

# Professional Practice Techniques

There are a number of techniques that are highly useful for those with professional EFT practices. Nonprofessionals can also use them, and none of these techniques is beyond the reach of the novice practitioner, though they all presuppose a base of experience with EFT's foundational techniques. They can be used independently of each other; there is no requirement that you master one of them before experimenting with another.

## **Maintaining Client-Centered Focus**

EFT is a client-centered practice. This means that the center of gravity in EFT sessions rests with the client, rather than the practitioner. Sessions begin with clients describing a problem they're facing, and continues with the practitioner offering Setup Statements and tapping with the client. The flow of the session, however, is best controlled by the client. One way of assessing the skill of a practitioner is if clients believe they made all the breakthroughs themselves. The purpose of teaching EFT is to empower the client to solve his or her own problems, rather than cultivating dependence on the practitioner to solve them.

When considering intervention by the practitioner, less is more. The simpler and less intrusive the direction offered by the practitioner, the better. An expert practitioner may guide and occasionally suggest but provide the client with plenty of space and time to come up with the solutions from within. Self-generated solutions are usually far better matches for the client's circumstance than solutions conceived on the outside. They are congruent with the client's existing neural network and behavioral patterns.

For this reason, teaching the client to tap is better than having the practitioner tap on the client. Learning to tap on 12 acupressure points is simple and very easy for a new client to learn. Only rare cases require the practitioner to tap on a client. In many jurisdictions, such touch by mental health professionals is not permitted even with permission from the client. Shifting the locus of power to the client empowers clients to take healing into their own hands (literally!). It provides clients with a tool that they can use in real-life stressful situations, rather than fostering dependence on a professional to solve these problems.

If a practitioner is faced with a choice between following a path that he or she has plotted for a session, or following the client's lead in a different direction, it's preferable to validate the client's chosen path. This plus tapping can give clients the confidence to pursue their journey of transformation.

A client-centered focus also avoids the power differentials inherent in the therapist-client relationship. In such a relationship, the therapist is the expert. EFT emphasizes that the client is the expert when it comes to his or her own internal states, and the role of the practitioner is to teach a self-help tool. A good practitioner cultivates a peer-to-peer relationship with the goal of fostering self-sufficiency in the client. This approach avoids the power differentials inherent in conventional therapist-client relationships.

### **Self-rating versus Observer-rating**

The word "rating" is used to describe the assessment of the severity of a problem. The SUD scale, which EFT borrows from the work

of psychiatrist Joseph Wolpe (1958), is the most common way to rate that severity. EFT relies on the client, not the coach or psychotherapist, to rate the problem. This places the task of evaluating the results of a session firmly in the hands of the client.

If you're a coach, you might occasionally sense that a client is rating the severity of a problem lower than nonverbal signals indicate. Perhaps a client says a problem is a 2, but you observe shallow breathing, tense shoulders, and perspiration. In such cases, it may be appropriate to ask the client to rate again, saying something like "You look upset. Are you sure you're only a 2?" This provides the client with an opportunity for reflection. The client may then scrutinize his or her feelings, and agree with you that the number is higher. Then again, the client may not. In either case, accept the client's rating of the problem, rather than declaring, "I can clearly see you're a 10."

The whole focus of EFT is to put the power back in the hands of clients, even if they are just learning the skill of rating the intensity of their emotions. If the coach or other practitioner grabs the reins and tells clients what their SUD number is, they remove the power from clients' hands. Some clients may have difficulty providing accurate SUD scores when first learning EFT, but it soon becomes second nature. If you think the client isn't accurately reporting SUD, make a mental note but don't invalidate the client's rating. Learning to rate their emotions might take clients some time, and a coach's support and validation plays a large role in the development of clients' confidence.

### **When Self-acceptance Is the Problem**

I remember a striking EFT session with a famous actress. I was teaching a workshop in Los Angeles and the organizer asked me to do EFT with an actress friend of hers. She drove me to a beautiful Beverley Hills mansion, and introduced me to her friend. I was star-struck to be in the presence of someone I'd seen in movies. The actress was tall, willowy, and beautiful, with a powerful personal presence.

I was moved and saddened to hear details of her chaotic childhood with an absent father, mentally ill mother, and physically abusive siblings, all lived in the Hollywood limelight. I formulated a Setup Statement, and asked her to tap on, “Even though [problem], I deeply and completely accept myself.” To my surprise, the actress burst into tears. It turned out that self-acceptance was one of her core issues. This woman, with millions of adoring fans all over the world, admired for her stunning beauty, was filled with so much self-loathing that she could not even choke out the words, “I deeply and completely accept myself.”

This phrase is part of EFT’s Basic Recipe. What do you do with a client who can’t say the words? There are several less confrontive versions you can experiment with. While a client might not be able to say those words, they may be able to make a more tentative statement. Examples of these are:

*I’m doing the best I can.*

*I’m a good person.*

*Many parts of me are okay.*

*I’m improving all the time.*

*My Higher Power loves me.*

*I’ll like myself someday.*

*I am working on accepting myself.*

*I feel compassion for myself.*

These less forceful versions of the Setup Statement are acceptable substitutes. Suggest one that matches the client’s current level of self-acceptance. In my experience, clients are able to say, “I deeply and completely accept myself” within a few rounds of tapping.

The self-acceptance problem is why we say “accept myself” and not “love myself.” Many clients are triggered by “accept myself,” but many more are triggered by the words “love myself.” We begin with self-acceptance, and introduce self-love when the client is ready. Usually within a session or two, clients can say “love myself” even if they couldn’t even say “accept myself” at the start.

## The Role of Insight

Insight is a cornerstone of the psychotherapy of the past century. Insight is the ability to link events and beliefs in a tapestry of meaning. Perhaps a male client has an aversion to balancing his checkbook. An expert therapist assembles details of his early childhood experiences, including the client's poor performance in high school math classes. The therapist asks the client if he was ever punished for poor math performance, discovers that he was, and has an "aha" moment. His insight is that, as a child, the client was punished for calculating sums. Declining to balance his checkbook is an extension of his childhood experience that attempting to add numbers was likely to result in punishment. These insights can be very valuable to a client's understanding of the source of his behaviors.

Unfortunately, they may go no further. Sigmund Freud believed that insight produces change. Insight may produce change, but simply knowing why you have a problem does not always bring a solution. At a recent conference, I was fortunate to share a number of meals in the faculty lounge with Stanislav Grof, MD, a psychiatrist who was one of the earliest experimenters with LSD. After LSD was made illegal, Grof sought nonpharmaceutical methods of altering consciousness, and developed a technique called Holotropic Breathwork. He described how, as a young man, he went to Freudian psychoanalysis three times a week for 7 years, but it failed to produce change. It certainly produced insight, but he described the overall result as mistaking the map for the territory. He had an excellent map of his psyche but no idea how to alter his course. He joked that taken to its logical conclusion, psychoanalysts might eat the menu, mistaking it for food.

