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The ICBEST Model of Forgiveness, Healing, Energy Therapy and Change

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Abstract

This article introduced the ICBEST (integrative, cognitive, behavioral, energy and spiritual therapy) model for guiding therapy and change, using an extensive, single case study of a highly depressed, suicidal client. Five of the eight levels of the PPPT (Positive Pressure Point Techniques) were used as the energy therapy approach in addition to Integrative Forgiveness Psychotherapy (IFP). In addition, the Practice Based Evidence Approach (PBEA) to assessment and change was used to demonstrate dramatic client changes over time. Short scales to track change were administered on a regular basis in the areas of stress, depression, negative affect and beliefs, positive affect and beliefs, well-being, flourishing, life satisfaction, self-worth, self-compassion, forgiveness, gratitude and marital positivity and cohesion. The client's scores showed major decreases in overall stress and negative affect, depression, suicidal ideation, neuroticism and vulnerability, and major increases in well-being, flourishing, positive affect and beliefs, self-compassion and self-worth, life satisfaction, warmth, marital positivity and straightforwardness.

Key words: ICBEST, integrative, cognitive, behavioral, energy, spiritual, therapy, IFP, Integrative Forgiveness Psychotherapy, PPPT, Positive Pressure Point Techniques, Change, PBEA, Practice Based Evidence Approach

Introduction

This article is based on an extensive case study, using the ICBEST, (integrative, cognitive, behavioral, energy and spiritual dimensions of therapy) model of forgiveness, healing, energy therapy and change.

'Ted' (assumed name, with Identifying information changed for confidentiality) was a married, 50 year old life coach with, a 14 year old daughter living at home and a 21 year old daughter in an ivy league college. His 42 year old wife, 'Jane,' was a research scientist at a local pharmaceutical company. They lived in the suburbs and owned two homes, one locally and one in the mountains as a getaway vacation home. Unfortunately, the upkeep on these two homes was very high and the expenses were exceeding their income. This was especially so since Ted's life coaching business, which had been doing well a few years earlier, had been doing very poorly in the last few years. In the last year he had brought in only \$12,000. At one point he had earned more than his wife but not in recent years.

Ted wanted to sell the vacation home for the substantial income it would bring but his wife was very reluctant, as she loved it. For the last year he was on antidepressant medication, which wasn't working very well. Ted was very angry at his wife for not being willing to sell one of the homes, especially the vacation home. The suburban and vacation homes were both worth a lot of money and the suburban home was really too large for them at this stage of their life, with lots of financial upkeep.

At intake Ted was not only angry and bitter toward his wife but feeling powerless in his interactions with her. He was also feeling powerless and frustrated in his endeavors to generate coaching clients despite a substantial degree of effort. He felt hopeless, discouraged, helpless, very self-critical, judgmental and defeated – to the point of contemplating suicide. His lack of self-compassion, his vulnerability and his lack of straightforwardness in his communication with his wife were significant contributors to his major depression, suicidal thoughts and overall high level of distress and turmoil.

Because of the intensity of his depression and suicidal feelings I chose to see him twice a week for the first five weeks, which is quite unusual for me in my clinical therapy practice. I also encouraged him to bring his wife in for marital therapy because of the crisis atmosphere. He was able to do on three occasions, despite her reluctance to come in at all.

Psychological assessment scales

It is my normal practice to have clients fill out psychological assessment scales while in the waiting room prior to sessions. This is helpful both in clarifying and addressing their clinical issues, tracking change over time and collecting data for research.

Before the first interview, Ted was administered a battery of psychological scales that included the Hopkins Symptom Checklist or HSCL (Derogatis et. al, 1973); the Kroenke and Spitzer PHQ-9 Depression Scale (2002); the Friedman Well-Being (1992), Affect (1998), Belief (1993), Meaning, Purpose and Vision (1997) and Self-Worth (1997) Scales; the Bradburn Well-Being Scale (1969); the Fordyce Well-Being/Happiness Scale (1987); the Diener et. al. Satisfaction with Life Scale (1985); the Diener et. al. Flourishing Scale (2010); the McCullough and Emmons GQ6 Gratitude Scale (2002); the Raes, Pommer, Neff et. al. (short form) Self-Compassion Scale (2011); the Snyder et. al. Hope Scale (1991); the Thompson et. al. Heartland Forgiveness Scale (2005); and the Marital Positivity and Cohesion subscales (adapted from Snyder, 1996). This is called a Practice-Based Evidence Approach (PBEA) to psychotherapy.

With the exception of the HSCL all these questionnaires were short (from 5 to 20 questions), and easily administered and scored. Many were administered at various intervals . This permitted the tracking of change over time.

Ted was also asked to complete the longer (240 items) personality inventory called the NEO-PIR (Costa and McCrae, 2010) and the clinical inventory (344 items), called the Personality Assessment Inventory or PAI (Morey, 1991) between the first two sessions. Both the NEO-PIR and the PAI were readministered at the end of the 14 weeks (3.5 months) of psychotherapy.

ICBEST Model

The generic model used to guide treatment is called ICBEST because it integrates (I) cognitive (C), behavioral (B), energetic (E) and spiritual (S) dimensions of therapy (T). This ICBEST model has been described implicitly in six other recent publications (Friedman, 2002, 2006a, 2006b, 2010, 2014 and 2015), though the acronym ICBEST has not previously been used per se.

Ted had many limiting core cognitions/beliefs at the beginning of therapy, such as “I can’t choose”; “I am a victim”; “I am a failure”; “I can’t accept myself”; “I am defective”; “I am inferior”; “I don’t deserve to be loved” and “I am helpless/powerless”. He also wanted to make behavioral changes in his job situation and in his communication with his wife. My assessment was that his energy level was very low, disorganized, and conflicted both within himself and with his wife. and mostly negative and disharmonious.

Ted was also spiritually very unforgiving of himself, of his wife and of his life circumstances and disconnected from Source energy, i.e. love, peace and joy..

Not surprisingly, on the psychological scales Ted scored very low on measures of well-being, positive affect, positive beliefs, flourishing, hope, meaning, life satisfaction and self-compassion and very high on depression, vulnerability, anxiety, overall emotional distress/neuroticism, aggressive attitude, interpersonal and marital problems and suicidal thoughts. Despite these issues, his wife reported he was a very talented and creative person.

