subjective units of distress scale) changes are

**This page:** A non-study participant and Clementine, a clinical psychologist, during and after treatment. Photos by Suzanne Connolly.

**Above Right:** Caroline Sakai works with Christian Muhawenimana the young man we are featuring in a film about his story and treatment. Photo by Caroline Sakai.



impressive (pre-treatment SUD statistical mean of 8.5, and post-treatment SUD mean of 0.5-both for the experienced ATFT team with the non-research parishioners, as well as the newly trained Rwandan therapists' work with the research participants). Also remarkable were the visible transformations and the spontaneous reactions and expressions of joy and relief and release. It has been a truly transformative experience for the survivors of the genocide, the newly trained therapists who were elated to see the rapid results, and the ATFT Foundation team who were thrilled to see the exuberant triple hugs, and radiant exuberance of all involved. Rwandans expressed "clouds lifting," rage fading away with the focus shifting from being stuck in the horrors of the past, to moving forward to a brighter unified future while feeling "happier and better" than they have felt for past 15 years, or for as long as they can remember. This included a young man embittered by the loss of most of his family, relatives and friends in the genocide who went from being focused on wanting revenge, to feeling an incredible sense of healing of his traumatic mental wounds, profound inner peace, and readiness to move onward with his life in a positive way.

The transformative results were often immediately apparent as forlorn, depressed, even vacant countenances sparkled with renewed energy, hope and faith, with the release of 15 years of painful, haunting and disturbing images from the horrors of their genocide experiences.

The Izere Center moved quickly to establish an office in their counseling center, which will be manned by therapists two days a week to provide on-going TFT to the parish community in Nyinawimana. The Rwandan TFT Committee have a director, secretary and members who will be meeting regularly. They are developing an ATFT branch in Rwanda to further spread TFT around the nation. They have two psychologists and a social worker who will be involved at the Izere Center. As one of the psychologists stated, she has used many different kinds of therapies and was delighted and astounded to see the rapidity and effectiveness of TFT in helping trauma, anger, rage, anxiety, sadness, etc.

### RWANDA: TFT AND HOPE

We are delighted to be the first in the ATFT community to welcome our brothers and sisters in Rwanda into the TFT family. We thank them for the opportunity to share the power and efficiency of TFT with them, and wish them well in helping with healing the wounds and scars from the 1994 genocide and all its repercussions.

The Catholic Diocese along with the ATFT Foundation appreciate all who contributed to this mission and those who may be contributing toward the yet unmet costs. Most appreciated also are the outstanding contributions of our Rwandan brothers and sisters.

Respectfully,

Caroline Sakai, PhD, TFTDx, VT; ATFT Board of Directors VP

To view a two-part video about the Rwanda study, go to: http://www.thoughtfieldtherapy. net/video/



### **RWANDA: CASE NOTES** By Suzanne Connolly LCSW, LMFT, TFT-Adv

During these two days we treated over 60 people from the district of Byumba, the young and old, all of them poor people of the countryside who live by sustenance farming. These were persons who wanted to participate in the study but due to the fact we had prepared materials for 200 only, they had to be excluded. Father Jean Marie Vianney reported that there was some upset because they couldn't participate and so we decided to treat them ourselves over a period of two days

Suzanne Connolly says, "my first client on the 16th lost her only parent and her beloved fiancée in the genocide of 1994. She was given shelter in a refugee camp in the Congo, and while there married and had children. When she was able to return to Rwanda she and her husband had to be tested for the HIV virus. Unfortunately her husband tested positive. She lost several children, likely to AIDS, and she now practices safe sex. Her husband is very sick and cannot work. Her life is very sad because of these losses and because she alone must work very hard to support the family. She wants to have more peace about her losses and difficult circumstances. In a very short time, by using TFT, this woman was able to feel peace around her present circumstances. Her SUD level went from a ten to

RWANDA



10

# RWANDA: CASE NOTES



a one and the change in her facial expression was remarkable.

Another young woman, only twenty- two years old with a young baby has a husband who drinks too much, and insults her. He sometimes tells her to sleep outside with the chickens. She reported that she gets so angry she cries. She loses her voice and cannot even speak. We talked about not arguing with him or defending herself verbally when he's drinking as it does no good, but at the same time, not agreeing with him. She could say things like, "That's your opinion, I don't think this, but we can agree to disagree", and she can still keep her dignity. But more importantly, she cannot be assertive in this way if she is so anxious and upset that she cannot even find her voice and literally cannot speak. Using TFT we worked on her sadness and her fear and anger around her husbands "bad behavior" and she could no longer work up the upset she previously experienced. She could now picture herself being positive in the face of her husband's bad behavior. Her throat was not constricted and she felt like she had a voice even under these circumstances.

The last person I treated on August 16th lost her husband and all seven of her children in the genocide of 1994. She understandably reported



## RWANDA: CASE NOTES

much sadness. She couldn't even imagine feeling peace after this tragedy in her life. She reported that she has flashbacks during the day and flashbacks that wake her up at night. She has had very bad dreams consistently and was afraid at night. She suffered from painful feelings of loneliness. We used TFT to address her symptoms of trauma. Her face, which was very sad when she arrived, began to brighten and eventually her frown grew into a huge smile. Her worn but beautiful face glowed and she was full of hugs and gratitude. She now could not bring up any sadness. Her only concern was that these good feelings might not last. I assured her, as I had assured the others, that likely



the good feelings would last, the bad feelings they worked on almost never return. I told her that the Rwandan therapists will now be working at the Izere Center and would be able to help her should any of these fears and other negative feelings return.

One man reported only physical symptoms. He suffered from headaches, back-aches stomach-aches and chest pains. He often couldn't work and felt very sad and reported



feeling like 'half a man.'

He had been to several clinics and nothing seemed physically wrong with him. He said that he is not bothered by the trauma of the past. He ran from the perpetrators who were chasing him with guns and escaped by hiding. However, most of his family was killed. At the same time, he reported no anger, fear, feelings of guilt or sadness. However as we conversed he mentioned flashbacks and bad dreams. His flash backs were so severe that when he experienced them his neighbors accused him of being crazy. When he thought about the events that came back to him as flashbacks and bad dreams he reported a SUD of 8. We worked with the memories that come up during his bad dreams and flashbacks and he soon felt only feelings of peace. He was not experiencing pain at the time of his treatment because he was taking pain medication for his symptoms. We are hoping that by addressing his symptoms

**Above Left:** Tension in the faces of nonstudy participants before treatment. Photo by Suzanne Connolly.

**Above Right:** Another non-study participant, visibly relaxed. Photo by Suzanne Connolly.



of trauma his physical symptoms of pain will also be reduced as these symptoms appeared for the first time soon after the genocide.

