ATFT UPdate



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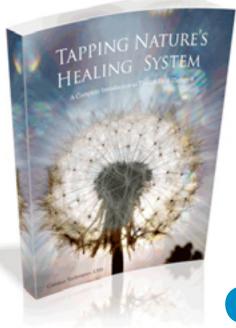
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Association for Thought Field Therapy (ATFT)

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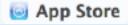
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MEMBER SPOTLIGHT MEET YOUR ATFT MEMBERS...



AYAME MORIKAWA Ph.D., TFT-VT, TFT-RCT

Ayame Morikawa has spent many hours translating all of the TFT manuals into Japanese and to organize training. She says, "Thanks to Roger Callahan's book, 'Tapping the Healer Within', published in Japanese in 2001, TFT has become known to the general public as well as to professionals."

Ayame received an offer from Kodahsha, a major publishing company in Japan, to write a simple TFT book for self-help in 2009. Her new book is coming out this fall and will be published by another famous publishing company. Besides this work, she has made presentations to a couple of academic societies including the Japanese Society for Traumatic Stress Studies and the Japan Association of Family Therapy. This year she was invited to give presentations in the National Rehabilitation Center for Disabilities and the Seiiku National Medical Center (former National Children's Hospital).

"We require specific qualifications for professional training," she indicates, "because we have a national insurance system in Japan. JATFT has ethical codes that require TFT certified therapists to maintain ethical responsibilities in their practice, and we think it is very important for professional therapists to receive credibility from the general public in order to enhance professionalism and therapist qualities. These qualifications would lead to an understanding in the medical field that would make TFT easier to be applied."

Ayame encourages members of the general public to learn TFT. They have offered seminars for self-help to non-professionals that help anyone learn TFT in a simpler way. The seminar is usually 2 to 3 hours and is focused on how the people can use it for themselves. "We have also developed an instructor's program for nonprofessional people that requires an examination to pass. The seminar gave us a chance to provide support in a tragic incident. It occured at the sports club in Sasebo in December, 2007. The man, a club member, shot a gun randomly and killed one employee and one customer. Eight were injured including the club manager. The company's executive and the staff members visited my office for help with TFT. The executive knew about TFT because he had attended the seminar for self-help. One of the staff members had taken our algorithm and diagnostic level training and he helped his colleagues with TFT. The colleagues who were doing media interviews had become highly stressed. They were surprised with how quickly TFT restored them to normal."

Gun shooting in Japan is rare. Such incidents happening in private enterprise are considered unprecedented. The company called in the most powerful and efficient way of recovering, that is TFT. The first critical response was done two weeks after the incident in the very early stage of Acute Stress Disorder. As a result, one month after the incident the club was re-opened, and all the members were back in the club. Ayame gave follow-up support a couple of times for two years and received a report of no PTSD and resignations due to the incident.

Ayame states, "Psychological problems have become increasingly serious in Japan. Psychology has been adopted as a science from the western world, while traditional psychology in Japan still has been rather philosophy-oriented based on Asian medicine, spirituality and Shintoism. Mental health care has been naturally done in daily life rather than through professional work. Japan and other Asian countries adopted science that is to be proved by statistical data, while mental health is still holding with a traditional, cultural point of view. These differences may make it easier for people to understand TFT's great work and to apply TFT in the medical and psychological fields in Japan."

She reports, "We are now working on editing the second volume of the Japanese TFT Journal featuring treatment models. TFT is a very simple procedure and can be applied in any area, but we professionals should present application models that make it easier for anybody to use in their daily life." She adds, "I will have a new seminar combined with family therapy with my colleague, Dr. Nakano, TFT-Dx, Psychiatrist in Seiiku National Medical Center. I will also give presentations 'TFT and Japanese psychological problems' in Tokyo, Osaka, and Oita, giving the general

MEMBER SPOTLIGHT

public ideas why depression has been increasing so much. TFT has significant meaning for Japanese not only as a treatment, but also as a philosophy of life. I have been working on many difficult cases including dissociation, depression, and developmental disorders that are obviously worsened by social and interpersonal stress. TFT not only eliminates the symptoms, but also empowers people to live their lives with greater awareness. Roger's word "be objective" in TFT diagnostic has been always in my mind. We Japanese try to keep objective by not being proud of ourselves. That is our professional ethics."

Ayame Morikawa serves as Chairperson of the Board, Japanese Association for TFT; Director, TFT Center of Japan; and provides Algorithm, Diagnostic, and Advanced Level TFT Training.

The Japanese Association for TFT (JATFT) was established in 2004. The three conferences for TFT study have been held every two years since then, and the first TFT journal was published in 2009. We are currently translating the journal into English. The total number of therapists who attended Ayami's training is approximatly 1,000 for 10 years since she met Roger and Joanne. Roger and Joanne have supported her development of Japanese TFT with a visit in 2009 when 33 therapists were trained and 100 members of the general public attended their Optimal Health course. In 2009, there were 225 JATFT members, of which psychologists and counselors comprised 36%, medical doctors and nurses 22%, chiropractors and body therapists 17%, while teachers comprised13% of members.



BRUCE R. PATON PhD, TFT-Adv

Bruce R. Paton, Ph.D, TFT-Adv, has been playing an active role in behalf of the furtherance of ATFT, primarily as a member of the ATFT Foundation. He currently teaches relationship and Thought Field Therapy workshops with his wife, Dariah Morgan, Ph.D. TFT-Adv, and TFT Adv. trained.

Bruce says, "I've been blessed with abundance in my life. The more I serve and contribute, the more my life expands." He adds, "I believe that Thought Field Therapy is God's gift to humankind and I've chosen to devote the rest of my life to perfecting my skills and knowledge and making this gift available to as many as I can."

Bruce's career spanned many years as a Manufacturing Manager for Procter and Gamble; former Vice-President of Frito Lay, Inc. (a division of PepsiCo) and as President of Strategic Consulting International.

Bruce has the distinction of being a Certified Creative Problem Solving Trainer of Trainers. He has taught organizational development courses at local colleges and businesses. He is an Association of Thought Field Therapy Foundation Board Member serving as Fundraising Chairperson, and has been instrumental in helping support overseas TFT missions while providing consulting expertise to the organization.