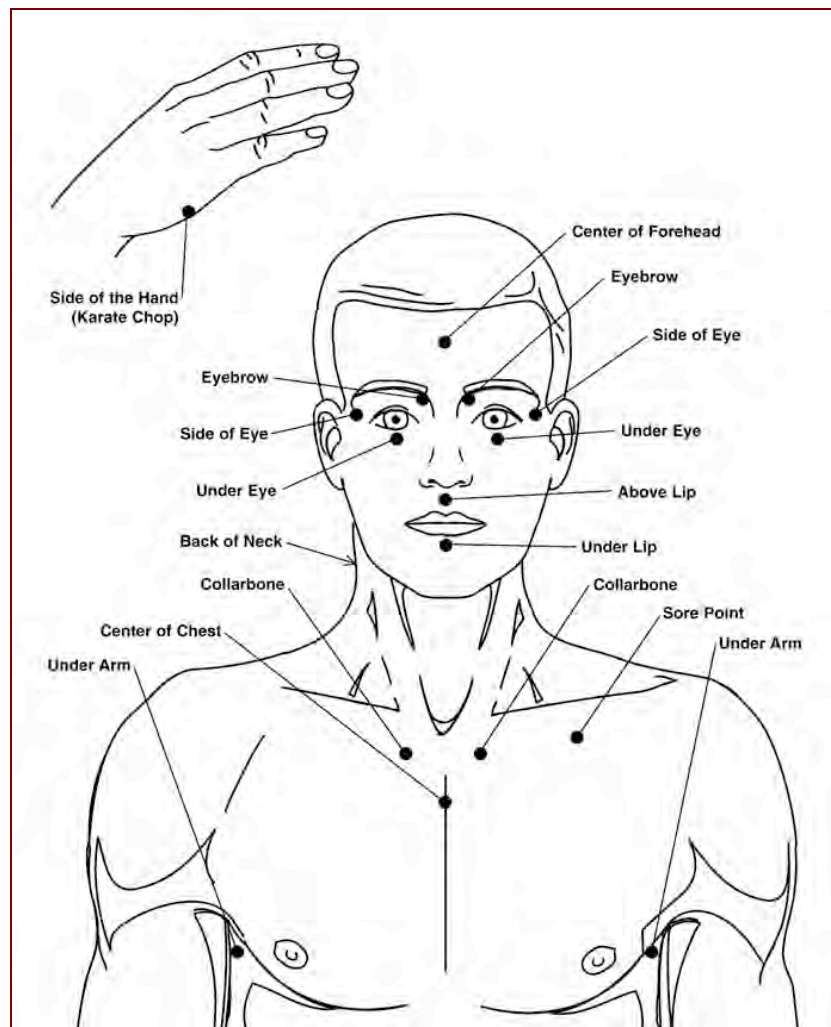
The therapy

First interview session and the Psychological Uplifter

Figure 1.

After Ted filled out of the initial battery of psychological scales in the waiting room that took about 90 minutes, I conducted a thorough initial interview lasting 60 minutes to clarify the inner and outer triggers to Ted’s problems as he perceived them and understanding how he saw his problems in general.

At the end of the initial session I taught him the Psychological Uplifter, which combines energy techniques with cognitive and spiritual approaches. (See Figure 1 and the description below)



The Psychological Uplifter

The following is repeated three times while rubbing on the sore point,, i.e., the neurolymphatic point:
 "Even though I have some of this problem or negative emotion (fill in the emotion/problem e.g. fear, anxiety, hurt, anger, depression, sadness, guilt, shame, low self-esteem, work, marital, relationship and family problems _____ etc.) I accept myself deeply and profoundly and I am a good, competent and magnificent person".

Followed by: "I love myself unconditionally despite my problems and limitations" three times while rubbing on the sore point.

Followed by: "I am entitled to miracles" 3 times while rubbing on the sore point.

This is done 10-20 times per day or as often as the person can.

I demonstrated the Psychological Uplifter on myself while Ted followed me, doing it on himself. In Ted's case, for emphasis, I circled the words, "hurt, anger, depression, guilt, work and marital problems" on the handout sheet I gave him. I also asked him to think about setting ten goals that we would write down together in the second therapy session after dialoguing with me. I call these the "miracle goals" and I told him they need to be changes that he can make over the next 3 months, 6 months and 1 year.

Second therapy session and "Anything is Possible"

Ted and I talked for a while and then I gave him feedback on all the psychological scales he had filled out. Combining his thoughts with my feedback, we set 15 goals which I wrote down, giving Ted a copy of the goal sheet.

Next, I taught him a new stress release, energy exercise:

Anything is Possible

While tapping with five fingers of one hand on the fleshy part of the side of the other hand (often called the "karate chop point," shown in Figure 1) I had Ted repeat three times: "Anything is possible; I am entitled to miracles; Miracles are happening"; and "Miracles come from love".

Then I asked him to practice both the "Psychological Uplifter" and the "Anything is Possible" statement one after the other. He was instructed to practice them both at least 5 times a day at home. Ted was also instructed to take at least one small step (I call it a "penguin step") in the direction of any of his 15 goals every week. This is an example of how these exercises integrate cognitive, behavioral, energetic and spiritual therapy (ICBEST) interventions.

Third therapy session and the Forgiveness Solution

Ted and I talked about his feelings, perceptions, attitudes, marital problems, low self-esteem and low self-compassion and his grievances/attack thoughts/unforgiveness toward himself, his wife and life. I also asked about his progress to date and gave him some feedback on what the weekly psychological scales were saying. I also taught him a third exercise:

Releasing/Choosing

While tapping with five fingers of one hand on the karate chop point, repeat 2 times:

"I release the hurt, anger, depression and guilt and all of the roots and causes (known and unknown) and all of the effects on me and everyone else in my life".

Then repeat two times:

“Instead I choose to feel calm, relaxed, peaceful and happy” .

I first demonstrated this exercise and we then did it together. Then Ted and I repeated together all three energy stress release techniques learned so far,. Ted was instructed to practice all three exercises in sequence 5 or more times per day.

2-Paths Model of Happiness/Change

Then I discussed what I refer to as the 2-Paths Model of Happiness/Change, using thirteen large poster board diagrams. This 15-20 minute dialogue/lecture is an educational roadmap for change that emphasizes the important role of forgiveness of grievances, judgments and “shoulds,” and clearing of attack thoughts toward oneself, others and circumstances in the change process. It also emphasizes that you can always choose between two paths, the path of happiness and peace or the path of unhappiness and fear.

I then gave Ted (as I give all my clients) a copy of my book, the *Forgiveness Solution* (2010), which is mostly an integrated, comprehensive, easy to read workbook on forgiveness. It includes energy, spiritual, cognitive and behavioral exercises for change and healing. Ted was instructed to read the first two chapters of the book, do the exercises and bring the completed assignments back with him in the next session so I could review them with him.

Fourth therapy session

After reviewing with Ted his responses to the material in the *Forgiveness Solution* and discussing how he was feeling, I taught Ted the first two levels of the Positive Pressure Point Technique (details below).

The Positive Pressure Point Technique is an energy therapy technique adapted from EFT, TFT and TAT, among others, and has eight levels. It uses both a tapping protocol and a hold and breathe protocol using eight meridian pressure points, with and without affirmations. It also includes a forgiveness protocol and is used following the Psychological Uplifter, Anything is Possible and Releasing/Choosing exercises. Most clients find it quite powerful in facilitating change.

Ted was taught both the “tapping” and the “hold and breathe” techniques without any affirmations (the Positive Pressure Point Technique - Level 1 and 2). The descriptions below are from my book, the *Forgiveness Solution* (2010) with permission of the publisher, adapted slightly for this article.

Positive Pressure Point Technique, Level 1

Use of Pressure Points and Tapping with No Affirmations (PPPT-L1)

“First, reflect briefly on the one area of emotional distress, such as anger, hurt, guilt, sadness, or fear, that you feel when you think of the person, circumstance, or yourself that you are having a challenging time forgiving. (In Ted’s case it was initially his wife, and later himself.) Rate it on a 10-point scale with 10 being very distressed (i.e., experiencing a lot of anger, hurt, guilt, sadness, or fear) and 1 not being distressed at all. This is called a SUDS (subjective units of distress) level or scale.

Attune to the emotional distress. Briefly think about the emotional distress, anger, hurt, guilt, sadness, disappointment, fear, etc. Do not dwell on it, however. Just think about it briefly. Do the Psychological Uplifter, Anything is Possible and Releasing/Choosing steps.

Then using two fingers of either hand, tap gently and consistently fifteen to twenty times on each of the following eight pressure points:

1. Center of the forehead (Figure 2). Use two fingers of one hand.

Figure 2



2. Inside corner of the eyebrows, just below the eyebrow (figure 3). Using two fingers of both hands is preferable.

Figure 3.



3. Just outside the side of the eye (figure 4). Using two fingers of both hands is preferable.

Figure 4.



4. Under the eye on the bony part of the eye in the center (Figure 5). Using two fingers of both hands is preferable.

Figure 5.



After tapping on the first four points, stop briefly and give yourself another SUDs rating from 1 to 10. In most cases, the numbers will have dropped as many as two to six points, and very occasionally all the way to 1.

5. Above the lip (Figure 6). Using two fingers of one hand is preferable on this pressure point.

Figure 6.



6. Below the lip and above the chin (Figure 7). Using two fingers of one hand is preferable on this pressure point.

Figure 7.



