Complete Transcript

VICTOR YALOM: Hello, I'm Victor Yalom. And I'm pleased to be here today with Dr. Rebecca Jorgensen, who will be our guide in this four video series, *Emotionally Focused Therapy, Step by Step.*

Rebecca is one of the lead trainers in Emotionally Focused Therapy. She's trained literally thousands of therapists around the world. So I'm delighted to have her sit down with us and share her expertise.

DR. REBECCA JORGENSEN: I'm really glad to be here, Victor.

YALOM: You know, I'm excited about the series for a number of reasons. First of all, our primary intimate relationship is so critical to our sense of identity, and our emotional, and even physical, well-being. When our relationships are not doing well, then we're not doing well. And the ripple effects are so large.

And if couples can improve the quality of a relationship, then it just makes such a huge difference. But I'm convinced couples therapy is one of the most, if not the most difficult, skill for therapists to master. And unfortunately, most therapists really get minimal training in it.

JORGENSEN: It is one of the most difficult things for a therapist to learn, and because they don't learn it as part of their therapy training, typically, in their original education, then coming back to master it, can even be a little bit more difficult.

YALOM: So this series is designed for therapists who want to significantly improve their couples therapy skills. And by learning an approach that has a very solid research basis to it, and also a very structured roadmap.

Frankly, I'm a little skeptical of many of the so-called manualized therapies that seem to take, kind of, a rote or almost cookbook approach to therapy. But in this case, working with couples, I'm convinced that having a very clear theory and framework is extremely helpful so you don't get just thrown off by the intense emotions, by the fighting, even the chaos that can appear when you're working with couples.

JORGENSEN: Yeah, it's so true. It's so easy to be thrown off by those factors. And without really good training, that just happens. We get so thrown off.

YALOM: Another reason I'm excited about this series is that it's unlike anything we've done before. And frankly, I think it's unprecedented in psychotherapy training videos. It's almost exactly 20 years ago since we produced our first training video. And most of the videos we've done show one

or two therapy sessions.

In this series, we've filmed six different couples, four different therapists, and we've captured over 100 hours of couples therapy. And then we've edited it down and extracted key moments in the therapies, and the essential principles and techniques of EFT. And you'll be with us every step of the way to explain and illuminate the process.

JORGENSEN: The therapy videos are so helpful to reinforce key concepts and to have to review. While it doesn't eliminate the need for more formal and in-person training, having the therapy videos makes a huge difference in capturing and understanding and being able to review key concepts. So to have such a variety of couples and therapist to watch doing the same model, I'm really thrilled about this-- the efforts that we've put into this.

YALOM: Okay, so let's jump right in. In this first video of the series, *Core Concepts in EFT*, we're going to focus on the theory that underlies the approach, an overview of the steps and stages of EFT, and the key interventions which are used throughout the course of treatment. In later volumes, we'll go into much greater detail of the steps and stages, as well as the specific challenges that therapists face.

First of all, I understand EFT is based on attachment theory. Anyone in our field certainly has heard of attachment theory, and may have some idea about it. But can you summarize the gist of it, and how it applies to couples therapy?

JORGENSEN: Yeah, attachment theory was developed by John Bowlby. And many people have heard about it, especially in relation to the parent child relationship. John Bowlby talked about attachment theory as being across the lifespan. And we really look at attachment theory—the need—the need to have a close relationship, someone that understands us, that connects to us, that co-regulates our emotion that we're bonded to.

So we're looking at the couple relationship—Sue Johnson would talk about it, not as a bargain, not as a way people just kind of share tasks, but as a bond. And the strength of that bond has everything to do with how happy we are throughout our lives, and especially in our couple relationship. So we take attachment theory and apply it to the adult and the love relationship. And look at the signals that people send and receive that indicate the security of their bond with each other.

YALOM: I think one of the ways we get trapped or stumble in this area, especially in Western countries, and perhaps even more specifically in the United States, is our ideas about independence versus dependence. And I think, more typically for men, we view independence as so important, and

being dependent on our partner, or anyone, is a weakness. How does that play out?

JORGENSEN: Well, it certainly adds to a lot of distress in couple relationships, because all the science shows, and our research in couple relationships specifically show, that we really need each other. And that's what attachment theory is based on, that we do need each other, and it's not a matter of clinging to each other or not being independent. The idea is that when we are securely attached and our bond is safe and strong, that we can be more independent. And because it's interdependence that helps us grow and develop as human beings.

