



# Emotion-Focused Therapy

Level 1: Day 1

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# Day 1: EFT Theory; EFT adaptations of Focusing

Time	Topic
9.30 – 10.00	Introductions
10.00 – 10.30	A. What is EFT?
10.30 – 11.00	B. Emotion Theory Intro; exercise
11.00 – 11.15	Break
11.15 – 12.30	C. Emotion Schemes; exercise
12.30 - 13.30	Lunch
13.30 – 14.30	D. Classifying forms of emotion response; exercise
15.00 - 15.15	Break
15.15 – 17.00	E. Moderating Emotion: Clearing a Space; video; Space clearing exercise; Processing




# Introductions

- Name
  - Why I am here today?
  - What am I feeling right now?
- 



# What is Emotion-Focused Therapy?

- **Integration of person-centered & gestalt therapies**
  - 1. Person-centred relational base
  - 2. Focusing to help clients deepen their process
  - 3. Gestalt therapy tasks to help clients activate emotions
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# What should we call it?


- 1. Formerly known as “***Process-Experiential***”: Process-orientation & emphasis on client experiencing
- 2. “***Emotion-Focused***”: client emotional processes are at the core of human function, dysfunction and change
- **EFT-C** = Emotion(ally)-Focused Therapy for Couples (Greenberg & Johnson, 1988; Johnson, 2004)
- **EFT-I** = Emotion-Focused Therapy for Individuals

# EFT Therapy: Distinctive Features


- 1. Neo-humanistic: Revival/ reformulation of humanistic/ experiential approach to therapy
  - Relational presence, experiencing, self-determination, holism, pluralism, growth
- 2. Emotion-focused: Emotional awareness and reprocessing as central to client change
- 3. Relational stance: Active following of content with some direction of process
  - Ideal: Work alongside client's process

# EFT Therapy: Distinctive Features

- 4. Exploratory therapist response style: Empathic exploration responses, exploratory questions
- 5. Process-differentiation: Extensive description of different kinds of client and therapist process, e.g., emotion processes; client task markers & tasks; types of therapist response
- 6. Evidence-based: Based on research on client change processes; supported by outcome research



# Time Line of Person-Centred-Experiential Therapy -1

- Roots/Sources: Humanism (existentialism, Third force Humanistic psychology)
  - 1940's: Nondirective therapy: Rogers
  - 1950's: Relationship conditions: Classical approach; warm, empathy, genuineness
  - 1960's: Focus on client process: late Rogers, Gendlin
- 



# Time Line of Person-Centred-Experiential Therapy -2

- 1970's: Experiential approaches, task analysis
- 1980's: Partial eclipse period; further development underground & in Europe
- 1990's: Beginning of PCE revival: PE-EFT; training centres; explosion of research

# Time Line of Person-Centred-Experiential Therapy -3


- 2000's: World Association founded; struggles for recognition; EFT books & training emerge:
  - Elliott, Watson, Goldman & Greenberg (2004)
  - Greenberg & Watson (2006)
  - Watson, Greenberg & Goldman (2007)
  - Greenberg & Goldman (2008)
  - Videos: Greenberg

# Time Line of Person-Centred-Experiential Therapy -4

- 2010's: World-wide training; ISEFT
  - Paivio & Pascual-Leone (2010): Complex Trauma
  - Greenberg (2011)
  - Angus & Greenberg (2011): Narrative in EFT
  - Goldman & Greenberg (2014): Case formulation
  - Timulak (2015); Timulak & McElvaney (2017)
  - Greenberg & Goldman (2019): Clinical Handbook
  - Videos: Paivio, Watson, Goldman, Elliott, Timulak




# EFT Therapy Principles - A. Relationship Principles:

- Facilitate safe, productive relationship:
    - ◎ 1. ***Empathic Attunement***: Enter, attend & track client's immediate experiencing
      - ◎ Always start with this
    - ◎ 2. ***Therapeutic Bond***: Offer empathic, caring presence to client
      - ◎ = bond aspect of alliance
    - ◎ 3. ***Active Task Collaboration***: Offer and facilitate involvement in therapeutic work
      - ◎ = task/goal aspect of alliance
- 




# EFT Therapy Principles:

## B. Task Principles

- Facilitate work on specific therapeutic tasks
  - 4. ***Therapist Responsiveness***: Attend carefully and differentially to important client processes (tasks, steps within tasks, client micro-processes and emotion processing modes)
  - 5. ***Emotion Transformation through Deepening***: Help clients use key therapeutic tasks to move themselves from problematic to adaptive emotions through an emotional deepening process
  - 6. ***Client Personal Agency & Growth***: Help clients develop new emotional meaning and a sense of personal power & forward movement in their lives
- 



# Theoretical Base of EFT

- Based on a reformulation of traditional humanistic values (=Neo-humanism)
  
  - Recent theoretical developments:
    - ◎ Emotion theory
    - ◎ Dialectical Constructivism (Day 3)
- 

# What is Emotion?





# Emotion is a Holistic Process that...

- 1. Points to what is important to us in the situations of our lives
  - 2. Prepares us to take useful actions in those situations
  - 3. We experience in our bodies
  - 4. We can usefully represent with words or images
- 






# Why Emotion is important






# 1. Emotions Shape Our Perceptions of Our Situation

- We see the world through the eyes of our emotions, or with the “light” they shed:
  - The way we construct reality is highly emotionally based (drive perception/cognition)
  - Emotion tells us what is personally important (source of information)
  - Emotions sensitize use to different important aspects of our environment
  - Emotion integrates experiencing, giving it meaning, value & direction
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## 2. Emotions Shape the Brain & Language/Cognition

- Emotions have neurological primacy
  - Emotions often outside of awareness
  - Emotions precede language-based knowing
  - With development, emotion is fused with cognition
- 