7. Behind the neck (Figures 8a and 8b). When tapping behind the neck, use all the fingers of both hands. Tap up, down, and all around thirty-five times on the back of the neck points, as this area is especially beneficial. Make sure when tapping on the back of the neck to go down the center, up, and around while covering all the muscles, arteries, and veins in the back of the neck.

Figure 8a.



Figure 8b.



8. The collarbone-chest area (Figure 9). Using two or more fingers of both hands is preferable on these pressure points.

Figure 9.



After tapping on all eight pressure points, give yourself another SUDs rating. In many cases, the SUDs rating will have dropped to 1. If the SUDs rating has not dropped to 1, repeat Level 1. If you are having difficulty, read the troubleshooting instructions at the end of Positive Pressure Point Technique Level 4.

Positive Pressure Point Technique Level 2:

Pressure Points with Holding and Breathing with No Affirmations (PPPT-L2)

Follow the instructions for the first seven steps of Positive Pressure Point Technique Level 1.

Using two fingers of either hand, hold each pressure point (Figures 2-9) while breathing in slowly through the nose and breathing out slowly through the mouth three times for each of these points, as detailed above.

If you are having difficulty, read the troubleshooting instructions at the end of Positive Pressure Point Technique Level 4.

In particular, I had Ted work on lowering his anger at his wife and his core limiting beliefs about himself, his capabilities and his future. In both of these areas Ted's SUDS levels dropped from 9 to 1. Ted was much more peaceful after these exercises. He began at this point to think that maybe he was capable, fine, acceptable, empowered and loveable. We also talked about the possibility of bringing his wife in for one or more sessions. He said he would speak with her about it.

Fifth therapy session

Ted said his wife was considering coming in to talk with me. He believed she was also, more willing to sell the vacation home than she had been previously. He was quite relieved to hear this, feeling she was finally listening to him. He also had signed up to take some advanced executive coaching classes. Even though their savings were quite depleted at this point, apparently his wife supported him on this decision. Clearly Ted was beginning to take some behavioral action steps both with his wife and his career.

In this session Ted also learned the Positive Pressure Point Technique Level 3 and 4 and we reviewed the exercises he had done at home in the Forgiveness Solution book (chapters 3, 4 and 5).

Positive Pressure Point Technique Level 3: Pressure Points with Tapping, Holding, and Breathing with No Affirmations (PPPT-L3)

Level 3 of the Positive Pressure Point Technique is identical to Levels 1 and 2 except that you alternate a round of tapping on the eight pressure points with a round of holding and breathing.

Start with the first seven steps of PPPT-L1. Using two fingers of either hand, tap gently and consistently fifteen to twenty times on each of the eight pressure points. Then, again using two fingers of either hand, hold each pressure point while breathing in slowly through the nose and breathing out slowly through the mouth two times for each of the eight pressure points.

After tapping, holding, and breathing on the first four pressure points, stop briefly and give yourself another SUDs rating. In most cases, the numbers will have dropped from two to six points, and occasionally all the way to 1. If the SUDs rating has not dropped to 1, repeat Level 3 of the Positive Pressure Point Technique.

If you are having difficulty, read the troubleshooting instructions at the end of the Positive Pressure Point Technique-Level 4.

I encourage you to practice Levels 1, 2 and 3 of the Positive Pressure Point Technique ten to twenty times a day, or as often as you can, and experiment with using it on all kinds of distress for a few weeks before learning the next levels.

Positive Pressure Point Technique Level 4: Pressure Points with Tapping, Holding, and Breathing with Affirmations (PPPT-L4)

Level 4 is identical to Level 3 except that you alternate a round of tapping on the eight pressure points with a round of holding and breathing and also add certain affirmations.

Start by doing the previously described steps of the Positive Pressure Point Technique Level 1. Then using two fingers of either hand, tap gently and consistently fifteen to twenty times on each the eight

pressure points (see below).

In Level 4 of the Positive Pressure Point Technique, when tapping on each pressure point, use the following generic affirmation formula two to three times (usually three at first): “I release X, I want Y. I release X, I choose Y. I release X, I am Y.”

For example, say, “I release anger, I want to be at peace,” “I release anger, I choose to be at peace,” and “I release anger, I am at peace”

This set of affirmations focuses on what you want to release, what you want to experience—empowerment (I choose) and acknowledgment/remembrance of one’s true nature (peace). In general, it reinforces what you have been learning in other ways; that is, releasing darkness and choosing/acknowledging light. Sometimes it is also beneficial to add “I release X, I intend Y” and “I release X, I focus on Y” after you say, “I release X, I choose Y,” where X is the anger, guilt, hurt, or other distressing emotion, and Y is “be at peace.”

Tap using the sequence detailed above.

After you have done the tapping with the affirmations on each pressure point, I encourage you to practice the holding and breathing process two times on each pressure point, with the idea that you are breathing in peace on the in-breath and breathing out whatever distress you are attuned to on the out-breath. For example, you want to image to yourself that you are breathing in peace and breathing out anger or guilt or sadness or fear or hurt.

Sometimes you may find it beneficial to use more than one word while doing the tapping. For example, you may want to say: “releasing anger, hurt, and disappointment,” instead of releasing only anger. You may want to say “I want” or “I choose to be calm, relaxed, and at peace” rather than “I want” or “I choose to be at peace.”

The main point is that you are reducing or releasing the negative distress and increasing or strengthening the positive feelings and attitudes.

Everyone is unique, and there is no right or wrong way to do it. You may find that you prefer either the tapping method or the hold and breathe method, and you may find after practicing them both that you prefer doing the Positive Pressure Point Technique process with or without affirmations. I do, however, encourage you to try the different versions on all kinds of issues, both small and large, and to practice it frequently. Practicing even a few times a day, however, can give great relief for many people. It is often very beneficial to write the affirmations or the whole process on note cards, your computer, PDA, or in a journal.

Trouble shooting

If you get stuck using any of the above Positive Pressure Point Techniques, I have two recommendations. Most of the time it won’t be necessary to use these, but if you do run into trouble, they can be very helpful.

1. Continuously tap the karate-chop point (Figure 1) with two fingers of the other hand while repeating: “Even though I still have this problem (for example: anger, hurt, resentment, guilt, sadness, fear, anxiety, etc.), I accept myself deeply and profoundly and I am a good and magnificent person.” Do this three times and then return to the Positive Pressure Point Technique you are using.

2. Access an earlier or deeper upset/feeling. In this approach, which I find is the most powerful, you

close your eyes and look within until you find an earlier or deeper feeling inside you that you didn't notice before, one that was underneath the feeling you were working on. For example, suppose you were using the PPPT to release hurt and the SUDs numbers came down in several steps from 10 to 6, and then became stuck; that is, the numbers either didn't get any lower, or they moved very slowly from 6 to 5 and 5 to 4.

Close your eyes and look inside. You might then discover that there were some strong angry feelings underneath the hurt feelings. Switch over to the angry feeling, give it a SUDs number (for example, a 9 out of 10), and then do the Positive Pressure Point Technique on angry feelings. When the SUDs on the angry feelings have come down to 1, check back to see what the SUDs number is on hurt feelings. Sometimes the SUDs number on the hurt feelings will also have come down to 1 (the hurt will be gone). At other times, some of the hurt will still be there. At that point, give it a new SUDs number and then do the Positive Pressure Point Technique you are using for hurt feelings until it comes down to 1.

I helped Ted using Positive Pressure Point Technique (PPPT) Levels 3 and 4 to reduce his marked anxiety and worry about his financial situation and to reduce some limiting beliefs about the possibility of ever being successful again in his career as a coach. He still had felt hopeless and powerless and in fact a failure, as well as inferior to his friends and colleagues. The use of the PPPT Levels 3 and 4 reduced the SUDs levels from 8 to 1. He started to feel more competent, worthy, peaceful and successful. At this point I had him visualize positive changes occurring in all areas of his life (financial, job, marriage, relationships, etc.) in 3 months, 6 months and 1 year. This also led to his feeling much better.