One woman whose husband was killed during the genocide spoke of the double pain she experienced because he was a person of a certain ethnic group and was mistaken for a person of another ethnic group and killed. Because of their relationship to him, she and her children were pursued but she was able to hide herself and her children. One of the children was killed a week later by a bomb and another has been missing and presumed dead since 1994. She has one child in secondary school that did very well but she could not afford school fees so the girl now lives at home and cannot go on with her studies. She is not entitled to genocide survivor benefits because of her ethnic identity. Her daughter's having to drop out of school was the woman's greatest concern and greatest cause of anxiety. TFT successfully addressed her feelings of despair and after about an hour and forty five minutes of treatment to address her past trauma and her current anxieties she reported a feeling of peace in her heart when remembering her losses and in thinking about her current unfortunate circumstances.

Another woman was eleven years old in April of 1994. Whenever she sees soldiers she has intense fear although Rwanda is not at war and the soldiers now work as peace keepers. It is unclear what she witnessed or experienced concerning soldiers in 1994, however her fear of soldiers seemed crippling, as soldiers are everywhere in Rwanda. At one point, while she was concentrating on her fear she opened her eyes and looked at our interpreter and said 'You are a soldier.' This young woman's fears were successfully alleviated to the point where she could think about seeing them along the road and be able to pass by them and even greet them.

During these two days I treated fourteen persons all with similar problems to the ones above. Others included alcoholism, loneliness and three women who had intense fears of the loved ones they lost coming back as ghosts during the night.

Between us we successfully treated 58 of the sixty persons who had not been admitted into the study due to the 200 study slots allotted already having been filled."

# RWANDA: CASE NOTES

Gordon Barrett likes to tell a story about a man who was walking along a beach that was covered with starfish that had washed up on the sandy shore. As he walked he threw as many starfish back into the sea as he could. Of course, he made only a small dent as there were literally thousands of starfish washed upon the shore. A boy came and laughed at him telling him he couldn't possibly make a difference, because the starfish that washed upon the shore were simply too numerous. The man smiled and as he threw the next starfish back into the sea he said aloud. "It makes all the difference to that one."



### **VOLUNTEERISM:** AT A HOME FOR AT-RISK YOUTH By Christina Mayhew TFT Advanced Practitioner

A couple months ago I was asked to present Thought Field Therapy to 16 boys at a local home for troubled and at risk youth. The boys ranged in age from 16 to 21 years old. This was their last stop before going to a youth detention center or to another foster care home. Some of the boys came from really rough neighborhoods. They were in trouble with the law for various reasons or their home life was incredibly negative or dangerous for them.

During the day the boys learned about construction, and then in the afternoon and a couple evenings, they would attend school. The other two evenings were spent with different programs learning ways to deal with their anger, frustration, social skills, etc.

The new social worker was a friend of mine. When I introduced her to Thought Field Therapy (TFT), she couldn't wait to have me come work with the boys. We set aside a night for me to teach them TFT. Knowing most of them suffered some type of trauma, were angry, and might have guilt feelings, I decided to use the Complex Trauma Algorithm because it covered trauma, anger and guilt.

I wasn't sure what to expect when I arrived. Sixteen boys were in a circle with their heads hung low and looking angry to be there. I'm thinking, "What am I getting myself into?" I'm saying to myself, "Ok, I have 3 boys, two of them are their ages and one has been in major trouble, and I've been in the construction industry for 28 years. I do have several connections with them."

To get things started, I introduced myself and gave them a brief history of my life, my 3 boys, dealing with my son and his antics with getting in trouble with the law, and that I owned my own construction company. That did get a few comments like, "No way, you're a girl!" or "What do you know about construction?" So after a few stories of what I do and asking them specific construction questions, I was starting to gain their trust and respect.

After about 20 minutes of construction talk and asking them what they've learned so far, half of the room started loosening up and at least paying some attention. The others just sat there looking very agitated that they needed to be there.

Next, I gave them some inspirational stories about various people overcoming hardships in life to become great at making their dreams come true. I told them they may have been given a bad hand in life, yet they had the power to change that if they chose. I had a deck of positive quote cards and I walked around and let each boy pick one card. Each card had a message for them. Some were in shock that the message was on target and others didn't understand their message. I told them to hold onto the cards for a while and think about it because I was going to teach them some tools that would help them deal with the emotions they face in life. I used the analogy of TFT being like tools for the contractor. A contractor can't go to work without a hammer, nails, measuring tape, construction material, etc. I explained that the Thought Field Therapy tools were used to help reduce or eliminate negative emotions to help them get through life's challenges and promote a more healthy and positive life. These TFT tools can go with them where ever they go and can be used at any time they need them.

As we worked through the sequence, tears started flowing, their demeanor changed and I could see them breaking through their hardships.

Looking around the room, I picked out one of the biggest boys to use him as a demonstration of how negative emotions cause the bodies' muscles to go weak. He stood up and came into the center of the room and I asked him to hold his arm out strong. He did. I practically hung on his arm to show it was strong. I asked him to think of something that made him mad and then I pulled on his arm. It immediately went weak. He didn't know what to expect and then he told me to do it again because he wasn't ready. I did it again with the same result. Then I asked him to say what color his shirt was and his arm was strong. Then I asked him to say it was a different color and his arm went weak. Now, this got their attention! They all wanted me to try



this on them.

By now, they were showing signs of being interested in what I was talking about. I explained that having negative thoughts and emotions causes our bodies to be weak. By using Thought Field Therapy, they can reduce or eliminate those negative emotions to allow the body to stay stronger.

