

Jessica Ortner:

You only need to try Tapping to see that it works. But it might leave you wondering, “How exactly does it work?” And also when you're trying to convince a friend or a family member to give Tapping a try, it's helpful to understand the research that exists. That there's over 275 peer-reviewed, published studies on Tapping. And many more in foreign languages, as well. So, to help us understand all of this research, we're going to be speaking to one of the top researchers when it comes to Tapping, Dr. Peta Stapleton. Let me tell you a bit about Dr. Stapleton.

She has over 20 years of experience as a registered clinical and health psychologist and is currently an associate professor in psychology at Bond University in Australia. Dr. Stapleton leads worldwide-research in psychological trials into new therapies investigating the effectiveness of treatments, such as Tapping. She is also the author of the book *The Science of Tapping*. And you can learn more about her incredible work at PetaStapleton.com. Peta, welcome. Thanks for being with us.

Dr. Peta Stapleton:

Thank you so much, Jessica. It's always a pleasure.

Jessica:

It's always a pleasure to speak to you because you talk about the science, without putting you to sleep. So I always love our conversations. I'd love to start off, though, for someone who is new to your work. You are a researcher. Can you tell us a little bit about your work and how you got started with researching Tapping?

Dr. Peta:

Absolutely. So it came across my table clinically by a colleague almost about 18-20 years ago now. We were all using it sort of a bit under the table, because no one knew what this thing was or how it worked. But with our clients and getting phenomenal outcomes and success. So at the time, about 15 years ago in my academic role, my boss at the time said, “You need to do research.” And I'm like, “Well, can I do this technique? Really interesting these outcomes we're getting with food cravings.” And he said, “Oh yeah, okay, that's fine. But I don't think anyone will come to your trial because it's just a bit too weird.” And that very first trial that we ran in food cravings trying to help people lose weight and things like that, we had four and a half thousand people that responded to that trial. So of course, he fell over, couldn't believe,

we couldn't believe it either. And we knew we were onto something that at least offering, you know, something that looked a little bit different. And of course, we spent the last 15 years looking at lots of different areas here in Australia, and worldwide, in terms of what Tapping can work for.

Jessica: Yeah. So you just shared that you're using it with clients a bit under the table. Like it's kind of this new thing, but you're getting results, so you keep using it. Now someone says, "Do research." Why? Why is research something that we really should spend time on?

Dr. Peta: Yes. And I know for a lot of clinicians, they don't worry too much because they get the outcome, so they feel they don't need to know that. What research does, though, for a field is it actually gets the attention, if you like, and the acceptability at some of those more senior levels, such as government policy or even medical institutions. And when it gets approval like that, it actually then has a far greater reach. So research does really play a role in some of those bigger things like, you know, is it covered by certain insurances? Or what's the acceptability? That sort of thing. So it always has a place. And for people that love to do research, we're quite happy doing what we do.

But it really is about impacting the field so more people can access and, you know, call something, you know, an evidence-based treatment. That type of thing.

Jessica: Yeah. Well, it's incredible that already there's been over 275 published peer-reviewed studies. But for someone who doesn't even know what that means, what's it mean to be published and to be peer reviewed? How do we know that these studies are really legitimate?

Dr. Peta: Yeah. So it is important, I guess, when people do maybe go and look for a journal article to find out what research has been published, to make sure you do look for those words "peer-reviewed", and it will say that on the journal. Now, that doesn't mean "peer" as in "friend". It actually— which I think some people might say, "Oh, my friend reviewed that for me." What it means is peers in the academic world, and particularly in

terms of Tapping, people that have nothing necessarily to do with Tapping, will review those articles. And they are looking for, you know, the design rigor of the methodology. They're looking for the sample size. They're looking for the outcomes that come out of the results and how that's discussed. And that's really valuable information from someone that isn't a colleague or not from someone that perhaps is an advocate of the topic.