Sixth therapy session

We reviewed his homework from chapters 6, 7 and 8 in the Forgiveness Solution. One part of this homework included 30 forgiveness affirmations such as "Forgiveness is the key to happiness and peace"; "I am determined to see and experience things differently;" and "I can forgive rather than judge others and myself".

Another part introduced the first two of fourteen guided forgiveness imagery exercises, such as "Forgiveness imagery of seeds and weeds" and "Opening the way for change". Although these imagery exercises are described in the Forgiveness Solution book, I generally give clients three CD's that collectively have all of the fourteen forgiveness imagery exercises on them or invite them to download these on MP3's to their computer from my website.

Ted reported in this session that his wife was now ready to see me and would call me within the week to set up a therapy appointment. He was also actively taking an executive coaching class in the evening and had been given his first assignment to present to the coaching class in a few weeks. He was quite nervous about this assignment. Ted was enjoying the class and yet feeling quite challenged at the same time.

I taught him the Positive Pressure Point Technique Level 5:

In Level 5, we add forgiveness affirmations. After doing all the steps of Level 3, you then tap continuously about a hand's width beneath your armpit, first under the right arm (figure 11) and then under the left. Finally, you tap on the center of the chest (no figure). The forgiveness affirmations are used to further emphasize that forgiveness is a key to happiness, to strengthen your connection with the path of light, and to further connect you with your true identity.

Figure 10.



Forgiveness Affirmations

This group is used while tapping under the right arm:

I forgive myself for my contribution to this problem.
I forgive myself, I am doing the best that I can.
I forgive myself, I release all judgments against myself.
I forgive myself, I release all grievances against myself.
I forgive myself, I release all attack thoughts against myself.
Forgiveness is the key to happiness.

Then, while tapping under the left arm, repeat these phrases.

I forgive him/her (use the person's name). for his/her (pick one) contribution to the problem.
I forgive him/her (use the person's name) He/she is doing the best that he/she can.
I forgive him/her. I release all judgments against him/her.
I forgive him/her. I release all criticisms against him/her.
I forgive him/her. I release all attack thoughts against him/her.
Forgiveness is the key to happiness.

Now, while tapping in the center of the chest, repeat these phrases.

Forgiveness is the key to happiness.
There is forgiveness in my heart for myself and for him/her. (Say twice, usually using the person's name)
There is love in my heart for myself and for him/her (use their name). (Say twice)
Deep down, I am the Presence of Love. (Say twice)
I thank God or the Universe (choose one) that I am at peace, and all my problems have been solved.
I thank God or the Universe (choose one) that i am healed and at peace.
I thank God or the Universe (choose one) that I am at peace and healed.
I thank God or the Universe (choose one) that I am out of the darkness and experiencing light.

Next, put your hand on your heart and close your eyes. Then say silently and slowly to yourself:

I am grateful for all the experiences in my life in the last month, the last three months, the last six months, and the last year. (Say three times and reflect on those experiences.)
I am at peace. (Say two times slowly)
I am calm, relaxed, and at peace. (Say two times slowly)

Take three more slow, deep breaths. Gradually, very gradually open your eyes and bring your consciousness back into the room. Give yourself a SUDs number. If it isn't down to 1, repeat the PPPT- Level 5 from the beginning.

Forgiveness and the Positive Pressure Point Techniques

Since forgiveness is so important in my work, here is a brief comment on this cognitive, emotional, energetic and spiritual process.

PPPT Level 5 introduced the powerful role of forgiveness in the healing process. Here are some observations and exercises from my book, *The Forgiveness Solution* (2010).

I define forgiveness as:

1. Releasing the negative emotions of anger, resentment, bitterness, indignation, hurt, irritation and guilt towards not only others and circumstances but also oneself, God and groups of people.
2. Giving up the beliefs that generate these emotions such as the grievances, judgments, shoulds and attack thoughts behind them.
3. Shifting one's perceptions toward the person or circumstance that triggered the unpleasant or negative feeling so that you learn to see things differently.
4. Choosing and deciding to forgive.
5. Developing positive or benevolent feelings and attitudes toward the person or circumstance that was previously perceived as hurtful including oneself. These include feelings of compassion, kindness, warmth and love.
6. Developing a sense of peace and contentment when thinking about the person or situation previously perceived as hurting or harming you.
7. Giving up the desire for retribution, punishment or harm to another person.
8. Discovering that the events or circumstances that were perceived as harmful or hurtful were learning experiences that existed for the personal and spiritual growth of all the parties.
9. Discovering eventually at a deeper more profound level that the person you perceived as harming or hurting you is your savior.

I would add further that the disruption in the flow of energy hypothesized to be the cause of all negative emotions in the EFT discovery statement has its roots in unforgiveness (Friedman, 2014).

Ted needed to work extensively on self-forgiveness and self-compassion to alleviate the guilt and self-criticism and self-attack/judgment he had engaged in as well as the anger, judgments and criticisms he had of his wife. Not surprisingly his SUDs levels in these areas was quite high (8 to 10) but one or two rounds of the PPPT Level 5 brought the SUDS level down to 1.

Jane's first therapy session

Before seeing Ted again I saw Jane for an individual therapy session. Naturally Jane's perspective on Ted's problems and their marital problems was somewhat different. She believed that Ted always had a temper problem, as did his Dad before him, whenever he was frustrated and that his temper had gotten much worse in the months before he came in for therapy. In fact, she said he had been verbally explosive with her a few times and it scared her. Jane said that Ted, however, was very talented and creative and usually very conscientious. Lately, he was very discouraged and depressed over his lack of work and finances and his self-esteem had taken a big hit. He used to make more money than her but now it was much less. Many opportunities had gone sour for Ted, job-wise, in the last few years, so his income was very low. He was often home alone during the day. Being fairly social he would brood a lot with no one to talk to.

Jane seemed to be a quite confident and outgoing woman, fairly self-assured. She also said she was more willing than Ted had thought to sell the vacation home in the mountains, even though she loved going there. Although she was somewhat ambivalent about it she knew it would help their financial situation a lot. Apparently the vacation home was worth a considerable amount of money and was quite saleable according to the realtors. She clearly felt at times a victim of Ted, though overall in much better shape emotionally. Near the end of the therapy session Jane surprised me by saying she thought that Ted's suicidal thoughts had something to do with side effects of the antidepressant medication he was on. Ted hadn't mentioned that to me, nor had he given it much weight. In fact, he had implicated Jane as the potential cause of them. Jane agreed to come in for a joint session with Ted in the near future.

Seventh therapy session

Ted talked about his gradual improvement in his relationship with Jane and his pleasure at her willingness to come in and see me. He asked about my impressions of her, which I gave him. Ted felt much less desperate as a result of her coming in. Then Ted talked at some length about his anxiety/worry at his presentation coming up for his executive coaching class. We used the PPPT Levels 4 and 5 to help reduce his anxiety/worry from a SUDS level of 7 to 1. We also worked on reducing some remaining guilt and anger he had regarding his wife. The SUDS levels decreased on both guilt and anger from 6 and 7 to 1. By this time Ted's suicidal feelings had been eliminated for three or four sessions and his depression was greatly reduced.

Eighth therapy session

I saw Ted and Jane together for the first time. Despite the anxiety over coming together they communicated quite openly, for the most part. Ted still had some anger at his wife, which he shared easily, around selling the vacation home. Jane said she was willing to sell it in a few months after some work was done on the house. She also emphasized that she wanted to cooperate and support Ted any way she could and still get her own needs met. Jane wanted Ted to make more of an effort to build up his coaching business and not mope around the house during the day. He agreed to do that. With my encouragement they both agreed to take concrete positive steps together as a couple in the next week, which clearly pleased Ted. They agreed to come back the following week for a marital session.

Ninth therapy session

Ted had made some contacts during the week that led to two new coaching clients and the possibility of more in the future. His presentation at his coaching class went quite well despite some lingering nervousness on his part and he received an A- for the presentation.

