



January, 2010

Volume 10, No. 1

## Speculations on Two or Three Points for Transformation

Daniel J. Benor, MD, ABIHM

*Truth only reveals itself when one gives up all preconceived ideas.*  
- Shoseki

I am struck by the varieties of newer psychotherapeutic interventions that involve two or three modality stimulation of the brain and/or mind and/or body as a portion of their methodology. I speculate here on whether the multiple focus of awareness might be an overlooked mechanism for change, regardless of the type of focus.

There are numerous variations of this sort, which I broadly categorize here into three clusters. All of these methods produce releases of stress, pains and distress. Many of the therapies fit within more than one cluster.

### 1. Focusing the mind on the body or on a mental image while simultaneously focusing the mind on an affirmation or inner (mental and/or emotional) process

***Mindfulness meditation*** – Conscious focus (on breath; words; gazing at object; mental image) while noting but not attaching attention on passing thoughts and sensations (Kabat-Zinn, 1994).

For example: Focus on your breath or on an object such as a candle flame, flower, or mental image. Allow all other awarenesses (physical, mental, emotional) to fade into the background and dissipate from consciousness.

Alternative:

Hold the intention that you will not attach yourself to anything that crosses your mind. Watch anything without responding with emotions or associative thoughts, letting it pass by and dissipate.

***Vipassana meditation*** – Focus your attention on specific parts of the body while allowing passing thoughts, emotions and physical sensations to move through awareness without attachment and to dissipate.

For example: Focus on the upper lip and nostrils, observing the breath entering and exiting the nostrils. Allow all other awarenesses (physical, mental, emotional) to fade into the background and dissipate from consciousness.

*Multi-point focus:* In meditational releasing for transformation of negativity, one allows problematic issues (along with any other awarenesses) to pass through consciousness without attachment to them. This is like running two recorded tracks simultaneously but paying attention to only one of them. The ignored track fades in intensity and our intention is that it will disappear from consciousness entirely.

While this is often used for relief from troublesome thoughts and feelings, it also opens into transpersonal, spiritual realms of awareness.

**Eye Movement Desensitization and Reprocessing (EMDR)** – alternating right and left body stimulation (eye movements, auditory, or touch to right and left sides) + conscious focus on a problem; similar physical procedures + focus on a positive mental focus to install positive cognitions/ emotions. The negative issues diminish in intensity to the point that they are no longer perceived as problematic. The positive cognitions/ emotions are strengthened by this process.

For example: People will hold a negative memory with its associated emotions and physical sensations in their awareness, such as a car accident or a memory of child abuse that still raises fears and tensions when they think of it. They alternate stimulating the right and left sides of the body. The intensity of the negative experiences diminishes with successive rounds of tapping until it is completely dissipated. Then they focus on a positive awareness, e.g. "I have had many valuable lessons as a result of this traumatic experience." Again stimulating the right and left sides of their body, and the positive awareness and positive feelings associated with it are strengthened.

Caution: EMDR is a very powerful tool for releasing buried issues, and may produce heavy emotional releases. For this reason, it is recommended that EMDR should be used only in the therapist's office. A client's second EMDR session is often devoted to stress management methods that enable a person to de-stress in case they are experiencing distressingly intense releases between therapy sessions (Shapiro, 1995; [www.emdr.com](http://www.emdr.com)).

*Multi-point focus:* In EMDR, the first point of awareness is the troublesome issue (which usually includes thoughts and emotions) and the second is a body awareness of alternating right and left stimulation. The bilateral stimulation produces very deep releases of negativity, following which profoundly helpful positive cognitions and emotions can be installed. Because any alternating right and left sensory stimulation (tactile, visual and auditory) produces similar shifts, it is speculated that the real mechanism is the alternating right and left brain hemispheric stimulation that occurs with the sensory stimulation. More on this under WHEE, below.

**Thought Field Therapy (TFT)** – Tapping on prescribed acupressure points (specific to particular problems) + conscious focus on the problem + positive counteracting affirmations (may use tapping alone or affirmations alone). The perceived intensity of the problems diminishes (Callahan, 2002; [www.rogercallahan.com](http://www.rogercallahan.com)).

For example: TFT therapist prescribes a specific series of acupressure points (different points will be used for a headache, phobia, craving, etc. etc.) on which you tap as you focus on your negative issue and its associated emotions and physical feelings. With repeated rounds of tapping the negativity is dissipated.

**Emotional Freedom Techniques (EFT)** – Tapping on a generic series of acupressure points + conscious focus on a problem + positive counteracting affirmations. The perceived intensity of the problems diminishes (Craig, 2008; 2009; [www.emofree.com](http://www.emofree.com)).

As with TFT, but the same generic series of 12 acupressure points is used for all problems.

**Tapas Acupressure Technique (TFT)** – Touch on front and back of head + conscious focus on a problem + positive counteracting affirmations that include spiritual components (Fleming, ND; [www.tatlfe.com](http://www.tatlfe.com)).