Insight may produce change, but knowing exactly how you got so messed up psychologically does not necessarily provide you with any clues about how to repair the damage. The process of discovery also takes a very long time.

EFT places a little emphasis on insights generated by the therapist or life coach. The focus is not on how you got messed up, but on how

you can heal. That's why EFT tests relentlessly, asking clients if their SUD scores have gone down. The earliest proponent of SUD, Joseph Wolpe, was equally disenchanted with psychoanalysis after observing that it failed to provide relief to veterans of WWII suffering from PTSD. Like later proponents of EFT, Wolpe was intensely practical: he wanted methods that made people feel better, and fast. In at least one study of anxiety, the Diaphragmatic Breathing method favored by Wolpe was as effective as EFT (Jain & Rubino, 2012).

EFT does not require insight to make progress, though insight can be useful. Particularly useful are insights that emerge spontaneously from within the client's experience. When tapping clients have an "aha" moment and link their current problem to a childhood pattern or belief, they're usually excited by the insight. They now understand a new facet of their inner world, and may experience a feeling of satisfaction and integration.

As a coach, you're likely to have many insights while working with clients, but I urge you to share them sparingly. Let the insight emerge from the client if at all possible. You might see the links, but they're much more powerful if the client discovers them without your help. It might take the client much longer than it takes you, but emerging organically from within the client's consciousness, the links and insights have much more power than if you offer them from the outside. When the client exclaims, "I just realized the reason I feel so reluctant to balance my checkbook is that I was punished for doing my sums wrong by Sister Lorenzo in third grade!" he is in control of his own restorative process.

You might have powerful insights that will impress a client, but dazzling the client with your brilliance is not your job in an EFT session. Less is more. Letting clients dazzle themselves with their brilliance is far more valuable. Letting them have the insight, and own the insight, even if it takes longer, places the power firmly in their hands. That's where it belongs.

## Collarbone Breathing Exercise

One of the many techniques borrowed by EFT from TFT is the Collarbone Breathing Exercise. It's used in cases in which the Full Basic Recipe is not producing a reduction in the SUD level. It takes about 2 minutes to perform, though the instructions are complicated and should be followed exactly. Here are the instructions.

During the Collarbone Breathing Exercise, keep your elbows and arms away from your body. The exercise uses your knuckles and fingertips; these should be the only parts of your arm that touch your body.

Place two fingers of your dominant hand on the Collarbone point on that same side of your body. With the first two fingers of your nondominant hand, tap the Gamut point (in the groove in the bones that anchor the last two fingers) continuously while you perform the following five breathing exercises:

1. Breathe all the way in and hold your breath for 7 taps.
2. Breathe half way out and hold your breath for 7 taps.
3. Breathe all the way out and hold your breath for 7 taps.
4. Breathe half way in and hold your breath for 7 taps.
5. Breathe normally for 7 taps.

Then place the first two fingertips of your dominant hand on your nondominant side's Collarbone point and, while tapping the Gamut point continuously, perform the same five breathing exercises.

Bend the fingers of your dominant hand so that the knuckles of the second joint stick out. Place them on your dominant side Collarbone point and tap the Gamut point continuously while doing the five breathing exercises. Repeat this after placing the knuckles of your dominant hand on the Collarbone point of your nondominant side.

You are now halfway through the Collarbone Breathing Exercise. Repeat the same procedure starting with your nondominant side. When you're finished, proceed with the Full Basic Recipe. Many prac-

titioners have reported significant shifts in SUD levels after using this exercise, even with clients who had been going nowhere before.

### **The Floor to Ceiling Eye Roll**

This technique is for use when a client is at a low SUD number, perhaps 1 or 2, but is not getting to 0. It takes only around 6 seconds to perform, so it's faster than doing the Basic Recipe. Here's how to do it.

Tap the Gamut point on the back of the hand. Tap it continually, hold your head steady, and repeat the Reminder Phrase while performing the following eye movement. Start with your eyes looking all the way down at the floor, with your head held straight. Keeping your head still, raise your eyes slowly to the ceiling, taking around 6 seconds to do so. Clinical practice has found that this is often enough to bring the SUD level to 0.

### **Reframing**

Reframing refers to changing the frame through which a client sees an event. You can't change past events, but you can see them through different lenses. Imagine looking at an old photograph of a family on vacation. You place it in a dark and somber frame. It seems depressing. You take it out and place it in a happy-looking frame ringed with smiley faces on every side. You might perceive the same photograph as joyful. That's the power of reframing: same event, different emotional tone.

Reframing is a useful technique in EFT sessions. Clients often spontaneously reframe an old event after tapping. An event that previously seemed traumatic to a client may be placed in a neutral emotional frame. I worked with Jacques, a man whose father had spanked him with a belt on several occasions. He was angry and resentful toward his father. After EFT, Jacques said, "I know my father loved me, he was doing the best he knew how. Compared to the way his father, my granddad, beat the crap out of him, what he did to me was

just his best effort to keep me in line. I was a handful.” Jacques had flipped to perceive the spankings as an example of his father’s restraint, rather than abuse.

Either the context or the content of an event can be reframed. The context represents the meaning of the event. Here’s an example. Before EFT, Roberta exclaimed, “I am so angry at my mother for not protecting me from my father’s abuse. I can never forgive her.” After EFT, Roberta saw the same events in a different context. She said, “Mother was trying not to get assaulted herself, knowing that her survival was all that stood between us kids and Dad’s craziness. She also knew Dad was a good provider, and the family couldn’t survive without Dad’s paycheck.”

The second kind of reframing involves the content. Janie first said, “My sister tried to pull my hair out when she got angry and jealous.” After EFT, Janie saw the content differently, and put it this way: “My hair is strong and thick to this day, despite my sister’s efforts to destroy it.”

The client or the coach can do the reframing. A simple reframe by a coach might be to add the words “and you’re safe now” to a Setup Statement. This places the traumatic event in a context of safety and of the present moment. Coach: “Even though your mother threw things at you, she had terrible aim, and she always missed, and here you are safe and sound.”

Cognitive shifts by the client often result in spontaneous reframing while doing EFT. As a client taps, she may shift her perceptions of the people and events that troubled her in the past. She may go from describing the two bad things that happened on vacation to the six good things that occurred. The bad things fade in intensity after tapping, allowing the good things to predominate in memory.