We reviewed his feedback on the exercises on nine "forgiveness affirmations", such as "Why am I able to forgive so easily now when previously it was so hard for me?"

There were also some new imagery exercises such as "Creating well-being forgiveness imagery" and "Light imagery grateful heart technique". We also did some additional PPPT work on core limiting negative beliefs and feelings around self-confidence and empowerment. Ted did well on these exercises. His SUDS levels decreased from 6 to 1 quickly.

In this session I also recommended Ted read two books on the law of attraction: "Law of attraction: The Science of attracting more of what you want and less of what you don't want" by Michael Losier and "The Hero," by the author of "The Secret", Rhonda Byrnes. He was quite eager to read both.

Tenth therapy session

Ted and Jane came in together for another marital session. They had both contacted their realtor about selling their vacation home and also made some inquiries about having some carpentry work done on their home to fix a few things that would be needed before selling it. They were clearly communicating better and Ted's mood was greatly improved. They seemed to be on the "same page" for the first time. Ted's resentment at Jane had mostly vanished. Jane was increasingly supportive of Ted now that he had started to get some new coaching work, lightening the burden on her supporting them both. This had weighed heavily on her. Ted indicated he had purchased the "Hero" book and liked it very much as it was quite uplifting.

Eleventh therapy session

Therapy sessions up to this point had been taking place twice a week because of the seriousness of Ted's depression and suicidal feelings. From the eleventh session on they were held once a week with a three week break after the fifteenth therapy session. Ted announced in this session that he was doing well in his executive coaching class and had signed up for two more advanced coaching evening classes during the next semester.

Ted was encouraged by the powerful stories in the "Hero" book that increased his optimism. He also liked the practical exercises in Losier's "Law of Attraction" book. Ted and Jane were mostly communicating well and much more supportive of each other. His self-confidence was improving though his income was still well below what he wanted it to be. After his SUDS level had dropped down on the recent remaining stressors in his life, we did some more PPPT energy healing work on creating positive images and beliefs about the future. Ted looked forward to spending more time with his two daughters in the near future and getting out and socializing more with friends.

Twelfth therapy session

Ted had spent some enjoyable time over the weekend with friends. This was the seventh week since he had been coming for therapy. We reviewed his next homework assignments in the Forgiveness Solution book. He did the exercises and brought in his written report of his experiences, which he found very helpful.

He also reported on the results of doing exercises in Losier's "Law of Attraction" book. Ted also had two interviews for possible coaching/consulting jobs and was feeling very hopeful.

Thirteenth and subsequent therapy sessions

We continued to do PPPT exercises, guided forgiveness imagery exercises, affirmations and affirmations, law of attraction exercises, cognitive restructuring, some behavior rehearsal and future imagery pacing. We had one more marital therapy session which again was very useful and effective. Like the previous marital sessions, they focused quite a bit on enhancing listening, expressive, problem-solving and decision making skills.

About three weeks later, one of the job interviews led to Ted's being hired. In fact, the job offer practically filled up his daytime with executive and professional coaching clients. Moreover, this new coaching work paid him quite well, with the possibility of even more work in the future.

Follow-Up 1

Six weeks after therapy was over I received a call from Ted saying he was doing very well. He was employed full-time during the day and taking two courses on advanced coaching techniques in the evening. He was getting along well with his wife, socializing more on weekends and the vacation home was being put up for sale. Ted said he was too busy for therapy sessions now as he was quite happy, productive and very busy. He thanked me wholeheartedly for getting him through a very rough time in his life.

Follow-Up 2

Five and a half months after therapy was over I spoke to Ted on the phone. He indicated he was working as an executive coach four days a week and his wife was working five days a week earning substantial money. Although they came close to selling the vacation home they jointly decided not to at the last minute. Instead they decided to rent it for a considerable amount of money per week. Consequently, Ted now felt financially secure. He said he and his wife were getting along very well, communicating openly and clearly, He was also exercising regularly. Ted sounded happy and thanked me for the follow-up call.

Assessment Changes

Between the seventh and eighth week of therapy Ted’s scores on most of the assessment scales were in the average range for a general population. His PHQ-9 depression score had dropped from 24 (very high) to 6 (normal) and his HSCL-Depression score had dropped from 43 (very high) to 11 (just above average). See T

Ted’s overall HSCL stress symptom score (sum of 9 subscales) had dropped from 137 (very high) to 31 (slightly above normal). See Table 2. able 1.

Note also the rapid drop in depression and overall stress during the early sessions of therapy.

Although data on most of the other assessment scales weren’t available between the third and ninth week of therapy, Ted’s well-being

Table 1. Changes in Depression Over Time

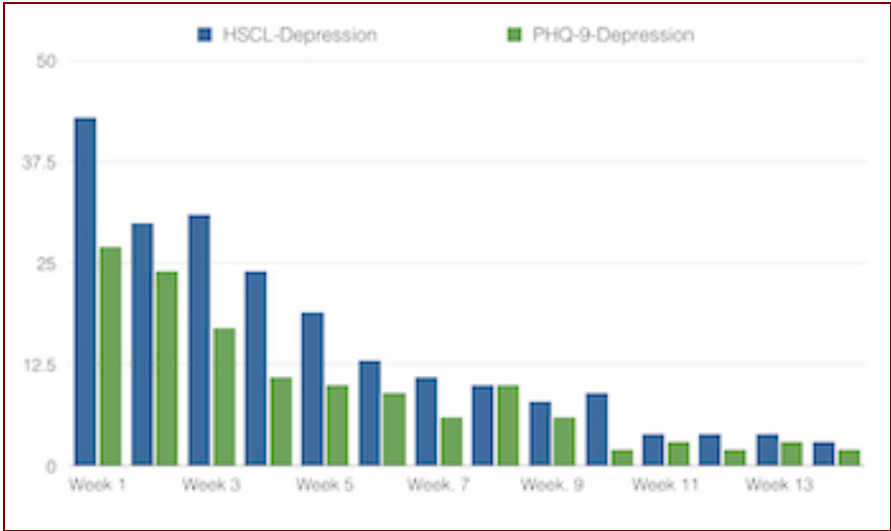
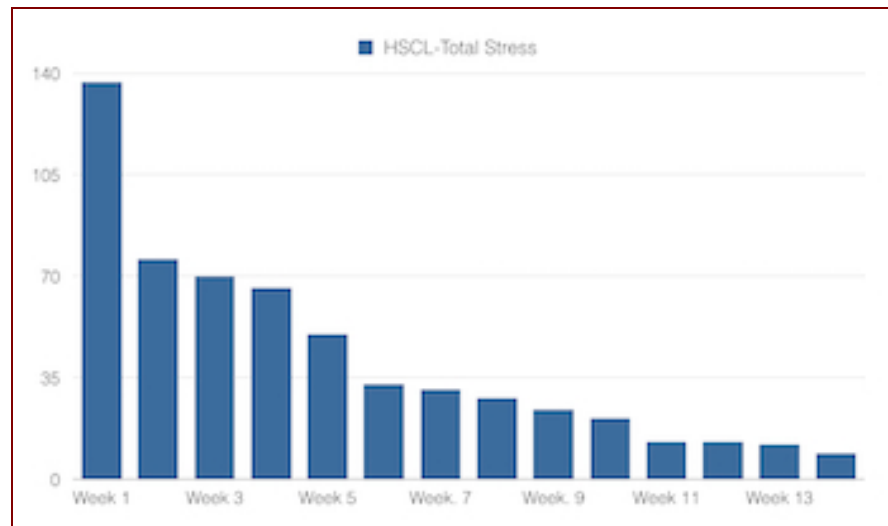