Effects similar to those of EFT.

**Seemorg Matrix Work:** Touching one or more chakras (biological energy centers) on the body + conscious focus on a problem + positive counteracting affirmations that include spiritual components (<http://www.seemorgmatrix.org>).

Effects similar to those of EFT.

**Multi-point focus:** With TFT, EFT, TAT and Seemorg Matrix Work, the first point is a conscious awareness of the problems issues; the second is a counteracting affirmation; and the third is the activation of body awareness and/or biological energies of the acupuncture points/meridians (energy lines) and chakras. The involvement of the biological energy system of the body has led to a collective label of 'Energy Psychology' for these and related therapies.

**Wholistic Hybrid derived from EMDR and EFT (WHEE)** – 1. Alternating right and left body stimulation (alternating touch on right and left sides of the body) + conscious focus on the problem being addressed + positive counteracting affirmations; 2. (after #1 is complete) similar physical procedures + focus on a positive mental focus replacing the negative that was released + alternating right and left body stimulation + focus on a positive affirmation to install and strengthen positive cognitions/ emotions (Benor, 2006; 2009; [www.paintap.com](http://www.paintap.com)).

WHEE has a similar procedure to that used with EMDR, with the addition of a positive affirmation (similar to EFT), combined with the alternating right and left stimulation. WHEE is derived from a wholistic perspective, addressing body, emotions, mind, relationships (with other people and the environment) and spirit. WHEE focuses on roots of problems and on meta-anxieties and other meta-emotions and thoughts/ beliefs/ disbeliefs.

WHEE is safe for people to use on their own, as it does not produce the intense, heavy emotional releases seen in EMDR. WHEE is much quicker and more user friendly than EFT, and can be done with discrete tapping that is not embarrassing to users in front of people who are unfamiliar with these techniques. Because WHEE is so rapid and easy to use, people readily go deeper into their issues, coming to know fairly quickly that they are capable of managing any issues that emerge into their consciousness.

Effects similar to those of EMDR and EFT.

**Multi-point focus:** As in EMDR, the first point of awareness is the troublesome issue (which usually includes emotions and their associated thoughts – a reverse order to the common focus in EMDR); the second is a positive awareness (cognitions and feelings); and the third is a body awareness of alternating right and left stimulation. The bilateral stimulation produces very deep

releases of negativity, following which profoundly helpful positive cognitions and emotions can be installed. Because any alternating right and left sensory stimulation (tactile, visual and auditory) produces similar shifts, it is speculated that the real mechanism is the alternating right and left brain hemispheric stimulation that occurs with the sensory stimulation.

**Systematic Desensitization**, described below, may also fit here – when negative issues are neutralized by pairing them with muscle relaxation exercises and relaxing imagery (Wolpe, 1958).

In all of the above methods, there is a pairing of a focus on conscious issues that is combined with a focus on physical sensations. One learns to hold the awareness of the problem with its associated emotional components while focusing as well on physical sensations.

## **2. Pairing a conscious focus on a problematic issue with a positive conscious focus (e.g., permission to change; affirmation; image; memory)**

**Sedona method** – Holding the problem issue in conscious focus, asking yourself whether you can release it now; installing positive cognitions/ emotions in a similar manner. Negative issues are released rapidly, and positive replacements are installed rapidly (<http://www.sedona.com>).

For instance, focusing on a negative issue, such as fear of speaking in public, ask yourself whether you are ready to release it now. Giving yourself the permission to do so will often diminish the intensity of fear immediately. When the negatives are dissipated completely, picture to yourself that you are speaking in public with pleasure and confidence, asking whether you are ready to feel increasingly confident and comfortable with this mental image. As you give yourself the permission to feel more positive, your confidence and comfortable feelings increase.

**Multi-point focus:** 1. First point of focusing is a negative issue; second focus is on whether people are willing to grant themselves permission to release some or all of their negativity. 2. Similar to EMDR. First point of focusing is a positive replacement for the negative that has been released; second focus is on whether people are willing to grant themselves permission to strengthen the positive.

**Behavior modification** – Positive behaviors + positive reinforcement/ rewards (words of praise; food; tokens that can be exchanged for material rewards) lead to repeats of these behaviors; Negative behaviors + ignoring/ negative reinforcements/ punishments lead to changes in behavior. This is the basis for much of our learning. We do something and decide through the effects we achieve and responses we receive from others (or not) whether it is worthwhile to repeat our behaviors (Wolpe, 1958).

For instance, a child pees in the potty and is praised, learning that peeing in the potty is a positive thing to do. A child reaches a hand towards a hot toaster. Either through the "No!" of a parent, or through the unpleasant feedback of painful fingers (which would fit in category 1) the child learns to avoid touching a hot toaster. These principles can be applied systematically in therapy.