Bruce has been President of Paton Family Charitable Foundation for the past thirteen years. A member of Rotary International; past foundation vice-president for Rotary Mentor for Kids at Risk; Commissioner for Rockwall Housing Authority and Director Emeritus for Rockwall County Helping Hands. He is a former Presbyterian Church elder and Unity Church Board Member and has coached football, basketball, and softball for the YMCA. In addition to his volunteer activities, Bruce and his wife enjoy time with their 3 children and 4 grandchildren.



ROGER CALLAHAN HONORED WITH ACEP LIFETIME ACHIEVEMENT AWARD By Roger J. Callahan, Ph.D.

It was truly an honor to be recognized by colleagues from around the world, for my thirty years of building Thought Field Therapy (TFT). There was so much excitement and warmth from so many of the over 500 people attending the annual ACEP conference.

People came up to me throughout the four days telling me how pleased they were to carry on my work into the world. Others said, 'You saved my life three years ago'. Some I have met previously but had not seen for years, others I did not know but all showed the same warmth and appreciation with a passion for helping others. It was inspiring to see all the various forms of Tapping, the research being done and the humanitarian relief work that is helping so many people throughout the world.

Joanne and I received a standing ovation from our workshop "Thirty Years of Healing With Thought Field Therapy" as we demonstrated the power tools of TFT and showed the many changes and improvements that have taken place in TFT over the last three decades. The ACEP members were so grateful and some even expressed surprise at how much



TFT has evolved from its early days as the Callahan Techniques.

I was so proud when our ATFT Foundation team, Suzanne Connolly and Caroline Sakai, presented their humanitarian relief work and PTSD studies and announced the acceptance for publication of the first study. They too received a standing ovation and a very strong endorsement from one of ACEP's lead researchers, David Feinstein.

The entire ACEP conference was exciting with a wonderful positive community spirit. I am pleased to see that our practitioner base is growing and we welcome all who are working with tapping at the algorithm level to continue on with their skills and grow with our new training programs in TFT.

A special thanks to all of our clients, practitioners and 'tappers', you've helped to make TFT the success story it is today.

The June 2010 ACEP Conference included an impor-

Fellow ATFT practitioners and association members gathered after the ACEP Awards Ceremony to celebrate with Roger and Joanne.

Front: Roger and Joanne Callahan Rear: Robert Pasahow, TFT-Adv; Suzanne Connolly, TFT-Adv; Robert Bray, TFT-VT; Caroline Sakai, TFT-VT; Mary Cowley, TFT-VT; Susan Wright, TFT-Dx



tant and historical opportunity to honor Dr. Roger Callahan, who was awarded the Lifetime Achievement Award. It was wonderful to have Roger and Joanne participate in a Conference that stemmed in many ways from Roger's original Callahan Techniques and to have TFT as part of the program. I hope Roger, Joanne, and the ATFT membership will continue to be a part of future Conferences and endeavors as we move forJoanne and Roger Cananan aner the ACEr Award presental.

ward to bring more effective psychotherapy approaches into mainstream treatment for those in need.

- John H. Diepold, Jr. Ph.D.

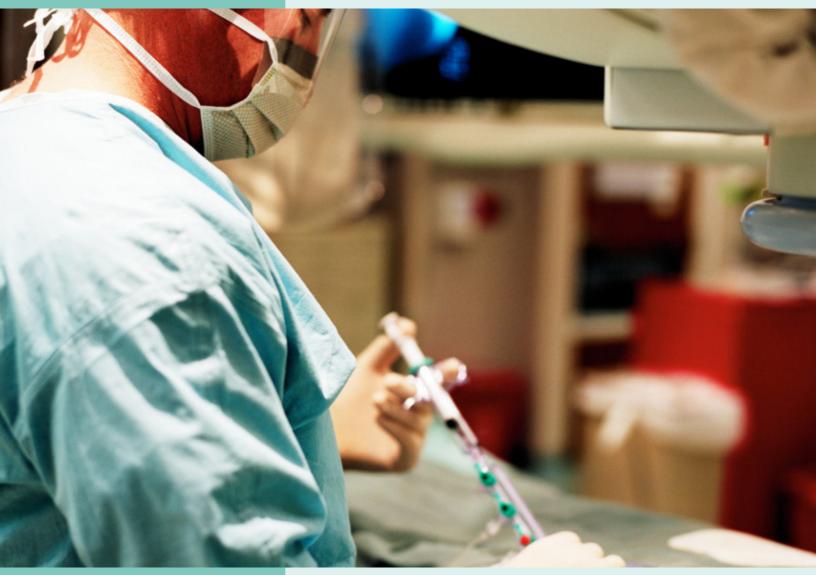
The Association for Comprehensive Energy Psychology (ACEP) is an international nonprofit organization 501(c)3 of mental health professionals and allied energy health practitioners who are dedicated to developing and applying energy psychology methods.



AWARENESS DURING ANESTHESIA: My Personal Mission to Help Others By Jeanette Magdalene, Ph.D.

I've worked with a problem known as Awareness During Anesthesia for the last 18 years. Many people don't know that an estimated 100 people per day, or more, will wake up during their surgery and not be able to speak, move, open their eyes, or do anything to let the doctors know they are awake! This is a frightening experience that happened to me in 1990 during my own surgery.

I woke up before the surgery even began only to find myself buried within my body that no longer worked as I knew it. The surgery began. I felt every cut of the knife, smelled and felt my flesh burning, heard everything everyone was saying and even stepped outside of my body as my heart started to go into arrest. I then viewed everything the doctor was doing to get my heart under control. I even heard the doctor say there was nothing wrong with me! He said, "Misdiagnosis, so never needed the surgery to begin with." The real nightmare for me began not only on the table, but after I went home and had to deal with the trauma of awareness. No one knew what I was talking about due to never hearing about





it. A Physiotherapist that I went to had told me it had to do with my childhood, and something I buried within myself. No matter how I tried to explain what happened, they would not accept it as truth, until my work in Anesthesia Awareness started coming out.