# Emotion Generation

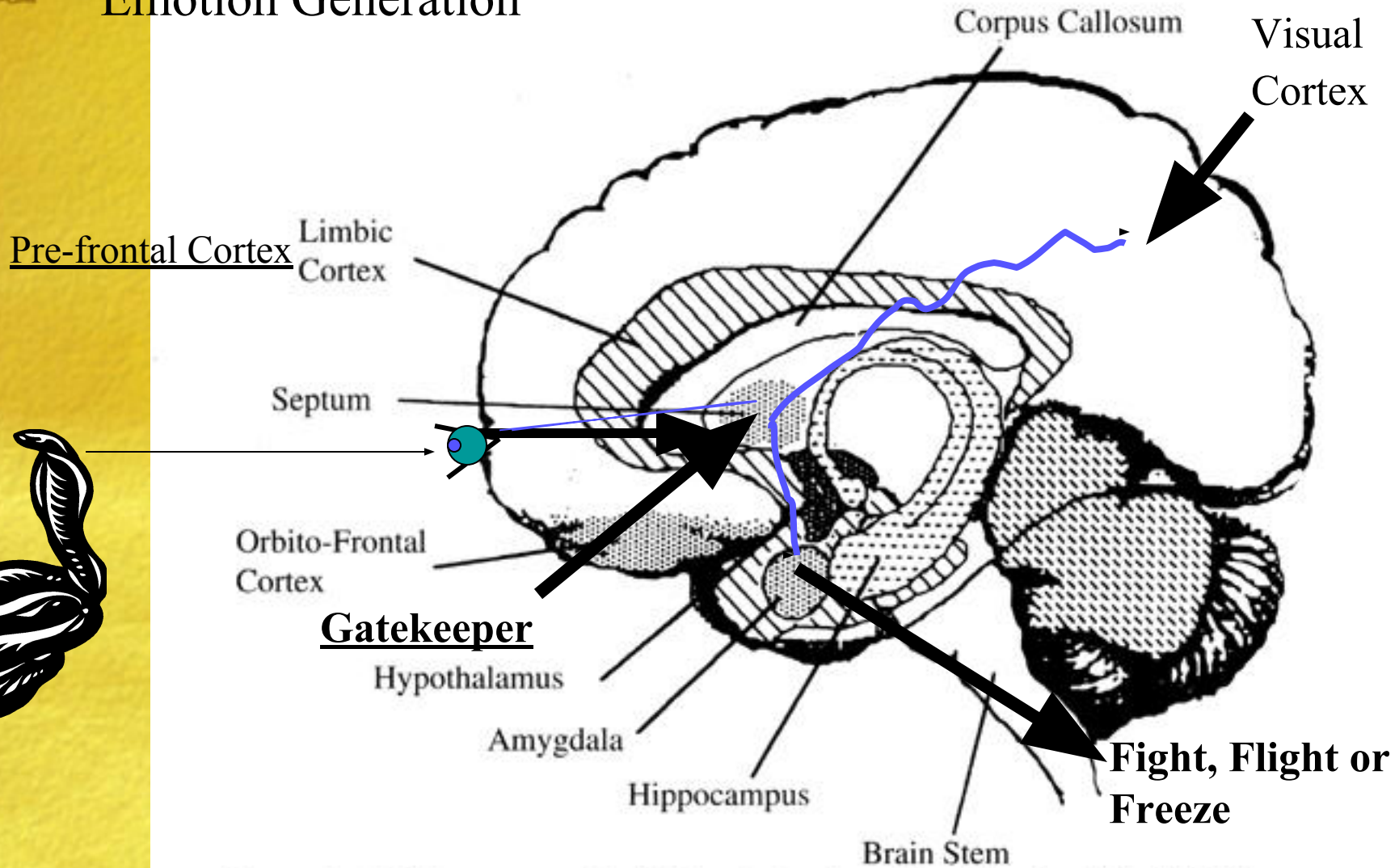
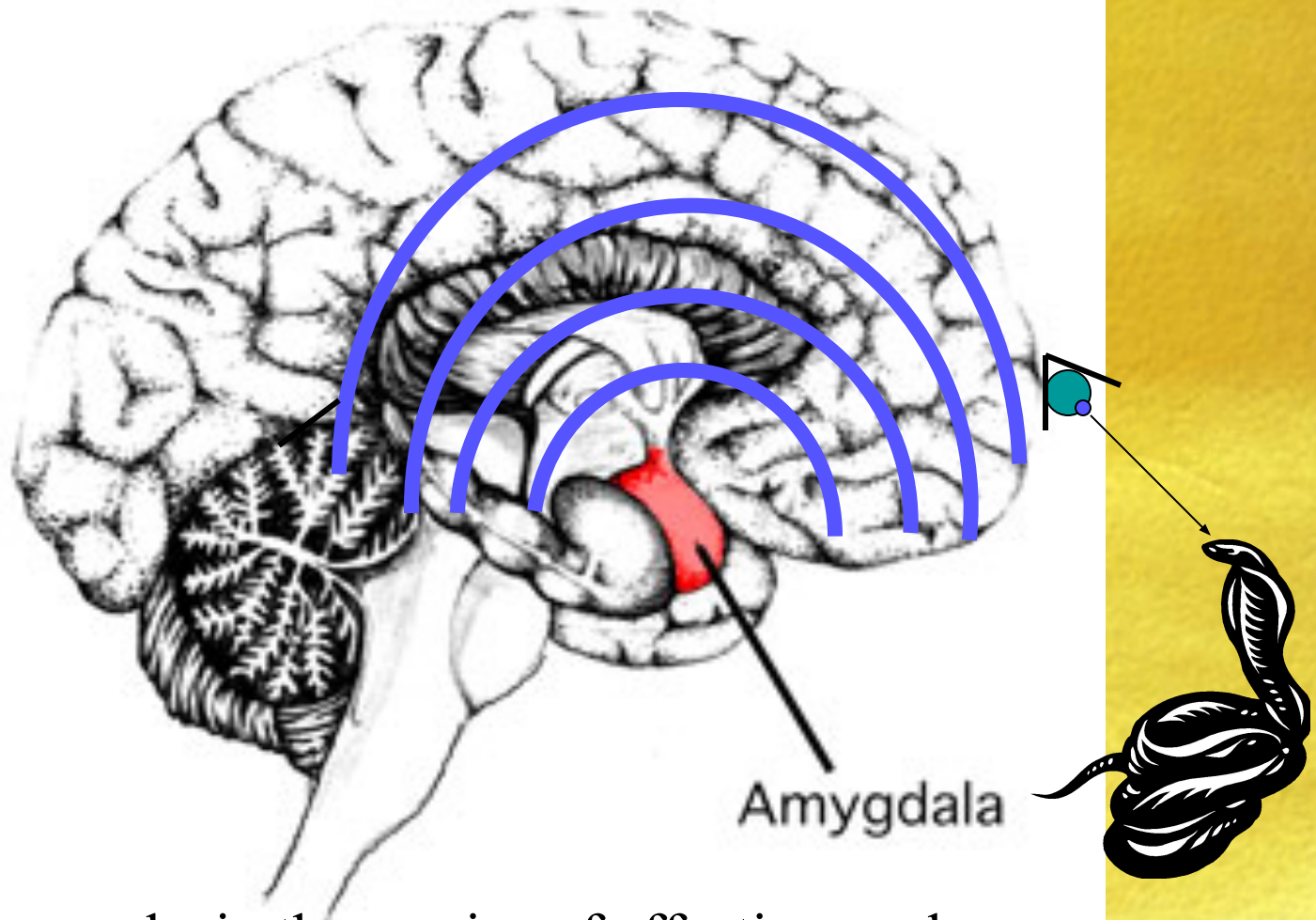


FIGURE 2. Limbic structures of the right hemisphere, lateral view. Cingulate is labeled limbic cortex (from Trevarthen, Aitken, Papoudi, & Roberts, 1998, and used with permission of Jessica Kingsley Publishers).