## **Reframing**

Reframing refers to the practice by the coach of providing a context to the next phase of the session. The coach might say, “We’ve made

great progress on your anger toward your sister for the way she acted at Thanksgiving. Now we're going to nail all the remaining aspects of that event." This type of statement by the coach sets up the expectancy in the client that she will, in fact, completely release all the unpleasant emotions lingering since the event.

One of the most elegant preframes was developed by hypnotherapist Milton Erickson. It's called the "Yes Set." He would ask a client three questions in a row, the first two having an inevitable answer of yes. He would then ask the client the third question, to which he wanted a yes. The previous two questions would preframe the outcome of the third. For instance:

Erickson: It's a nice day, isn't it? Client: Yes.

Erickson: Are you comfortable in that chair? Client: Yes.

Erickson: Are you ready for change?

The client was now in the rhythm of answering yes. Erickson would also use the word no in a similar way, a technique known as Erickson's No Set.

Preframing can be used to reinforce either a positive or a negative expectation. In the Thanksgiving example, the coach set the client up for positive change. An EFT practitioner can also reinforce the negative. An example of this might be: "We've tapped successfully on the superficial aspects of the problem. We can probably make great progress on the deeper aspects, so let's go there."

## Identifying Tables and Legs

One way of conceptualizing the difference between general problems and specific events is the analogy of tables and legs. General problems are the tabletops, while events are the table legs. Examples of general problems are procrastination, low self-esteem, anxiety, depression, disappointment, and lack of self-confidence. There are many others.

Though clients may come to us driven by a desire to solve a tabletop-type problem, as EFT practitioners we look for the table legs.

The legs are the events that gave rise to the tabletop. For instance, a client might have a tabletop of a lack of self-worth. You dig for specific events, and discover that her father put her down for being good at school, believing that a woman's place is in the home and academic performance is irrelevant. When she showed him her second-grade report card, he said, "When you're barefoot and pregnant, that won't matter." She remembers many similar incidents. Her mother became competitive with her when she reached puberty, and when she put on a skirt and makeup for her first date, her mother said, "Wipe that stuff off. You look like a slut." The client remembers nothing other than being put down for being precocious and beautiful. All these incidents combined to create the tabletop of low self-esteem. But the tabletop did not spring to life fully formed. It was built gradually, the culmination of dozens or even hundreds of specific events. The client is aware

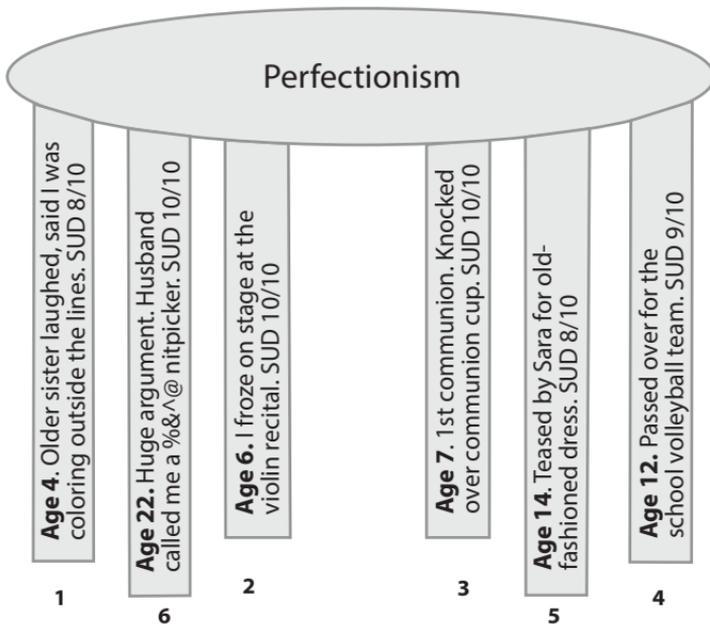


Figure 1. Tabletop and table legs.

that she has low self-esteem and is seeking counseling for the problem but has not traced it back to the individual events that gave rise to the problem. If you tap on the tabletop, your success will be limited. Just as the tabletop was created by individual events, it must be collapsed by removing the emotional charge from those events.

A client might see this as a daunting challenge at first. If there are hundreds of events, do you have to tap on each and every one? This is where EFT's generalization effect comes into play. Once you've removed the emotional charge from a few of the major legs through tapping, you destabilize the whole table and the top comes crashing down. You don't need to tap on every event, just enough events to collapse the tabletop.

Take a look the table and legs diagram in Figure 1. Perfectionism is the tabletop. The table legs consist of several events. The first one is at age 4, when the client's older sister saw her coloring outside the lines and mocked her. The last one is at age 22, when she had a terrible argument with her husband and he called her a nitpicker. Three of them are a 10 out of 10 intensity on the SUD scale, and reading the brief descriptions of the events, we can understand why they might cumulatively have resulted in a habit of perfectionism. She also has various core beliefs reinforcing her tabletop, such as "I'm never enough," "I always get punished no matter how hard I try," and "Murphy's Law: If anything can go wrong, it will." She believes all three statements very strongly.

We tap with the client on the first two events, and she goes to a 0 for both. We check in again, and the other events have now all dropped by 2 points in intensity. We tap on the First Communion memory, her SUD goes to a 0, and goes to a 1 for the remaining three without tapping. We didn't have to tap on all seven events. After we've tapped on only three, we ask the client how big her problem of perfectionism is, and she exclaims, "I'm perfect just the way I am, warts and all. I enjoy my life even if I never change." This indicates a cognitive shift, a reframe of how she perceives the world. Once we've tapped on

some events, her intensity goes down for all the remaining events, and some go to 0 without tapping at all.

You test your work further by assuring her that she'll "always get punished no matter how hard I try." She disagrees with you vigorously, even though she held firmly to this core belief at the start of the session. She tells you that other people appreciate her and what she does and usually praise her rather than punish her. This shows that her core beliefs shifted when enough legs were knocked from under the tabletop.

Here's an example of distinguishing tabletops from legs written by expert EFT trainer Jan Watkins. Jan is a former attorney and psychotherapist who earns rave reviews from students for her Level 1, 2 and 3 workshops, and you can see evidence of her fine mind in the following story. When the client resolves old childhood events, she gains a fresh perspective on the challenges she faces in her life right now.

### **Tabletop: "I'm Unlovable"**

*By Jan L. Watkins, JD, MSW*

Laura came to an EFT practitioner because she was overwhelmed with life generally. She expressed disappointment in her lack of accomplishments in her movie production career, her failure to keep pace with her friends, who had successful careers and children, and her disconnection with her father and stepfamily. Laura's family was quick to blame her for just about everything. Additionally, Laura was uncomfortable in her community, and she reported, "It doesn't feel like home" and "I feel all alone here." She was sensitive to social feedback and constantly worried that she had done something to alienate her friends. Her story revealed several tabletops or core beliefs, including: "Something's wrong with me," "I'm unlovable," and "I'm alone."