I was offered a large settlement but I turned it down so I could speak about this problem and help other people to know what I went through so they would not have to suffer in this way. I did my own research and blew one of the most well kept secrets in medicine wide open. As a result hospitals and medical schools are paying attention to what I've shared. I've written a book on Anesthesia Awareness, have been interviewed on T.V and in print throughout the world.

Recently, a friend told me about Thought Field Therapy. She invited me to attend a training with her. I jumped up and said "Yes, lets go"! We went and I'm here to tell everyone, TFT blew me away! You see, for about 15 years, I was still dealing with the traumatic aftermath of Anesthesia Awareness along with Post Traumatic Stress Disor-

AWARENESS DURING ANESTHESIA

der. I was learning how to live with the traumatic stress, but realized I wasn't really living... I was only existing.

When I attended Suzanne Connolly's TFT Algorithm class, she showed me how to put the missing pieces of my life in order and take the sting out of the trauma within the deepest parts of my being. There is not a day that goes by that I do not ask God to bless her and Dr Callahan for the true gift of TFT. This is not another band-aid over a wound... its a Gift of Life!

I've been there and can tell you I've tried everything. Only 2 or 3 therapies worked and TFT is a major help to me.

Today I use TFT Algorithms with everyone with whom I work from the very start, and it has made such a change for them and me. I understand that it is, and was hard for anyone outside of the anesthesia problem to believe what can happen. It's a true horror story but it was mine, and I believe God gave me this experience because God knew I would do the right thing with it, and I have. Wisdom saves lives. When we don't understand something, it may be shock of the unknown that could take a life. So from my heart and soul to yours I share with you what I know in hope of helping others.

STROKE: TREATMENT, REHABILITATION AND RECOVERY By Rosemary Wiseman, TFT-Dx

A tribute to Josephine (Josie) Woolf, who is 'An inspiration to us all'. R. Callahan

For all of us there are key dates and events that stand out in our memories. We may remember exactly where we were, or exactly what we were doing prior to or when that event or situation occurred. From weddings to world events, a snowstorm or even an exceptionally windy day.

I can remember exactly what I was doing in the minutes before I found my Mum on the day she had a dense stroke.

It was 6th November 2009 and Josie, my Mum, was 88 years old. Fortunately I found her soon after her stroke, or "brain attack" had happened. After calling the ambulance, I immediately began tapping Josie with TFT reversal procedures. (PR psychological reversal spot and CB2 Collar bone breathing). Josie was only able to make a small vocal sound and use her left hand to hold mine. Then there was silence. She was unable to speak. Her right leg and right arm on examination at A & E (Accident and Emergency) did not move and she was unable to swallow. She had experienced a 'left brained' stroke. In time she was admitted to Spruce Ward, which is a specialist acute stroke ward at Barnet Hospital.

For the whole family there was a lot to learn and go through. Stroke recovery/rehabilitation and journeys are so different for everyone. This meant our family, who we call 'the

team' and medical staff, lived in the present moment and strove for the best possible outcome. Apart from the useful booklets and documents published by The Stroke Association, I read the book My Year off - Rediscovering Life After A Stroke by Robert McCrum which I found helpful, especially as it made reference to how acupuncture had helped in his recovery. Of course we use the acupressure points in TFT. I also watched the film of a book I had read many years earlier, The Diving Bell and the Butterfly written by Jean-Dominique Bauby after he had suffered a massive stroke.

My ongoing work and experience with my client, May, who had suffered a similar stroke, certainly assisted me as I helped my Mother. May, her family and medical and caring staff, (at the same hospital as Josie), had given feedback and encouragement about how the work I was doing had helped. The family wrote, "You did a very good job, May is always happier after your visits. The staff are impressed as well." I particularly remember the day I visited May in the weeks after she had her stroke. I did some tapping and then played the flute to her. After I left, I was told she suddenly started to wave to other patients on the ward. Helping one's own family is a very special thing to be able to do if you can and if it is wanted. As a Hypnotherapist and TFT diagnostic practitioner and professional musician I was certainly glad of all the skills I had learned, as keeping positive and keeping one's energy up were all important in the daily hospital visits that we did for many months.

Often TFT practitioners will ask colleagues when discussing treatment "Which tapping sequences (Algorithms) did you use?" and "How did you know what to tap for?"

As there were usually no evident emotional issues with Josie, for six months I mostly treated her with TFT for any infections, visualising positive outcomes and treating reversals for general recovery on a mostly daily basis, then gradually and naturally decreasing as she improved.

I used the 9gamut sequence (9g), and reversal treatments PR (psychological reversal spot) UN (under nose) and CB2 (Collar Bone Breathing) regularly. In time Josie was able to carry out the the visualisation sequence and the 9g sequence herself, with guidance. It was interesting to observe how she was able to complete it according to her condition.

Although very sceptical at first, Josie had become a keen 'tapper' and had used the TFT techniques for a number of issues very successfully in the past.

Whenever I used the tapping for her stroke recovery, I looked for signs that Josie was happy or in agreement for me to use it. One day I asked directly if she felt the tapping helped. She said 'everything helps'. Of course her personality and a positive dispo-



sition helped enormously, as well as the prayers, healing, and love care of the family, friends and medical staff.

Sometimes I have been asked if I am a 'Music Therapist'. Being a Musician, I have found ways to use music therapeutically with some clients. With Josie we did a lot of singing and sometimes I played the flute to her. (I was glad I had learnt at least one portable instrument!) Josie would join in vocally, or move in time to the music. It was a good way to communicate and it helped in a therapeutic way with her speech. It also showed me how much life was in her.

In the early days of her recovery, even before she could speak, Josie became known on the ward for her humming. She sang along with me IN TUNE (which was particularly interesting, as Josie was my first 'client' who I had enabled to sing in tune after many years of her silence during

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communal singing). One day she had no speech. After I played the flute to her, she suddenly said 'very nice' and began to say a few more words. In January my sister told me "you can be an 'ordinary' daughter today, you don't need to tap her every day" as at this point Josie's speech was excellent. She had short telephone conversation saying "I'm jogging along slowly'. We then began regularly singing an American folk-song 'Jim along (meaning jog along) Josie'.

As a family, we kept a diary during Josie's rehabilitation. This helped with communications between us, as changes in her condition were at times rapid.

In time, as she began to recover, Josie took pride in this diary and made sure we all completed it daily! We have continued to keep this diary.

