

Multiple Phobias Treated with EFT – 10-Year Follow-Up

By Patricia Carrington

Gary Craig's Introduction:

Dr. Patricia Carrington has made many fine contributions in the past. Some of you know her as the Research Chairperson for ACEP, while others have had contact with her through the EFT Certificate of Completion (EFT-CC) program. She is also one of the luminaries in this energy psychology field, having been around it much longer than most of us (myself included).

Now, here is Pat's message--written in her thorough, narrative style. It depicts the lasting power of EFT and, along the way, visits (1) numerous client reactions (2) multiple aspects, (3) the Apex problem (4) the value of persistence. You will also appreciate the crescendo type of ending wherein the quality of this multiple phobia relief was put to a series of real-world demanding tests.

There are times when nature seems to help us out by testing our EFT work to see whether it's "for real." My experience with "Louise" is a prime example of this and also demonstrates the extraordinary lasting power of this approach.

When Louise originally consulted me it was for problems she had "leaving home." She was a highly competent executive in a major corporation, a large, rangy young woman with startlingly blue eyes, a pretty face, and the ways of an exuberant child. She would often burst into my office like a whirlwind and start talking long before she was seated.

At the age of 32, Louise was still living with her parents and almost daily had verbal battles with her mother, on whom she was nevertheless very dependent. She couldn't drive 40 miles from her home to my office because she was afraid of driving on highways and over bridges (she had to cross the Hudson River to arrive at my office), so on the few occasions when she came to see me in person, her mother had to drive her there. The rest of the time we worked over the telephone.

Strange as it may seem, Louise's therapy took place more than ten years ago. This was in the days when "formal EFT" had not yet been devised, so at the time it didn't occur to me that I could use a tapping procedure to handle Louise's dependency problems, and I confined its use to dealing with her fears. Today I would immediately apply EFT to the kind of deep personality problems she was displaying. Had I been able to do so with her it would probably have enabled us to get to much deeper layers of her problem sooner and with greater effectiveness.

In these "frontier days" of the energy psychology movement all I was using was a rudimentary, single algorithm method which I had developed from Roger Callahan's then "Callahan Techniques," the name which he used to refer to his method. I called my approach "Acutap," and as it turned out, it was remarkably similar in many respects to Gary Craig's EFT method (which by the way was developed entirely independently – neither of us knew each other or the other's work). Even though it didn't have what I consider to be some of the most powerful attributes of EFT, such as the introduction of the Reminder Phrase, the subtle delineation of multiple aspects of a tapped-on problem, and the clinical variations of the method known as the Art of Delivery -- my basic single algorithm was surprisingly effective for many purposes. When I became acquainted with EFT, I collapsed my Acutap method into it and EFT has been my energy psychology ever since.

At the time I was seeing Louise, I was still somewhat timid about using a tapping method because in “those days” (it seems an eternity ago) most psychotherapists weren’t using such methods and many colleagues resisted my efforts to tell them about it.

Before I had started to use tapping with Louise we were already making progress by talking about her problems and helping her “grow up” a bit emotionally. She had also learned my Clinically Standardized Meditation (CSM) method which was serving to calm her fiery temperament somewhat. As a consequence of these interventions she had begun dating a man in whom she was genuinely interested. Then, to everyone’s surprise (including the man’s!) “Ted” was suddenly transferred to Australia. He and Louise found themselves on opposite sides of the earth.

But it was when Ted phoned her to tell her that he was going to have a week’s vacation from his job there that the challenge occurred which led to my use of tapping with Louise. Ted couldn’t fly home for his vacation because he had to handle some duties in Australia, but he offered to pay for Louise’s plane fare if she would join him for that week. Would she fly over?

Louise was thrown into conflict. Not surprisingly, this young woman who feared highways and bridges was absolutely terrified of plane travel. However, in her usual precipitous fashion, Louise announced to me that she was determined to join Ted for that week in Australia even though she was terribly afraid of being in strange places and “petrified of plane travel.” Could I “fix” her fears for her?

That was a pretty tall order. “I” (notice that Louise didn’t say “we,” I was supposed to do it for her) had only three weeks to accomplish this miracle. The multiple fears that Louise displayed, embedded as they were in a context of deep personality problems revolving around her dependency on her mother (and on other mother figures, including this therapist!) and her obvious immaturity on certain levels, would ordinarily have required a long course of psychotherapy to resolve. Did I dare tackle them in three weeks with a relatively unheard of procedure?