Initially, the practitioner had Laura use continuous tapping while explaining her dissatisfaction with her relationship with her father, the issue that troubled her the most. Laura felt unloved by her father and his new family. She was excluded from certain family photos, and

was criticized for not having advanced degrees. One family member even told her that everything was “her fault.” Laura had a tabletop belief that she was unlovable, and many table legs, or specific events, supported that belief. We addressed many specific family experiences separately with EFT. Setup Statements included, “Even though he said, ‘You have to work hard like your siblings to get ahead,’ I deeply and completely love and accept myself” and “Even though I’m not in that family portrait, I deeply and completely love and accept myself.”

Other core beliefs were revealed during Laura’s sessions. Laura had undergone many unsuccessful infertility treatments. She had heard many discouraging statements from professionals, such as, “You’re too old” and “Your body isn’t properly equipped.” She reported during an EFT session, “There’s just something wrong with me! I’ve always felt that way” and “I’m so alone.” These core beliefs represented additional tabletops that had formed as a result of Laura’s early experiences.

As Laura felt the experience in her body of “something’s wrong with me” while tapping, she was flooded with unpleasant memories of early childhood experiences that had led her to conclude that she was flawed. She was embarrassed when she moved to a new area and kids made fun of her southern accent, and humiliated when kids made fun of her for needing special help with schoolwork. She was tested repeatedly and labeled as learning disabled at a very young age. She felt responsible when her father moved away after her parents divorced when she was in elementary school. As an only child, she was often alone, as her young divorced parents had active social lives. These early table-leg experiences supported the tabletop, or core beliefs, “Something’s wrong with me” and “I’m alone.” Laura used EFT on these and other early childhood memories. Setups included: “Even though I was called in by the teacher during recess to be tested, I deeply and completely love and accept myself” and “Even though I played alone with my new Christmas toys, I deeply and completely love and accept myself.”

The emotional charge was initially very strong on many of the early table-leg experiences. During each session, we addressed specific childhood events with EFT until there was no remaining charge. Laura's circumstances began to change. The tension eased between Laura and her family. Laura was surprised when her father invited her to a special occasion and her siblings unexpectedly began to communicate in respectful and loving ways. Eventually, Laura reported feeling more comfortable in her community. She developed more compassion for herself and began painting and exploring new interests. She decided to put her plans to start a family on hold, as she rediscovered herself and reexamined her goals and vision for her future.

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The type of shift described by Jan, with a client gaining a new perspective on her current life after old events are tapped through, is typical with EFT. It's important to tap on each leg separately as Jan

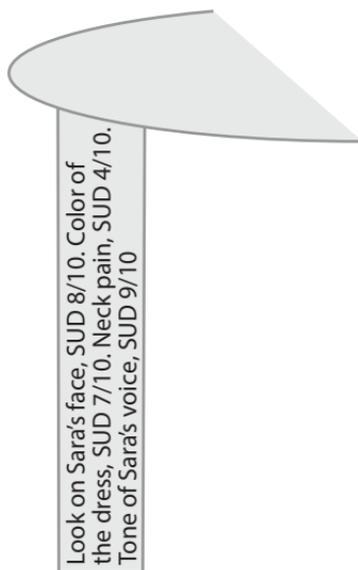


Figure 2. Aspects within a table leg event.

describes. Within each leg, you might find several aspects (see Figure 2). For instance, as an EFT practitioner working with the client who has the tabletop of perfectionism, you would look for different aspects of the client's experience at 14 when Sara teased her for her old-fashioned dress. The client may be at an 8 for the look on Sara's face, a 7 for the color of the dress, and a 9 for the tone of Sara's voice. You tap on the first two, but then she says she has a sudden pain in her neck, a kinesthetic aspect that emerges in the middle of the session. You tap on the pain as a separate aspect, and perhaps you use the Movie Technique or Tell the Story on the Sara memory as a whole. You might find that when you tap on one aspect, such as the pain, EFT's effect generalizes to all the other aspects. You might find some go to 0 even without tapping. Eventually, testing reveals that all aspects of the event are now a 0, and you move on to the next event.

It's well worth getting clear on the differences between tabletops and table legs, and between legs (events) and aspects. Knowing and exploring these distinctions and tapping on each piece of the event until all the emotional intensity clears is important to being thorough and to getting good results for your clients.

### **Becoming Extremely Specific**

When you're not sure if a client is fully in touch with the emotion that underlies a traumatic event, you can find out by becoming extremely specific. If the client has told you there were bodies lying on the ground after an auto accident, and says he's now at 0 for the accident, ask him how many bodies there were, and in what positions they were lying. If he's truly discharged the emotional intensity, his SUD scores won't go up. If they do, you may have missed an aspect, and you have more tapping to do.

You can ask very detailed questions about what the client saw, heard, and experienced. For example, if the client says, "Dad yelled at me" you can ask for the exact words that he used. If she says, "He hit me," you can ask "How many times?" This kind of specificity tests how thoroughly you've cleared out the trauma capsule. If it's clear, a

client is able to recall even horrific details of a traumatic scene without becoming emotionally triggered.

### Targeting the Problem from All Angles

Especially if I'm short of time, after identifying specific events, I may use many versions of the Setup Statement in quick succession, as I seek to clear as many possible aspects of the problem quickly. Some of these might resonate with the client; others might not. I watch their faces carefully and notice when one seems particularly potent. I then follow it up with more along those lines. I might use 10 to 20 different statements a minute, after which time we'll have exhausted most of the possible ways of targeting the problem. In the case of the German doctor with the wrist injury described in an earlier chapter, whose father criticized her for not coming first in her school in her exams, I used phrases like:

*My father's angry face.*

*His angry eyes.*

*His angry words.*

*Full of anger.*

*Life is full of anger.*

*I am full of anger.*

*He never approved of me.*

*He never approves of me (switch to present tense)*

*I never approve of me.*

*I'm never good enough for him.*

*I'm never good enough for anyone.*

*I'm never good enough for myself.*

*He doesn't love me.*

*I don't love me.*

*Nobody loves me.*

*Nobody will ever love me.*

... and so on. These phrases, repeated while tapping and especially while performing the 9 Gamut routine, can clear the emotional impact

of many similar memories in a very short period. The goal is to formulate every possible variant of the statement, eliminating emotional charge from each of them. This technique starts with specifics, like Father's angry eyes, and then spirals outward in a progressive swirl of generalities, each of which may be linked to the event we're targeting.