YALOM: So it sounds like in one way or other, you're always seeing the couples' interactions through this lens of attachment theory. Is that correct?

JORGENSEN: Yes, everything that the couple's distressed about, for the most part, it always goes back to this attachment and bond. So couples may come in talking about problems with their in-laws or their children or the money, but we're going to look at that through the security of their bond, through the attachment lens, because we send signals when we're distressed-- emotional signals, very non-verbal oftentimes-- verbal signals that will lead into more disconnection to couples.

And if they're feeling insecure in that bond, then it's very hard for couples to solve problems together and to coordinate their moves together. So the strength of the bond has everything to do with what we do in couple therapy. We're looking at distress through the strength of their attachment bond.

YALOM: So you're always looking-- you're always looking at that. I recall Sue Johnson, the founder of EFT, saying, it all gets down to one basic way of looking at it is, are you there for me?

JORGENSEN: Yes, are you there for me? Can I count on you? Do you need me too?

YALOM: So then-- so that's how you're looking at it. Then, how does that affect the practice of EFT?

JORGENSEN: Well, it's through this lens of attachment theory-- the way that we're looking at it through this lens-- impacts because we are looking at the structure-- the systemic base of the couple, based through the attachment lens. So how strong is our bond? How do we get disconnected? What does it look like when we get disconnected? What are the emotional signals that we send?

So we're looking at when there is insecurity, people don't send as clear signals

to each other of their need. And they'll get more defensive with each other. And really can't co-regulate each other's emotions.

YALOM: Or if they need something, they'll express it through attacking.

JORGENSEN: They'll attack, complain, criticize, withdraw. And those needs will go underground, because they can't send clear emotional signals.

YALOM: So when you're observing these behaviors-- the attacking, the withdrawing-- and you're thinking of that in terms of attachment styles-specifically, the secure and insecure and disorganized attachments styles-how do you make sense of that?

JORGENSEN: The attachment literature, the research on attachment styles, is really prolific. We know so much about people's inner worlds based on their style. So what we do in emotionally focused therapy is understand those predominant styles, and use what people describe is happening in their inner world, and what we see behaviorally, and what they also describe behaviorally. And that helps us formulate what their inner world is, so we can more closely attune to them and help them co-regulate, and help them learn to share more with their partner.

YALOM: Okay, but my understanding is that that understanding is always in the service of how is it played out in their relationship.

JORGENSEN: Yes, how it's played out in the relationship is the context that we're always looking at. So the attachment style is really helpful to us to understand people's automatic responses when they're in threat of their attachment. And when their insecurity is playing out in their attachment, because their bond isn't strong enough.

And so understanding those styles, which we'll talk more about positions in the cycle, like-- it's very much more common for someone who is insecurely avoidant style to withdraw in the relationship. And it's much more common for someone who might meet the criteria for insecure anxious style to be more critical and blaming in their relationship.

YALOM: So let's now move to the structure of EFT. And as I mentioned before, one of the strengths, I see, of EFT is that it provides a roadmap, a structure that the therapist can follow. And that can be very helpful when there are so many things to attend to. So let's go over this map.

JORGENSEN: Okay, so there's three stages in Emotionally Focused Therapy, and nine steps. And the first stage really has to do with understanding the couples' dance, as Sue Johnson would talk about it, the pattern that they get stuck in when they're under attachment distress, attachment threat.

And the first stage is to complete a de-escalation process so they can see their pattern. They understand their pattern, and they understand the need for each other and the secure bond that's driving that. And then the second stage is where we are really changing, in a second order way, their automatic response to each other.

YALOM: What does that mean, in a second order way?

JORGENSEN: So we're making what has been an implicit-- automatic and implicit process, in Stage One, we're making that explicit. And in Stage Two, we're recreating a new implicit response. So a second order change, meaning it's going to become more automatic to them to be able to move towards each other and strengthen their bond and find relief in sharing with each other, rather than moving into disconnection. And then in Stage Three, we're consolidating all of that work.

YALOM: All right, and so the end product is--

JORGENSEN: So the end product is that couples come out of couple therapy with a secure bond. And can go out in their life and become more and more secure as they move forward.

YALOM: So those are the three stages. And I understand within the three stages, there are nine steps.

JORGENSEN: Yep, there's nine steps. There's four steps in the first stage, assessment and de-escalation. So we are working first to create an alliance. Step One, create an alliance and assess. What's the problem that the couple defines they came in with, and then starting to formulate that through the attachment lens.