So I might peer review somebody else's article, but not on Tapping, because that's my field. So it actually adds this extra layer to help with bias and things like that. So it is really important, but just remember it's not our friends.

Jessica: Yeah. Well, and again, 275 is a lot. And there have been many in foreign languages, right? What's that number up to? You know?

Dr. Peta: Last time we looked, over 70 are the non-English speaking articles that have actually been published out in different countries, such as Iraq and Iran and Korea. And all these countries are emerging. India, as well. So published in their native language journals. But again, all on what we traditionally see as EFT Tapping. It's astounding. We keep getting surprised.

Jessica: Yeah, me too. Me too. So when it comes to these studies, what are some of the big discoveries when it comes to: what is Tapping doing to our body?

Dr. Peta: You know, I think you know, where we've really got to in the last several decades is going from a place of, "How is this affecting the body's energy," which is how we talked about it in the beginning. To really, "What's actually happening in the body at a biochemistry level?"

So some of the standout research has actually been around measuring, you know, cortisol levels—that stress hormone—after Tapping. DNA changes, EEG changes in the brain, blood pressure, heart rate variability. So a lot of biological research has emerged in the last decade. Including brain scans, and I know we'll talk about that today where that's really

encouraging for us to understand more about the mechanism of how Tapping actually works.

And we do, of course, have you know that ten year study that Harvard University did on acupuncture and stimulating acupressure points on the body, and they did MRI studies and things like that. And actually showed that if we stimulate an acupuncture point, whether that's, you know, Tapping for us, or using a traditional acupuncture needle, the amygdala, that stress center, does deactivate—and quickly. So it's not, “We have to do this for hours and hours and hours.” It's quite a fast process.

So the fact that we've got Harvard University that has established how stimulating acupressure points, and now of course, we've got other research even just this year, 2021. Where Korean researchers actually injected dye into the primary vascular system, which is that kind of, what we traditionally call “The Meridian System”, and have proven that these acupuncture points do exist. Because the dye does concentrate at these vascular structures. So, you know, even any one kind of understanding a little bit about acupuncture knows the points exist, and stimulating them absolutely affects the brain.

Jessica:

Well, I would love to go more in-depth on that brain scan study.

Dr. Peta:

Yes. Yeah, absolutely. And we've just finished a second one. So perhaps this time next year, we'll be able to talk about that one. But our original MRI study here in Australia was part of our food craving research. So trying to help people that are overweight or obese decrease those food cravings to ultimately lose weight long-term.

And we had a group pilot group of 15 participants, adults who were all overweight. Ten of them were in the EFT group, that was random allocation. Five of them were in a control group. And of course, we put them all inside an MRI machine and showed them high-calorie images of food and drinks that they would crave. And we said, just imagine eating and drinking these foods. And of course, we made them starving hungry first thing in the morning, so they hadn't had any breakfast. And the brain activated. So we do know a little bit about how food images,

so it's always a lesson for us in looking at Pinterest recipes after dinner. Because the brain will fire when you look at things that are attractive to you at a food level.

And we saw that, so we actually saw areas of reward and pleasure actually activating, of course, thinking about those food images. And even that deprivation-loss circuitry.

So the EFT Group, Tapping Group, knew they were going off to do a four-week Tapping program and then coming back for another MRI. So of course, they did that. And what happened in that second scan is the deactivation, because there was no longer any desire to want to eat those foods they were looking at on their headsets. The brain didn't fire, so we actually had a significant reduction. Which correlated with them saying, "I don't actually want to eat those foods."

And of course, that didn't happen to the control group. Their food cravings remained the same four weeks later.

So even just the impact of a four-week Tapping program, and that was only two hours a week, absolutely deactivated. And we've even had long term research two years now that shows the cravings don't come back.

Jessica:

It's incredible, truly. What I love about this is that we, "we" the two of us, we have seen the results. We have seen people tap on cravings. We've had experiences. We know that it can change the way you associate with food. It's something completely different to be able to see a brain scan and say, "Ok, here we can see that the brain is reacting different to food." It's extraordinary to have that.