On 23rd December 2009 there was another one of those events that I can remember clearly. 'What a journey this is!' I wrote to a friend. "Yesterday when I went to see Mum they asked me to go and have a coffee while they did some new physio. I found myself at the hospital Christmas Carol service, where the lady who was supposed to be leading the singing couldn't attend as she had a cold. I stepped in, as it was being recorded for transmission to all Barnet hospitals on Christmas Day and it quickly became obvious they needed leading!' Father Tom, the Barnet Hospital Pastor, asked me afterwards which Church I went to (obviously he was impressed I knew so many Car-

STROKE

ols)! Once I'd explained I was Jewish, he told me about the Rabbi there and Jewish volunteers who can visit Mum. It gave Mum something to think about!'

Josie's recovery amazed her family/friends and medics alike, particularly when the Consultant was about to administer, within earshot of her, an end of life care package after yet another and most serious pneumonia in early February, probably caused by Norovirus and being unable to swallow at the time. Josie it became obvious was not ready to go. She fought hard and described her experience, at one point, as "a fast moving soap opera". When her grandchild mentioned about her being a 'fighter' she said 'I have a lot to fight for'.

I really noticed how Josie was striving to get better when she did the exercises for the SALT (Speech and Language Therapists) team. Although she was well motivated, which helped, the exercises themselves were quite difficult to do. For example, Josie and the bed had to be in a special position and they did require considerable effort from her. Fitting them in with hospital schedules could be difficult. One day the SALT team had to inform us the videofloscapy had revealed Josie was still unable to swallow safely, making clear the exercises and the TFT tapping had so far not worked. However, it was suggested she still continued doing the exercises. As the SALT team spoke, I could see Josie was already practising the exercises. Her reaction was clear.

In contrast, the non-invasive TFT procedures were easy to administer. So, following the perseverance of the medical team, we continued with the tapping. I also did a Hypnosis session with Josie, taking suggestions for stroke patient rehabilitation from the handbook of Hypnotic suggestions and metaphors, Hammond.





Treatment by the physiotherapists was also of extreme importance. At the end of April we were invited to watch Josie doing her physio. I saw Mum walk in the hospital corridor for the first time. It was very moving and quite an amazing experience. Words couldn't say enough. The physio said my Mum was very special. "We don't get many people like your Mum."

Throughout her recovery Josie showed great decisiveness about her wishes. Still, it was a big and brave decision for her and for us as a family to make for Josie to agree to have a PEG (Percutaneous endoscopic gastrostomy) feeding tube fitted to replace the nasal gastric tube, which she had done very well to have kept in for so long. It was also a life – making decision for her. She had a PEG for six months (December 2009 to June 2010) which allowed her time to recover.

Josie made sufficient progress to

be able to continue her rehabilitation at Finchley Memorial Hospital. Finchley Memorial Hospital were quite interested in me bringing in a keyboard for Mum as she enjoyed her piano playing a lot prior to her stroke. I was able to do this early in May. We had a family singsong, and in her diary it was recorded 'Grandma is clapping! and she was able to play the keyboard...C major scale, yes, with each hand!'. After six months in Hospital recovering from her stroke, Josie was able to walk with a frame, write and play the piano a little, speak reasonably well and eat and drink normally. On leaving, the staff at Finchley Memorial Hospital wrote an entry in Mum's diary 'Dearest Josephine, all the Nursing Staff are so proud of the way you have progressed whilst on George Brunskill Ward. We all wish you well for the future. You have showed courage and determination. Truly a superstar!'

STROKE

And so in May, 2010 Mum arrived back at Hill House Care Centre, a residential home, where her late husband had stayed some years previously, and she was once again 'open to visitors'. She described it as 'home from home'. Within weeks Josie was eating in the dining room and joining in various activities such as quizzes, art and keeping fit as well as playing her piano. As for the future, Josie says "I hope I will carry on this way". These last nine months have been an incredible journey for us all. We have learnt so much about human strength, love, friendship and about positive attitude;

As Josie would say:

'THE THINGS THAT YOU FEAR MAY NEVER COME TRUE' and, 'THERE IS A DESTINY WHICH RULES OUR LIVES, ROUGH HEW THEM AS WE MAY'

For further information contact rosemarywiseman@googlemail.com.

Or see www.rosemarywiseman. com.

To complete this article I would like to thank a significant number of people involved in Josie's recovery, from medical staff at Barnet and Finchley Memorial Hospital, Hill House, Roger and Joanne Callahan, Dr Colin Barron and of course to all family and friends who contributed in various ways.

LAYOFFS HURT, BUT TFT HELPS By Herb Ayers MA, LMHC, TFT-Dx, Member, ATFT Board of Directors

Lay off one person from his or her job and it's a disaster for the family; layoff hundreds of people from a business or plant, and it's a disaster for that town. Lavoff disasters occur throughout the United States and other countries every day because of our current economic recession. Paradoxically, our movement out of the recession is not ending layoffs nor is it creating enough needed new jobs. Economic recession causes a chain reaction loss of jobs that affects the security of millions of people. The outcome generally results in serious emotional problems for those affected.

I've been called to visit a number of different companies recently that were in the process of laying off employees. Most of the people being laid off are people who have been with their company for many years; some, upwards of 20 or even 30 years. Most of these people are not ready to retire and they have essential bills to pay each month such as a mortgage, utilities, car payments, school loans, etc., and they usually lack other financial resources. Therefore, the news that they have to find other employment comes as a terrible shock to them.

One of these companies was on the brink of a shutdown when I was called. The employees had not yet been informed that a layoff was coming, so the management wanted me to be on the scene when the announcement was made. In essence, I was like a "first responder" to help employees deal with the firestorm of bad news.

There were 250 employees about to lose their jobs and frankly, they didn't know me from Adam, but the management assured them that I would be available for counseling if they wished to see me. I was also available to help any of the managers who might become overwhelmed with the problem, and some were.

Over three days, I met with 40 people; some in small groups, some individuals and some couples. In one instance both husband and wife worked in the same company and both were being laid off.