## Emotion Sets Problems for Reason to Solve



Cognition works in the service of affective goals




# **3. Emotions Connect us to our Bodies**

- Our emotions put us in touch with our bodies and our concrete, lived reality
  - Our bodies help us to access our emotions
- 




# 4. Emotions Shape Action

- Literally/etymologically, emotions are what “moves us”:
    - Emotions help us to survive by providing an efficient, automatic way of responding rapidly to important situations
    - Emotions provide action tendencies, amplify goal-oriented behavior.
- 



# Emotion prepares us for action

- Emotions generate wishes/needs, which generate actions
  - Every feeling has a need; every need has a direction for action
    - We bond because we feel afraid or attracted
    - Without anxiety we would not flee danger
    - Without compassion we would not take care of others
    - Without curiosity we would not explore new things etc
- 



# Universal Human Emotions in their Adaptive Forms

(from Greenberg & Paivio, 1997)


<u>Situation</u>	<u>Emotion</u>	<u>Adaptive Actions</u>
Psychological injury	<b>Emotional pain</b>	Withdrawal into self
Violation, attack on self, family or possessions	<b>*Anger</b>	Assert, protect, defend self
Loss, separation	<b>*Sadness</b>	Seek support (e.g., crying)
Danger; possible danger	<b>*Fear; anxiety</b>	Monitor, escape, freeze; prepare
Exposure as having acted inappropriately	<b>*Shame</b>	Correct or hide impropriety to protect social standing, connection with others
Harming a valued other	<b>Guilt</b>	Apologise, repair the damage
Offensive, dirty, indigestible object or person	<b>*Disgust</b>	Expel or avoid object or person
Change, novel stimuli	<b>*Surprise, interest, curiosity</b>	Attend, approach, explore, engage
Achievement of goal, task, need or connection	<b>*Joy, happiness</b>	Friendly interaction, future seeking of similar situations
Highly valued other	<b>Love, affection, caring</b>	Contact, express positive regard; strengthen attachment bonds
Suffering of a vulnerable other	<b>Compassion</b>	Offer support, validation, soothing

# Exercise: Stuck vs. Productive Emotions

- 10-min Warm-up exercise: A bit of Focusing; get out notebook or paper to write on
- Think of two times:
  - A time when you got stuck in an emotion;
  - Another time, when an emotion helped you move forward in your life.
  - Jot a few notes about these experiences
- Now, pair off with a person sitting next to or near you, and take turns:
  - Sharing about each of these experiences
  - Other person listens and reflects but does not impose or problem solve




# Key Emotion Concepts

- Emotion Schemes
  - Emotion Response Type (Emotion assessment)
  - Emotion Regulation
- 




# Emotion Scheme Concept

- Emotion schemes provide implicit higher-order organization for experiencing
  - Both:
    - a representation of experience
    - and a plan of action
  - Not available to awareness until activated and reflected upon
  - Self-organizing processes, not things
  - Idiosyncratic (content, expression and organization unique to each person)
  - Complexity: many operate simultaneously
- 