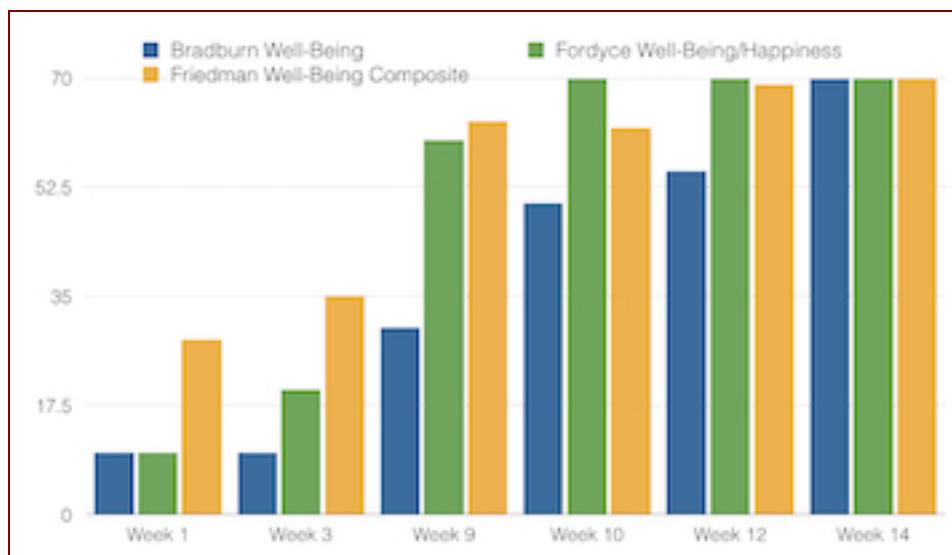
Table 2. Changes in Total Stress Over Time: HSCL-Total Stress

scores on the Bradburn, Fordyce and Friedman



measures of well-being increased dramatically between the 3rd and 9th sessions. See Table 3.

Table 3. Changes in Well-Being Over Time



For example, the scores on the Bradburn, Fordyce and Friedman Scales were 10, 10 and 28 out of 100 respectively at intake (extremely to very low) and 50, 70 and 62 at the 10th therapy session (around 63 is normal). Consequently, on 2 of the 3 well-being measures Ted's scores on well-being were in the average range by the 10th week and on the 3rd measure it was close to that. On all measures Ted was above average by the 14th and last week of therapy (3.5 months).

Tables 4 and 5 show Ted's changes on positive and negative affect and beliefs over the course of therapy. See Tables 4 and 5.

Table 4. Changes in Positive and Negative Affect Over Time

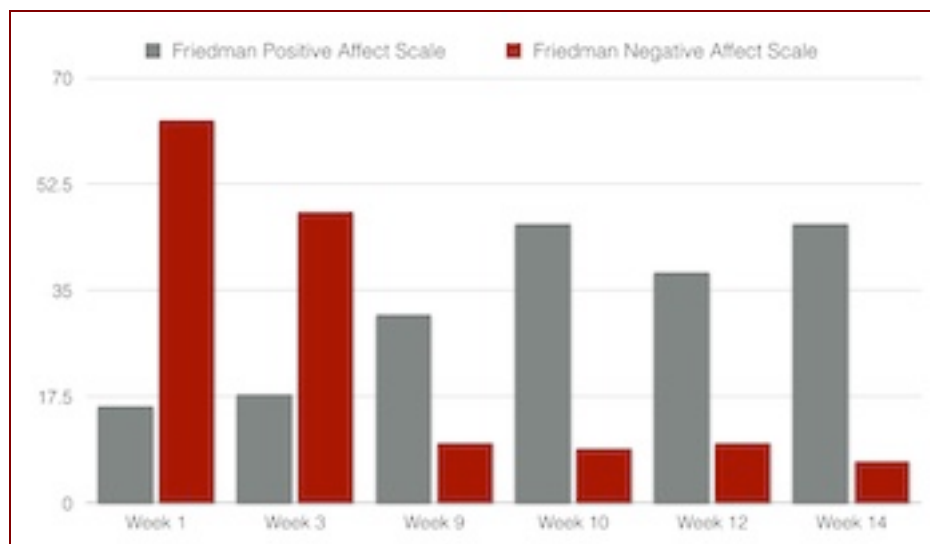
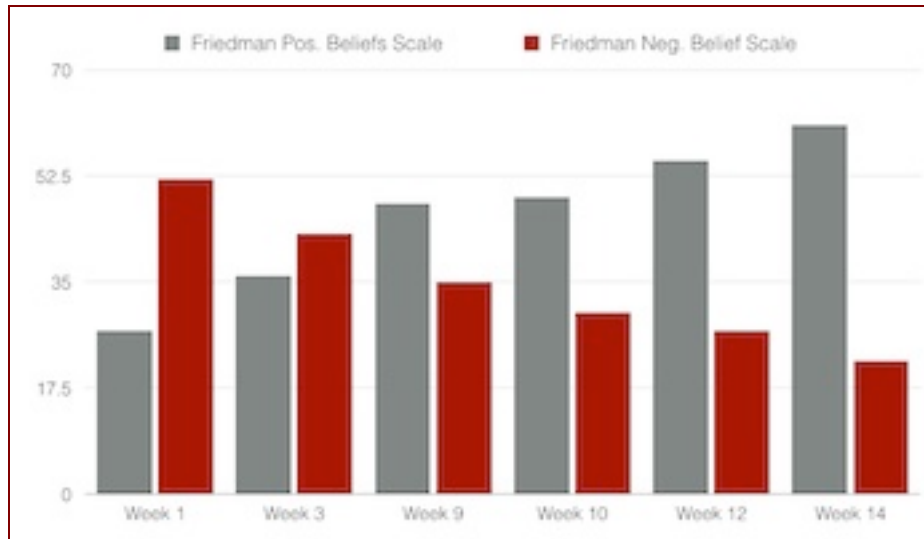


Table 5. Changes in Positive and Negative Beliefs Over Time

Both Tables show a steady increase in positive affect and positive beliefs over time and a decrease in negative affect and negative beliefs over time using the Friedman Affect Scale (25 positive and 25 negative affects) and Friedman Belief Scales (40 positive and 40 negative beliefs).

As you can see in Table 6 there was also a very positive shift in Ted's feelings of hopefulness, satisfaction with life and sense of meaning and purpose in life over the course of 10 and 14 weeks. Using scales developed by Snyder et.al, Friedman and Diener et.al. his scores at intake were 11, 9 and 9 (extremely low) respectively on the 3 scales and 24, 29 and 29 at the 14th and last week of therapy. These scores were average, high and high respectively at this point in time 3.5 months later. See Table 6.