When I arrived, I immediately sensed the tension and the apprehension among the managers. The core treatment I use is Thought Field Therapy in these circumstances, but it's also important to help the employees in other ways. Mingling with them in the lunch room, being an empathetic listener, learning which of the employees knew others whom they might refer for help, and following the instructions of management are all important factors. In general, I believe it is a good idea to help the employees understand how stress can affect them in negative ways. I explain Hans Selye's General Adaptation Theory for stress, and involve them in talking about how they manage their own stresses. I help them appreciate the fact that stress is cumulative and that everyone has their own "comfort level" for tolerating stress. When problems are not resolved satisfactorily and in a timely manner, the individual can move to a higher stress-level, that is, higher than their "normal" stress tolerance level. When this happens, the person may start thinking that their new stress-level is what is "normal" for them and they forget what it means to be in their own comfort zone. This problem can be magnified by multiple stressors that fail to be resolved until the person's system is at high risk for physical, mental or emotional consequences.

I also explain how a person's resistance to disease changes under stress as their chemistry changes with the introduction and persistence of stress hormones such as cortisol, and norepinephrine that are released at periods of heightened stress. The hormone regulating system is known as the endocrine system. Cortisol is believed to affect the metabolic system and norepinephrine is believed to play a role in depression and hypertension. Severe trauma or stress events, or even caffeine, can elevate cortisol levels in the blood for prolonged periods.

I also explain to them that heightened stress can also cause loss of REM (rapid eye movement) sleep, memory problems, lack of concentration, tension and fatigue. These problems can lead to accidents on the job or interpersonal problems at home or work. Short temper and anger sometimes result. When nothing is done to alleviate the stress, a person's immune system can take a serious hit which can then lead to other medical problems.



LAYOFFS HURT

When appropriate I also remind people that the loss of a job can also result in them going through a process of grieving. After all, it's not just the loss of a paycheck; it may also be the loss of relationships developed over many years when people have to move away. Clearly, the employees often react with denial. "This just can't be happening." And with anger, "How can they betray me after I've been so loyal! Or, "Why didn't they tell me this was coming!" Elizabeth Kubler Ross defined 5 overlapping stages of grief as Denial, Anger, Bargaining, Depression, and Acceptance.

Once I have my employee-clients sharing and understanding the importance of doing something positive to manage their stress, I explain there are also ways to eliminate stress. I usually take them through the TFT complex trauma algorithm by having them think privately about a problem they are experiencing. We use the Subjective Units of Distress (SUD) scale as well. Not everyone has the same problem on their mind during such a crisis. Some are worried about their mortgage payments; others about their age and difficulty finding another job; some are distressed about their medical benefits and what may happen to them.

By the surprised and doubtful looks on their faces, it's obvious that

my first mention of "tapping on one's face and fingers," elicits some snickers and grins. But with a little coaching, good humor and clarifying that they don't have to talk about their problems, the client-employees participate in the exercise. But not everyone is ready or willing to do TFT or to sit down with a counselor. It's not unusual to find some employees quite devastated by the layoff news bordering on panic, yet the only one he or she will turn to is a close friend or colleague. But I've also seen employees change from a highly distressed state to a calm state in which they become resolved to help themselves and others over the layoff hurdle. One employee commenting on how calm he felt following TFT remarked, "Why doesn't everyone know how to do this!" A month after meeting with the employees, I read in the newspaper how happy they were that the company brought in a counselor to work with them.

Layoff's are not the only time employees can use TFT. Sometimes I'm called to work with employee groups when a coworker has died. In these situations I still use the psychosocial approach to understanding stress, and the elimination of stress by using the Complex Trauma Algorithm. In one such situation however, a participant became very indignant with me and angrily told me I have no right to have them bring up painful emotions as they were trying to heal their own grief. I was not expecting this kind of response at the time, yet anger is a normal part of the grief process.

While I don't remember exactly what I said, I tried to sympathize with her. I also asked the group of 25 employees for their permission to continue with the algorithm and they approved my doing so. The complaining person then relented. Following the use of the complex trauma algorithm, the group spontaneously applauded. They asked for more information, and the angry participant also appeared happy. On another occasion I used TFT to help an employee and his family members after they had been kidnapped at gunpoint by armed robbers. The adults and children had exceedingly high stress levels but following the TFT intervention they functioned normally once again. The employee could finally relax stating, "I was so frightened for me and my family but now I can breathe again." I also taught them how to use TFT for their anxiety that the gunmen would keep their threat to come back to kill them.

So Thought Field Therapy can help many employees who lose their jobs and their family members. It can also help employees in other distressing circumstances. Callahan Techniques should be made available to all Employee Assistance Counselors and crisis counselors for this purpose.

CHAOS THEORY By RITA WEINBERG, PhD. TFT-Adv

This paper compares principles, practices, and assumptions of Thought Field Therapy with those of Chaos Theory. It is striking to look at the parallels between them. Roger and Joanne Callahan have discussed some of what I will write about in their book **Stop the Nightmares of Trauma** (2010).

Thought Field Therapy (TFT) is a form of psychotherapy. It presumes that we have energy systems in our bodies. If anything interferes with or blocks the flow of energy, we have a problem, psychological and/ or physical. TFT uses the meridians or energy points for their tapping patterns. TFT uses the idea of energy and meridians from Acupuncture and also incorporates some ideas from kinesiology (body movement) as part of treatment, particularly in determining the degree of pain or system disturbance their clients feel (Subjective Units of Distress, SUD).

First, a little background about Chaos Theory. Some 500 years ago, the great mathematician Isaac Newton, set the stage for what is now called linear theory. (Kuhn,1970) Since that time we have become increasingly linear in our thinking, learning and planning. This Newtonian world is one of order, certainty, quantification and predictability. It still remains the dominant paradigm we use in Western societies, in our schools and in our business world. In the last century, practitioners began to see that the world did not always behave in the orderly manner that linear theorists predicted. In fact, the world was sometimes downright chaotic.

Chaos Theory, or non-linear Theory, emerged about 50 years ago from the field of mathematics and spread to physics and other sciences, including behavioral science. The advent of computers facilitated this work by doing the long and complex calculations necessary to discover this Theory which operates with rules that are different from those of linear systems. Many living organisms, including human beings, are dynamical systems, and operate in non-linear ways.