**Systematic desensitization** – Conscious focus + picturing yourself in a calm, pleasant situation/ recalling a specific time when you were enjoying yourself (may use muscle relaxation or breathing to relax – which would place this in the first category); Conscious focus on a

problem issue + conscious focus/ imagery of a positive focus. The positive neutralizes the negative. This is usually done in small, gentle increments (Wolpe, 1990).

Your fear of dogs (spiders, mice, snakes, exams or whatever) is elaborated into a list of all aspects of this phobia, with the most intense items towards the top of the list. You rate the intensity of each item on the list.

e.g. Seeing a large, barking dog on a leash right next to you. = 10/10 intensity

Seeing a medium sized dog not on a leash walking towards you. 9/10

Seeing a large dog on a leash coming towards you from the other end of the block = 8/10

Seeing a small dog behind a fence in a yard barking = 4/10

Seeing a small dog on a leash walking towards you = 2/10

You hold the conscious image of the least intense item in your awareness, along with the associated feelings and any traumatic memories. You practice connecting your awareness with positive memories (alternatively, may use deep breathing and/or other forms of relaxation). You pause after a few minutes to note how much the intensity of the negative item has decreased. Repeat until it is zero. Then proceed to neutralize the next least intense item. Proceed until the entire list is neutralized. Then practice with a dog present, perhaps working your way up through a series of small to larger dogs.

**Flooding** – As with Systematic Desensitization, but with focus on the most intensely negative aspects of the problem. The positive feelings of conscious focus on a positive memory neutralize the negative thoughts and emotions. This is usually done in powerfully confrontive therapy sessions (Sundel and Stone-Sundel, 2005).

You start with the mental image of a large, barking dog on a leash right near you. Using the same methods as in Systematic Desensitization, you reduce the intensity of your reactions until they are completely dissipated. The rest of the list is usually neutralized as well with this procedure.

*Multi-point focus with Systematic Desensitization, Behavior Modification, and Flooding:* First point of focus is a negative cognition and/or emotion; second point of focus is a counteracting positive cognition and/or emotion. The positives diminish the intensity of the negatives.

**Cognitive Behavioral Therapy (CBT)** – Incorporates varieties of Behavioral Modification approaches (Cormier, Nurius and Osborn, 2008).

For example: A person with a panic disorder is asked to consider whether they have ever come to any harm whatsoever due to the things they think about during their panic attacks. They are taught relaxation techniques for diminishing the intensity of their fears during panic attacks. They may practice systematic desensitization in the therapy room for issues that arise during panic attacks. Gradually, they learn that whatever comes up during a panic attack can be neutralized through the techniques they learn, and are able to control and then to abort and eliminate their panic attacks.

*Multi-point focus:* As in Systematic Desensitization, Behavior Modification, and Flooding; plus logical reasoning about the irrationality of the symptoms.

**TFT, EFT, WHEE, TAT** – All of these include pairings of conscious focus on a problem + counteracting affirmation

### **General 2- and 3-point approaches**

*Simultaneously holding awareness in the present while connecting with traumatic memories -*

This is a subtle 2-points of reference element that is present in most therapies.

You have a conflict or traumatic experience that has eluded emotional release. You may be plagued with negative memories and feelings, and with more severe post traumatic stress you may also have flashbacks, nightmares, eruptions of intense feelings and panic attacks. Whether your trauma has been mild, moderate or severe, the process of therapy is to bring the memories and feelings to the surface through discussions with the therapist – who usually has a calm, soothing presence. Pairing the memories of negative past experiences with the calming therapist presence becomes a form of desensitization.

*Multi-point focus:* First point of focus (often without conscious awareness) is being in the safe environment of a therapist's treatment room; second point is the negative issue(s) being addressed. As with Systematic Desensitization, Behavior Modification, and Flooding, the positive neutralizes the negative.

### **3. Touching two (or more) parts of the body + conscious focus**

**Brain Gym (also WHEE and EMDR)** – Alternating stimulating the right and left side of the body (which simultaneously stimulates the left- and right-brain hemispheres) while holding a conscious focus on a physical problem (such as poor muscular coordination). Tapping on one side of the body stimulates the opposite brain hemisphere. Brain Gym procedures usually include crossed-midline stimulation with the hands, so that a dual, simultaneous stimulation of right- and left-hemispheres is achieved. That is, the right hand taps on the left side of the body. In this process the stimulus to the left body side will activate the right hemisphere, simultaneously activating the left hemisphere as the right hand experiences the sensations of doing the tapping (Dennison and Dennison, 1989). The parallel but opposite side stimulation occurs with the left hand stimulation of the right side of the body. This is a common denominator in WHEE and EMDR when the 'butterfly hug' is used, in which each hand pats the biceps muscles of the opposite arm.

The classic Brain Gym exercise is the 'cross-crawl,' in which, in a standing or sitting position, a person alternates back and forth tapping with each hand on the opposite knee. Brain Gym has been used successfully in enhancing poor coordination, especially in children born with such disabilities.