After explaining very briefly about how the energy meridians worked, I told them that instead of using needles like acupuncture, we would be tapping those points. I taught them the anger algorithm first by walking around the room and encouraging them to do this technique on something that makes them angry. They were looking around the room to see if the other boys were going to do it so I picked several that seemed engaged and asked them to show the others how to do it. Finally, all the boys started tapping. I asked if anyone would like to share what they were angry about and how they felt after doing the sequence for anger. Three boys told their story about who/what they were angry with and that they did feel a little better. I congratulated them on successfully doing the technique and gave them a "high five". Next, I went through the complex trauma algorithm with anger. I told them to think of a time in their life that they suffered some type of trauma like losing a parent or friend, having to live in a foster home, being arrested, or being abused. Thinking of a trauma brought tears to some and immediate withdrawal. I told them it may be painful to think about it yet the next tool I was going to teach them would greatly help them with those emotions. Some of the boys I had to really coax to do it. They finally agreed. As we worked through the sequence, tears started flowing, their demeanor changed and I could see them breaking through their hardships. Again I asked if anyone would share their story. A few did and by now instead of the boys being angry and rigid, they started to show compassion toward each other saying things like, "I know what you're going through man, I had the same thing." Or "My old man beat me too when he was drunk and I wanted to kill him so he wouldn't hurt us any more." And "I can't move back home either because my parents are in jail for selling drugs." I had more participation this time with them talking about how they felt different and didn't feel as angry. They couldn't believe that this weird tapping thing could cause them to feel better.

At this point the boys had several options for alternative healing. Reiki

# VOLUNTEERISM: AT-RISK YOUTH

practioners came to work with the boys later in the evening. I told the boys I would give individual sessions if they wanted.

I had about 9 boys line up to see me. I asked them to bring their positive quote card with them. As I sat one to one with each boy, I asked him what he thought the card meant to him at that point in his life. My heart was truly touched as each poured out their moving stories. Through those stories, I was able to get them to focus on a particular part that seemed extra troubling to them. I didn't have time to do diagnostic sequences so I just used general algorithms so that they could use that sequence over and over again as they needed it. Some had streams of tears as they finally let go of their pain. Others went from being scared and rigid to more relaxed and friendly. Every one of them had some transformation take place. They definitely felt it and agreed they needed the release.

Each of the boys gave me a hug and thanked me for coming which totally shocked me. Even the social worker couldn't believe that they showed gratitude toward me since they usually are so closed and don't show very much emotion to strangers. This is why I give of my time, even though I'm so busy, because the greatest reward for me was being able to work with these boys and make a little dent of hope and healing in their challenging lives.

### TREATING MEDICAL PROBLEMS WITH TFT By Dr Colin M. Barron M.B. Ch B, TFT-VT

TFT was originally created as a treatment for psychological problems. However since the earliest days of TFT it has also been used to treat some medical problems and recently it has even been used to help people suffering from cancer and malaria. However this has lead to non – medically qualified TFT practitioners becoming involved in the treatment of medical cases with the possibility of legal and ethical pitfalls.

In this article I will describe these challenges and how to solve them. I am also going to be covering a few other issues – namely establishing good communications with your local GP practices, problems with getting referrals from your GP or Health Centre, and the correct way to go about treating medical problems

#### The NHS and Complementary Medicine

The UK has had a National Health Service (NHS) since 1948 and although the NHS is largely based around orthodox treatments, complementary medicine has always been available here and there in the NHS. In particular homeopathy has always been available as part of the NHS - such as the modern Homeopathic Hospital in Glasgow which is run by the NHS.

So there has always been a minority of British doctors who are very interested in complementary medicine, particularly homeopathy, hypnotherapy and, more recently, TFT. The British Society of Medical and Dental Hypnosis is a very successful and thriving organization with hundreds of members and some BSMDH members have trained in TFT. I have also given a large number of lectures on TFT to groups of Doctors all over Scotland.

However, although a minority of British doctors are very interested in alternative therapies the majority are quite indifferent to these methods. They are not in favour of them but neither do they have strong feelings against them. And as one might expect there is a small minority of doctors who are very antagonistic towards any kind of complementary medicine. You should remember this when you are dealing with your local GP practice as only a minority of doctors are strongly in favour of complementary medicine. This is one reason why you cannot expect to get large numbers of referrals from your local GP practice as the NHS is still based largely around orthodox approaches, with drugs playing a major role in the treatment of most problems. GPs will occasionally refer people to alternative medical practitioners, but the practice is not widespread at present.

Many people who train in TFT contact their local GP Practice or Health Centre in the hope of getting referrals and discover that none are forthcoming. The reason is because GPs try, wherever possible, to find treatments for their patients which are provided by the NHS and will only occasionally refer people to a private practitioner. In the decade that I have been practising alternative therapies I have had very few referrals from GPs and I have never had any at all from my local health centre.

Things are likely to improve in the future with the introduction of the new NHS Complementary Health Practitioners register which will make it possible for NHS Doctors to refer patients to registered complementary practitioners and obtain funding for the treatment from the NHS but despite this referrals from GPs can be expected to be relatively small in number.

# Having a Professional Approach to Medical Problems

It is important that you approach medical problems in a correct, professional manner. Most people who learn TFT become very enthusiastic about it and want to demonstrate it on just about everyone they meet. It is a perfectly natural reaction. I was like this myself when I first learned





TFT – a man would come to read my gas meter and 5 minutes later he was being treated for his spider phobia.

# The Dangers of "Kerbside Consultations"

People who do courses of any kind like to try out what they have learned. However this tendency can lead to practitioners attempting to treat people in inappropriate situations. A few years ago there were many postings on the ATFT list-serve from practitioners who met people in a bar or at a party or at a filling station (gas station) and treated their psychological (or even medical) problems there and then.

I believe this is not a good idea as it is what doctors call a "kerbside consultation". Many years ago the "British Medical Journal" published a very amusing article about "kerbside consultations" and how to avoid them. In medicine a "kerbside consultation" is a term used to describe a scenario in which a patient approaches a doctor in an inappropriate situation such as a supermarket, a cafe or even in the street and requests that the doctor carry out a medical examination ( and come up with a diagnosis) there and then. For example a patient might ask his doctor to examine his sore leg in the middle of a busy supermarket.

The author of this "British Medical Journal" article gave advice on a number of ways to avoid kerbside consultations. For example, he said that doctors should always reverse their cars into parking spaces so that they are ready for a quick getaway if they see a patient approaching!

However humour aside, kerbside consultations are not a good idea in the world of medicine and I believe they are not a good idea in the world of TFT either - particularly when you are dealing with a medical problem - because you are carrying out a TFT treatment under conditions which may not be ideal for success. It is also not a very professional thing to do because you may not be covered by your Professional Indemnity Insurance if you treat people in such a situation.