Thought Field Therapy and Chaos Theory both deal with systems and with change. In both, our systems are assumed to be fueled by energy and they are also inter-connected. When we treat a problem with Thought Field Therapy, not only does the problem diminish or disappear but changes affect other systems and networks within the individual as well. For example, we can observe improvements in learning or in Heart Rate Variability (HRV) after Thought Field Therapy treatment helps to reduce fears. Chaos Theory postulates that there is novelty and flexibility in the nonlinear world. Thought Field Therapy is nothing if not innovative and flexible. It is a dramatic paradigm shift from other therapeutic methods. By leaps and bounds, this method, which we use to facilitate people making positive changes, is a tool which promotes re-organization into healthier modes of operation.

Chaos theory's message is that non-linear interdependent dynamics have a penchant for creating such things as patterns, coherence, stable dynamic structures, networks, and synergy. Ecology is an important part of Chaos theory. (Goerner, 1995)

TFT is a kind of metaphor for vast system changes and shifts from states of severe negative to positive emotional states. It deals with the reality of those changes made NOW, in the present. Both TFT and Chaos Theory have patterns. Yes, there are patterns within chaos. New ideas and new behaviors can emerge from chaos and negative emotional states. Clients seek treatment because their system is impaired and not functioning well. Callahan calls these disturbances in the system perturbations, a key concept in TFT. The term perturbation is defined as "difference from the norm." Perturbation is not a random event but a unique entity which contains "active information," a concept from quantum physics. It is responsible for triggering negative emotions. It controls all fundamental changes with the body, hormones, chemicals, neural pathways, cognition and brain activity. The perturbation holds the information which governs all nega-



tive or disturbing emotions. Every perturbation is associated with a specific energy meridian (Trauma, 2000).

Thus perturbations destabilize the individual's system. The system can gradually break down or it can suddenly change direction to proceed into a very different direction from its previous path. In Chaos Theory language, it is termed a bifurcation. When such a rapid change takes place, the system re-organizes. After Thought Field Therapy treatment, a re-alignment emerges in a client who is now feeling much improved and is operating with a newly organized system. Major changes often involve changes in system organization.

According to Chaos Theory, rapid change such as that described above comes about by one or more drivers which push the system into change. For example, after treatment with Thought Field Therapy, a client feels a substantial reduction in fears and finds that she can learn or do her job in a more effective manner. Perturbations in the thought field appear to be the drivers which move the system into this kind of shift, changing the trajectory or pathway of the system.

A small input, e.g., Thought Field Therapy treatment, can lead to enormous impact on the client. Chaos Theory postulates this as characteristic in non-linear systems. It is

CHAOS THEORY

known as butterfly effect. This metaphor indicates that the small movement of a butterfly flapping its wings in China can lead to a typhoon(a very large effect), in another part of the world. In other words, in a non-linear system, a small input can lead to a large output.Input and output of non-linear systems, therefore, are not proportional. This is just what occurs with Thought Field Therapy. A small input, such as an appropriate tapping algorithm, or a diagnosis which leads to a specific pattern of tapping, can produce major changes in an individual¹s life. By contrast, in the Newtonian linear system we learn the opposite is true: input equals output. What is put into the system will equal what comes from it.

Chaos Theory maintains paradoxes can exist in a system simultaneously. Psychological reversal, another of Callahan¹s major discoveries, appears to reflect a paradox within us: a part of us may be driven toward wellness; other parts or conditions prevent therapy from healing. The discovery of how to treat reversals or paradoxes, leads to more effective treatment. Using therapeutic tapping patterns to overcome various types of reversals insures a much greater percentage of therapeutic successes. Different types of psychological reversal require their own pattern of treatment.

Callahan also finds the polarity of the individual is changed when psychological reversals are tapped and corrected. It appears that a reversal correction also changes polarity in the client. That is, the direction of the energy flow is reversed and changed again after treatment for the reversal (Tapping, 2001).

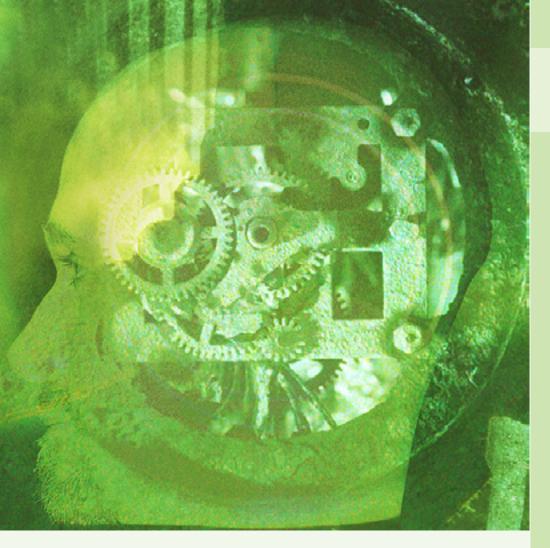
When non linear systems break down, parts of the old system float around in what is called phasespace. In that phase-space other parts called attractors draw segments of the old system towards their own orbit. Thought Field Therapy treatment appears to be such an attractor, drawing parts in, perhaps by enabling the system to change, with a rapidly restored flow of energy. It then self-organizes into a new and improved system which incorporates healthier shifts and re-alignments in individual operating systems..

Neurologically, Chaos Theory appears to be addressing the functions of the right hemisphere of our brain; the hemisphere which deals with feelings and emotions, with creativity and innovations, and with the arts. It is the hemisphere which oversees and deals with entire systems (Gestalt). The left hemisphere is more involved with linear processes such as problem solving and cognitive functions. Our educational systems usually work much more with the left than with the right hemisphere. Our work as therapists should, of course, encompass both hemispheres of the brain. But since feelings (the emotions) are so often drivers into negative and painful functioning, the right hemisphere does appear to be where we focus much of our treatment with Thought Field Therapy. Perhaps that is









one reason for its astonishing success and the rapidity with which it achieves results.

The Thought Field Therapy approach appears to be a good approach for the dynamic organizations and dynamical systems of our clients. It seems Thought Field Therapy and its parallels to Chaos Theory make it a good match for understanding and treating difficult and painful psychological problems which leads to more synchronous healing.