The cross-crawl and other Brain Gym routines are used in Energy Psychology when there is an 'energy reversal,' in which case blocks to change may occur, hindering muscle testing for intuited information and stopping releases of negative issues. The Brain Gym exercises clear these reversals. Though the mechanism is unclear, it is postulated that these right-left stimulations harmonize biological energies.

*Multi-point focus:* There is a dual, alternating simultaneous stimulation of right-plus-left brain hemispheres with hands plus another part of the body (arms, knees, eyes). This has been assumed to be a re-training of the neuromuscular system, perhaps correcting failure to learn to 'cross crawl' – i.e. to coordinate hands and knees in crawling. However, a recent report of a remarkable recovery using EFT to relieve poor motor coordination in a 22 year old man with cerebral palsy (Look and Larson, 2009) and another on EFT for relieving residual motor incoordination in a 58 year-old woman, six years following severe traumatic brain injuries (Craig, Bach, Groesbeck, and Benor 2009) open a question mark about this presumed mechanism

**NeuroLinguistic Programming (NLP)** – Touching a part of the body while focused consciously on a problematic issue; touching a second part of the body while focused consciously on a positive memory/ feeling; then touching both together ('collapsing anchors') leads to neutralization of the negative by the positive (Bandler and Grinder, 1979).

For example: Diminishing the intensity of a negative memory or eliminating it entirely is amazingly rapid and easy with this method. Hold in your mind the events and residual emotions from a negative experience. Simultaneously, press with one finger on your thigh, 'anchoring' the memory in that spot on your thigh. After about half a minute release your pressure but sure to keep your hand still so that you will be able to touch exactly the same spot again. Clear your awareness of the negative issues and then focus your attention on a strongly positive memory with its associated feelings. Simultaneously, press with a finger of your opposite hand on your opposite thigh. After about half a minute release your pressure but sure also to keep your second hand still so that you will be able to touch exactly the same spot again. Then, press both spots simultaneously and hold for about half a minute and then release. Return to focus on the negative experience. Most people note that the negative intensity has significantly decreased or even disappeared.

The same effects can be achieved by imagining that the positive issue is in a bubble in your right hand; the negative one in a bubble in your left hand. Bringing your hands together and visualizing that the two bubbles merge achieves the same effect as the tactile anchoring exercise. The bubble exercise might fit best in cluster (2).

*Multi-point focus:* First pair of points are a dual focus on a negative issue combined with touching a part of the body with one finger (it does not appear to make a difference if the right hand finger touches the right or left side of the body in this exercise); second pair of points are a dual focus on a positive issue combined with touching a part of the body with a second finger. The positive always counteracts the negative and neutralizes it to some extent. Repeating the process can completely eliminate the negative issues.

**Matrix Energetics** – Touching one part of the body that is intuited to be relevant to a problematic issue, followed by touching the body at a second intuited point. The intensities of the negative issue memories and associated emotions are weakened (Bartlett, 2009).

This is very similar to the NLP procedures, although the second point in Matrix Energetics is chosen intuitively rather than consciously and is not specifically associated with positive cognitions.

*Multi-point focus:* The first point is chosen intuitively to connect with the trauma; the second point is chosen as a counteracting point. While no cognitions are needed with the second point, the expectation is that it will counteract the issues in the problem focus. This may simply be another variation on NLP.

**The Meta-Medicine® approach** clarifies when and where in people's lives they were traumatized and how those traumas imprinted themselves in their bodymind to cause psychological and physical symptoms and diseases (Flook, 2009). Such shocks include the following elements: they are unexpected, dramatic and isolating, and the person has no strategy for dealing with them. Right- or left-brain hemisphere functions may be affected by stressors. When a person experiences a major stress, this may block functions in one side or the other.

When both sides are affected, symptoms are more likely to manifest. Making it a point to identify and clear symptoms related to each side of the brain and clearing both leads to rapid releases of the symptoms and illnesses. Once having identified these crucial traumatizing issues, a person may use any of a variety of techniques to release them, such as NLP, WHEE, EFT, etc.

When people come to Richard Flook for treatment, Richard will explore their traumas in the 12-24 months prior to the appearance of symptoms. He looks specifically for right brain, emotional-types of trauma, and for separate, left-brain cognitive types of trauma. He then uses any of a variety of therapies such as WHEE and EFT to clear the traumas. He reports successes in clearing PTSD, manic-depressive disorders and more.

*Multi-point focus:* Meta-Medicine identifies issues that have been registered and/or stored separately in the right-brain (first point) and left-brain (second-point) hemispheres. When both are cleared, symptoms are alleviated.

**EMDR, TFT, EFT, WHEE, TAT** – tapping on several parts of the body + pairings of conscious focus on a problem + counteracting affirmation

## Discussion

*The universe is simple; it's the explanation that's complex.*  
- Mark Russell.