### In Vivo Testing and Confrontive Questions

The most common form of testing in EFT is Joseph Wolpe's (1958) SUD scale. This is by no means the only way we test our results in EFT. There are many other ways of testing the results of a session besides the 0–10 scale. Two of these are in vivo testing and confrontive questions. *In vivo* simply means “in life,” as in “in real life.” If you have a client who's afraid of heights, ask her to look out of a high-rise window after an EFT session. That will tell you quickly how successful your work has been. If your client is claustrophobic, ask him to step into an enclosed space such as a closet. If his SUD level stays low, you've used a real-life situation to test the results of EFT. If you're teaching a workshop and a demonstration subject has a fear of public speaking, ask her to make a speech to the class after her EFT session. You'll immediately establish whether or not your approach has borne fruit.

Confrontive questions are another method of testing. If a client was assaulted by Uncle Bob, a family member, you can ask confrontive questions like:

*What was Uncle Bob wearing at the time?*

*What exactly were his words?*

*When will you see Uncle Bob next?*

*Imagine the future scene vividly. What will you say to him?*

If you've truly cleared the emotional impact of the old assault, the client may be able to answer these without a rise in SUD scores. If not, you might have more work to do on the past event. Confrontive questions might even reveal a cognitive shift from powerlessness to powerfulness. It's not uncommon for abuse victims to now per-

ceive themselves as large and the perpetrator as small. They may feel empowered enough to plan to tell Uncle Bob what they think of him. Successfully passing this test means that the client has cleared the emotional impact of the traumatic event.

### When Your Client Feels Worse

Usually after an EFT session, clients report great improvement. This is not always the case, however, and sometimes a client might report feeling worse. Does this mean EFT isn't working?

It's important that EFT practitioners validate client experiences. If a client reports feeling worse, treat it as an opportunity to go deeper. Just as you might be delighted when a client's problem gets better, be curious when a client reports getting worse. Encourage the client to report his or her progress honestly, without overt or subtle insistence on reporting only positive experiences.

An alert practitioner will use the situation as a way of facilitating deeper healing, rather than treating a report of "feeling worse" as a problem. The following are some of the common reasons that clients report feeling worse after an EFT session, and what action you can take.

**They're dissociating, and EFT has put them in touch with their feelings.** Clients with a history of traumatic events often dissociate. Dissociation serves a protective and adaptive function in young children, allowing them to function in the midst of their chaotic families. Dissociation may become the standard way a client deals with emotional difficulties and the pattern of dissociation may persist into adulthood.

Dissociative clients may start to get in touch with their long-suppressed feelings after they start using EFT. A dissociative client might initially provide you with a low SUD score for a horrific event. They may, for instance, describe a childhood rape, and then say, "But I don't feel anything, I'm a 2." When they start to tap, their SUD level may start to rise as they get in touch with the trauma encoded in the event.

It might seem that EFT isn't working because that 2 might become a 10. In reality, EFT is providing them with a safe space in which they can reopen old wounds, reexperience bad events, and tap them through to a place of emotional resolution. If you suspect dissociation, follow the Clinical EFT procedures for working with a dissociative client. In these cases, the SUD level typically rises, then falls again as all the aspects of the memory are addressed.

**They have permission to feel negative emotions for the first time.** Throughout our lives, we are taught to think positively. This is exemplified in sayings like “When the going gets tough, the tough get going,” “If life gives you lemons, make lemonade,” and similar admonitions. A relentless drumbeat of positive thinking permeates popular culture. If you're sad, you're reminded things will get better: “This too shall pass.” Growing up, phrases like “Big boys and girls don't cry” communicate to us that our negative emotions are unacceptable. There's no room for them, and rather than being taught how to process them, we're taught to stuff them. When a negative emotion comes to the surface, it triggers adult caregivers, who often try to suppress it as quickly as possible. The media presents us with images of heroes and heroines as people who stay positive, keep the faith, and overcome adversity.

We have a habit of pushing away uncomfortable and difficult experiences. These then wind up in what Carl Jung called the “Shadow,” the part of the self that has been suppressed or disowned. These elements of our shadow are often festering just below the surface, begging for attention and healing.

When we start to use EFT, these shadow elements may come to the surface. After the first few positive experiences with EFT, our psyche might realize that it has a safe way of processing old emotional trauma. Aspects of the shadow start to emerge, in order to be healed. Parts of ourselves that were too dangerous or overwhelming might crowd into our awareness, so that they can be safely reprocessed and

integrated into our larger personality. This might show up in an EFT session as “feeling worse.”

Think of an EFT session as a safe space in which a client can process this backlog of negative emotional experiences. It may take many sessions, but allowing these experiences to come out of the shadow, be reexperienced, and emotionally digested is an ultimately healthy experience, even if the client feels worse when he or she starts to feel long-suppressed feelings.

**You’re tapping on the tabletop, not the table legs.** Clients often state problems in broad terms such as “anxiety” or “self-esteem.” EFT is rarely effective when used on these generalities. Instead, you have to find the specific events that gave rise to the general problem. As discussed previously, the general problem is like a tabletop, supported by many legs. The legs are the specific events. A tabletop such as procrastination, for instance, might have been created out of hundreds of individual events in which, as a child, the client was invalidated. You do EFT on each of those events. As noted, you don’t typically have to work on every single one, because when you collapse enough legs, the whole table crashes down. Sometimes it takes tapping on only one or two legs to collapse many others. Some practitioners work on “the worst” or “the first” leg; the worst of the many experiences, or the first time that type of experience ever occurred.

When you tap on a tabletop, you might sensitize the client to the problem, without resolving the emotional intensity held in the legs. In such a case, the client might report feeling worse. The solution is to make sure you’re targeting the legs, and all the aspects contained in each leg.

**You’re tapping on an adult issue, when the real problem lies in the client’s childhood.** On the first day of one EFT workshop, a practitioner worked with a woman who was greatly triggered by a male colleague who treated her dismissively. The woman’s intensity went way down. The next day, however, she reported that it was right back up again. An expert practitioner then worked with her, and ignored the situation with the woman’s colleague. This second practitioner delved

deeper, and found a similar event that had occurred during kindergarten, when a male teacher had disparaged her work.

After EFT, the childhood issue was resolved. When the woman was then asked to think about her adult colleague, she said his behavior was “just silly,” and she had no emotional intensity around it. The real problem was the childhood issue, and tapping on the adult problem the first day produced no lasting change. When the childhood event was addressed, the intensity of the adult issue vanished, even though it hadn’t been tapped on that second day. If a client feels worse, you might be overlooking a childhood issue in which the trauma is rooted.

**The client is rating a different problem rather than the original one.** Often a practitioner will have an experience with a client that goes something like this:

Practitioner: *Where is your pain, and how intense is it?*

Client: *It’s in my shoulder, and it’s a 7 out of 10.*

They do EFT.