Dr. Peta:

Absolutely. Yeah. And anyone can have a look at those scans. So if our listeners are curious, those scans are on my website, but in an open access journal. So they can actually see those scans published and see the differences there. And it is really, I guess, you know, those in the field looking at those, to see that difference is that's the story that our participants tell us. And then of course, we can see the brain matches.

Jessica:

So Peta, I want to keep diving into different studies, but I want to backtrack just a bit because you mentioned quickly that we are

beginning to understand that Tapping impacts the amygdala. For someone who's completely new to this concept, how do you explain how our body processes stress and how Tapping helps?

Dr. Peta:

Yeah. So the amygdala, being that stress center in the brain, is very primitive. It's almost like it hasn't evolved since caveman sort of days. Where it really is there to keep us safe. And to have that threat perception out there in life is actually a really common kind of approach and almost like the one that we all default to to make sure we're safe and things like that.

So that amygdala will send that stress signal out whenever it detects anything that could be threatening at any level. But what happens after that is it does flood the body with hormones that match. So cortisol, adrenaline. And of course, then we get biological changes that might actually happen as well, based on this decision point that, "Ooh, something's a threat."

Now we're seeing this level of stress response even in teenagers with, you know, lots of screen time news and social media that's actually really activating the amygdala. Because if they get a notification on their phone that someone's posted something and they don't check it quick enough, the brain has that same body response that used to be reserved for, kind of "Is there a tiger in the grass outside my cave" kind of syndrome.

So, yeah, stress is one thing for someone to say, "Oh, I feel really stressed," but it's really biological, and it actually has such a profound wear and tear and inflammation in the body system. That if, and I always like to say, "If you could turn that off and it would only take a couple of minutes, would that be of interest to you?" So it's often my opening line. People go, "Oh, how can I turn off that stress response really quickly?" And it's like, "Well, the Tapping is part of that process."

Jessica:

Yeah, it's incredible, and we feel it, we tap a little bit and we begin to notice the difference. You also mentioned that there have been studies around genes. Can you tell us a bit about those?

Dr. Peta:

Yeah, fantastic to sort of see this emerging. So two studies in particular stand out. There was an original study that was done as a pilot to see: does Tapping (I mean, we know it affects cortisol and things like that), but is it actually impacting gene activity?

And we also know that different health conditions might come about because a gene is activated. So it's, if you like, turned on. And what they did was did one hour of testing only for the participants and actually were able to measure gene activity through blood tests and found 72 genes changed in their expression.

Now, some were downregulated or turned off. They were things to do with inflammation and cancer suppression. So genes responsible for those and then some were upregulated or turned on, if you like. And they were things like immunity. Meaning your immune system actually gets better through Tapping because you're getting that stress response down. So that was phenomenal to see that just one hour of Tapping 72 genes are changing here.

And then another study led by Dr. Dawson Church in the US, looked at war veterans that had post-traumatic stress disorder. So they actually put them through a ten week, ten hour session of EFT Tapping and were able to measure gene activity as well across those ten hours.

And found that six genes that are associated with having PTSD would downregulate. Meaning they didn't have the symptoms anymore, so they didn't make diagnosis, but the gene activity matched. So it's almost like your body will match what you feel and what you say. And then six months later, that study showed they hadn't actually turned back on or upregulated. Meaning those vets themselves said, "No, still feel great, don't have any symptoms of PTSD." And of course, Tapping was the only thing that they did.

So it's just heartening to see this level of research come out, particularly in this field that isn't in some of our gold standard therapies. They don't do this kind of research. But for us, we like to sing the praises and talk about exactly what it does.

Jessica:

Yeah, it's really incredible. So we're seeing that it's impacting the body.

We are seeing that it impacts the brain, that it impacts the genes. So that just shows us, “Ok, well, something is happening when we tap.”