How can we explain the effectiveness of the many therapies detailed above (along with many more, similar ones that have not been listed here)? What is it about stimulating several points on the body or about holding several awarenesses in the mind simultaneously that is so effective in bringing about the observed changes?

Each of the above methods involves multiple stimulation of the brain/ mind and body. Could it be that it is this multiple stimulation that produces change rather than the specific methodologies? If so, the next question is: How might this be an effective dissipator of negativity?

I believe that we often sell ourselves short by holding on to the impaired self-image we created when we were children. Having hobbled ourselves by carrying burdens of buried memories and feelings, we limp through life with constricted expressions of our full potentials. We hold back from expressing our full feelings, creativity and personhood because we have limiting beliefs that are locked in because we continue to run away from our issues and are afraid to release them from their file drawers and hidden caves, buried in our unconscious.

*There is the dual nature of self: The incomplete self and the complete self... As humans, we are seeing from the perspective of the incomplete self. This incomplete self is undoubtedly very important. But if we attach to this incomplete self, although this incomplete self is important, then we'll never be able to experience the complete self.*  
- Joshu Sasaki Roshi

## *Staying present with a negative issue*

It is a common experience that people get into ruts of thinking/ believing, feeling and behaving in habitual ways. These habitual patterns are commonly developed in childhood, but may be created at any time during one's lifetime. An occurrence that is experienced as stressful or



traumatic elicits a negative emotional and/or behavioral response. This subsequently creates a reflexive, similar response when people experience similar stimuli. In the example noted above, a person who is bitten by a dog may become avoidant of any dog following the initial trauma, and anxious even when near a dog that is small and clearly friendly and harmless.

The habit of avoiding dogs may persist for years, even when there is absolutely no danger of being bitten. Just the conscious thought of a dog often arouses anxieties. Simply thinking and reasoning about the fear is not likely to change it.

We do the same thing with many unpleasant experiences. We do our best to run away from them and avoid thinking about them. Avoiding whatever disturbs us – externally or within our thoughts and feelings – is one of the more common strategies for protecting ourselves from painful, unpleasant experiences and memories.

Some of the effectiveness of multi-point focus may derive from our not running away from our unpleasant experiences. That is, we focus our awareness on a problem, including cognitions and emotions that we previously did our best to exclude from our awareness. The various tapping, multiple touching rituals and conscious pairings of positives with negatives may simply enable us to remain present with our negative issues instead of avoiding them.

#### *Right and left brain hemispheres as two points of awareness*

In childhood, when we experience severe pain, stress or distress we have few options. As children, we cannot alter our traumatizing and painful circumstances; we have limited coping strategies; and we cannot leave our uncomfortable situations. Rather than suffer, we do our best to avoid thinking about and feeling our uncomfortable issues. Very often, the best coping strategy when we are children and suffering is to bury our more painful awareness as deeply as possible outside of our conscious awareness.

The good news is that this is a successful strategy that prevents suffering. In fact, this works so well to protect us from pain and distress that we persist in burying our discomforts right on into adulthood, just as we did earlier in our lives – despite the fact that as adults we have many more sophisticated and healthier options.

The bad news is that when we bury painful materials, they remain locked into our consciousness. A major depot for buried feelings appears to be in unconscious memory files of the right-brain hemisphere. The right hemisphere is involved with patterns and feelings, to a great extent as unconscious processes; the left hemisphere with conscious, linear thinking. What appears to happen is that the right hemisphere says to the left hemisphere, "You don't want to know about these painful feelings and memories I've locked away, do you?" And the conscious, left brain hemisphere says, "Naahh! I'd rather not know!" So our brain helps us not to be upset – by not being aware of the uncomfortable, buried feelings.

It appears to me possible that the right and left stimulation of the body in WHEE, EMDR and Brain Gym may serve to bring the right and left hemispheres to simultaneous awareness of the buried issues and feelings related to our conscious focus as we use these methods. For instance, a person with a phobia for heights will hold this fear in her awareness while tapping alternately on the right and left sides of her body. This may then allow the right and left hemispheres to stop pretending to each other that the previously buried problem is not there, and to release the memories with their attached feelings.

While this may be the mechanism for releases with WHEE, EMDR and Brain Gym, I have been cogitating on whether there may be a more general principle at work – in addition to or instead of the right-left stimulation of the body and brain.

*Body and mind as two points of awareness; or body, emotions and mind as three points*

While conventional medicine and psychology teach that our traumatic memories are stored in neurochemical and bioelectrical configurations within our brain, there is considerable evidence that memories are stored in other parts of our bodies as well.

There are fascinating reports of cellular and/or tissue and/or organ memories which accompany organ transplants. A typical example is that of a woman who received a heart transplant from a young man who was a motorcycle person. She experienced a totally uncharacteristic craving for beer following her surgery. Others have acquired experiential memories along with their new organ, such as a familiarity with a geographic location (Pearsall, 1999). No one has been able to demonstrate a clear mechanism for the transfer of such memories.

