

GUIDELINES FOR WRITING A CASE STUDY ANALYSIS

A case study analysis requires you to investigate a client's problem, examine the alternative solutions, and propose the most effective solution using supporting evidence.

Considerations for the Development of Case Studies

Describe:

- √ How you learned what EFT knowledge the client already had, or if the client had no previous experience with EFT, how you introduced EFT.
- √ The client's presenting issue; their "story."
- √ How it was determined what to work on and why (global or specific).
- √ Whether there was an underlying Core Issue, and what it was.
- √ What set-up affirmations and reminder phrases were used?
- √ The specific EFT methods used to address the issues.
- √ Any pre-frames or reframes used.
- √ Any shifts of aspects or issue.
- √ How far the issue was resolved, and how this was assessed (tested). It is not necessary for the session to have been successful in order to have a good case study. Much can be learned from unsuccessful or unsatisfying sessions.
- √ Whether there were any cognitive shifts, and what they were.
- √ Whether there is there more work to do with that client on the presenting issue. If the client were to continue, what might be addressed next?

Preparing the Case

Formatting:

1. The Subject's Story (*Client's history and presenting issue*).
2. Details of the actual work done in the sessions (*for written case studies only*).

An example is offered next.

GUIDELINES CONT...

Example:

Using the Movie Technique we targeted the initial childhood trauma. The intensity was a 9 on the SUD scale.

We tapped one round of EFT, using the following phrase:

"Even though I have this 'Spanking Movie,' it happened a long time ago, and I'm OK right now."

The SUDS level dropped to a 5.

The second round of tapping was set up as follows:

"Even though I still have some of this 'Spanking Movie' intensity I deeply and completely accept myself. I was just being a little kid."

The SUDS level dropped to 0.

Then we used the Tell-The-Story Technique. The client told what happened, until the point was reached when she knew Dad was going to hit her with the belt.

The SUDS went back up to a 6

"Even though I realized Dad was going to hit me with his belt, I completely and totally love and approve of myself."

Practitioner guided the client through the following reminder phrases including the reframe:

I knew he was going to hit me and I was so scared.

I knew he was going to hit me and I couldn't get away.

He took off his belt.

I knew how much it would hurt.

I was just a little kid, and little kids shouldn't be hit with belts.

I wonder if he was hit with a belt when he was a kid.

Maybe that's why he did it.

I knew he was going to hit me.

SUDS went back down to 0 and the client said, "I know his father beat him when he was a boy. Maybe that's all he knew to do."

Client was then able to tell the story from beginning to end without an increase in SUDS.

Continue in this format until the essence of the work has been described. Be sure to include SUDS, set-up phrases, reminder phrases, pre-frames and/or reframes, techniques used, and testing methods.

GUIDELINES CONT...

Self-Evaluation

Please address or respond to the following:

1. How rapport was established at the beginning of the session, and what you did to make the client comfortable in the clinical setting. Examples:

- A. Eye contact/smile
- B. Words of welcome – introductions
- C. Logistics – if first session – introduction of what will happen, where the bathroom is
- D. Having a glass of water available for both client and practitioner

2. How did you explain to the client what to expect?

- A. Was the client asked what s/he already knew about EFT? (If this was the first visit)
- B. Was any theory explained?
- C. Did the practitioner ask if the client had questions, and, if so, were the questions answered accurately and confidently?
- D. Were the set-up and the reminder phrase explained (if first time)?
- E. Did the client and practitioner perform a practice round of tapping to ascertain that the client knew the tapping points? (If this was the first visit)

3. Was there a discussion of confidentiality, and/or signing of Informed Consent?

4. How did you demonstrate presence with the client?

- A. Eye contact
- B. Active listening
- C. Mirroring
- D. Expression of compassion
- E. Lack of judgment, refrain from giving advice

5. If a new technique was introduced, did you explain what would happen?

6. Was there a core issue underneath the presenting issue, and, if so, how was that discovered and handled?

- A. Detective work
- B. Reframing
- C. Flexibility/creativity
- D. Intuition
- E. Persistence

7. Closure: At the end of the session you review with the client the presenting issue and how the work was related to it?

- A. Was further work discussed?
- B. Was homework given?
- C. Was another session scheduled?

When you have completed your case study, please send it to your mentoring consultant.