In the UK we may soon be required to have written consent from every patient before treatment begins, and notes will be required to be kept of every consultation. Thus there could be legal implications in carrying out such impromptu consultations without clear written consent and casenotes. Quick demonstrations of TFT are fine but if you are really wanting to help someone with serious problems (especially medical conditions) then I would suggest you do a proper consultation.

# TREATING WITH TFT

#### The Importance of Professionalism

I would therefore recommend that if you meet someone who could benefit from a TFT treatment, instead of treating them there and then you give them your business card and ask them to make an appointment.

I think this is a much more professional way of going about this matter as professionalism is important. In Britain the Government is shortly going to introduce dress codes for alternative therapists, meaning that we will all have to dress smartly when treating patients.

Recently I took a call from a from a prospective patient who had been to see a top practitioner of an offshoot of TFT. One thing that really put her off this person was not so much that the treatment did not work but that the therapist wore jeans, trainers (sneakers) and a t-shirt and lacked having a proper consulting room. He saw the client in his front porch!

I believe that professionalism is important so when people come to see me for a face-to-face consultation I always wear a suit and tie. There is a brass plaque by my front door with all my qualifications on it. And I have a proper consulting room with all my certificates framed on the wall and bookshelves filled with books on Medicine, Psychology and therapy.

This all helps to create a professional image and make the client confident in your abilities.

# TREATING WITH TFT

# The Importance of Advance Planning

This leads me onto my next point which is that I believe that it is very important to prepare your patient for their consultation with you, especially when treating medical problems. One thing that can greatly increase your success rate is proper advance planning.

I am very interested in the history of the Second World War and one of my great heroes is General Bernard Montgomery who became famous for defeating Field Marshall Erwin Rommel at the Battle of El Alamein in October 1942. In the Summer of 1942 the British were on the verge of losing the Second World War. Tobruk had just fallen and Rommel's forces were poised to take Cairo. The British were just keeping the Germans at bay at a defensive line at El Alamein.

The situation was so serious that Prime Minister Winston Churchill flew to Egypt - quite a feat in those days-and urged the new British commander Bernard Montgomery to launch an offensive at the end of August 1942. However, Montgomery refused to do this. Instead he waited two months before he launched his attack because he knew that if he waited he would have more planes, more tanks, more guns, more equipment, more troops and they would be fitter and better trained.

Montgomery was proved right and the British success at the Battle of El



Alamein was the beginning of the end for Hitler's regime. You see one of Montgomery's favourite sayings was that he "never fought any battle unless he knew in advance that he was definitely going to win". Montgomery believed in setting things up to maximise his chances of success.

I am a bit like Montgomery when it comes to planning things whether that thing is a therapy session or a training seminar or just packing my suitcase before going on holiday. I believe in a lot of advance planning. For example, when I organise a seminar I always send delegates a lot of information about where the seminar is being held, how to get there by car, plane, bus and train, where to park their cars, how to get a cheap rate for overnight accommodation, details of other hotels in the area and so on. At my recent "Optimal Health" seminar I even gave out a handout I prepared with my personal recommendations on about a dozen local restaurants. But I have been to seminars where you were lucky if you even got told where it was being held!

# Maximising Your Chances of Success

So before anyone has a consultation with me I always ensure that I have set things up to maximise my chances of success. For example I am always keen that my patients should know a bit about TFT before the first appointment. I encourage them to read up a bit about TFT before the first session, perhaps by viewing various TFT websites or reading "Tapping the Healer Within" or even viewing video clips on "You Tube".

I also insist that patients refrain from wearing fragrances prior to their first treatment session - and it is surprising how many TFT practitioners don't bother to do this! Almost every week I get urgent calls for VT support from practitioners who cannot get TFT to work. In almost every case I find the reason is that the client is wearing a fragrance. I always tell my clients - both verbally and in writing - to avoid wearing fragrance.

General Montgomery used to describe the first phase of a battle as being "preparing the battlefield". In the same way I believe the first phase of TFT treatment is "preparing the patient". And this is particularly important when treating medical cases.

So when someone 'phones you up and asks for treatment for a medical problem the first thing you should say is "Have you seen your own doctor about this problem?" I don't think you should treat any medical prob-

# TREATING WITH TFT

lem unless this has been thoroughly investigated and diagnosed by doctors. Let me emphasise that TFT treatment can never harm anyone or make a medical condition worse. The only danger is that some people who really need expert medical treatment may delay a consultation with a doctor because they believe TFT can or has sorted their problem.

Here is an example of what I mean. Someone phones you up and says, "I have had pain in my stomach for the last 24 hours. I feel sick, I have got a temperature. Could you give me some TFT to take away the pain?"

Now just supposing that person had acute appendicitis! And they delayed seeking medical attention until they had seen you! That delay could cost them their life because untreated appendicitis can be fatal! That is what killed Houdini the famous escapologist. But on the other hand supposing someone 'phoned you up and said, "I have had abdominal pains for two years. They have been thoroughly investigated by the doctors and they cannot find any cause and so the diagnosis is irritable bowel syndrome." In such a case it would be quite safe to work with that person and you would probably be of great help. So I believe it is very important that you do not work with medical cases until these cases have been thoroughly investigated and a medical diagnosis made.

Let me tell you a little story. A

few weeks ago I was contacted by a young lady and she told me that she had had surgery for a brain tumour a few years before and now she was getting auditory and visual hallucinations . She wanted to know if VT-TFT could remove her symptoms. I also discovered that she was awaiting an urgent medical and psychiatric evaluation. I must tell you that



I refused to treat her until she had had this evaluation because these symptoms could indicate a number of very serious medical conditions and it would be foolish to attempt to take away symptoms until a proper medical assessment had been carried out.

So, once again, I would always suggest that you don't treat anyone until a medical diagnosis has been made.

Now there is another related problem which I sometimes come across. A person is treated for a problem with TFT and then some time later they become ill and the patient then 'phones the practitioner because they are convinced that this ailment was caused by the TFT treatment. I can state quite emphatically that this is just nonsense as TFT cannot cause medical problems - it is just a coincidence. Some people make these connections even though there is no real evidence or facts to back them up. It is the same way some people can be very superstitious. During WW2 RAF bomber crews used to urinate on their bomber's tailwheel before each mission in the belief that this would prevent them from being shot down. And Guy Gibson, the famous leader of the "Dambusters" (617 Squadron) used to wear a Boy Scout wristband and a Luftwaffe lifejacket when he was flying because he thought it brought him good luck.