*Pairing positive and negative cognitions and/or feelings as two points of awareness*

Numerous therapies detailed above utilize the pairing of positives and negatives, in which the positives neutralize the negatives. This may be a key underlying mechanism for releasing negativity – common to almost all therapies. It has been commonly noted that the presence of a warm, sympathetic person (e.g., a caregiver of any sort) has a calming effect on careseekers.

*The healing begins when the doctor arrives.*

Anonymous

Thus, the supportive presence of a caregiver may introduce an additional point of awareness that facilitates releases of buried issues and promotes healing. With many therapies, there are also deliberate pairings of positive cognitions and feelings with the negative issues, which dissipates the negatives. This has been methodically explored as an effective mechanism in behavioral therapies.

In addition to the positive-negative pairings, again I would ask whether the two-point focus might be contributing as well.

*Adding a third point of awareness*

My personal experience has been that when treatments involving mind and emotions are supplemented with interventions involving body awareness, the results are more deeply and rapidly effective. Examples include WHEE, EFT (and other Energy Psychology interventions), EMDR, bioenergetics (Lowen, 1975), yoga, breathing meditation, Vipassana meditation, and therapeutic massage.

Elaborate cognitive exercises as in CBT may slowly diminish and eliminate negativity. While CBT is considered the gold standard for therapy by the conventional psychology community, it is a relatively slow and laborious process compared to the newer techniques listed above. The newer techniques may achieve in one or two sessions psychological benefits that CBT requires six to twelve sessions to achieve (Benor, 2009). This suggests that these methods may be tapping into innate mind-body approaches that are more core to whatever stimulates changes in habits.

Explanations for the enhancements provided by the addition of body stimulation may include:

- Releases of tissue memories and emotions associated with the trauma;

- Releases of tissue memory meta-anxieties around repressed issues, which had served to block awareness and to block release of the buried memories and emotions (i.e., easing fears of releasing the memories);
- Adding a third point of focus for awareness, helping thereby to loosen the habitual defensive patterns of the traumatized person.
- Relaxation of the body that provides a counteracting positive point of reference and influence that neutralizes negative cognitions and feelings.

*Our cells are constantly eavesdropping on our thoughts and being changed by them. A bout of depression can wreak havoc with the immune system; falling in love can boost it. Despair and helplessness raise the risk of heart attacks and cancer, thereby shortening life. Joy and fulfillment keep us healthy and extend life. This means that the line between biology and psychology can't really be drawn with any certainty. A remembered stress, which is only a wisp of thought, releases the same flood of destructive hormones as the stress itself.*

- Deepak Chopra

#### *Bioenergies as another point of awareness*

It is commonly assumed that biological energies are involved in body memories. This hypothesis is supported in Einstein's theory that matter and energy are two sides of the same coin. The biological energy field that is addressed by healers is said to be a template for the physical body, while simultaneously reflecting the ongoing states of the physical body. Healers often note that there are bioenergy irregularities (heat, stickiness, prickliness, etc.) as they pass their hands around the body, or alterations in the aura they perceive visually. In many cases, addressing the bioenergy abnormalities alone is sufficient to release the physical problems with which the energetic perturbations are associated (Benor, 2001a; b). In my experience, however, combining the energetic with cognitive and emotional awarenesses often produces more potent, wider-ranging and longer-lasting effects. While these may be cases of multi-layer interventions being more effective, there may also be a more general two-or three-point element to such interventions.

John E. Upledger, a teacher of craniosacral therapy, theorizes that physical and/ or emotional trauma can create an *energy cyst* within the body. He hypothesizes that ordinarily a blow to the body produces heat that is dissipated by the body. (This is similar to the heat produced by a hammer pounding nails.) If the body is unable to dissipate the heat, it may be encapsulated as a localized concentration of energy. This *energy cyst* can obstruct normal body energy flows (of bioelectricity and acupuncture Qi); produce or exacerbate abnormal energy flows; compromise mobility of tissues, especially fascia layers; and produce energy interference waves. Energy cysts can create dysfunction or pain, and drain the body's energy. Upledger can palpate a "fullness" on the "upstream" side of acupuncture meridians where they are blocked by a cyst, and an "emptiness" beyond the block. Working with acupuncturists, he also found that pulse diagnosis abnormalities were restored to normal after treatments that released the cysts.

Infections or gross physiological malfunctions, such as heart attacks, can also leave energy cysts in the body. Upledger believes that several factors may determine whether or not a cyst is formed in response to a traumatizing energy. The trauma may be of such magnitude as to overwhelm the body's ability to dissipate it; previous trauma may compromise the ability of that part of the body to dissipate it; and intensely negative emotional states may hinder its dissipation. Upledger believes that local bioenergy regions of the body (as well as energy cysts) may function autonomously, with associated memory, intelligence and emotion (Upledger and Vrederoogd; Upledger, 1986).