What I'm curious about is, have there been research studies that have helped us begin to understand *why* the Tapping? Why Tapping on these points, why it works?

Dr. Peta:

Yes. So we have actually been able to take lots of studies that were done around Tapping and we call them “Dismantling Studies.” So studies that perhaps are done by people that are not kind of known in the EFT world, or it's a brand new technique to them, and they'll pull apart the technique.

So one group might only say the words, but don't do any Tapping. Another group might do Tapping, but on sham points, unidentified acupuncture points. Another group does the traditional recipe.

We were able to look at all the studies that actually had a look at all of those different variations. Of course, they all showed mostly that it is the traditional recipe of: say what you feel, tap on the acupuncture point, and you'll get the shift.

Now the meta analysis that we ran, Dawson Church and I, showed that the *actual* Tapping on the acupuncture point is the active ingredient when you're in the state of whatever feeling you want to shift. So all of those studies actually indicated that.

Which is really important for us to understand that sometimes people might think, “Oh, it's just because you're acknowledging what's happening for you, you're being present and you're saying, ‘Yeah, I feel really stressed at the moment.’” But you actually do need the actual Tapping on that point in order to get that shift. And that particular paper showed that. So we are investigating some other research right now looking at other mechanisms of how perhaps we might be affecting vagal nerve activity and things like that as well.

Jessica:

Right? Well, like I said before, over 275 studies. I mean, it could take us hours to talk about all of them. Are there any other ones, though, that

really stand out?

Dr. Peta:

Probably the ones that are like single sessions. So we have lots of research that's published, you know, eight-week programs, lots of long term follow up. But I think coming back to lots of published studies there as a single-session only. And the impacts in the long term kind of follow up that actually occurs, that shows that lasts over time. Just that impact. And we've had them in areas like phobias for people.

Things like body problems, frozen shoulder, of course, EEG changes in the brain, cortisol levels. Just one session, and that could be a 45-minute or an hour session. One session only, dramatic impact and changes and follow ups showing that it sticks over time. So I like to share those single-session studies with people just to sort of say, "You don't have to type for the next 15 years of your life. You actually may only need to do a little bit and you'll actually get the outcomes."

Jessica:

Right. Amazing, without this overwhelming amount of research that's come out, what has been the impact of that? So, for example, have there been doors opening now that maybe weren't open ten years ago when the research didn't exist?

Dr. Peta:

Most definitely. And this is probably the exciting part for anyone in the clinical field area listening in that kind of needs to be able to have a conversation with someone in a workplace to be able to use these techniques. Knowing where we're at, and it absolutely keeps improving, we've got major organizations that are actually showing support for Tapping.

So things like the Canadian Psychotherapy Association actually approves Tapping under one of their modality sections. The National Institute of Clinical Excellence in the UK has actually approved Tapping for government funding. And studies out of the UK recently have shown that Tapping is the most cost-effective in terms of doing those financial kind of analysis. Even more so than things like EMDR, the eye movement therapy, that, of course, is a gold standard.

So we've got those organizations. We've got organizations such as the

Blue Knot Foundation, which is a trauma based association here in Australia, and they have listed Tapping in their clinical guidelines for PTSD. We've also, most recently, had a national disability insurance scheme here in Australia approved Tapping. So people can actually, through those systems go, and have Tapping and of course, have it paid for at a government level.

And then of course, you know, one of our cortisol papers that we did publish (and this was probably from an academic point of view, a bit of a coup), the American Psychological Association published our cortisol trial in one of the academic journals. And to get the nod from the APA is quite a big thing, because they are the body that have actually always given that "evidence-based" phrase, if you like.

And I have one more to share, which this will be new for you, Jessica, but we want to get the word out there. For the first time ever, that APA organization has actually approved a team, of which I'm leading, to actually evaluate the effectiveness of EFT for trauma and PTSD to be included on their evidence-based website. So I am hoping to come back to you in twelve months time and say, "There's the listing." Because we have the process and that is like that is massive. To be able to have the APA's backing at this point to say, "Yes, we approve you to go and do this. Here's the process of what you do." And obviously we know what the results will show. To have that listed on that website. That is the one that people go, "Is it evidence based?" And ultimately, we're probably six to twelve months away.