So when people claim that a medical condition has been caused by TFT it is just an example of the same emotional, irrational thinking and you can refute it completely.

#### Legislation Affecting TFT Practitioners

Another reason why you have to tread carefully in medical cases is because of the legislation which governs their treatment. In particular there are two Acts of Parliament which affect TFT Practitioners in Britain.

# TREATING WITH TFT

#### The Cancer Act 1939

One is the Cancer Act 1939 which makes it a criminal offence for anyone other than a qualified medical practitioner to claim to be able to cure cancer. This legislation particularly applies to advertising but may also cover published articles. Every year a number of complementary health practitioners are prosecuted under this legislation. And supermarket chains have also been prosecuted for claiming in ads that certain foods have cancer-preventing effects. So this piece of legislation is not a paper tiger.

#### The Medical Act 1953

There is also the Medical Act 1953 which makes it a criminal offence for anyone other than a Registered Medical Practitioner to offer treatment for Cancer, Diabetes, Epilepsy, Glaucoma and TB. So as TFT Practitioners we have to work round this legislation. I would strongly suggest the following protocol:

1) Firstly. If you are asked to work with a cancer patient you should always make it clear that you do not claim to cure cancer, instead you "help" people with cancer. And this rule applies to other medical conditions as well. You should never talk about "curing" you should never talk about "curing" you should say things like "helping the problem by providing complementary treatment to support the orthodox medical treatment," that kind of thing.

2) Secondly. You should never per-



suade a patient to eschew chemotherapy or radiotherapy regardless of what your own views are on this. If the patients decide themselves they do not want these treatments then that is a different matter because that is their decision - but you should not influence them. Similarly you should never tell any patient to stop a drug prescribed by a doctor just because it is an IET (Individual Energy Toxin). I suggest what you do in such cases is diagnose the correct 7 second treatment for that drug and get the patient to repeat it three times per day.

3) Thirdly, I would suggest that if you are asked to work with a patient who has any kind of medical problem then you should make some kind of contact with the GP or the Hospital Consultant, even if it is just a letter stating that you will be treating them. You will probably find that in most cases the GP or Consultant won't even bother to reply but that doesn't matter. You have still behaved in a proper ethical manner. Sometimes the patient will ask you not to contact their GP or Consultant. That is fine. In such instances you respect their wishes but make a note of this in their case notes.

Quite apart from the legislation affecting the treatment of medical cases there is also the question of Professional Indemnity Insurance. You should all have Insurance, but I think you will find that if you check with your insurer, the treatment of certain medical conditions may not be covered by your policy. I would therefore suggest that if you are in the habit of treating medical problems then you should check with your insurer as to what is and is not covered by your policy.

# Treating Medical Emergencies with TFT

This subject is a legal minefield for TFT Practitioners. I am not suggesting that you never treat such cases but rather I suggest you take certain precautions.

First of all, if you are faced with a medical emergency, the first thing you should do is call for an ambulance and/or a doctor.

The second thing you should do is what any competent first-aid person would do in that situation. So if you think you are likely to be faced with medical emergencies then I strongly suggest you do a recognised First Aid course. Often when you are faced with a collapsed or unconscious patient then the most important thing to do is the very basics of First Aid. A,B,C (Airway ,Breathing, Circulation.) Getting people into the recovery position, for example, can



often make the difference between life and death.

There was a case in point a few years ago in my town. A young motorcyclist was involved in a relatively minor Road Traffic Accident. As he lay stunned on the ground a group of people stood around not knowing what to do. The motorcyclist then vomited, choked on his own sick and died. If just one of these people had put him in the recovery position he likely would be alive today.

I know a number of doctors who work in Accident and Emergency Departments and they have told me about how the general public has a habit of doing the wrong thing in medical emergencies and making things worse. For example many people think that the correct treatment for a burn is to rub butter on it! Another common error involves the treatment of people who are suffering extreme cold. A lot of people think the best thing to do is to give people alcohol. This is actually the worst thing you can do because alcohol dilates peripheral blood vessels and draws heat from the core of the body. Alcohol will certainly make you feel warmer but the physiological change it causes is really the opposite of what you want. A far better plan is to give people a hot drink (provided they are fully conscious).

When it comes to the treatment of medical emergencies you are better to do nothing than do the wrong thing!

Even in non-life threatening situations I would recommend that you know the correct First Aid treatment. For example if you are faced with a burn case the most important treatment is to cool down the affected area using cold water. This should be done before you do any TFT. Cooling the area can actually limit the extent of the burn.

Likewise I have heard of TFT practitioners treating acute muscle injuries. But again the best First Aid treatment is to apply an ice pack. You can even use a packet of frozen peas, wrapped in thin fabric to prevent a "cold burn." Again you should do this as soon as possible and before TFT not after. So I suggest that if you want to use TFT in medical emergencies then you should learn the basics of First Aid and only once you have called for medical help and have done all the correct first aid procedures should you administer TFT.

You should realise that under British Law if you are faced with a medical emergency and you don't call for expert help and you use TFT

# TREATING WITH TFT

and it doesn't work and the patient dies then you will end up in court explaining your actions to the Coroner. So I suggest you follow the procedure I have outlined above.

So to summarise:

- TFT may be useful in treating some medical conditions
- You may get referrals from GP but they are likely to be small in number
- It is important to have a professional approach when treating medical problems

• Quick demonstrations of TFT are fine but you should avoid kerbside consultations

- Be like General Montgomery always do some advance planning
- Be aware of the raft of legislation governing the treatment of medical conditions.

• Follow the correct protocol when treating medical conditions especially medical emergencies where a knowledge of First Aid can be an asset.

**Dr. Colin Barron** M.B., Ch B, TFT-VT



## TFT RELIEVES BANK ROBBERY TRAUMA By Mary Cowley Ph.D. VT

Juanita Van Ham describes the horrifying trauma of being in a bank robbery and howTFT relieved her of its debilitating effects. The illustrations included in the article are the 5 drawings she did depicting the healing process that came to include other parts of her life as well. Juanita's husband, Lee, adds his perspective.



#### Juanita's Story

I entered the credit union shortly after 9 a.m. on Monday morning. There was no line so I walked up to a teller and handed her my checks, suddenly there came from behind very loud voices yelling obscenities. It felt surreal.

