Energy Psychology in Psychotherapy – Molecular Healing
by Russell Henderson MNCP Pg Dip Adv Dip CAPs

Abstract
Energy Psychology, Meridian Based Psychotherapy, Energy Medicine, Vibrational Medicine, etc., is as old as mankind itself – the energetic paradigm utilized in this modality, is the same as Reiki, Acupuncture systems and theory, and Chakra Philosophy. It has its roots embedded in the ancient healing arts, such as Ayurvedic Medicine, Traditional Chinese Medicine and Tibetan Medicine, to name but a few. Modern science and its increasing ability to understand through valid research the functioning of the human psyche/soma, is confirming what the healing arts of antiquity have been saying for millennia; current researchers into the bio-energy arena are seeing that the human species could be regarded as ‘liquid crystal under tension, capable of vibrating at different frequencies, some in the range of visible light’.1

Energy Psychology rests upon a central theme that all psychological trauma, ‘emotional wounding’ resides ‘phase locked’ inside of the body, and that this trauma can be understood as a disruption of the body’s ‘Thought Field energy system’. If untreated, the trauma remains as ‘active information’ which when triggered, is energetically encoded, and the subsequent Thought Field/s activated, which is then experienced somatically as affect, and dissociation. The Thought field is a pivotal linchpin in the scaffold of Energy Psychology paradigm. Thought Fields could be described as domains of influence, which have elements of electro, magnetic, gravitational, light, sound, elastic and many other constitutes of bio-energy, which are visually unobservable, however, inferred through their effect. Another key component inside of the psychology of bio-energetic medicine is ‘intentionality’. It is hypothesized that the focus of the mind creates Thought Fields; this opens new and fascinating dimensions for the process of healing, whilst raising a profoundly interesting question ‘can humans proactively, or self consciously, or intentionally change the margins of their biology in medically significant ways by what they think and feel?’2

If this proves to be accurate, and current research trends are orienting themselves in this direction, then Energy Psychology as an intervention for conditions other than ‘psycho-pathology’ create permutations of immense proportions. Psychotherapy, Bodywork, and other heavily mentally focused practices such as Yoga, Qi Gong, Tai Chi Chuan, Meditation etc., may gradually lead to more structural coherence (crystallinity) in the tissues, facilitating vibrationally entrained fields which just get stronger over time. The field maintains the pattern of thought in the midst of a flux of components.3

Conversely it could also mean that humans suffering Post Traumatic Stress Disorder (PTSD) living in regressed Dissociative states, might be reinforcing...
their symptomology, by pouring immense amounts of intra psychic energy into their painful Thought Fields.

I have seen Energy Psychology interventions used successfully for the cessation of drug use, (both licit and illicit) and alcohol cravings, including nicotine, migraine, period pains, post operative pain, sleep disorders, PTSD, hyperactivity, hypoactivity, psychosis, enuresis, chronic somatic pain, performance anxiety, bereavement, phobias - even clearing previous life trauma, to name a few.

Psychological Trauma can be considered as phase locked frequencies, energetically encoded into the bodies’ 'Thought Field Energy System', are debilitating over time and cannot be dissolved in the same state in which they were created. Energy Psychology has a focus upon transferring the locus of control back into the domain of the client.

Energy Psychology should not be regarded as a 'quick fix cure all intervention'; thorough client assessment, and all of the tried and tested psychotherapeutic fundamental prerequisites, including extensive training and supervision are included in the approach.

Psycho-pathology, can be viewed as ultimately a disease ('dis-ease') of the vibrational energy at the sub-atomic level. The pathology may present as chemical imbalance; however, the underlying problem is of an electromagnetic nature. The energetic interventions such as tapping, tabbing - laser spray, seem to balance/correct the perturbation, hence 'entraining or resonating' the oscillations back to coherence. This modality models safe, non toxic ways with which to deal with trauma and other manifestations of energetic disruptions, to which clients often attempt to self soothe through toxic-destructive behaviours, ultimately completing and reinforcing the Gestalt of lack of self-worth.

As opposed to certain therapeutic interventions, the chances of painful 'abreactions' with tapping and or tabbing, including that of cold laser spray, is virtually non existent. This is as a result of the trauma being 'cleared' as quickly as it was made, but not in the same state. Energy Psychology research is showing how our bodies' molecular structure with its atoms and electrons, interact and communicate with the coherent light (photons) at the cellular level and much deeper still, this information is decoded inside of our bio-energy fields as affect. It is hypothesized that trauma resolution is the realignment of dissonant molecular oscillation at the sub-atomic level.

It is hypothesized that the percussion or stimulating motion of the Acupressure, transduces kinetic energy into the bio-energy system, changing the vibration of the intrusive perturbation, thus relieving the energetic property of the trauma. It is thought that the effect is created by the specific point of the Meridian being worked upon, is located to or very close to bone which is crystallized calcium. Subsequently the mechanical stress created by the tapping has a 'piezoelectric' effect inside of the energy pathway/meridian. For example, an imbalance or disharmony of bio-energy (Chi) inside of the stomach meridian, could be the energetic charge for the emotional experience of irrational fear.