Practitioner: *Are you feeling better now?*

Client: *No. I feel worse. My pain has gone up to a 9. EFT clearly isn’t working.*

Practitioner: *Really? The pain in your shoulder is now a 9?*

Client: *The pain in my shoulder? Oh, that’s gone. The pain in my hip is a 9.*

This might sound funny, but it often happens. The client perceives that the problem has become worse, and reports a higher number, because they’ve shifted their attention to another problem, after the first problem has been quickly resolved with EFT. Make sure, if the client reports feeling worse, that they’re focusing on the same area in their body or the same experience in their psyche that they were reporting on initially. Chasing the Pain, one of the Gentle Techniques, is appropriate to use in these cases.

**The client has shifted aspects.** The client might have been picturing the face of a perpetrator who assaulted her. When first providing a

SUD score, she tells you it's a 7. After tapping, it's a 9. She concludes that EFT isn't working. You inquire what her number is for the perpetrator's face, and she tells you it's a 1, but the smell of his breath is a 9. She's shifted aspects. The first round of EFT was, in fact, successful, but the client shifted aspects rapidly. She's not trained to look for them, but you, as the practitioner, are. You find the new aspect, tap on that, and the number goes down again. A client may switch between many different aspects in the course of processing an event.

**Cautions.** When clients report a higher SUD score after a round or rounds of EFT, it's vital to validate them. Virtually all clients wish to please their practitioners, whether the practitioner is a medical doctor or an EFT expert. A client wants to get better, you want the client to get better, and this produces psychological pressure to report lower SUD scores. When clients report a higher SUD score, validating them supports their confidence in tuning in to their bodies. This establishes trust, reliability, and a good working relationship. You can go on from there to find out why the SUD score might be rising, but it's vital to validate the client's experience first.

### Energy Toxins and Allergens

Energy toxins and allergens are substances that interfere with the effectiveness of energy psychology treatments. They aren't necessarily toxins or allergens in the conventional sense of the words. They may be innocuous yet still prevent EFT from having an effect. In a series of cases presented by Roger Callahan and colleagues (Pasahow, Callahan, Callahan, and Rapp, 2014), one was a 38-year-old male client who was successfully treated for insomnia using Thought Field Therapy. In a subsequent session, he told his therapist that for the previous two nights, his insomnia had mysteriously reappeared. On investigation, they discovered that the client's wife had begun using a new detergent that was harsh and heavily scented. After a subsequent application of TFT, and his wife switching to an unscented detergent, his insomnia disappeared for good.

Soaps and detergents can be energy toxins. So can certain fabrics. Perfumes can be energy allergens. During one visit to Washington, DC, to testify before a congressional committee, I left the hearing room feeling elated that we'd effectively presented EFT in a conventional forum. With two colleagues, I got into a cab and I made some cell phone calls on the way back to our hotel. An air deodorizer strip hung from the cab's rearview mirror, and the fragrance felt sharp to my sense of smell, despite the many odors of a busy city. After a few minutes, my nose began to close, then my sinuses, then my throat. I tapped while I was talking, but I felt as though I could not breathe. I became nervous despite tapping. I felt as though I was drowning, and I was surprised the tapping had so little effect. That fragrance was clearly not toxic or a conventional allergen, but it was an allergen for me. If you find you aren't making progress with a client, or if progress is suddenly reversed, scan the client's environment for possible energy toxins and allergens. The client can eliminate fragrances, soaps, oils, detergents, and fabrics, one by one, till the culprit is identified.

### **Massive Reversal**

Some clients are so massively reversed they're hard to work with. In cases of massive reversal, psychological reversal isn't an occasional impediment to success; it's a way of life. There are clients for whom psychological reversal is their normal state, and any other energy configuration feels foreign to them. With experience, you'll be able to spot these clients easily. They are often very intelligent, and have a difficult time accepting progress with EFT on a mental level. They may feel a change physically, but their minds will argue that such changes are not possible, or at least be very puzzled.

Clients may have massive reversal generally, or in one specific part of their lives such as food. Some obese people go into reversal whenever they're around food, and find it very difficult to respond to normal cues involving taste, smell, or satiety. Reversal blocks out the usual signals. Others go into reversal when it comes to other parts of their lives, such as work, money, or relationships.

Working with a client who is massively or chronically reversed is a challenge because they can't readily perceive the usual signposts indicating successful progress. I recall working with one brilliant researcher during a workshop. I sensed shortly after I met him at the start of the workshop that he had massive reversal. I observed that his face did not reflect emotional shifts the way the faces of other participants did, as though he perhaps had Asperger's syndrome. His body moved woodenly, without free articulation of the joints. His questions reflected mental puzzlement about the course curriculum. He had difficulty connecting emotionally with the other participants. He had trouble performing the Cross Crawl, an exercise drawn from the field of energy medicine (Eden, 2012). Reversed clients typically have difficulty with this exercise, or are unable to perform it at all. I decided to work on him during demonstration, partly to show others in the room that EFT is not a panacea and doesn't always produce a dramatic result. Though I applied all the best EFT techniques, his SUD score dropped only slightly.

My subjective experience during the demonstration echoes that of other cases with clients who are massively reversed. I found myself becoming drowsy, and the air seemed thick, as though made of syrup. I found myself becoming drawn into his internal arguments that EFT couldn't work, and becoming unsure myself whether EFT would work. My mind became foggy, and I had trouble remembering the techniques I planned to demonstrate. I felt as though I were fighting an invisible force throughout the session. The force seemed determined to block any progress, fluidity, thought, or movement.

With experience, you'll learn to recognize massive reversal quickly. In these cases, it's important to tap long and often on the Karate Chop point to correct psychological reversal. I might spend two thirds of the session on that one point, returning to it again and again. Rubbing the "Sore Spot" on the chest just below the point where the collarbones join the breastbone is also effective for psychological reversal. Energy medicine has further techniques for correcting massive reversal when EFT fails (Eden, 2012). Though there are few clients in whom reversal

is so massive that EFT makes little or no progress, most practitioners will eventually cross paths with one, and knowing that this condition exists prepares to you deal with it when it arises.

### **Physical Symptoms That Resist Healing**

Many people have used EFT successfully on physical issues such as rashes, headaches, sore throats, and similar problems. Sometimes we can tap directly on the physical problem, creating a Setup Statement with the words, for instance, “This migraine.” There are often emotional factors underlying our physical symptoms, however, and it’s usually much more fruitful to dig for those.

You might try tapping on the physical problem first, or you could search for the emotional problem first. If you’re an experienced EFT practitioner, you’ll probably work with your clients’ emotions, even if you believe the physical problem might be resolved by tapping on it, because it’s an excellent way to dramatize to the client the contribution emotional factors make to our physical symptoms.