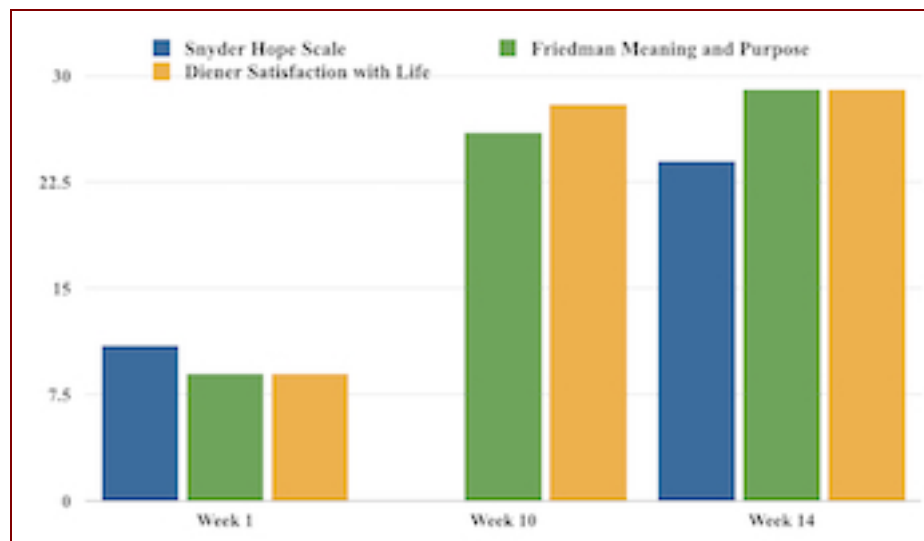
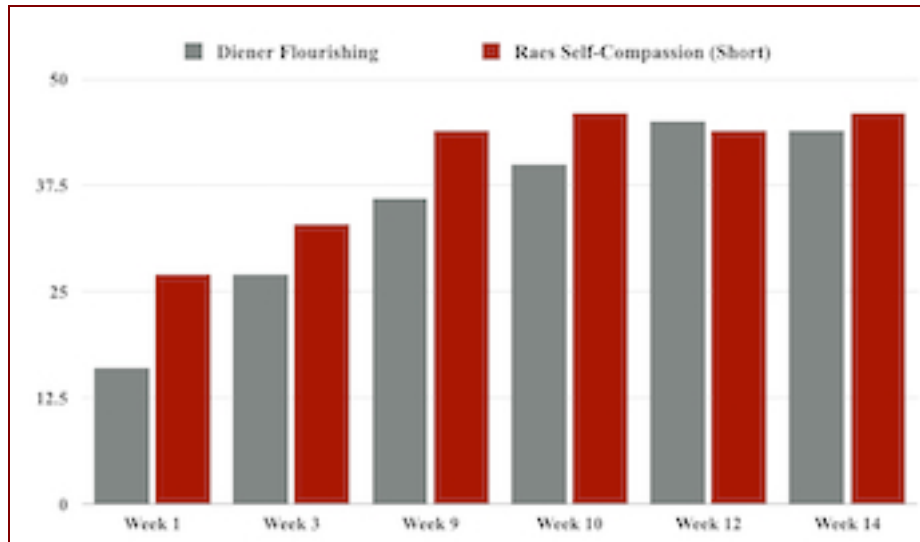
Table 6. Changes in Hope, Meaning and Life Satisfaction over Time

Table 7 demonstrates the marked positive changes in flourishing and self-compassion over 9 to 14 weeks using the Diener et.al and Raes et.al scales. See Table 7.

Table 7. Changes in Flourishing and Self-Compassion Over Time

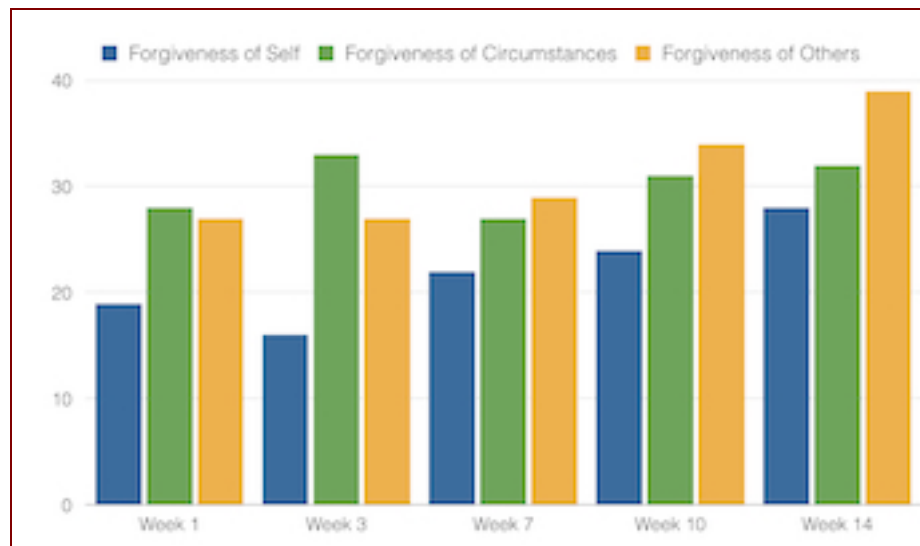
Ted came in with very low scores of 16 and 27 on these 2 scales respectively and improved to 36 and 44 respectively at week 9 and 45 and 44 respectively at week 14. Average scores for the Flourishing scale are 45 and for the self-compassion scale are 36. On most scales Ted reached the average range between session 7-9 though on some scales it took from 12-14 weeks to reach the average or better range.

Table 8 shows the changes in self-worth and forgiveness over the course of 14 weeks using the Friedman Self-Worth scale and the Thompson et. al Heartland Forgiveness Scale. Ted started with very low scores of 45 and 74 respectively on these 2 scales (average scores are 65-70 and 93 respectively) He improved over 14 weeks to the average range on self-worth and above average on forgiveness. See Table 8.

Table 8. Changes in Self-Worth and Forgiveness Over Time

Table 9 shows Ted's score on the 3 Heartland Forgiveness subscales of forgiveness of self, circumstances and others. See Table 9.

Table 9. Changes in the Heartland Forgiveness of Self, Circumstances and Others Subscales Over Time



An average score on these subscales is about 31. At intake Ted had scores of 19, 28 and 27 respectively. He was lowest on self-forgiveness which not surprisingly correlates fairly highly with self-worth and self-compassion. He made the largest improvement over time on the self-forgiveness and forgiveness of others subscales such that his scores at week 14 were 28, 32 and 39 respectively. However, his self-forgiveness score was still slightly below average at week 14 while his forgiveness of others score was well above average. As previously mentioned his self-worth score at week 14 was about low average while his self-compassion score was somewhat above average.

The dramatic changes in gratitude using the McCullough and Emmons GQ6 gratitude scale can be seen in Table 10. See Table 10.

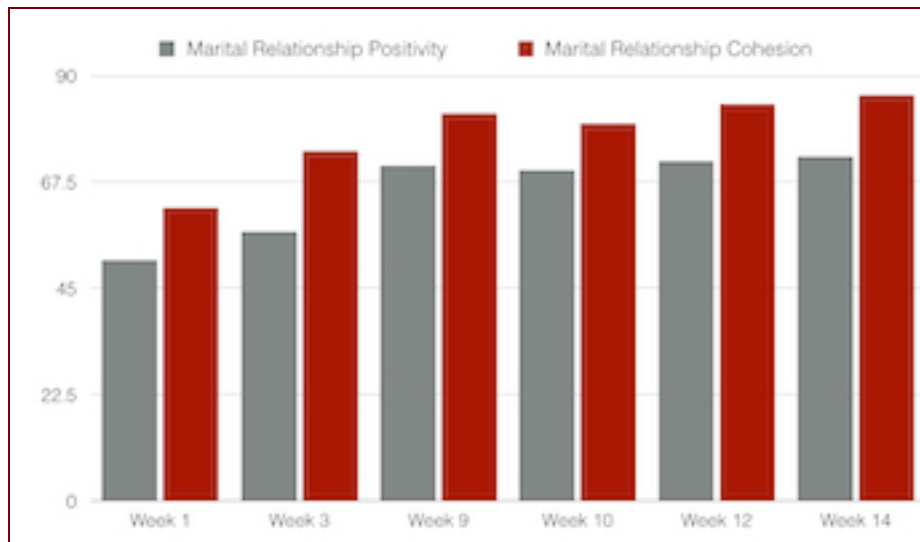
Table 10. Changes in Gratitude over Time



Ted started with a very low gratitude score of 25 (37 is average out of 42) and by week 10 had a gratitude score of 38 which dropped slightly to 36 at week 14. However, both gratitude scores were in the average range by then. Gratitude increased slowly over time at first and then accelerated.

Table 11 shows Ted's scores on a measure of marital relationship positivity and marital relationship cohesion. See Table 11.