#### We could be shot ...

It took me a few seconds to realize these voices were here, now, yelling and cursing for us to get on the floor. I turned around and there were three men in black hooded sweatshirts with white cloth over their faces pointing weapons, large – not handguns, but rifles. They had a young male hostage.

I didn't get far enough down on the floor. The leader, a very large, aggressive man was barking out orders to everyone and for a moment his words were directed at me. I tried to imagine myself as part of the carpet. I also thought that none of us had any value to these desperate men and we could be shot at any moment.

Feeling like both a fleeting moment and a life-time, the armed robbery was over. We were gathered into an office to await the arrival of the police and FBI.

As the bank employees and I talked a little and cried, I remembered that there was a young Afri-

**Left:** *"A Self-Portrait"* **Above Right** *"Rosemary and Re-membrance"* By Juanita Van Ham

# BANK ROBBERY TRAUMA

suffered through the incredible violence of the Scorched Earth Policy." I had carried my six-year old daughter into the ER in a coma – this wasn't that bad.

What was wrong with me? Nothing helped. I was frightened at levels beyond anything I had known before. I didn't make sense. It wouldn't go away. I felt lost to myself.

I did see my counselor and she diagnosed me with Post Traumatic Stress Disorder and said it would be a good idea to call my physician and get on medication for awhile.

#### Finally, some relief...

On the eighth day, I went to see Paul Oas, Ph.D. He had been out of town when Lee had called and had just returned. I knew nothing about the treatment (TFT). Lee had read some information out loud to me, I think, but nothing was sticking in my brain. I couldn't read or concentrate.

We entered Paul's office and I remember feeling confused and unsure but very open to try a technique that worked with the wisdom of the body, not drugs. The actual experience is kind of a blur. I remember working hard to concentrate on what Paul was saying and to follow his patterning of tapping movements. He had me say words that I mostly don't recall.

I experienced a shift inside as we repeated the techniques. Eye move-

can-American man waiting in a car outside as I entered. He had caught my attention because I liked the music he was listening to. I was concerned that he may have been the hostage and walked with one of the tellers over to the window.

the early hours

day, I knew why

nt to be I becanic

to me that this

embigance" was

ring symboli and

NEW

Message

The car was there and the doors were wide open but the young man was nowhere in sight. It turned out that he was the son of the only other two credit union members who were present during the robbery. His parents were limp on the floor sobbing with grief. I remember thinking how many times my older children had waited for me in what I thought was a safe location.

After being questioned, I returned home. The dizziness I had experienced had pretty much subsided and I wanted to get out of there. I don't know how I drove home.

# A man with no face carrying a weapon...

When I entered and saw my husthis one room in the house. I didn't want to talk about it, not even with my adult children.

I tried rationalizing what had happened. "This wasn't like being in Iraq or like the people I had been with in Guatemala who had

### BANK ROBBERY TRAUMA

ments were a part of it. I remember the instruction to sing a childhood ditty and thinking, "This seems odd." Mary had a Little Lamb came instantly to mind and as I sang it, there was the sensation like a flood gate opening up and I felt awash with joy.

I couldn't believe the sensation as I felt the rigidity of fear leave my body and my muscles relax. I laughed out loud!

If anyone had told me that I would be shifted from a paralyzing fear to joy-filled laughter in one Thought Field Therapy treatment, I would not have believed it. I had to live it!

The huge, looming, armed robber without a face was now a small figure in my head. I told Paul about it. He explained that this experience was now a memory, no longer a trauma.

#### Like a miracle...

Even Juanita's husband, Lee commented: "I felt I was observing a miracle. During the eight days Juanita had, in the words of her therapist whom she had gone to see, all the symptoms of Post Traumatic Stress Disorder (PTSD): headaches every day and sometimes throughout the night, crying when daily things stressed her, being startled by noises or movements, unable to drive, inability to sequence thoughts in conversation, unable to work, basic and general dysfunction.



But in this brief treatment, no more than 10 minutes, a huge shift happened. Juanita giggled, sparkles shone from her eyes, she was flushed with energy and took off the jacket she'd needed just minutes before. Her images of the robbers were reduced from huge, intimidating men to harmless midgets.

She sat relaxed. She was present again. I think all of us brushed some tears from our eyes, being emotionally affected by this simple and profound procedure that broke the grip of trauma and let her whole person reintegrate toward health."

The following week, Juanita commented, "I had a couple of

set backs. First, I was feeling good and was going to see my Naturopathic doctor. I have been driving expressways for 40 years but found that I went into a state of panic on the road; feeling convinced that the aggressive driving meant they were out to get me.

Two days later, Lee and I were in a different credit union in National City and I began to panic thinking about how quickly these young peoples' lives could be changed

**Above:** "Ginseng and Protection" **Top Right:** "Hawthorne and Transition" **Bottom Right:** "Juniper and Healing" By Juanita Van Ham

# BANK ROBBERY TRAUMA

if a robber entered. I had to leave before the transaction was completed. I was not traumatized to the extent I had been but definitely shaken up.

Talking with Paul, he explained about the surfacing of older traumas and told me to go through the treatment again. I did and have been doing very well even experiencing some significant healing regarding other parts of my life.

I am appreciating the body's ability to heal itself at levels far greater than I could have imagined. I am grateful for the compassionate healing abilities of Dr. Paul Oas, and the Thought Field Therapy technique.

In the next days, Juanita gradually began to re-engage life. She could think a sequence of thoughts again and plan her day. No more headaches. Her appetite gradually returned.

When expressway driving was still too much for her, we decided on a second treatment. Having a written copy of the treatment sequence with us, Lee said, "I led her in it. Again, there was remarkable improvement, and she was soon able to drive in heavier, faster traffic. How grateful I am, as the spouse, for those who are learning how to work with energies in therapy, integrating spirit with body and mind."



## TFT TESTIMONIALS VOICES OF THOSE HELPED BY TFT

#### OVERCOMING FEAR OF SNAKES

#### BY DALE SOLARZ, TFT-dx

A couple of months ago I had a neat experience helping my ex-wife, and now a good friend, Rose, overcome her fear of snakes. She was deathly afraid of snakes. Just talking about them would put her into a state of trauma. It took my daughter and me several tries before she finally agreed to talk about her snake phobia. Then she agreed to let me use TFT when she was visiting. I had to convince her I would not make her look at a snake or touch a snake or any resemblance of one.

