In addition to the papers in this database published in peer-reviewed journals, more than 100 clinical trials reporting investigations of energy psychology have been published in foreign language journals. They report encouraging outcomes with a wide range of issues, such as anxiety disorders, aggression, drug addiction, dementia, depression, post-traumatic symptoms, post-operative pain, and controlling insulin levels in diabetes. These studies were not included in this database because only the abstracts had been translated, and so they could not be reviewed for methodological rigor. Also not included are English-language publications for which ACEP was unable to verify the legitimacy of the journal. In this era of predatory journals, we are not inflating our count of legitimate energy psychology studies.

See the document, “EP Studies Published in Non-English Journals” on this website.
Meta-Analyses of Energy Psychology (EP) Studies


Systematic Reviews of Energy Psychology (EP) Studies


**Comparative Reviews: Comparing EP Methods with Other Therapies**


Randomized Controlled Trials with Potentially Strong Generalizability


Souilm, N., Elsakhy, N. M., Alotaibi, Y. A., & Ali, S. (2022). Effectiveness of emotional freedom techniques (EFT) vs sleep hygiene education group therapy (SHE) in management of sleep disorders among elderly. *Scientific reports*, 12(1), 6521. [https://doi.org/10.1038/s41598-022-10456-w](https://doi.org/10.1038/s41598-022-10456-w)


**Randomized Controlled Trials with Limited Generalizability**


Indian adults. *Journal of Clinical Psychology and Mental Health Care*, 2(4). [https://doi.org/03.2021/1.10025.](https://doi.org/03.2021/1.10025)  [https://tinyurl.com/4h2n4tkz](https://tinyurl.com/4h2n4tkz)


Uncontrolled Outcome Studies


http://dx.doi.org/10.4172/2167-7182.S4-005

doi 10.9769/EPJ.2015.05.1.AR


http://thescipub.com/abstract/10.3844/crpsp.2014.64.72


doi 10.9769/EPJ.2014.11.2.NO.JH.MC


be effective in the treatment of emotional conditions? Results of a service evaluation in Sandwell. *Journal of Psychological Therapies in Primary Care* 2:71-84.


**Mixed Intervention Studies that Included a Tapping Component**


**Mixed Method Clinical Trials that Included a Tapping Component**


**Clinical Case Studies**


Friedman, P. (2022). A practice-based evidence approach pre, during, and post COVID-19 during psychotherapy. [Web article]. Published by the *Society for the Advancement of Psychotherapy* (Division 29 of APA: the American Psychological Association)


Drewry, D. (2017). Central nervous system apnea can be caused by traumatizing events, and it can be resolved. *International Journal of Healing and Caring, 17*(1).


**Systematic Observational Reports**


Survey Studies of Practitioner Observations


EP Hierarchy of Evidence
Association for Comprehensive Energy Psychology | Energypsych.org
Anecdotal Reports

There are several hundred anecdotal reports re: positive effects reported from energy psychology techniques. Visit the following websites to review these:

http://www.remarkablerecoveries.com/
https://www.emofree.com/eft-article-archive.html
http://www.eftuniverse.com/faqs/eft-tapping-case-studies

Theoretical and Review Articles


https://link.springer.com/article/10.1007/s12671-022-01923-6#citeas

https://journals.lww.com/jonmd/Abstract/2022/02000/Corrigendum_Supports_Therapeutic_Contributi

Spielmans, G. & Rosen, G. (2022). Corrigendum compounds errors and again fails to support the


Spielmans, G; Rosen, G.; Spence-Sing, T. (2020). Tapping away at a misleading meta-analysis. Journal of Nervous and Mental Disease, 208(8), 628-631. doi: 10.1097/NMD.0000000000001181


http://mhc.cpnop.org/doi/full/10.9740/mhc.n131766


Hoss, R. & Hoss, L. (2010). The Dream to Freedom Technique, a methodology for integrating the complimentary therapies of energy psychology and dreamwork. *Energy Psychology: Theory, Research, & Treatment, 2*(1), 45-64.


Definitions of the Categories Used for This List

This list of studies and review articles in the field of energy psychology is arranged in categories in order of scientific rigor, from meta-analyses and systematic reviews to anecdotal reports. One (unranked) category (Theoretical and Review Articles) follows at the end. These categories are based on a schema proposed by David Feinstein in a review article published in the APA Journal, *Psychotherapy: Theory, Research, Practice, Training*: “Energy Psychology: A Review of the Preliminary Evidence” (Feinstein, 2008).

**Meta-Analyses and Systematic Reviews:** Scholarly articles which review a series of studies, generally of one technique for a specific application, which critique the design, methodology, statistics and conclusions of those studies.

**Randomized Controlled Study with Potentially Strong Generalizability:** A formal study using established pre- and post-intervention assessments with multiple clients, including randomization, follow-up, and at least one control/comparison group with blinding those assessing the outcomes from knowledge of which subjects were in which group. These studies are well-designed and administered so that the effects of each treatment condition can be reliably compared, and generalizations to specified populations can be anticipated with reasonable confidence.

**Randomized Controlled Study with Limited Generalizability:** A formal study using established pre- and post-intervention assessments with multiple clients, including at least one control/comparison group and randomization, but lacking follow-up, blinding, and/or rigor in design and execution.