A key question to ask if a physical ailment doesn’t yield to tapping is: “What emotional experience might underlie this physical issue?”

Sometimes a client will immediately describe one. A client might say something like “These migraines began just after my husband asked me for a divorce.” Other times, a client is unable to come up with any emotional experience associated with the symptom.

In these cases, ask the client to guess. These guesses are usually close to the target. One young man in an EFT workshop could not identify any emotional event linked to his migraine headaches but had a word that triggered him: “injustice.” We asked him to make up an event, and asked who might have said words of injustice to him, or been a headache in his early life. “My mother,” he replied. “What might she have said?” we asked. “You can’t have what you want,” he told us. We asked him to visualize her face, and asked how old he was. He replied that he was 8, and his mother was telling him he could not use his yellow bicycle. He’d saved up and bought the bicycle with his

own money, and when he transgressed, his mother wouldn't let him use it. These questions helped him evolve from a guess, to an actual event, to an emotional contributor to his migraines. Once he tapped on the event, the migraine headache that had developed during the EFT workshop went away.

Though it's possible to get some success tapping on physical symptoms alone, don't stop there. Find the underlying emotional issues, and you'll usually have long-lasting success with EFT.

### **Guidelines for Serious Diseases**

You aren't likely to see "one-minute wonders" with serious diseases. Though these have been known to happen, and it's essential for the practitioner to be mentally open to a client healing, serious diseases usually require time, persistence, and collaboration with the client's healing team. Serious diseases often take many years to incubate, and may take quite some time to reverse. The average cancer grows for 12 years before it is detected (Jemal et al., 2011).

Yet up to 30% of cancers resolve spontaneously by themselves, without any medical treatment or intervention (Challis & Stam, 1990). This shows that your body has a remarkable ability to heal itself and reverse even serious diseases like cancer. The amount of time between the first cancerous cells arising and when cancer is detected can be substantial. That serious cancer growth was not created overnight, and expecting it to disappear in a flash of tapping is unrealistic. Serious diseases usually require support from the client's entire health team. This includes doctors and mental health practitioners, as well as health coaching and tapping.

Conventional medicine excels at treating emergency conditions such as infections, wounds, and mechanical injuries. It often fails with chronic and autoimmune conditions. Many diseases such as type 2 diabetes are called "lifestyle diseases" because they're propagated by the patient's lifestyle rather than medical causes. Stress plays a big role in lifestyle, chronic, and autoimmune diseases, and this is where EFT can

help. But EFT cannot be used as a substitute for lifestyle change. EFT may reduce a client's stress, but if the client continues to make lifestyle choices like an unhealthy diet and no exercise, EFT cannot counteract the long-term effect of these choices.

Here are some recommendations for using EFT with serious diseases.

**Tap daily.** Tap in the morning on waking with the intention of releasing anything other than positive thoughts and beliefs about the day ahead, and about life in general. Personally, I tap this way for 5 to 10 minutes every morning. I'm not awake enough to formulate Setup Statements, so I tap generally, intending to release anything other than my highest good. Tap in the evening just before going to sleep, releasing all the stress of the day, intending to have good dreams and sleep well.

**Tap whenever you think about the disease.** A simple Setup like "Even though I have chronic arthritis, I deeply and completely accept myself" doesn't require much imagination. If you tap every time you notice your pain from arthritis, you get into the habit of associating the disease with the stress-reducing effects of tapping. This can reduce your stress level around having the condition. Mentally, you go straight from the problem to stress reduction, which promotes your overall sense of well-being.

**Tap for negative thinking.** Whenever you find yourself catastrophizing, or extrapolating into the future based on the suffering you now feel, tap. When you allow your mind to harbor negative thoughts and beliefs, your body is immediately affected. An extensive body of research shows that your autonomic nervous system, which regulates every major organ system in your body, shifts from repair mode to stress mode when you think negative thoughts. When you find yourself in negative mental mode, start tapping even before you formulate a Setup Statement. While tapping, decide what direction you want your thoughts to take.

**Get rid of negative influences in your life.** When you're faced with a serious disease, you need all the positive support you can get. You also need to cut the cords linking you to any negative influences that drag you down mentally and physically. This can mean jettisoning friends, social events, movies, books, television programs, video games, and other media that exert a negative pull on your emotional state. You might be in the habit of listening to the news, and reluctant to let go of your need to "stay informed." Tap on that. A friend of mine recently, and aptly, referred to radio and television news shows as "fear porn." They propagate mental distress, yet they are fascinating. You can do nothing about the problems they describe, while they distract you from the positive influences in your life.

Make a list of what lifts your spirits, and what depresses them. If you're dealing with a health crisis, it's time to jettison the concrete boots that pull you down. Your healing is far more important than the junk you're letting go of. Tap on any worry about the habits you're throwing away in order to support your healing journey.

**Tap directly on symptoms.** You can tap very simply on the symptoms themselves, before going deeper. This often provides partial relief. An example is "Even though I have this migraine headache..." or "Even though my blood sugar level is over 300..." or "Even though my blood pressure is 185..." The EFT archives contain many cases in which this simple form of tapping on symptoms changed them quickly.

**Describe symptoms in detail.** Describe your symptoms precisely, and get as vivid and detailed as possible. Describe their shape, size, temperature, consistency, and color. I worked recently with a client with fibromyalgia who had pain in many places, and her feet hurt the worst. She tapped on "Even though I have this square brown block of pain with bright yellow lightning bolts stabbing through my feet..." A detailed description while tapping on the pain plus several highly emotional events brought her pain from 7 to 0.

**Tap on the emotions behind the symptoms.** Ask yourself what emotion is linked to the body part that feels pain or is symptomatic. An example is “I have this swollen right knee. I am so angry at my knee and about how it restricts my movement. Even though I’m so angry...”

**Tap on the events behind the emotions.** If you’re angry, tap while describing various events that made you angry. If you’re feeling helpless, take your mind back to an early event in which you were helpless. Clear as many events as possible. Use the symptoms as a useful stimulus. They can serve the purpose of unearthing painful early memories, so you can tap away their emotional intensity.

**Sneak up on the problem.** Identify your most hopeless beliefs and thoughts, and incorporate them into a Setup Statement. You might believe your condition is hopeless, that it’s genetic, that it runs in your family, that it’s bigger than you, or that it will get worse. You can simply take your exact words and add “Even though” at the beginning and “I deeply and completely accept myself” at the end. Examples are:

*Even though [this disease is 100% genetic and there’s nothing I can do about it]...*

*Even though [the doctor said my case is hopeless]...*

*Even though [my mother, grandmother, and great-grandmother all had it]...*

*Even though [this problem is overwhelming]...*

This practice of using your negative thoughts in a Setup Statement while tapping transforms them from hopeless impediments to your healing to stress-reduction tools. Clients usually report a marked shift in the intensity of their negative beliefs, and some make a 180-degree turn after tapping, arguing that their decline is not inevitable.