And Step Two then, we're understanding their negative interactional pattern. What is their cycle? What is that negative dance? There's a repetitive dance that happens when couples are in distress, and we outline that.

YALOM: Okay, and so that's an important concept in EFT, this cycle?

JORGENSEN: The cycle is a really important concept in EFT. It keeps the whole interpersonal part of the relationship, the attachment frame, in front and center to us all the time. And it's foundational to being able to do the work with the emotion.

First is to understand the lay of the land. What's happening in their pattern, in their dance? Because we can't go in and intervene in it until we really kind of have an understanding of what that looks like. So we get their cycle.

So Step Three is when we begin to access the primary emotion. And the

primary emotion is what drives the negative cycle. So the insecurities, the fears related to the insecure bond. We start to access that emotion so we can organize and make sense out of-- from the emotional sense-- what about the partners being disconnected from each other?

And then Step Four is the reframe, where the couples really understand in an experiential way what is driving the whole pattern-- each other's primary emotions, the unmet needs they have from each other-- and they're able to pull together to stop the negative cycle when they accept the reframe.

YALOM: Okay and the therapist provides the reframe.

JORGENSEN: The therapist is reflecting through the attachment lens and the negative cycle from their primary emotion, the reframe. For example, one partner may say when they're accessing emotion, yeah, I'm really lonely. And I'm really afraid about not getting it right with you.

So the therapist will respond from that, with the reframe. I understand that in this relationship, when you're hearing from your partner you're not getting it right, that that's really scary for you then.

YALOM: So that's Stage One. And the steps in Stage Two are?

JORGENSEN: And Stage Two has three steps. So we're restructuring the bond. And the way that we do that is at Step Five, we're going deeper into the emotion. And we're helping each partner to claim disowned aspects of their experience of their emotion.

YALOM: What does that mean?

JORGENSEN: Well, when we are insecure, we often hide our needs from ourselves and from our partner. And we disown pieces of our personality, pieces of ourselves, that we need to be whole and complete and happy. And so we're-- because there's safety, since the couple's de-escalated-- now they can start to explore their inner world more deeply, and begin to share that with each other.

YALOM: These are some of the more vulnerable feelings?

JORGENSEN: Yes, very much the vulnerable feelings. And the ways that they have organized their life and their sense of self from these deeper feelings that haven't been processed or recognized before. So it's very deep intrapsychic work, that then Step Six is to promote acceptance of these new experiences and new understandings of one partner. Step Six is to go to the other partner and promote acceptance of these new discoveries that are happening when we're working really deep interpersonally, intrapsychically.

And then Step Seven is to begin to have each partner ask for their unmet needs to be met from this position of vulnerability. So I'm asking when I'm feeling-- I'm feeling afraid, for example, that you might leave me. I'm asking for reassurance that you won't, from the place of fear. Which is really different than what happens in the negative cycle, when all of that is defended against. And it's not brought out right into the open.

YALOM: Or those needs are expressed through criticism or demands.

JORGENSEN: That's right. The needs are expressed oftentimes in ways that make it impossible for the partner to respond in a way that will build the bond. I may be able to do the task aspect of what you're asking, but, emotionally, not being engaged in a way that really brings the reassurance that I need that our bond is secure.

YALOM: So let me understand. So five is to access those primary, more vulnerable, emotions. Six is to promote, so you, as my partner, can actually hear and accept those.

JORGENSEN: Yes.

YALOM: And then seven is for me to be able to use my awareness and understanding of those emotions to express my needs to you in a more vulnerable way.

JORGENSEN: That's right.

YALOM: That you're going to be able now to hear and respond to.

JORGENSEN: Yes.

YALOM: Right, and then that process gets repeated?

JORGENSEN: Yeah, we have two partners. And so the Step Five is really intrapsychic with one partner. And the Step Six, promoting acceptance, is with the other partner.

So we begin with one partner, the most withdrawn partner, in this intrapsychic exploration. And then after we complete that process-- we call it the withdrawer reengagement. So we do Step Five, Six, and Seven, leading with the withdrawer at Step Five. We come back and start Step Five. Redo it, only now leading with the more pursuing partner.

YALOM: So in the example I just gave, after we did it with me, we would then turn around and do it with you.

JORGENSEN: That's right. We'd start the Step Five, the intrapsychic process, for the second time, but with the pursuing partner. And then share those

new discoveries of self and experience with the now engaged withdrawer to promote acceptance of these parts that neither one of them have really shared with each other before, maybe even not known about. And then come back to the pursuer for Step Seven, where I would ask for my unmet needs to be met from this not demanding position, but from the position of vulnerability.