**Uncontrolled Outcome Study:** A formal study using established pre- and post-intervention assessments with multiple clients but lacking randomization and a control/comparison group.

**Mixed Intervention Studies that Included a Tapping Component:** Studies combining 2 or more interventions, including meridian tapping.

**Mixed Method Clinical Trials that Included a Tapping Component:** Quasi experimental studies combining mixed methods (e.g. quantitative and qualitative measures) exploring the effectiveness of meridian tapping.

**Survey Studies of Practitioner Observations:** A phenomenological study exploring practitioners’ observations and experiences.

**Clinical Case Study:** A formal report which uses established pre- and post-intervention assessments with one subject and details one or more treatment variables.

**Systematic Observational Report:** An informal outcome report describing the course of treatment using a single therapeutic approach with multiple subjects.

**Anecdotal Report:** An informal report describing outcomes after applying a psychological method with a single individual.

In addition to the above categories, which are listed in descending order of scientific rigor, is the additional (unranked) category:
Theoretical and Review Articles

Scholarly articles which discuss theoretical considerations and plausible mechanisms of action for a treatment approach, review existing research studies, and/or discuss clinical applications based on these studies.

This list was compiled by John Freedom and David Feinstein. If you have additions, corrections or updates to this list, please email research_committee@energypsych.org. Thank you.


This paper reviewed Touch Therapies for the tx of PTSD.

A total of 1,044 articles were initially identified and a further 26 papers were retrieved through reference listings and hand searches, including the Google search engine. Thirty-nine articles remained after full text screening. Five of the articles remaining [47,49,50,51,60] were based on larger research studies which are included in this review.

Eleven touch-based interventions were described, with one paper including multiple CAM utilising touch techniques as part of a wider interdisciplinary treatment programme [56]. EFT, was the focus of 17 articles, with body-oriented therapy/Mindful Awareness in Body-oriented Therapy (BOT/MABT) described in 10 of the total papers reviewed. The remaining interventions were diverse in nature and included Upledger CranioSacral Therapy (UCST), Zero Balancing (ZB) biodynamic massage massage therapy, Healing Touch (HT) Complex Manual Therapy (CMT), Rosen Method (RMB) Pituitary Adrenal Touch (HPAT) and Light Touch Manual Therapies (LTMT).

All of the 17 EFT studies in this review reported impact on key outcomes, including PTSD symptom reduction, with no adverse effects reported. With 9/17 papers on EFT focused on war veterans, the majority of the research was generated by one organisation in the USA [64]. In addition to practitioner led sessions guiding EFT, participants also used self-applied EFT/tapping touch.

With the exceptions of EFT and BOT/MABT, the other touch-based interventions had a limited evidence base, therefore more rigorous research designs with larger sample sizes are required in future studies. EFT appears to have the majority number of studies indicating efficacy of this modality, however, expanding the participant populations to non-military and including more mixed methodologies, would support this touch-based intervention.

Conclusion
Touch can play an important role in emotional regulation and the reduction of symptoms of PTSD. With a growing evidence base for the efficacy of these interventions, one intervention, Emotional Freedom Technique, prevailed. Methodological diversity and a paucity of conceptual frameworks mean that findings should be interpreted with caution. Developing a theoretical understanding for the underlying mechanisms of why touch-based treatments may be effective is required.


https://www.who.int/publications/journals/bulletin/online-first

This systematic review and meta-analysis compared CBT, BT, narrative exposure therapy, interpersonal psychotherapy and TFT. The authors found small to large effect sizes, but did not identify which studies had which effect sizes.

*They did state:* “In addition, data values from Robson et al.’s study appeared to be extreme.37 (“Extreme” implying a large effect size.”)

Study characteristics

Of the 19 studies, 10 were conducted in Africa and nine in Asia. The primary outcomes were:

(i) post-traumatic stress disorder (13 studies);29-41 (ii) depression (three studies);42-44 (iii) alcohol use (two studies);45,46 and (iv) anxiety and depression combined (one study).24,29 The primary intervention methods facilitated by lay counsellors were: (i) cognitive behavioural therapy (six studies);32,34,38-40,47 (ii) individualized combinations of behavioural therapy and psychoeducation (six studies);36,41,42,44-46 (iii) thought field therapy (three studies);29,30,37 (iv) narrative exposure therapy (two studies);31,35 and (v) interpersonal psychotherapy (two studies).33,43 People in control groups: (i) were on a waiting list in 11 studies;29-33,36-41 (ii) received enhanced care in four studies;43-46 (iii) received usual care in two studies;34,42 and (iv) received no treatment in two studies.35,47

The length of training for new lay counsellors ranged from 2 days in three thought field therapy studies29,30,37 to 1 year in two classroom-based cognitive behaviour therapy studies (Table 1 and Table 2).38,39 One study involved previously trained lay counsellors who received one additional full day of training.41 The number of interventions facilitated by lay counsellors varied from one session (three thought field therapy studies)39,36,37 to 15 sessions (four classroom-based cognitive behavioural therapy studies)

This study states that the studies facilitated by lay counselors with TFT delivered ONE session, vs (up to) 15 sessions for CBT. The implication is that TFT delivered equivalent results in one session vs (up to) 15.
Also that the length of training for new lay counselors ranged from 2 days in 3 TFT studies, vs. one year in two CBT studies.