Jessica:

Oh, wow, thank you for all the work that you've done to make all of this possible. It's exciting. I feel like we're in the beginning. I mean, every time we talk, a year goes by and I say, "Peta, is there anything new?" And you send me an email of just all the amazing things that have come up in all of the studies. There's always so many new things. It seems like we're moving at a much faster pace than we ever have before. There's more interest than ever before.

What is your hope and excitement? You know, when you think about the future and where this is going, what comes to mind?

Dr. Peta:

Yeah, definitely. You know that evidence-based listing. Because I think that will open so many doors. You know, that's where our medical bodies will look to in order to improve it under different hospital settings and things like that. And of course, many of them already use it, but it definitely adds another layer.

You know, our recent research has been in that chronic pain space, and we're really excited. That's the other MRI trial that we've just concluded. We're really excited about the impact of these techniques for people with long-standing health issues.

And I think particularly, you know, coming out of 2020 worldwide, you know, the stress that people felt and things like that. To actually share this technique with people that can help them cope, and obviously get back to whatever normality looks moving forward, is just a gift and behind that gift now people can feel confident that we actually have such a body of research.

And you nailed it there, Jessica. It is growing exponentially now to the point where people like David Feinstein and myself kind of go, "Did you know this study was out?" "I did not know. I've not seen this study." So we used to know everything, and now so many people publish in different pockets of the world. It's fantastic that we've got that sort of spread out there, so I can't wait to see what happens.

Jessica:

No, me neither. Something else came to mind that I'd love to address and gain some clarity on. So within the Summit, we do these Tapping meditations or these quick, you know, Tappings. And people can experience the results and really feel calm in their body. And then you also have clinical therapists who work with veterans and people struggling with PTSD that are doing clinical EFT.

Can you kind of give us how you explain those two different types of Tapping?

Dr. Peta:

Yeah. So you know, on one hand, you can do self-Tapping, that personal use kind of thing. And I think that is such a valuable tool. You know, we've talked in the past even about young children learning to do that.

So that you can actually just shift a feeling, any level of negativity or distress, when you want to.

I guess where it makes that crossover into perhaps licensed health care professionals, is if maybe there's a longstanding kind of pattern or different distressing events, PTSD being one of them. But that's where it is really helpful to have someone guide you so that you're actually in the hands of someone that's skilled. And of course, you know, people worldwide can actually reach out to find out where someone is in their area.

And I guess one of the signs that perhaps that's a really good idea to do is if someone's doing self-Tapping and becomes aware of something that kind of wasn't what they were Tapping on in the beginning or a memory comes to mind. That's where part of the brain's kind of structure is that as the amygdala quiets down and gets less active, the hippocampus is the memory center and it sits next door. And the hippocampus sometimes can actually start to give you the memories and ideas of where that came from, whatever it is that you're Tapping on. And often that can be overwhelming for people who didn't realize, you know, that Tapping works really fast. So that's often a sign that perhaps you want to go off and be supported by somebody that's highly skilled. It's really good in that therapy sense to actually process some of those bigger things.

Jessica:

I see people coming from both directions. So there's so many people who come to us and they participate in the Summit and they say, "I've been going to therapy and my therapist is like, 'You have to try this Tapping,'" and has given it to them as homework. And so they attend the summit to learn more how to do it themselves. And then others who start with the Summit and maybe decide that they want to work with somebody else that can help lead them. It really goes both ways.

What I love about it is that, the moment you learn it, it's something that you have for your whole life. You know, it's that moment when you get rear ended and you're feeling stressed, and all of a sudden everything's firing off. You can do it in the moment. And now we're beginning to see that there is something physically happening when we say, "You know what? At the end of the day, before I go to bed and I'm feeling stressed,

I'm going to do some Tapping ." And we're hearing how people are sleeping better, but now we're able to go, "Ok, well, this makes sense. You're sleeping better because of all of these things happening inside of your body that we can now track."