On one occasion when our kids were young, they were looking out the basement window watching a snake crawl through the grass. Suddenly, the snake turned toward the window, she screamed and with her arms she swept the kids away from the window knocking them down on the floor. Another time, a neighbor boy put a small toy snake on the seat of her car. As she got in, she

#### LYME DISEASE SUFFERER FINDS RELIEF WITH TFT

#### **BY TANA J. - MINNESOTA**

"Trying to heal myself from Lyme disease has been a long battle. I've been on antibiotics for a year and I only feel about 50% better then I did when I first started treatment. A few months ago I decided to invessaw it on the seat, started screaming, and went into a hyperventilating shock. We almost had to call the ambulance to revive her. So, for her to agree to do this procedure was a major step.

While we were talking to her to get her prepared, she became ashen white and was starting to faint. She was basically familiar with TFT from all the talking about it in previous days and she had an understanding about doing the tapping instead of using pressure or needles on the meridians. I started by asking for her level of discomfort about snakes from 0 to 10. She said she was well beyond a 10 level and was willing to start the procedure now. So, I chose to start with the anxiety/stress/fear/ phobia algorithm. Upon completion, she said she was at about a 5 level and was feeling comfortable. I said we should try another algorithm to try to get it down to a 1 or 0 level. Next we did the complex trauma algorithm. Upon completion she said she was down to "no fear at all" and said the SUD was

tigate alternative ways to treat my Lyme disease symptoms. I learned about the relationship between symptom "flare ups" and food and chemical sensitivities. I had muscle testing done to determine which foods, personal products, and chemicals such as household cleaners would cause me to have an increase in symptoms. Once I was able to about a 0. At this point I had her do the floor to ceiling eye roll and wrapped it up to a successful event.

How long can a treatment for a fear or phobia last?

Now by way of a true testimony, she recently had a small black snake crawl into her bathroom (no guess as to how it got there). A guest of hers actually stepped on it and yelled for Rose. When Rose saw it she got normally excited and she called the kids to come and see the snake. She did not get all upset or scream or anything. She did yell but it was only to get everyone in the house to come see it. She took the back scratcher and started pushing the snake around while wondering how it could have gotten in there. She was standing next to her grandson when he picked it up and put it outside. That was the end of it. So for her, the treatment was still working 2 months after I treated her. That to me is incredibly amazing. Another **TFT success story!** 

find what makes me flare up, I've been able to stay away from these products and foods. By doing this my symptoms have decreased in severity. I strongly believe Thought Field Therapy is a great tool to use when attempting to improve symptom reduction from Lyme disease.



#### LIVING FEARLESSLY WITH TFT

#### BY DR. DARIAH MORGAN, TFT-dx, TFT-Adv

I returned home on the afternoon of Thursday, September 24 and was greeted by the familiar red flash of my voice mail recorder. "This is Jane Blume, Dariah...I did it, Dariah, I went over the edge! It was a struggle, a real struggle, because I had to press the guide rope with my nondominant hand, but I did it! I actually stepped off a 16 story building and rappelled down the side!"

Jane is a KUNM radio programmer in Albuquerque, NM whom my husband, Bruce, and I met during a TFT workshop that we did in Albuquerque in August. She is 66 years young, a recent grandmother, owner of Desert Sky Communications and became a widow two years ago after 44 years of marriage. "Well, do I curl up in a corner in a fetal position, or do I go out and embrace life?", she asked herself at that time.

Rappelling down the side of a 230 foot building in downtown Albuquerque to raise money for Special Olympics New Mexico looked like embracing life to Jane, so she became the first media personality to sign up for the challenge, entitled "Over the Edge". Shortly after making her commitment, she called me for some TFT assistance. After

# TFT TESTIMONIALS

two brief phone consultations, Jane was ready for the big day. One of only two women to rappel, she had this to say at the end of her phone message .... "I have been featured on the news here...my picture (there were actually two) will be on the front page of the metro section of the Albuquerque Journal, people felt inspired, I feel inspired! I used the TFT techniques you taught me for an hour before stepping off the building! I am grateful for your help! You helped me with my intention to live fearlessly! I could not have done this without you! Thank you!"

There is a popular inspirational plaque that asks, "What would you attempt to do if you knew you could not fail?" Perhaps it should read, "What would you attempt to do if you knew you could conquer your fears and accomplish things no one, including yourself, ever thought possible?" TFT opens the door of living fearlessly to all of us!

**Photos this page:** Jane Blume rappelling down the side of a 230 foot building in Albuquerque, N.M.. Photos submitted byDr. Dariah Morgan



# FOUNDATION NEWS

### ATFT FOUNDATION TRAUMA RELIEF EXPANDS IN 2009 IN BOTH THE VIRTUAL AND THE REAL WORLD By Joanne M. Callahan, MBA, President, ATFT Foundation

I can remember, only a few years ago, writing the agenda for the ATFT Foundation board meeting. The board was a small group of dedicated TFT practitioners and leaders, working hard to find ways to help others with TFT, raise funds, increase awareness and initiate research studies that will support TFT use in the mainstream health care fields.

Now, five and a half short years later, we have a larger group of equally dedicated leaders, some the same, some new, and an ever expanding list of humanitarian, research, relief and educational projects.

Our need for resources, both human and financial is growing daily as new projects, requests and needs arise. Even in today's tough economy, we have done an admirable job of stretching our existing resources to the max and accomplishing wonders, changing the lives of thousands and extending TFT support to nearly a million additional lives.

This year's projects include the following:

- Uganda PTSD treatment/ training
- Uganda Malaria treatment / study to support further research
- Rwanda PTSD study and treat ment second replication
- Rwanda IZERE Centre estab lished – ATFT Rwanda center

- TFT Trauma Relief Blog free trauma help in many languages
- Freedom R & R's program for returning vets and families
- Research submission from 2007-2008 PTSD study
- Research submission from 2008 PTSD study
- Documentary Rwanda PTSD work

Pending or in planning stages:

- 1. Troops training
- 2. Military training documentary
- 3. African Channel documentary
- 4. Data collection on TFT in the front lines of war

Projects in various stages of planning for 2010/2011:

- London, UK major training with local charity
- Rwanda PTSD follow-up
- Research submission from 2009 PTSD Study
- Sudan training and treatment in hospital
- Uganda follow-up training/treatment

Join us in helping to provide the healing power of TFT to the world.