# Organization of Emotion Schemes

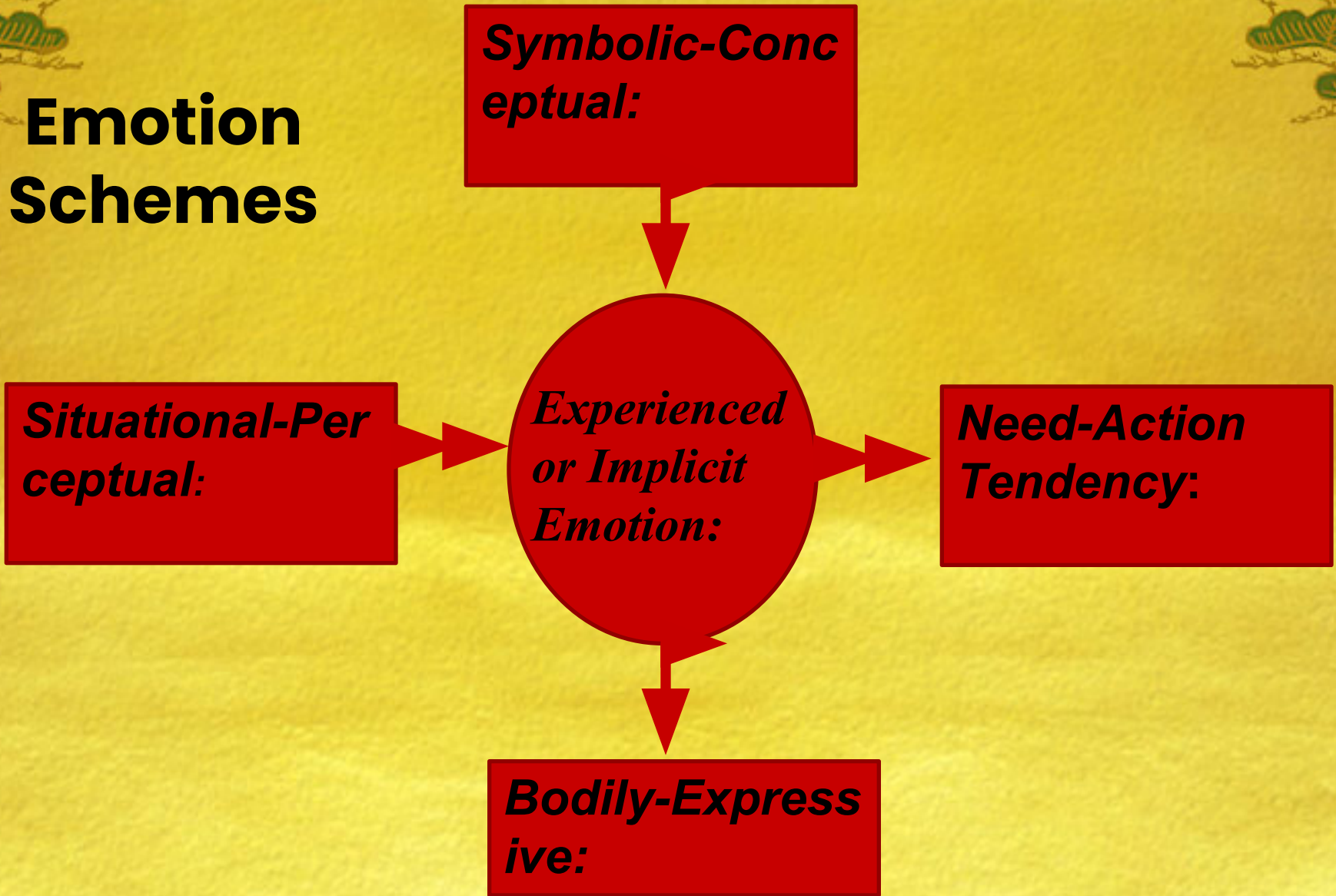
- Consists of component/elements linked together in a network
  - Implicit/automatic processing of experience:
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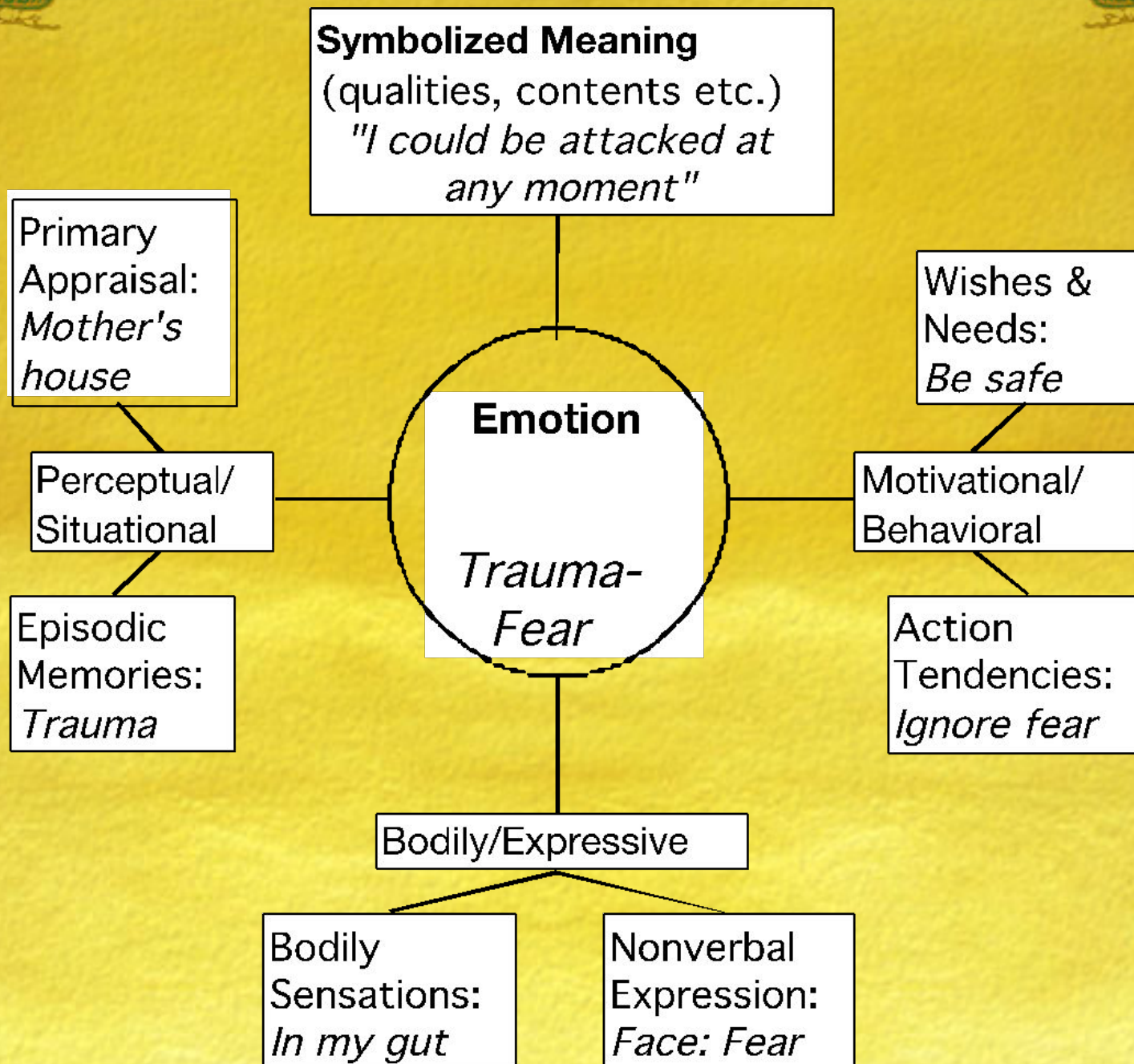


# Clinical Implications

- 1. Activation spreads; components activate each other
  - 2. Empathy, evocative and exploratory work required to foster access, activation & self-reflection
  - 3. Complete processing involves all elements
    - Can lead to greater awareness, useful clarification, and access to important related emotion schemes
- 

# Emotion Schemes









Qualities  
 Temporal  
 Shape  
 Size  
 Color  
 Location


Possible Actions

# Emotion Scheme Elements

- 1. Perceptual/situational: immediate awareness of current situation; memories of specific events (e.g., perception of darkened living room reminds person of a previous trauma).
- 2. Bodily/expressive: immediate bodily sensations (e.g., a round, knotted feeling in the gut accompanied by feelings like electrical impulses in arms and legs); nonverbal expression of emotion (e.g., a fearful facial expression and nervous laughter).
- 3. Experienced or implicit emotion: The feeling that organizes the emotion scheme; may be in awareness or not, including felt quality and intensity (e.g., intense, trauma-related fear).
- 4. Symbolic/conceptual: verbal/visual representations, including verbal statements (e.g., “I could be attacked at any moment”), metaphorical qualities (e.g., “small and black”), and identities (e.g., “victim”).
- 5. Motivational/behavioral: desires, needs, wishes, intentions (e.g., to be safe from attack) or action tendencies (possible actions; e.g., get rid of the fear by trying to ignore it).