**The Personal Peace Procedure.** This is useful as homework for clients. They make a list of every emotionally troublesome event they can think of in their lives and tap on them. Even if there are over 1,000 events, if you tap on three per day, in a year you’ll have tapped on them all.

**Use emphatic language or shout the Setup Statement.** This can engage an increased level of emotional energy, and shift the problem.

**Search for secondary gain.** There's often some benefit to a person from staying sick, whether it's increased attention from important people like doctors, the financial reward of disability benefits, or the escape from unwanted social obligations. Here are some questions you can ask to identify secondary gain:

- What would it be like to have none of your symptoms?
- What benefits are you getting from this illness?
- What would you have to give up if your illness went away?
- Why might you believe you deserve this illness?
- Who would you be without this story?

**Use questions to identify core issues to tap on.** Here are some questions you can ask to identify them:

- If there was an emotional contributor to that symptom, what could it be?
- If you had life to live over again, what person or event would you prefer to skip?
- Who or what are you most angry at?
- What are the three worst things that happened to you?
- How has this disease shaped your life?
- What comes up when you say, "I am in perfect health"?

**Chasing the pain.** Sometimes after tapping, physical discomfort changes location and/or intensity or quality. For example, a headache, initially described as stabbing pain in the temples at an intensity of 9 can shift to a dull ache in the jaw at an intensity of 7. In this case, the tapping strategy is to chase the pain. Tap for the new location and quality. Each time the number goes down, find the next site of pain.

**Use humor.** Sessions working on serious diseases can feel very heavy and grave. Laughter can break up the intensity of the session.

It's almost as if both client and practitioner go into a trance, which can be broken by laughter. Laughter often characterizes the transition from tapping on the severity of the problem to considering the possibility of healing. Great sensitivity on the part of the practitioner is required when using humor or laughter, so that the client does not feel the practitioner is making light of a serious situation. What sometimes works well is when the practitioner outdoes the client's catastrophic conditions. In the previous case of the fibromyalgia patient with painful feet, the healing transition came when I agreed with her that her foot pain would never get better. We tapped while saying, "It will get worse." Then I said to her, "Yes, even at your funeral, people will look down at the corpse and say, 'Her feet are in such terrible pain.'" The client laughed at this absurd scenario, and the pain began to lift.

### Professional Standards in a Coaching Practice

As EFT coaching and practice has evolved, a body of knowledge has emerged about how to care for clients and for practitioners. Two excellent textbooks describe the professional standards to which EFT coaches aspire. They are *Creating Healing Relationships* (Hover-Kramer, 2011) and *Ethics Handbook for Energy Healing Practitioners* (Feinstein, 2011). Clinical EFT training also includes an ethics module and practitioners must pass an ethics examination in order to become certified. The following sections review briefly some of the procedures that facilitate a happy and healthy professional practice. They are covered fully in the two textbooks and live trainings.

**Self-care.** Caring professionals such as social workers, psychotherapists, and life coaches are usually excellent at giving to others. They give time, attention, and their best insights to their clients. They're often less adept at caring for themselves. It's important to include yourself among the people you care for. This might include establishing healthy professional boundaries such as hours when you're unavailable to clients, adequate vacation time, and clear payment and refund policies.

**Case study write-ups.** When becoming certified, it's required that you record your client sessions in writing. You're encouraged to con-

tinue this practice after you're certified too. Provided you respect client privacy and the laws of your jurisdiction and mask the identity of your clients, you can write up case histories to post in the EFT archives and on your own website. These give you a record of your progress, as well as provide potential clients with a sampling of the types of problem in which you specialize.

**Record keeping.** Professional records such as session times and billing, and referrals to other practitioners, are an integral part of a coaching or psychotherapy practice. There are many software packages that guide you through the process of capturing the details required to maintain professional records.

**Scope of practice.** The scope of practice of a coach is quite different from that of a psychotherapist. For instance, life coaches are not qualified to diagnose or treat mental health conditions. There are many other differences between the two. Similarly, psychological trauma might be beyond the scope of practice of a psychotherapist, who might refer traumatized clients to specialists who have such training. Regard for your clients makes it essential to be aware of the limitations of your scope of practice and observe these boundaries.

**Supervision.** You are likely at some point in your practice to face puzzling professional dilemmas. You might be uncertain whether to coach a family member, or how to prioritize clients, or whether to communicate troubling news you've heard about a colleague. You don't need to figure out these problems alone. Having a wise mentor with whom you can discuss issues puts a new and more experienced pair of eyes on the problem. Having a source of such supervision is required of psychotherapists in most jurisdictions, and life coaches also benefit from having the resources of an experienced supervisor to draw on.

**Ethics codes.** Professional organizations publish ethics codes. Be familiar with the ethics codes of organizations you belong to, since these principles will steer you clear of many ethical pitfalls of which you might otherwise be unaware. Organizations also publish procedures for filing complaints against practitioners who might have commit-

ted ethical violations. Familiarity with the ethical guidelines of your organization makes it much less likely that you will have a complaint lodged against you.

**Interactions with other professionals.** If you're a life coach practicing EFT, you'll come into contact with other members of the healing professions in your area, such as physicians, nurses, psychotherapists, and alternative medicine practitioners. Conducting yourself professionally shows that you're a responsible member of the healing community. You'll also find yourself referring clients who need help that lies outside your scope of practice. An example of such a referral is a client who comes to you for business coaching, and you identify symptoms of PTSD in his behavior. You recommend he work with a local psychologist trained in treating psychological trauma; for his own safety, you might even make appropriate mental health treatment a condition of him continuing with you as a coaching client. If you conduct yourself professionally in these circumstances, you'll become a respected member of your local healing community, and you're likely to find mental health professionals referring clients needing coaching to you, as well as the other way around. We want the profession of EFT practitioner to be highly regarded by all the other members of the healing community, and responsible interaction with other professionals is key to establishing a good reputation.

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### *Resources*

- Collarbone Breathing: [CollarboneBreathing.EFTUniverse.com](http://CollarboneBreathing.EFTUniverse.com)
- Floor to Ceiling Eye Roll: [FTC.EFTUniverse.com](http://FTC.EFTUniverse.com)
- Serious Diseases: [SeriousDiseases.EFTUniverse.com](http://SeriousDiseases.EFTUniverse.com)
- Tables and Legs: [TablesLegs.EFTUniverse.com](http://TablesLegs.EFTUniverse.com)
- When Your Client Feels Worse: [ClientFeelsWorse.EFTUniverse.com](http://ClientFeelsWorse.EFTUniverse.com)