Thought Field Therapy is a "green" form of treatment. Like Chaos Theory, it is ecological. Ecology plays a significant role in Chaos Theory.

Thought Field Therapy works with interacting networks of the individual for the purpose of increasing systems functioning at more integrated and optimal levels. Thought Field Therapy does not introduce foreign substances into the treatment. It uses what the client brings to therapy. It provides clients with knowledge about what is toxic for them so they can live more ecologically within their own systems. Chaos theory, ecology and Thought Field Therapy deal with preventing, protecting, and promoting healthier organization shifts in our systems. Thought Field Therapy transcends organization shifts by treating all ages, cultures, genders, even species, alike. It is an equal opportunity treatment.

Thought Field Therapy is a positive force which, in many cases, allows people to find beauty and enjoyment in a life free from pain, anxiety, depression and the other ailments. As a result, Thought Field

CHAOS THEORY

Therapy promotes positive feelings of health, joy, fun, laughter, and hope for men, women and children.

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LEADERSHIP CHANGES

A Heart Felt Thank You And Congratulations To Ian Graham

Ian Graham has announced his retirement from his long time leadership position in the BTFTA and with Thought Field Therapy in the United Kingdom. Not only did he provide an excellent leadership role for the organization, he provided mentoring and leading by example to TFT practitioners in the UK for nearly 13 years.

lan was the first practitioner to study TFT in the UK. He began learning and using it in 1997 and has shared its healing powers with his fellow countrymen ever since that time.



He is a founding and life member in ATFT and a founder of

BTFTA. It has been under his leadership that the BTFTA has accomplished national and governmental recognition, insurance and other benefits for its members.

Over the years, we have periodically seen issues from differing perspectives, yet Roger and I have always had the utmost respect and appreciation for Ian's character, integrity and perseverance as he moved TFT forward in the UK.

I know many of our other practitioners and leaders in TFT share similar feelings about Ian. I have asked ATFT President, Rhoda Draper, to give her perspective, from the other side of the pond.

"What I most appreciate about Ian is his enthusiasm, his friendliness, the breadth of his knowledge and, above all, his generosity. In February 1999, I returned to Ireland after my first Dx training in Indian Wells feeling somewhat isolated. I found Ian's website and, grateful for a TFT contact in the same time zone, called his phone number. He couldn't have been more helpful and encouraging. Later, when I started my own training courses, he generously supplied me with all his training materials including demonstration DVDs, useful research papers he had compiled as well as an A4 layout of the training manual!

Ten years on I still contact Ian when I need to make sense of something, knowing that his scientific mind will reliably produce the answer. Although he will no longer take the role of Honorary President of BTFTA, I am confident that he will continue to work for the advancement of TFT in many other ways. So, thank you, Ian, for all your help in the past – and in the future!

We will miss his solid, clear thinking as we work with BTFTA committee to resolve issues and bring more benefits to our membership in the UK. As he always has in the past, he has offered to help as he can and we are grateful.

Best wishes to you, Ian, from all of the ATFT board and membership and, especially, from Roger and me.

Joanne Callahan



TFT TODAY By Herb Ayers MA, LMHC, TFT-Dx

WORDS OF GRATITUDE

Dear Joanne Callahan;

Thank you very, very much for the wonderful gift you sent me and brother Augustine. We already received the money you sent us. Our assistance for Suzanne and Caroline was done and will always be done because it is our duty for the well being of our people who suffered a lot from trauma based and other psychological problems. When we observe change in the lives of the people we are treating using TFT, we really feel a deep joy in our hearts and all this is because of your generosity which pushed you to think about us and and your love for us that led you to decide to send again the team from the USA to train Rwandan therapists who are now doing their best to help people using TFT. What is pleasing us the most is that after the departure of the team from USA, now many people are coming every day at IZERE CENTER to be treated, the average number being 30 people a day, and we are trying our best to treat them and finish them all. Thank you so much, and may God bless you all and bless your work always.

Father Jean Marie Vianney

.....

Dear Herb Ayers,

I want to thank Dr. Nora Baladerian from Los Angeles for responding to our need for trauma relief after Katrina by initiating the arrival of several groups of thought field therapists and two trainings to New Orleans. I cannot thank you all enough. Even now, almost 5 years later, we are still tapping and benefitting from this helpful therapy. As you know, now the BP oil spill crisis has left many in our region devastated, helpless and in need of more trauma relief. We cannot express to you enough how essential this therapy has been in helping many of us move past these traumas and we hope that this new disaster will bring more opportunities for more people to learn this therapy from the experts, as well as, perhaps, a Diagnostics Training for those of us who are ready to learn more.

Ecoee Rooney, MSN, RN, SANE-A Director, Professional Development, Practice Excellence and Clinical Affiliations Interim LSU Public Hospital New Orleans, LA 7011

.....

I am so happy to have discovered TFT! After decades of sleep problems, no doubt in later years exacerbated by the onset of menopause, I finally found something that eased me into slumber and kept me asleep all night.

I am a Red Cross volunteer and I was relating some of my sleep issues to another fellow volunteer who said he knew of something that may help. He is a counselor who uses Thought Field Therapy in his practice, and he demonstrated some of the TFT techniques with me. I tried them at home for the next few nights. That was nearly a year ago and I have been sleeping soundly almost every night since and have only had to do the tapping maybe twice in all that time.

Since then , I have shared what I learned with some of my friends and am spreading the word about what is possible without drugs.

I don't understand how it works or why it works. I only know that it DOES work and I am very happy to have discovered it. It is wonderful to wake up refreshed and rested and ready to take on the day. To all of you TFT practitioners, keep up the good work! Kimba Overby Tri-Cities, WA



FOUNDATION NEWS

By Joanne M. Callahan, MBA, President, ATFT Foundation

ATFT Foundation Goes To Haiti and Back To Rwanda

This year the ATFT Foundation has been very busy with follow-ups to research, training many new TFT practitioners, treating those in need, and spreading the healing power of TFT around the world. We continue to grow, expanding our service, education and research.

Caroline Sakai and Suzanne Connolly have just announced the 2006-2007 El Shaddai study with the orphans and street children of Kigali, Rwanda, has been accepted for publication in the International Journal of Emergency Mental Health. They presented the amazing results at the recent ACEP Conference in San Diego, CA.