# Emotion Scheme Examples

- Session 1 State Check  
focusing/emotion scheme elaboration:  
SA601: Session 1; 8:00 – 14:50
  - 92-94, Session 5, 55:24+
  - Brief live demonstration
- 



# Brief Exercise/ Demonstration of Emotion Schemes


- Take a minute to think of a recent experience you've had that stands out in your mind
  - Now think of how you felt right at that moment
    - This is the basis of an emotion narrative
  - Here's a brief demonstration of how to elaborate an emotion scheme
    - Volunteer?
- 

# Questions for Elaborating Emotion Schemes

- (0) Unclear feeling: Start by turning your attention inside to an unclear feeling or odd experience you've had
  - Give yourself time
  - If there is more than one feeling or experience, pick one to start with
- (1) Internal/bodily experiencing:
  - What does this feeling feel like inside you?
  - Where/how do you feel the feeling in your body?
- (2) Context or "aboutness":
  - What is this feeling feel like it is about? What does it point to in your life?
  - What set this feeling off? What brought the experience?
- (3) Symbol or "handle":
  - Sit with the feeling for a bit; then see if you can find a quality, word or image that describes it.
  - Does this word/quality/image fit the feeling? If not, what would fit better?
- (4) Needs, wants or action tendencies:
  - What does the *feeling* want or need? What does it want to do?
  - How would the feeling like ito be?;




# ***Exercise: Elaborating Emotion Schemes***

- Modified Focusing steps (Gendlin)
  - Do in pairs, taking turns facilitating each other
    - Therapist asks questions; clients says what comes out loud; observers track emotion scheme elements and help as needed
  - Make yourself some mental and physical space for this:
    - Stretch, get comfortable
    - Take a couple of deep breaths
  - Try to do something from each section
    - But don't use all the questions in each section, just the ones that you find useful
- 




# General Suggestions for Skills Practice

- Facilitators rotate through rooms; may interrupt to talk with therapist or may suggest things
  - Best to practice with people you don't work with
  - Respect client's need to safety or to stop work when they need to
  - Provide support/prizing as needed
  - Therapists do your best to track empathically & attempt a particular kind of work without worrying too much about getting it right
  - Observers keep track of theory; offer help if therapist asks
  - Don't forget to process what happened
- 



# Exercise Discussion Questions

- Eye contact: Was it easier or harder to focus when you made eye contact with your facilitator or didn't?
  - What questions helped the focuser open their experience best?
  - What questions got in their way?
  - What Emotion Scheme Elements were easiest to describe?
  - What Emotion Scheme Elements were hardest to describe?
- 



# Problems with incomplete processing of Emotion Schemes

- Attending to only one or two emotion scheme elements leads to incomplete processing of emotions:
- 1. Externalized: attending to other people, external events [*perceptual/situational*]
- 2. Somatically-focused: attending to chronic pain or illness signs [*bodily/expressive*]
- 3. Flooded: Overwhelmed by pure emotion without conceptual or perceptual elements [*experienced emotion element*]
- 4. Abstract: formulating things in linguistic or abstract terms without reference to concrete experiencing [*symbolized/conceptual*]
- 5. Action-focused: Focused purely on wishes or actions; driven or impulsive, without reflection [*motivational/behavioral*]



# Four Forms of Emotion Response



# Forms of Emotion Response

## 1. **Primary Adaptive:** Unlearned, direct response to situation

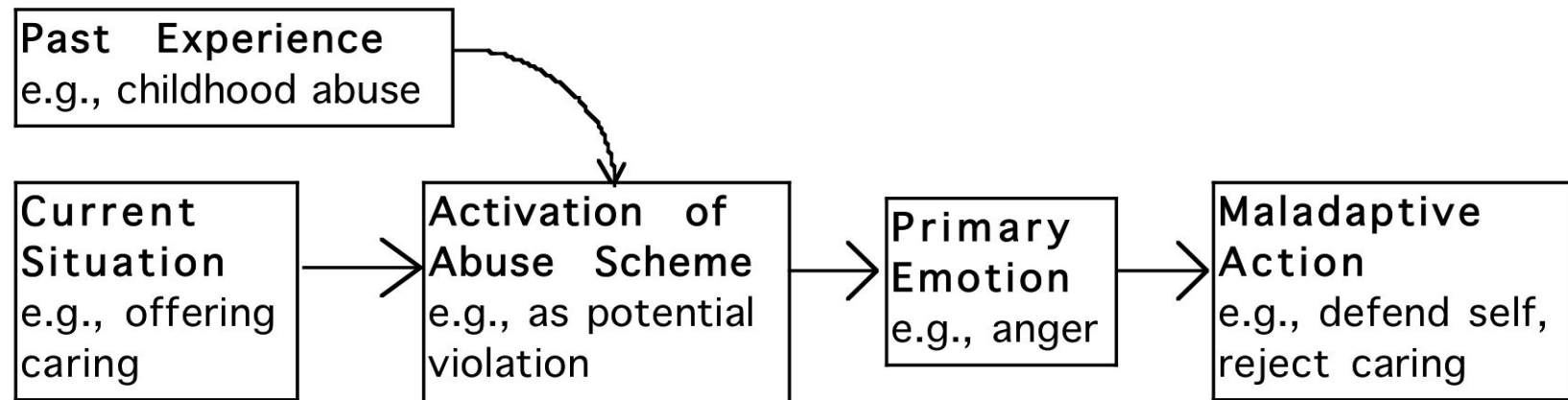


Eg: Anger: Situation: Violation of self, children, property  
Action tendency: Go to one's boundary and defend it