I decided that I dared. After all, what could we lose by trying it? I suggested to Louise that she have her mother drive her to the office to try a “revolutionary new technique that was being used for phobias.” Maybe we could whirlwind our way through to a solution. I had no idea at that point that I could do an acutapping procedure like this over the telephone – Roger Callahan, Gary, and the others had not yet demonstrated this fact for us. Today of course I wouldn’t hesitate to use EFT over the phone for a situation of this sort and it would no doubt be highly effective.

Louise’s mother drove her in to see me, waiting patiently for an hour and half in the car while her daughter and I worked on her multiple phobias that revolved around being alone and apart from her mother. I explained that first things come first. We’d have to tackle her fear of traveling alone by car first, before we could address her fear of flying to Australia by herself – stands to reason.

In that first session we handled Louise’s fear of driving on a highway. Tap-tap-tap, and after about 6 rounds she was down from a 10 to a 2. In the “olden days” of energy psychology, a “2” was the best I could hope for. I never expected to have a client get down to a zero, and of course, they didn’t.

Next, we tackled her fear of bridges. Down to a 2. Then Louise confided that she was plagued by a fear that her mother would die. She had obsessive thoughts about this every day which she couldn't banish from her mind. Tap, tap, tap and that came down until it was negligible. Then we tackled her fear of being alone at her place of work. She couldn't work after hours without being so frightened of an unidentified danger that she lost concentration. That came down to a 2.

Louise kept going at this; she had terrific energy, for one and half hours. Fear after fear was eliminated. Then she jumped up and asked me -- How could she be sure that the relieved feeling she had now wouldn't disappear when she got out on the "real road"?

I told her we didn't know what would happen but that there was an 80% probability that it would last. I then asked her to drive all by herself to her appointment next time, all 40 miles to my office and back. Somehow I felt she could do this now and that it would be an important step in preparation for tackling her airplane phobia in the next session. But she had to promise me that if she felt anxious while driving she would stop the car and pull over to the curb and "tap" the fear down to at least a 2 again. She said she'd do that and vanished. Louise moved at an amazing speed!

The following week she was back, having driven by herself the whole 40 miles. No mother. After she sat down she fastened her intent gaze upon me and told me that while she had driven all this way by herself, she nevertheless had had to "stop several times to tap!" She was scowling when she said this as though the method had let her down. I asked her if doing that had helped. Had she been able to bring her distress level down? She nodded but looked dubious. The fact that she had never before been able to drive alone for that distance, and over bridges too, was apparently not considered too significant. I was to learn that this type of "Apex" effect (or denial) is typical of certain clients, although certainly not of others.

When I asked Louise whether during this past week she had any of her usual fears about her mother dying, she looked bewildered. No, she guessed not. She hadn't really thought about it. What about her fears of being alone in the office building where she worked? As a matter of fact, she said, she had stayed there one evening by herself to finish up some work and come to think of it, she hadn't noticed any fear at all then.

So far so good, despite the lack of acknowledgement on Louise's part of her progress. We started on the plane phobia, which turned out to have multiple aspects. Louise was afraid of going far from home, of being in a strange city by herself, of being in an enclosed place, of being anyplace where she was out of control or felt "trapped", of heights, of a plane crash, of the "swooping" feeling when the plane rises or dips. You name it, it frightened her.

One by one we tackled these fears over the next few sessions and soon she felt comfortable with the idea of flying--at least when discussing it in my office. So I gave her some "homework." She was to go to the airport and watch the planes landing and taking off, tap away any anxiety that occurred as she watched them, and then walk up to the ticket counter and tap away whatever anxiety occurred there.

When Louise came back the next week she had plane tickets to Australia in her purse. When she had tapped her anxiety down at the airport she had felt a sudden urge to buy the tickets. She made a decision to GO! Our work on this issue was now almost complete, just a few details to clean up and Louise would, enthusiastically, depart for distant shores.

Or so I thought.