Dr. Peta:

Absolutely. And I think, you know, just knowing a little bit about what's happening from the science and research, can kind of give people the confidence that it's not a placebo, it's not a distraction technique. They're the common things we hear. You are actually physically affecting your body's biochemistry, even if you haven't got a cortisol kit to test it. That's why you're sleeping better. It's why you make better decisions. It's why you feel calm the next time you get a red light or someone cuts you off in traffic.

And it seems to be that neurologically, once you shift a pattern, it stays shifted. So our long-term follow up research worldwide shows the old behavior doesn't come back or the old reaction. That the brain can actually kind of update its learnings and go, "Oh, we don't do that anymore," or "I don't eat that food craving anymore," which is our shared interest. And people look at you and go, "I don't even remember what I did Tapping on."

Jessica:

Yeah! I mean, I have been Tapping for over 15 years, and when the study came out about gene expression and when I saw the difference it made, I remember calling Nick and both of us were like, "We should tap more!" Like we already tap a lot, but this is...

Dr. Peta:

Could I grow taller?

Jessica:

Like jeez! Oh, Yes. Oh my goodness, I'd love that. But we're not promising that here, people. Tapping has its limitations.

But you're able—but it's exciting because it just, it feels good to know like, "Wow, I'm doing something that's not just good for my emotions, it's good for my body. It's impacting my future. My future health. "It's not just impacting this moment, it's impacting my future because it's changing my gene expressions.

Dr. Peta: Absolutely. And, you know, even everything we know about trauma in childhood, and things like that, can all be overcome. And long-term chronic health issues do not have to be part of someone's story. When we have these fantastic techniques that will, you know, impact stress hormones and inflammation in the body and things like that.

And truly happiness is everyone's birthright to actually kind of reach that. And I can't—in all the stuff I teach at master's level here in psychology, nothing comes close to Tapping. And I can tell you that we've actually been approved here at Bond University. That Tapping will be included in one of our master's subjects as of 2022. So we actually will teach it at this level so our students actually can learn how to do it for clients as well.

Jessica: Wow, that's incredible. This is so exciting. It's just so exciting! And for those who are watching, I hope that you feel and this is totally corny and dorky, I know, but that we're a part of history because it is so new and we're discovering it. And it's just the beginning, and it's exciting to know it now as things unfold.

And so I hope for those who are watching this, that you share this interview. This is why we make this interview available to everybody at no cost. Because we really believe that the research should get out there and more people should be encouraged to tap more. Why? Because it can help us feel happier, like you said, right? That's really what we're doing here is like, how do we feel good and improve our quality of life? That's what we're moving forward with all this research.

Dr. Peta: Yeah, that's right.

Jessica: Right. Well, Peta, thank you so much. Any last words? Anything else that I forgot that you'd like to share with us?

Dr. Peta: No, I think it's so, you know, it's so lovely just once a year to kind of recap and sort of go, "Yeah, well, here's what's happened since." And I can't wait for, you know, twelve month's time to do the same. And for anyone brand new out there, that perhaps is new to this field, just be open. Stay open and dig a little bit deeper. Reach out. You know, find

out. What I love hearing the most is someone saying, “I heard of that Tapping thing 15 years ago. I had no idea this is where it was at now.” And I just think that’s fantastic. You know, even if it was part of your path a long time ago, come back to it. Remember to tap, you know, as frequently as you can, because your body benefits, but so does happiness and satisfaction and well-being in life.

Jessica:

Well, I am truly so grateful for you and all the hard work that you do. You’re the reason that so many people are being exposed to this and really benefiting from it. So thank you so much for all of your work and for spending time with us today.

Dr. Peta:

Thank you so much, Jessica.