“Adaptive” = useful

# Forms of Emotion Response

**2. Primary Maladaptive:** Learned, direct response to situation (*feels stuck, old bad feeling*)

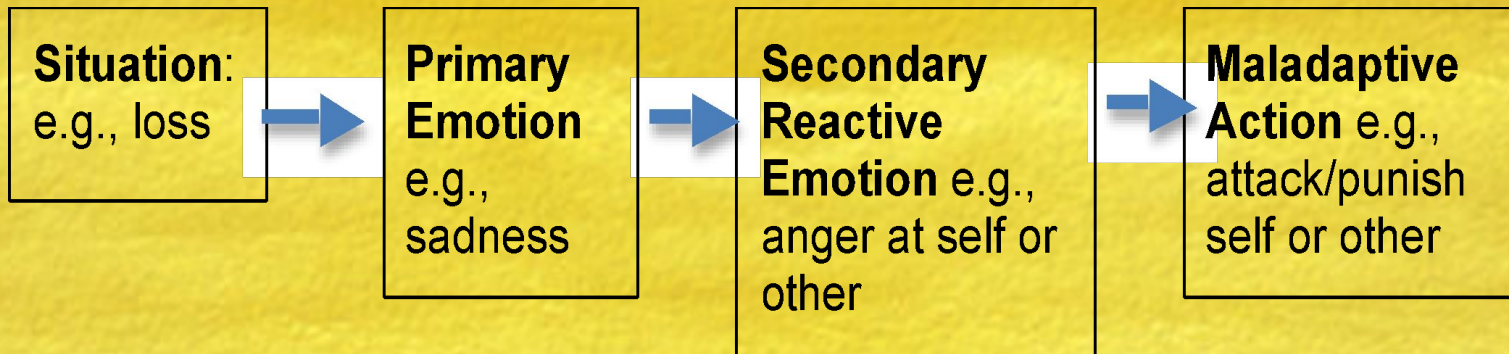


- Common with fragile process
- \* Often trauma-based

• “Maladaptive” = Incongruent response: doesn’t fit the situation

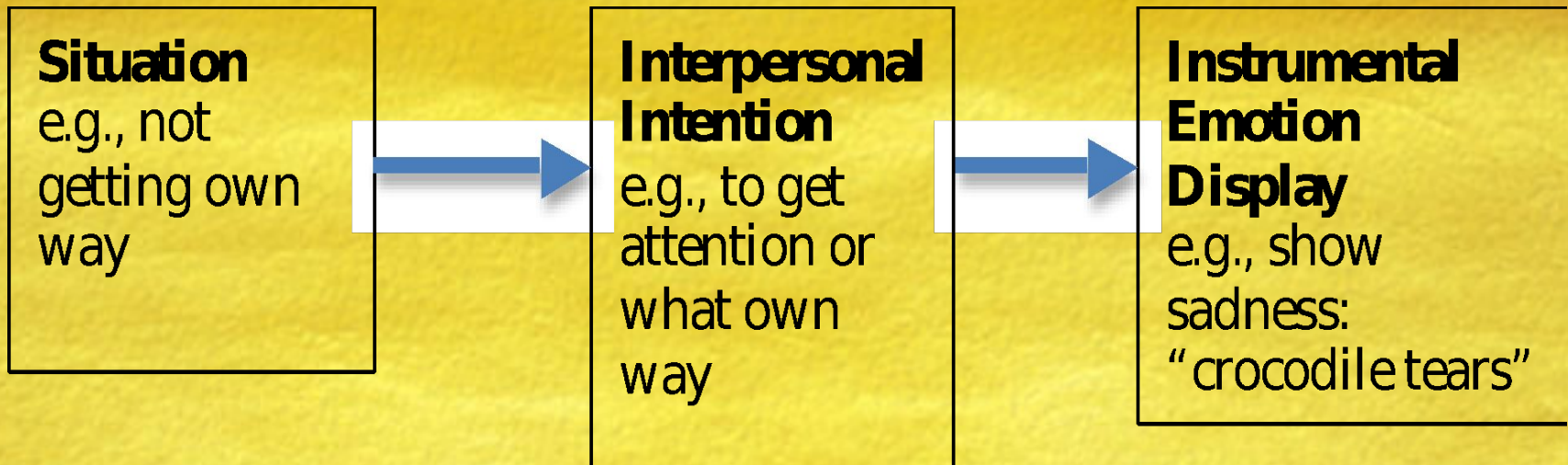
# Forms of Emotion Response

**3. Secondary Reactive:** Adaptive emotion obscured by a self- or externally-focused reaction to the primary emotion



# Forms of Emotion Response


4. **Instrumental:** Emotion displayed for its intended effect, independent of actual emotional experience





# Classifying Emotion Response

## Types Exercise - 1:

- 1. Preliminary Focusing exercise: Take a piece of paper. Ask yourself if you can think of any times when you experienced each of the following. Then write a bit about it, to help you remember it:
    - a. Think of a time when you acted from an emotion in a *natural, spontaneous manner*, and it both felt right and was exactly the right thing to do.
- 



# Emotion Response Type

## Exercise - 2:


- b. Think of a time when you found yourself responding automatically in an *old, familiar, stuck* way that felt like, “This is the story of my life! This always happens!”  
What was the feeling that went with that?





# Emotion Response Type



## Exercise - 3:

- c. Think of a time when you responded emotionally to the way you felt. That is, you initially reacted to a situation with a first emotion (such as sadness, anger, fear, disgust, shame, etc); but then you *reacted to the first emotion with a different emotion* (such as anger, guilt, shame, fear etc).
- 




# Emotion Response Type

## Exercise - 4:

- d. Think of a time when you used an emotion *to get someone to do something* you wanted them to do (such as: impress them, pay attention to you; leave you alone; make them feel guilty or intimidated). What was that like?
- 
- 



# Emotion Response Type Exercise:

- 2. Work in groups of three or four:
    - (a) *Client*: selects one of these experiences and describes it, but doesn't tell the counsellor what kind of emotion response it is.
    - (b) *Counsellor*: listens, reflects empathically, and asks exploratory questions to help the client explore the experience.
    - (c) *Observer*: tries to figure out what kind of emotion response the client is exploring.
- 



# Summary of EFT Emotion Response Types

□ Video: Alfred and the Shadow



# General Principle: Follow the Deepening Emotion Process

Emotion Response Type	Counsellor Facilitation
0. Instrumental: To make an impression on you	Explore the interpersonal aim in the therapeutic relationship
1. Undifferentiated/unclear emotion (“bad”)	Help client differentiate
2. Secondary Reactive: Presenting emotional issue	Help client explore and listen for emotion that came first
3. Primary Maladaptive: Old familiar stuck places	Help client deepen to core emotion
4. Deeper Primary Maladaptive: Core pain => unmet need	Help client experience fully, then access unmet need
5. Primary Adaptive: Changing emotion with emotion; self-empowerment & self-soothing	Help client stay with, appreciate, access useful information

# Emotion Regulation



# Emotion Regulation Necessary for Adaptive Functioning

- 1. Optimal level of emotional arousal or distance
  - Varies with situation/task
  - Too little & too much both dysfunctional
- 2. Ability to self-regulate emotion derives from early attachment experiences (emotion schemes for self, other)
  - Models of Self (weak - strong - separate - merged)
  - Models of Other (caring - intrusive - neglectful/abusive)
- 3. Requires both:
  - Ability to access, heighten or tolerate
  - Ability to contain/distance/moderate/soothe