The night before her departure I received a desperate phone call from Louise. “Dr. Carrington, I’m terribly scared!” I asked if her fears about the plane trip had come back, feeling quite sure that this was the case. “Oh no,” she said. She felt absolutely great about the trip, it was the fact that she wasn’t crying at leaving her parents that frightened her, and the fact that she wasn’t scared about leaving her mother. She wanted to know if it was “normal” NOT to be crying at this point and to be feeling good about going away alone – or if it was a “bad omen.”

I didn’t waste much time assuring her it was “normal” for a 32 year old woman not to be crying at leaving for a week’s plane trip without her mother. We just started tapping for her fear of “not having fear” and her fear of “not crying,” and brought them both down over the telephone. Louise now felt fine and was ready to leave for Australia, which she did.

A week and a half passed before she phoned me on her return to the states and breathlessly told me what had happened. If I had created an obstacle course to test the strength of the tapping effects I could never have dreamed up such an effective one. Here is Louise’s trip as she recounted it to me.

When the plane had left the airport for Chicago, she had experienced surprisingly little fear, maybe once or twice she had to tap a bit but that was all. When she got to Chicago and they were laid over for an hour between planes – a strange city and she was alone – she still experienced no problems.

It was only after the plane had set out for its nonstop trip to Los Angeles that nature’s “tests” began. When they were about an hour out of O’Hare airport, the pilot announced over the loud speaker that passengers must fasten their seat belts and remain in their seats because one of the plane’s engines had “caught on fire”. He said they would turn back to O’Hare airport and “try to land”, however they might have to make an emergency landing in a field before that time and they “shouldn’t be worried” if this happened (!).

According to Louise, at this announcement “people began screaming and praying in the aisles and some were throwing up.” But, she told me nonchalantly, she was one of the few who didn’t panic. However she did feel pretty uncomfortable when they reached O’Hare airport and she looked down and saw the fire brigade and the ambulances lined up waiting to rescue them. “I didn’t feel good about that at all,” she said, “but I didn’t panic.”

That wasn’t quite the end of her trials though. After a few hours wait in O’Hare, the passengers were put onto another plane headed for Los Angeles. But instead of going there nonstop they were informed that the plane would land temporarily in Salt Lake City with no reason given for this. When it landed, Louise watched an emergency medical crew board the plane, go back about ten seats behind her, and remove the body of a man who had died of a heart attack while in flight – it was thought that he had been traumatized by the earlier fire incident. Louise told me that she felt very sorry for the man when she realized what had happened, but still she “didn’t panic”.

There was a little more to go though. Eventually they landed in LA to discover that they had missed their connection to Australia because the overseas plane had not been able to wait through the many hours of delay. The airline accordingly announced that they would put the passengers up at a motel at their expense so that they could board another plane in the morning. They would have to spend the night in LA.

Louise had always had a fear of being in a strange city. Now she was in a strange city under what can only be described as rather strange circumstances. She handled this without difficulty. She had been sitting next to a nice woman on the plane and the two of them decided to go out to dinner together in Los Angeles. Louise forgot to be afraid to of a “strange city” and the layover went fine.

Their new plane left the next morning for Australia, and Louise described her flight over the Pacific as “a breeze” because nothing much happened, there was just a quiet ocean to look at.

She then spent a wonderful week with Ted in Australia and had a pleasant easy trip home. When she phoned me to tell me about it she was happy about the trip but was (surprise, surprise!) once again having unpleasant disagreements with her mother. Clearly there was a lot more therapeutic work to do be done. All of Rome was not built in a day, as they say.

However, from that time on flying was not a problem for Louise, nor was driving on highways or staying in offices after hours. Her company promotion the following year called for her traveling on the company’s behalf all over the world, and Louise took it in her stride. Now, ten years later, Louise, now married with two children and in a high executive position in her company, has traveled extensively on planes ever since this treatment and hasn’t given this a second thought. It is as if she had never had such an incapacitating fear in the first place.

One of the most interesting aspects of Louise’s experience is that there appears to have been a permanent obliteration of her phobia – ten years is more than the 7 year “cure interval” decreed by medicine. During this time, Louise’s former negative memories of planes have been replaced by a host of positive memories. She has experienced so many successful, easy, comfortable trips on planes following the tapping treatment that her former reaction is now but a dim memory. There is nothing like an accumulation of good memories to wipe out negative ones – in this case, apparently permanently.

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