Suzanne and Caroline were recently in Rwanda, with Gary and Cyndi Quinn, training, treating and doing follow-up research. They are doing both a quantitative and qualitative follow-up for the 2008 and 2009 PTSD studies. The IZERE Center has welcomed them back for a diagnostic level training and another algorithm level training to increase the center's skills and outreach in the community with TFT. And even though Caroline spent the first week without her luggage, as you can see from the notes, it has not slowed them down.

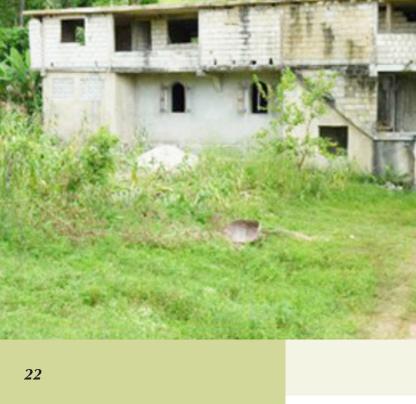
Suzanne shares some Rwandan notes with us:

"Caroline and I and the Quinns have been quite busy. Last week we did a one day review session for the therapists trained in 2007 and 2009 who are from the various Serve Centers associated with Catholic Relief Services. They are all professionals who serve vulnerable groups such as AIDS centers, orphanages, centers for street children, homes for the blind and aged and handicapped, etc. It was good to see familiar faces and good to hear about how they are using TFT to help the people they serve. They had some truly amazing stories.

The next day we did a two day algorithm training for Serve Center leaders who had not been previously trained. Then we worked on the Follow up study over the weekend.

This week began with a review training for therapists trained last year at the Izere Center. The next day they attended a Diagnostic Training and the next day, with the help of our interpreters selected by Father JMV, we trained 34 new therapists. As last time, they were well selected. We trained the head of the famous S.O.S. Village, many school teacher, a nurse, heads of various orphanages, a pharmacist,

The Codeha Training Center is used by many who serve local people.





TFT training on the ground floor of the Codeha Training Center

leaders of various sectors, and cells and some well picked University students. Today we head out to supervise 35 therapists as they treat 200 villagers. There will be a combination of the therapists trained in 2009 and the newly trained Rwandan therapists."

We all are so grateful for their hard work and dedication and pray for their safe return home.

TFT Mission to Haiti:

Howard and Phyll Robson have just returned home safely from Haiti. They have sent me some early details and photos from the joint ATFT Foundation's, USA and UK, mission to Haiti. The USA ATFTF funded the training attendees and facility and the UK ATFTF the materials.

I want to personally thank Howard and Phyll as this is the second mission (first was Uganda) that they have completely funded all of their own travel expenses and purchased supplies for the mission with their own funds. Their dedication and generosity has made these missions possible. They not only serve on the UK ATFT Foundation board, they offer their financial support as well.

They joined a physician's team from the USA doing community outreach and provided the TFT training and treatment for the community and the team.

Training took place on July 5-6, at Codeha, a training center still under construction, in a rural setting.

They trained 32 people, mostly professionals: - 28 local people and 4 members of Dr Carolle's team. All participants were provided with a training manual. ATFT Foundation Certificates of Attendance were given all attendees upon completion.

Travel in Haiti is challenging due to poor infrastructure. None of the attendees stayed overnight, they travelled each day on foot or motorbike. The local language is Creole and at times it was difficult to translate from French to Creole.

The participants were very attentive and frequently applauded them for their efforts.

Howard and Phyll invited the newly trained therapists to join them



at the hospital in the days following training where they treated patients each day. They were pleased to experience some supervised practice treating local people who were suffering from a variety of problems, including pain, anxiety, anger, frustration and traumatic stress.

Six students were able to join them at the hospital where they experienced the power of TFT for the very first time. Their enthusiasm and joy at the results they could achieve after just two days training was visible on their faces. Two of the students joined Howard in the Medical clinic where TFT was used to help reduce palpitations, anxiety and pain. Most of the people who attended the hospital harboured fears of dying should there be another earthquake.

Howard feels that "Although our mission was of short duration, our experience was that Thought Field Therapy provided relief from physical and emotional symptoms, of great value to a population, most of whom have very limited access to medical care."

Phyll feels certain that those who



FOUNDATION NEWS

were trained will be able to help others because they worked under supervision healing many of the patients at the hospital for three days. They have the confidence to treat patients, friends and family. The local people accepted TFT without any reservation. The hospital staff was just as keen to receive treatment as the local people.

She said Haiti would be a very worthy case for future trips. The foundation's hope that future trips will allow us to reach more people and provide a larger group of trained TFT therapists throughout Haiti. Perhaps we will have the opportunity to travel to the Port Au Prince area to assist.

As we all support and work to

fund and staff these missions, we always hope that we are providing lasting change, giving a traumatized people the tools to help themselves and fellow countrymen heal.

I believe the paragraph that Suzanne sent to us in one of her updates from Rwanda, shows us what is being accomplished.

"We then went to the reception in Byumba. The Bishop of Byumba said a prayer and greeted us as did other local dignitaries. One of them from this sector told of how when he first came to the area, so many people looked unhappy and never smiled. Now, he sees them smiling and enthusiastic about life. Before they were not productive and now they are very busy with projects. He sees a whole community that has changed because of Thought Field Therapy."

It is work well worth doing and the foundation's are now receiving requests to come back, to Rwanda, to Uganda, to Haiti, and so many other areas. As we grow, our leadership is working hard to find ways to fund the many humanitarian projects, research and trainings.

Dr. Robson is working to complete a proposal we will be submitting to European charities for a large study in Uganda.

Bruce Paton, our fund raising chair (see this issue's spotlight), will be leading the US board in a business planning retreat at the end of July in Sedona, AZ. Our dedicated board all are paying their own expenses for this retreat, as we strive to grow and expand our reach.

If any members have ideas, contributions or contacts, that would help us in our planning retreat, please contact me, Joanne@tftrx.com , or Bruce Paton, drbrucer@sbcglobal.net. We appreciate your participation and support.

TFT training at a local Haitian hospital.



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