# Principles for Facilitating Adaptive Emotion Regulation

<b>Principle</b>	<b>Examples of Therapeutic Work or Task</b>
<b>1. Support client's strategies</b>	Ask what client does on their own
<b>2. Offer support and understanding</b>	Offer genuine empathic understanding and unconditional positive regard; empathic affirmation/ prizing voice
<b>3. Encourage controlled expression of emotion</b>	Offer client opportunity to safely and carefully experience/express emotions
<b>4. Symbolize painful emotion in words or images</b>	Empathic exploration; Focusing; creative arts methods
<b>5. Use containing language/ imagery</b>	Use packaging rather than evocative reflections; reflect using "it" or "something"; help client attain useful working distance; Clearing a Space



# Principles for Facilitating Adaptive Emotion Regulation

<b>Principle</b>	<b>Examples of Therapeutic Work or Task</b>
<b>6. Use emotion regulating mini-tasks (small pieces of emotion regulation work)</b>	Help client attain useful working distance; Clearing a Space; helping client imagine a Safe Space; Grounding/mindfulness exercises. “Say hello to something in your that’s scared.”
<b>7. Offer emotion-regulating tasks (larger pieces of emotion regulation work)</b>	Clearing a Space; Empathic Affirmation (task); Meaning Creation; Compassionate Self-Soothing; Work with client to help them identify adaptive pleasant or self-soothing activities
<b>8. Help clients regain psychological contact when overwhelmed or dissociated</b>	Pre-therapy; Mindfulness suggestions: “Take a breath”; “Put your feet on the floor”; “Look at me”; “Pay attention to what you sense around you.”

# Principles for Accessing Emotion

<b>Strategy</b>	<b>Examples of Therapeutic Work or Task</b>
Moderate level of arousal in order to create safety	Make a safe Space for attending to emotions
Address self-interruption and other forms of over-regulation of emotion	Self-Interruption Split Work
Attend to emotion-related bodily sensations*	Focusing
Remember previous emotion episodes*	Unfolding; Trauma retelling
Encounter evocative verbal emotion triggers*	From client or therapist; words or images; Evocative Reflection Unfolding, Meaning Creation
Enact emotion expression and action tendencies*	Two Chair work, Empty Chair work

\* Follows Emotion Scheme Model



# Examples of EFT Emotion Regulation Work

- Audio: SA058-30: 41 – 52
- Clearing a Space




**An Emotion Regulation Task:  
Clearing a Space for  
Attentional Focus Difficulties**





# Clearing a Space for Attentional Focus Difficulties

## □ General Issues:

- “Working distance”:
    - ◎ optimal state of emotional arousal;
    - ◎ optimal psychological distance from powerful or painful experiences
  - Clinical Applications:
    - ◎ Generalized Anxiety Disorder, PTSD, Panic Disorder, borderline processes, and major illness (e.g., cancer) or pain
  - Helps empower and encourage clients to determine the focus and process of their therapy
- 




# Marker Forms:

## □ (1) *Overwhelmed:*


- multiple worries
- over-identified with problem

## □ (2) *Blank:* (“filling a space”)

- client doesn't know what to work on
  - helpless stuckness of depression
  - avoidant numbing of PTSD
- 




# Developing a Working Distance


- Find a *unique* strategy for the client.
  - *Moving problems away from the self*: pushing them onto a shelf, a drain that holds them, or into a room.
  - *Using containment metaphors*: jars, boxes and other things that can be shut or locked.
  - Imagining a *safe place* to put them.
  - Imagining a *protective layer* between one and one's problems.
- 

<b>Task Resolution Stage</b>	<b>Therapist Response</b>
1. <u>Marker</u> : <u>Attentional</u> <u>Focus Difficulty</u> : Client overwhelmed; stuck or blank.	Identify, reflect marker to client; propose task.
2. <u>Attending</u> to internal “problem space.”	Invite client to turn attention inward (focusing attitude).
3. <u>Listing</u> concerns or problematic experiences.	Ask client to attend to things that “keep you from feeling good.” “Anything else?”





<b>Task Resolution Stage</b>	<b>Therapist Response</b>
4. <u>Setting aside concerns or problems</u> : Client able to create emotional distance from problems, identify most important to work on.	Ask client to imagine setting concern aside; may suggest containment imagery; may facilitate negotiation with concern; make use experiential teaching about optimal working distance as needed.
(Repeat 3 & 4 as needed, until client runs out of concerns)	



<b>Task Resolution Stage</b>	<b>Therapist Response</b>
<p>5. <u>Appreciating cleared internal space</u>: Client enjoys relief, sense of free or safe internal space.</p>	<p>Suggest client stay with, explore felt sense of clear internal space.</p>
<p>6. <u>Generalizes cleared space</u>: Client develops general appreciation for need, value or possibility of clear or safe space in his/ her life.</p>	<p>Explore value or possibility of cleared, safe space in client's life to help deal with overwhelming feelings.</p>




# CAS Examples

- Stuck/blank in session 2:
  - SA601, Session 2: 2:35 – 21:50


# Exercise: Practice Moderating Emotions and Attending to Bodily Sensations

- 1. Do Clearing a Space
- 2. Optional: At the end, propose to the client that they ask the issues they've put aside which one needs attention right now.
- 3. Do a mini-Focusing on this issue:
  - Sit patiently with the issue
  - Attend to the emotional feeling in your body
  - Then find a word or picture for it
  - Check the word/picture to make sure it fits




**Gently Accessing Emotion:  
Focusing for an Unclear  
Feeling**






# **Gently Accessing Emotion: Focusing for an Unclear Feeling**

- Useful or teaching clients early in therapy about basic experiential concepts and assumptions
  - Can be taught explicitly early in treatment, or parts of it may be used at appropriate times
- 




# Focusing Marker: Unclear Feeling

- Something not right (e.g. general sense of foreboding / discomfort, something eating away)
    - (1) Particular internal experience
    - (2) Difficulty articulating or symbolizing
    - (3) Distress or disturbance in connection with
  - Not a puzzling reaction
- 




# The Focusing Attitude

- Focusing is not a skill or technique. It is an attitude of...
    - "...waiting, of quietly remaining present with the not yet speakable, being receptive to the not formed" (Leijssen, 1990)
    - Temporary suspension (bracketing) of cognitive activity, of what person "knows" already
    - Like Zen or Taoism, but directed towards specific object
    - Requires: safe environment
- 