The concept of an energy cyst is not new. Upledger cites an observation from Elmer Green, one of the grandfathers of biofeedback, that the energy cyst was presaged many centuries ago. In the yoga sutras of Patanjali we find the concept of *samskaras* or scars in the energy body that may impede proper body energy flows and physiological functions.

So working on the physical and/or bioenergy body may release buried traumas directly, or may shift the body into a positive state that serves to counteract the negativity of the buried traumas.

Another possibility is that the focus on bioenergies adds another point of awareness that serves to promote releases through the multi-point process of facilitating changes.

#### *Spiritual awareness as another point of reference*

Many find that incorporating components from transcendent awarenesses will markedly enhance the effects of healing and self-healing interventions. It is through experiential learning that people come best to appreciate these healing elements.

For instance, I teach a self-healing method for pain, stress and distress called WHEE (Benor, 2009a). By adding various elements of bioenergy (which for many is a doorway into spiritual connections) and cognitive/ sensed spiritual awareness incrementally, many people who are learning WHEE experience distinct enhancements in their healing responses. Having used an affirmation such as "I love and accept myself, wholly and completely" to reduce their pains somewhat, people report definite enhancements in pain reduction with the addition of "...and [God/ Christ/ Mary/ Allah/ other transcendent agent] loves and accepts me, wholly, completely and unconditionally."

The above might be viewed as a 'reframing' of the context for our problems. Our problems shrink when viewed in the context of a greater, vaster, spiritual reality.

And again, it may be that adding another point of focus, as we concentrate on our problems, serves to release the negative thoughts and feelings attached to the problems. This might put a different light on a quote from Matthew 18:20, "For where two or three come together in my name, there am I with them."

#### *Centering oneself may be facilitated by multi-point awareness*

How could multi-focus be beneficial in healing? Finding, developing and holding a centered place of quietness and relaxation is a demonstrated approach for releasing negativity. Meditation, yoga, t'ai chi, and qigong exercises all help us find this healing, spiritual space.

Our language may incline us towards poor coping with difficult situations. We tend to identify with our stresses and problems and with our negative reactions to them. We say, "I am angry, frustrated, depressed or upset." If "I" am "angry" then I've defined my situation as a more fixed and difficult to change problem than if "I feel angry," in which case I can choose or learn to change my feelings. Altering my emotional state looms as a less difficult task than altering myself as a person. However, having the common perception with negative emotions that "I am" the emotions, the focus on more than one locus of beingness may help us to release the perceived links between the negative feelings and our true self, which IS and does not have to be reactive to negativity by taking on the negativity and clinging to it.

'Centering', however, may be a simplistic concept. The term is derived from the turning of clay on the potters wheel. If the clay is centered on the spinning slab of stone, it can be shaped into vessels of many sorts. If it is off center, it goes flying in all directions. For the most part, the term centering has been applied to mental awareness. However, there are several different types of awareness, which I summarize here through the parsing of the question: What constitutes intelligence?



Jane Evenson observes:

Howard Gardner [1985], whose theory of multiple intelligences has been highly influential, includes "bodily-kinesthetic intelligence" on a list of seven "intelligences" - along with verbal-linguistic, logical-mathematical, musical, visual-spatial, interpersonal (self awareness) and intrapersonal (social skill). Recently, he has added an eighth and ninth intelligence to the list: "naturalist intelligence," the ability of an individual to relate to nature, and "existential intelligence," the ability to think in terms of larger issues that might be termed religious or spiritual.

'Centering,' therefore, might occur in any aspect of our ways of experiencing our consciousness. Alternatively, it may be that multipoint focus disengages us from any of the discrete, physical world-focus modalities and facilitates our connecting with a transcendent focus.

### **In summary**

A multi-point focus may help us loosen up our habitual defenses against releasing current and long-buried hurts, and our limiting self-concepts. This could then open doorways for us to seek a more centered place of beingness within ourselves, which also enables us to connect with the All, of which we are a part, and which puts us into an even more positive state.