What can you do to share the gift of TFT:

1. Join a committee or work group

- Freedom R & R's Chair, Joanne Callahan
- Fund Raising Bruce Paton
- Research Chair, Jennifer Edwards, PhD
- Trauma Relief Chair, Suzanne Connolly, LCSW
- TFT Trauma Relief Blog Modera tor, Mary Cowley, PhD
- 2. Help raise funds
- 3. Give presentations to community service groups
- 4. Volunteer for a Trauma Relief mis sion or research study
- 5. Post a trauma story to the blog – www.TFTTraumaRelief.word press.com
- 6. Translate the TFT trauma algorithm in print or video into another language

You can e-mail any of the chairs or group leaders to join in the gratifying work of giving TFT to the world.



# FOUNDATION NEWS



Read the ATFT Foundation's trauma relief blog. When you do, you'll want to share it with others. Dr. Paul Oas, TFT-Dx, says: "The blog is magnificent and beautifully done! Thank you for making all these stories available. I can hardly wait to share it with family, friends and colleagues." Our blog is a powerful way to give people or organizations an idea of the revolutionary impact TFT can have. Introduce them to our blog today.

Use the blog to inform, enlighten, reduce suffering in the world, and promote peace! Use it to share your own stories with others, including potential clients.

We use our blog to teach the TFT trauma relief technique in English, Japanese, Chinese, German, and Russian. Spanish, French and Italian will soon be added. A few days after posting the Russian translation, we received comments from two Russians. Translated, they read: "Saw by accident. Was surprised" [positive host for good posted notes. Read everything and got a lot of useful information for myself." How exciting it is to learn that we are reaching that part of the world!

#### TFT TRAUMA RELIEF BLOG http://TFTtraumaRelief.wordpress.com By Mary Cowley, PhD, TFT-VT

We now have 23 powerful stories about how TFT has relieved the trauma of war, suicide, genocide, kidnapping, prison, massive burns, rape, etc. Our most recent is Juanita Van Ham's account of how TFT transformed her experience after being severely traumatized in a bank robbery (read



**PEACE - One Heart At A Time** 

her story in this issue of the "Update"). A bonus on the blog is a link to the 5 amazing drawings she did depicting her healing journey. These moving testimonials reach people in a way that calls them to action—for themselves and others (even animals!). Use our blog about TFT to inform, enlighten, reduce suffering in the world, and to promote peace! Use it to share your own stories with others, including potential clients.

Send your stories to me at drmary@thecel.com or submit them directly to the blog by registering as a contributor. If you register as a contributor, your posts will link to your web site address and information that you write about yourself, as well as a list of all your posts on the blog.

Thirteen stories are now shared on video, a particularly effective way to connect with viewers. Rather than view what you (or the people you're filming) say on camera as a testimonial, just tell the story--share the experience. Talk about the trauma and how it affected you (or another); how other therapies may have been tried; and how TFT helped-the difference it made. Keep it 3-5 minutes long. When you're finished, you can upload it to You-Tube and let me know so I can post it to the blog-or you can send your video to Sheila Crouser at sheila@atft.org, who will get it in blog-ready format.

Help the ATFT Foundation make trauma relief available on a global scale! Send stories, videos, translations. Share the blog with everyone!

# **TFT TODAY** By Herb Ayers MA, LMHC, TFT Dx

# *TFT Information and Book Presented to U.S. Officials*

Herb Ayers, ATFT Board Member, had a chance to share some information about TFT with several officials lately. One was U.S. Ambassador, Ryan Crocker, ambassador to Iraq during the recent surge campaign. He asked for more information on TFT. He also spoke with U.S. Marine General, J.N. Mattis, who serves as NATO's Supreme Allied Commander Transformation and Commander, U. S. Joint Forces Command. He was able to give General Mattis a copy of Bob Bray's book, "No Open Wounds, Heal Traumatic Stress Now," which he said he appreciates.

#### New Workbook Soon Available

By Bob Bray, PH.D, LCSW, CTS, TFT-ADV

Fall is here!! We just had our first rain in many months here in San Diego - it feels so good. I love it when we get some weather as it reminds me that change is inevitable. Change in my life and I hope in your lives is almost always a positive force for growth. Soon there will be a workbook to go with Heal Traumatic Stress NOW. I would love to hear any of your thoughts or experiences with the book or using Thought Field Therapy on you or your clients. The workbook will be full of exercises to understand and end traumatic stress. Deciding the most important material to be included in a self-help tool is more difficult than I ever imagined. Your ideas are greatly appreciated!

I hope to see you at a workshop or conference soon. For information on upcoming workshops, see: http:// rlbray.com/.



### *TFT Practitioners Want To Partner With Red Cross In Australia*

By Judith Harvey

Summer and the fire season are fast approaching and it would be fantastic if the members of TFT in Australia were also members of Red Cross. If there is another disaster like the Victorian bush fires or the floods in Queensland, or like the cyclone that hit the north west coast of West Australia, we could be a bit more prepared. I found that if you were not Red Cross trained there was not a lot that you could do for any of the victims. You could not get anywhere near them, and there were a lot of people that we could have helped if we had the recognition of being Red Cross trained.

I have done the emergency services training, it is just a day's training and not hard to do. It is free of charge and lunch is provided as well. Red Cross runs the Emergency Services training every month in each state. If you refer to their web-



site there are names, phone numbers and email addresses for the different states that you can contact to get the dates of the courses.

If there is anything else that you would like to know please email me at judithharvey1@westnet.com.au.



### Mexican TFT Association Is Formed

The Mexican TFT Country Committee, under the leadership of Alvaro A Hernandez, TFT DX Adv, has been granted its nonprofit status as an AC (Civil Organization). This is a major step in the progress of TFT in Mexico. The committee has a full board that includes:

Presidentre: Ing Alvaro A Hernandez Alvarez del Castillo TFT DX Adv

Secretario: Ramon Cuauhtémoc Miselem Alfonso TFT DX AB

Tesorero: Maria Eulalia del Perpetuo Socorro Perez Porrua TFT DX ABC

Vocal: Debora Robles Gil Mestre TFT DX ABC

Vocal: Eloisa Hernandez Guido TFT Dx AB

The ATFT Board applauds the action taken by the Mexican Country Committee to legalize and promote their association in Mexico. We will hear more about their work in the near future.