# Focusing: Helpful Questions You Can Ask Your Body

- What is the emotional quality of the feeling?  
Example, “tightness in chest.” “Is it a scared, excited, or happy tightness?”
  - What gets it so \_\_\_\_\_?(eg. jittery, hot);  
What is the \_\_\_\_\_ feeling about?
  - What does it need? From you?
  - How would OK in your body feel? What would need to happen to get there?
- 




# Task Resolution Stage 1: **Marker**

- *Client process:* Unclear Feeling:
    - Vague, internal, difficult to express, distressing
  
  - *Therapist Response:*
    - Identify, reflect marker to client
    - Propose task
- 



# Task Resolution Stage 2: **Attending**

- *Client process*: Attending to the unclear feeling, including whole thing
  
  - *Therapist Response*:
    - Encourage focusing attitude: Invite client to turn attention inward to what is troubling or unclear
    - Encourage attitude of receptive waiting
    - Encourage attention to whole feeling
- 




# Task Resolution Stage 3: Finding a Handle

## □ *Client process:*


- Searching for & checking potential descriptions (label, symbolic representation)
- Including checking accuracy of label

## □ *Therapist Response:*

- Ask client to find word or image for unclear feeling
  - Reflect exactly what client says
  - Avoid interpretation
  - Encourage client to compare label to unclear feeling, until “fit” is found
- 



# Task Resolution Stage 4: Feeling Shift

- *Client process*: Nonverbal display of easing or relief
  
  - *Therapist Response*:
    - Go back to Step 2 (what is X about?)
    - Or use exploratory shift questions:
      - What else is there?
      - What is at the core/bottom line?
      - What does it want/need to change/shift?
- 




# Task Resolution Stage 5: Receiving

## □ *Client process:*

- Self-criticism
- Appreciating, consolidating felt shift

## □ *Therapist Response:*

- Encourage C to stay with feeling that has shifted
  - Help C to temporarily set aside critical or opposing feelings
- 




# Task Resolution Stage 6: Carrying forward

## □ *Client process:*

- Carrying forward outside therapy
- New in-session task

## □ *Therapist Response:*

- Listen for, facilitate carrying forward if appropriate
  - What is next? Where does it lead?
- 

# Focusing Resources - 1

## □ 1. Recommended Books/articles:

- Cornell , A. W. (1996). *The power of focusing*. Oakland, CA: New Harbinger.
- Cornell, A.W. (2005). *The Radical Acceptance of Everything: Living a Focusing Life*. Berkeley, California, USA: Calluna Press.
- Gendlin, E.T. (1981). *Focusing* (2nd Ed.). New York: Bantam Books
- Leijssen, M. (1996). Characteristics of a healing inner relationship. In R. Hutterer, G. Pawlowsky, P.F. Schmid, & R. Stipsits (eds.), *Client-centered and experiential psychotherapy: A paradigm in motion* (pp. 427-438). Frankfurt am Main, Germany: Peter Lang.
- Purton, C. (2004). *Person-Centred Therapy: The Focusing-Oriented Approach*. Basingstoke, UK: Palgrave.





# Focusing Resources - 2

- Focusing Institute: [www.focusing.org](http://www.focusing.org); including extensive library of articles by Gendlin, available for free.
  - Focusing Resources: Ann Weiser Cornell; [www.focusingresources.com](http://www.focusingresources.com); her free Focusing Tips newsletter is highly recommended; you can subscribe on her website
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# Extra slides





# Homework: Classifying Emotion Responses - 1

- Purpose of exercise: To help you identify different kinds of emotion response.

# Instructions - 2

- 1. ***Listen to your body*** (= Focusing)
  - Find a comfortable place
  - Make yourself some psychological and physical space to sit
  - Pay attention to the basic sensations in the trunk of your body, stomach, chest, arms, throat or face
  - Ask yourself: “What is it like inside?; What am I feeling in my body?”
- ***Let yourself feel the emotion.***
  - Welcome the feeling.
  - Try not negatively evaluate it.
- ***Name the feeling.***
  - Put words to your feeling.
  - Find words that help articulate what it's like inside.
  - Let the words come from the feeling as much as possible.

# Instructions for Speaker - 2

- Step 2. Identify whether your emotional reaction is direct (primary) or indirect (secondary or instrumental).
- Check with yourself:
  - “Am I *really* feeling this feeling?, or, “I’m *not* trying to use the emotion to make an impression on someone, or because I’m *supposed* to feel it, Am I?”
  - If you are not really feeling it, or if you are *mostly* trying to make an impression on someone else, then it’s probably an **instrumental emotion response**.
  - Go back to Step 1 by asking yourself: “What am I *really* feeling?”

# Instructions for Speaker - 3

- 3. If you really are feeling it, ask yourself the following:
  - “Do I feel something else that comes even *before* or *underneath* this feeling?”
  - If you get a “Yes” to these questions, my feeling is probably a **secondary emotion response**
  - **Go back to Step 1 and focus on the earlier/ more basic feeling**
  - If you get a “No” to this question, go on to Step 5.

# Instructions for Speaker - 4

- 4. Establish if your primary emotional reaction is adaptive (healthy) or maladaptive (unhealthy).
  - a. Ask yourself:
    - Is this feeling a response to other past experiences rather than mainly a response to what's happening now?
    - Does this feel like a recurrent, familiar bad feeling?
    - Is this a familiar stuck feeling?
  - b. If the answer to any of these is “Yes,” then it's probably a **maladaptive emotion response** (=unhealthy core feeling).
    - Go back to Step 1: Listen again to your body & go through steps 1 to 3 again

# Instructions for Speaker - 5

- Step 5, end:
- 5c. If the answer to the above questions is “No,” this is an **adaptive emotion response** (=a fresh new healthy feeling in response to the present situation); take a minute to enjoy it!.



1. Listen to your body

2. Let yourself feel the emotion

3. Name the feeling

4a. Am I trying to do make an impression on someone, or make myself feel what I'm supposed to be feeling?

Yes

No

4b. Is there a feeling before or underneath this one?

No

Yes

**Instrumental Emotion Response**

**Secondary Emotion Response**

**Primary Emotion Response**

5. Response to other past experiences rather current situation?  
Recurrent, familiar bad/stuck feeling?

Yes

**Primary Adaptive Emotion Response**

No

**Primary Maladaptive Emotion Response**  
(What does it need? =>)