Case Study

Last year I worked with a client who I shall refer to as Don. This young man was referred to me via a GP suffering symptoms of hyperarousal, sleep disorder and panic attacks. Don had been to see a counsellor, but after a few sessions terminated the work as he said it made things worse.

I met with Don over two sessions and completed my initial assessment. It was very clear Don was suffering symptoms of PTSD. He attributed it to finding an elderly relative who had suffered a stroke, lying on the floor when he got home from a night out with friends. What Don did not tell the GP was that he had taken Ecstasy, an hallucinogenic amphetamine which can induce feelings of euphoria, and also a class A drug. Don was painfully mesmerized by the continuing hallucinations of the relative whose stroke caused the eye sockets to bleed; he just kept repeating 'the eyes, I can't stop seeing the eyes'. This was the first time Don had used this drug, and apart from using alcohol on a controlled social level, was not using any other drugs, other than Zopiclone prescribed by his GP for sleep management purposes.

What I was being presented with was quite simple in terms of trauma; any regressive work with Don would trigger his extremely acute Fight, Flight, Freeze, Fragmentation programmes. The Trauma has to have two main psychological components, the introject which was the relative, and the dissociation which was the abject terror.

For symptom relief and social control, we did two rounds of Touch and Breathe (TAB), in which I showed Don the 12 meridians and two connector vessels to press with his finger and invited him to breathe very deeply, one slow inhalation and exhalation with each point. For maximum sedative effect I asked Don to TAB on both of the bodies' bi-lateral meridians. At the end of the session Don reported zero on the Subjective Units of Distress; prior to the work the SUDs were at ten.

The following week I invited Don to work with the Tapas Acupressure...
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Technique (TAT), in which he held the Urinary bladder points, on the head, and third eye point – whilst cradling the back of the head at the occipital ridge. I invited Don to tune into the memory of the moment he discovered his relative. I used Cold Laser Spray, on both ears, throat area and at various points upon the head – we worked like this for approximately ten minutes with no dialogue at all, just concentrating on the process. At the end of the session Don was beaming, and had no memory how hard he tried, the face was gone, and so had the somatic sensations which were energetically linked to the emotional states.

I met with Don the following week and he reported that the problems he had discussed with me at our first session three weeks ago had completely gone, and he was sleeping well. In this session which was to be our last we put closure to the work we had done. On an energetic level I saw the Acupressure and the Laser removing/dissolving the painful frozen thought form of his relative (introjection removal), allowing instantaneous re-integration and re-association.

Cold Laser Auricular Acupuncture is a process of stimulating/sedating acupuncture points upon the ear. Auricular medicine cites that the ear is a complete somatotopic representation of the entire acupuncture points upon the physical body, and that the ear symbolizes the foetus, the ear lobe representing the head and brain of the person. This science is comprehensively based upon systematic research and extensive clinical findings of medical doctors and acupuncturists in China and Europe. The use of Cold Laser Spray as a means of accessing the 250 plus acu points upon the ear, is undoubtedly a 'whole mind/body/spirit experience.

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Electrical resistance on auricular points is very low in frequency, therefore, coherent light in the form of cold laser is easily absorbed as information via these ear points. Cold Laser Spray Acupuncture or coherent vibrations recognize no boundaries; it has a frequency resonance of 635-640 nanometres, which is exactly the same frequency the bodies' cellular components communicate at. The application of cold laser will affect the body at a subatomic level, and depending upon the intentionality and of the focus of the therapeutic relationship, create change at some cellular level. Often the change is so subtle it is not registered at a conscious level; the client just feels varying degrees of change.

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which frees up information processing upon the Corpus Callosum and associated inter-hemispheric fibres of the frontal lobes. Cold Laser Acupuncture, using sprayed light over the ears, crown (Ketheric Chakra), and throat (Etheric Chakra), which seems to access and integrate the experience, Chi Kung Breathing to focus mental intention and transfer operant information processing to the Parasympathetic nervous system, which will in turn start to activate sedatory neuro-transmitters.

It is vitally important for the therapist to have an 'open field' and not to carry the signatures of Counter Transference, as this can allow a process of 'bio entrainment' to become operant. This is an energetic process whereby two frequencies which have a similar frequency can become phase locked and resonate as one frequency. It could be said the therapist is providing an energy container.

Inside of the context of its clinical approach, the Energy Psychology perspective could be said to encompass a Psychodynamic, Cognitive, Humanistic and Transpersonal paradigm, as it addresses disruptions/disharmonies of intra psychic energy, which in turn, if left in a state of dissonance, will undoubtedly compromise thinking, feeling, behaviour and relationships, both internal and external. The incorporation of the Transpersonal domain is integral in any true resolution of trauma. Healing as with life force itself comes to us via the vertical energy spectrum.

References

About the Author
Russell Henderson MNCP Pg Dip Adv Dip CAPs works as a psychotherapist, and trainer delivering workshops in conflict management, drugs awareness, stress reduction and meridian-based complementary therapy. His working background is in Special Needs Education and the Drugs/Alcohol Mental Health Environment. He is on the teaching team at the Iron Mill Institute Exeter, delivering training in Energy Psychology. He has trained with Tapas Fleming, and has been training with Willem Lammers for the past six years. Russell has been studying and using energy therapies for the last 20 years. He may be contacted via info@nimbustraining.uk.com

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