## References

- Bandler, R., Grinder, J. *Frogs into Princes: Neuro-Linguistic Programming*. Moab, UT: Real People Press 1979.
- Bartlett, Richard. *Matrix Energetics: The Science and Art of Transformation*, Atria/ Beyond Words 2009.
- Benor, Daniel J. *Healing Research: Volume I, Spiritual Healing: Scientific Validation of a Healing Revolution*, Southfield, MI: Vision Publications, 2001; 2<sup>nd</sup> Ed Bellmawr, NJ: Wholistic Healing Publications 2007.
- Benor, Daniel J. *Healing Research: Volume I, Professional Supplement*, Southfield, MI: Vision Publications, 2001.
- Benor, Daniel J, WHEE Workbook, Bellmawr, NJ: Wholistic Healing Publications, 2006  
<http://wholistichealingresearch.com/WHEEWorkbooks.html>
- Benor, Daniel J. *Seven Minutes to Natural Pain Release: Pain Is a Choice and Suffering Is Optional - WHEE for Tapping Your Pain Away*, Bellmawr, NJ: Wholistic Healing Publications 2009. [www.paintap.com](http://www.paintap.com)
- Callahan, Roger J. with Trubo, Richard. *Tapping The Healer Within: Using Thought Field Therapy to Instantly Conquer Your Fears, Anxieties, and Emotional Distress*. New York: McGraw-Hill 2002.
- Cormier S, Nurius PS, Osborn CJ. *Interviewing Change Strategies for Helpers: Fundamental Skills and Cognitive Behavioral Interventions*. Florence, KY: Brooks Cole; 2008.
- Craig, Gary. *The EFT Manual*. Santa Rosa: Energy Psychology Press 2008.
- Craig, G. *EFT for PTSD*. Santa Rosa: Energy Psychology Press 2009.
- Dennison, PE and Dennison, G. *Brain Gym Handbook*, Ventura, CA: Educational Kinesiology Foundation 1989.
- Craig, Gary; Bach, Donna; Groesbeck, Gary; and Benor, Daniel J. Emotional Freedom Techniques (EFT) for Traumatic Brain Injury, [International J Healing and Caring](http://www.internationaljournalofhealingandcaring.com), 2009, 9(2), 1-10.
- Evenson, Jane. The Ultimate Object: Overcoming Self-Created Obstacles through Mime  
<http://www.indranet.com/arts/lcds/theultimateobject.html>
- Fleming, Tapas. *Professional's Manual*. [www.tatlife.com](http://www.tatlife.com).
- Flook, Richard with van Overbruggen, Rob. Why am I sick? What's really wrong and how you can solve it using META-Medicine®, Bosmin & King's Lynn, UK: MPG Books Group 2009
- Gardner, Howard. *Frames of Mind*. Basic Books, New York 1985.
- Glickman, Marshall. *Beyond the Breath: Extraordinary Mindfulness Through Whole-Body Vipassana Meditation*, Journey 2002.
- Jung, Carl. *Man and His Symbols*, Garden City, NY: Windfall/ Doubleday 1964.
- Jung, Carl. *Memories, Dreams, Reflections*, New York: Vintage 1965.
- Jung, Carl. *The Archetypes and the Collective Unconscious, Collected Works, V.9 Part I*, Princeton, NJ: Princeton University 1969.
- Jung, Carl. *The Collected Works of CG Jung*, 20 vols. Bollingen Series XX, Hull, RFC, trans/ Read, H, et al., eds. Princeton, NJ: Princeton University 1953-1979.
- Kabat-Zinn, Jon. *Wherever You Go, There You Are: Mindfulness Meditation in Everyday Life*, Hyperion 1994)
- Lowen, Alexander. *Bioenergetics*, New York: Penguin 1975.

- Pearsall, Paul. *The Heart's Code: Tapping the Wisdom and Power of Our Heart Energy: The New Findings About Cellular Memories and Their Role in the Mind/ Body/ Spirit, Connection*, New York: Broadway 1999.
- Shapiro, Francine, *Eye Movement Desensitization and Reprocessing*, New York: Guildford 1995.
- Sundel, Martin; Stone-Sundel, Sandra. *Behavior Change in the Human Services*. New York: Sage 2005. pp. 241–242.
- Upledger, John E. *Craniosacral Therapy II: Beyond the Dura*, Seattle, WA: Eastland 1986.
- Upledger, John E and Vrederoogd, Jon D. *Craniosacral Therapy*, Seattle, WA: Eastland 1983.
- Wolpe, J. *Psychotherapy by Reciprocal Inhibition*, Palo Alto, CA: Stanford University 1958.
- Wolpe, Joseph. *The Practice of Behavior Therapy*. Tarrytown, NY: Pergamon Press, 1990.

**Daniel J. Benor, MD, Editor in Chief, IJHC**

Dr. Benor is author of *Seven Minutes to Pain Relief* and of *Healing Research, Volumes I-III* and many articles on holistic healing.

**Contact:**

IJHC – [www.ijhc.org](http://www.ijhc.org)

Book - [www.paintap.com](http://www.paintap.com)

Email - [DB@WholisticHealingResearch.com](mailto:DB@WholisticHealingResearch.com)



**TERMS OF USE**

The International Journal of Healing and Caring On Line is distributed electronically. You may choose to print your downloaded copy for relaxed reading.

We encourage you to share this article with friends and colleagues.

**The International Journal of Healing and Caring – On Line**

**P.O. Box 76, Bellmawr, NJ 08099**

**Phone (609) 714-1885 (519) 265-0746**

**Email: [center@ijhc.org](mailto:center@ijhc.org) Website: <http://www.ijhc.org>**

**Copyright © 2010 IJHC. All rights reserved.**

**DISCLAIMER: <http://www.wholistichealingresearch.com/disclaimer.html>**