Table 11. Changes in Marital Relationship Positivity and Cohesion Over Time

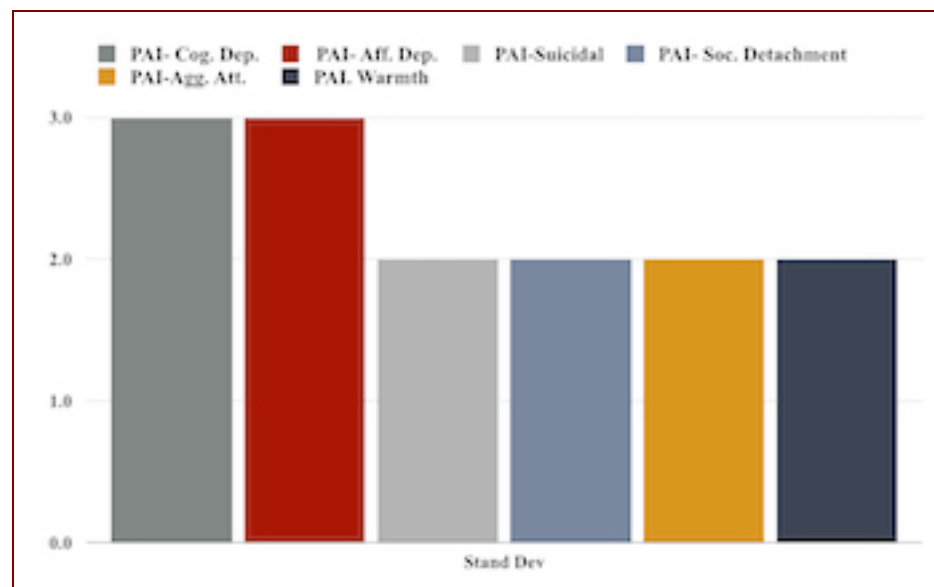


Ted had shaky scores of 51 and 62 on these scales at intake. His scores greatly improved to 73 and 86 respectively at week 14. This means the perceived negativity in his marriage went down and the perceived “doing things together and enjoying it” score went up. Most of these gains had been achieved by the 9th week. By this time his scores were in the average range on these scales.

Tables 12 and 13 are a little different from the other Tables. The 344 item clinical (PAI) and 240 item personality (NEO-PIR) inventories which were administered at intake were re-administered to Ted right before the 14th and last therapy session (3.5 months). The profiles on these scales and subscales allow you to measure changes in standard deviations of change.

Table 12 and Table 13 highlight the major changes on these two inventories. Table 12 shows that there were three standard deviations of change (decrease) on the PAI subscales of cognitive depression and affective depression over the fourteen weeks of therapy. It also shows that there were two standard deviations of change (decrease) in suicidal ideation, social detachment and aggressive attitude and 2 standard deviations of change (increase) in warmth over this period. See Table 12.

Table 12. PAI-Number of Standard Deviations of Change Per Scale



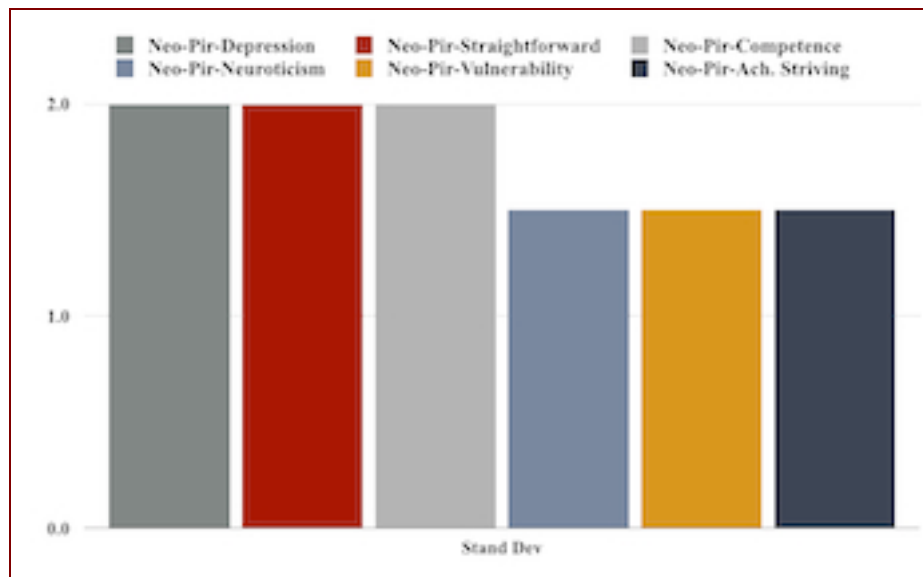
For contrast purposes Leslie Morey in his Interpretive Guide to the PAI (1996) says that effect sizes (standard deviations) of greater than .70 are considered large changes during psychotherapy treatment. In a study I conducted back in 1995 of 22 psychotherapy patients using the PAI and published in Morey's Interpretive Guide, I found an average change on the PAI, pre-post therapy (average duration was 3 months) of 1.39 standard deviations on depression, and .62 on suicidal ideation (decrease) and 1.17 standard deviations of change (increase) on warmth. Looking more closely at these data, the unpublished results from this 1995 study found that there were 1.01, 1.41, .62, .86, .46 and 1.17 standard deviations of change respectively on cognitive depression, affective depression, suicidal thoughts, social detachment, aggressive attitude and warmth. These changes, though substantial, were much less than the ones found with Ted over 3.5 months.

Table 13 shows that there was a 2 standard deviation change (decrease) on the NEO-PIR depression subscale and a 2 standard deviation change (increase) on the NEO-PIR straightforward and competency subscales .

There was also a 1.5 standard deviation change (decrease) on the overall neuroticism subscale (which is a sum of the anxiety, anger, depression, self-consciousness, impulsiveness and vulnerability subscales) and a 1.5 standard deviation change on the vulnerability subscale (decrease). There was also a 1.5 standard deviation change (increase) in achievement striving.

See Table 13.

Table 13. NEO-PIR: No. of Standard Deviations of Change Per Scale



In the same study mentioned above in 1995, I gave the NEO-PIR to 21 clients pre-post therapy (average duration three months). The standard deviation of change was 1.72, .03, .73, 1.39, 1.01 and .76 respectively for the depression, straightforward, competence, neuroticism, vulnerability and achievement striving scales and subscales. Again with the exception of the straightforward subscale all these scales showed changes above .70 (large change in psychotherapy according to Morey) and yet quite a bit less than the changes Ted made over three and a half months.

There were also positive changes on other PAI and NEO-PIR scales and subscales. The changes shown in Table 12 and 13, however, were the most dramatic. They indicate. using these more extensive personality and clinical measurement instruments. that Ted made very substantial changes over a relatively short period of time. As an aside, the reader might be interested in knowing that it

was around 1995 that I began learning about energy therapy techniques (TFT and EFT) as a kind of newbie to the energy therapy field.

Summary

Ted was used as a case study of a very depressed, suicidal client with serious personal, marital, financial and career problems to demonstrate the use of the ICBEST i.e. I (integrative); C (cognitive); B (behaviorial); E (energy) and S (spiritual) T (therapy) model for guiding therapy and change. Also the PPPT (Positive Pressure Point Technique) levels 1 through 5 (there are 8 in all) were described as the energy therapy approach used and applied to Ted's case in some detail.

The eight total levels of PPPT are an integration and extension of EFT, TFT, TAT etc.. Other interventions described in the book, the Forgiveness Solution, (Friedman, 2010) were also mentioned, covering many of the bases of the ICBEST model including forgiveness guided imagery, forgiveness affirmations and affOrmations, behavioral rehearsal, the law of attraction exercises, homework and future pacing. In addition, marital therapy, education and job interviewing/retraining were used.

In order to document the dramatic changes taking place in this very depressed, suicidal client, short scales were administered on a regular basis in the areas of stress, depression, negative affect and beliefs, positive affect and beliefs, well-being, flourishing, life satisfaction, self-worth, self-compassion, forgiveness, gratitude and marital positivity and cohesion. In addition, the longer, clinical and personality inventories called the PAI and the NEO-PIR were administered pre and post therapy over three and a half months. The graphs and tables of these many scales and subscales showed dramatic changes on these measures in Ted, in general, and compared to norms from other studies using the same measures.

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