YALOM: So at the end of Stage Two, Five, Six, Seven-- both of us would have been able to discover our needs. The other person-- or, discover our more vulnerable feelings. The other person would be able to hear those and accept them, and respond to them. And then both of us would be able to express our needs in a more vulnerable place, in a more vulnerable way.

JORGENSEN: And going through that process restructures the bond. So we go from an insecure bond to a secure bond.

YALOM: Okay, and then moving on, finally, to Stage Three. What's that about?

JORGENSEN: So Stage Three is where we're consolidating the work. And at Step Eight, we may look at solving the unsolvable problems before. So because throughout this process, we're mostly focusing on the process of the cycle. And we're being process consultants, and we're not really looking at the content, the actual argument itself. We're looking how people argue, not what they're arguing about.

YALOM: Just so we understand that fully-- so how people argue the process is the cycle.

JORGENSEN: Yes.

YALOM: And the content would be--

JORGENSEN: So maybe the couple comes in and say we don't communicate, or we fight about sex, or we're fed up because our parenting styles are different. They come in with content kind of issues.

YALOM: Money.

JORGENSEN: Money, sex, in-laws.

YALOM: Those are the typical things people argue about.

JORGENSEN: Yeah.

YALOM: But you don't get caught up on focusing on the content. We're not going into problem solving with them on that content until after their bond is secure and we've completed Stage Two. Then we can revisit that content and say, now that you're more secure, are you able to stay in conversations around

these things that you used to not be able to agree on or to come to agreement on? And so we'll revisit those and see any place that they may get stuck.

The therapist still stays as a process consultant. We're not going into problem solving. We're not negotiating with them. We're not giving them ideas about how to solve the problem. When people are secure they can come up with new and creative ways to solve a problem that they hadn't considered before. But we revisit those issues.

YALOM: That's Step Eight.

JORGENSEN: That's Step Eight. And then at Step Nine, we're really consolidating the whole thing. Where now the couple is developing a story. Wars-- we've been in a war. War fought, war won. This is how we got through it. They're creating a new narrative of their relationship and what they've been through and how they succeeded pulling through together.

YALOM: Okay. All right. So that's a wonderful overview of those steps. So a couple of questions come to mind for me. How do you know as a therapist what stage you're in, what step you're in? I imagine in the chaos of the therapy, in the fog of war so to speak, it's very hard to always know where you're at.

JORGENSEN: Yeah, especially in the early-- in Stage One, during cycle deescalation. It can be really hard, because that's when things are most chaotic. Part of de-escalating does clear that up so that it's not as disorganized anymore. We put an organization to it through the attachment lens.

And another thing about the steps that's really helpful to think about is, well, people might think that this, because it is a step by step process, that it's linear. And in some way it's linear because we're going from Step One to Step Two. What we're really doing is, once we've completed Step One, we're looking at the next objective is to complete Step Two.

So Step One is alliance in assessment. I'm never going to stop assessing where we're at and working on my alliance. Even though I'm doing cycle assessment at Step Two, I'm going to continue. So I may have the target of Step Two as the objective, but I'm going to continue to use Step One.

YALOM: And you're always paying attention—is the alliance strong? Have you missed something that could cause their rupture.

JORGENSEN: That's right. And then when I add Step Three, when I start to access primary emotion, that's the target that I'm going for. That's the objective.

And I'm continuing to watch my alliance to assess how we're doing, to put it in the cycle frame, and access emotion. And I'm going to be continuing to do

that even into Step Four.

So it's circular, or additive, or really we're looking at the step. Not "oh, I did Step Three now I'm done." I'm going to continue to do Step Three, even when I'm working on Step Four, for the cycle to get the reframe and learn to fight the negative cycle together, for the couple to get the reframe. I'm going to continue to do Steps One, Two, and Three, while I'm on the objective of helping them until they are deescalated, until they get that reframe and can pull together to stop the cycle.

YALOM: I'm just wondering. The analogy that comes to my mind always is a musician mastering the scales. And then when you're in performance mode, if you're a jazz musician, you're playing. You're improvising, you're not thinking about the scales, at least as you get better.

Is it kind of like that? What's the process like for a beginning therapist versus as you get more comfortable with that?

JORGENSEN: Yeah, when you're beginning, therapists will spend a lot of time trying to-- what step am I on? And maybe keep a training note in front of them so they can know what's my objective of this session? I really want to do some Step Three work. So that's an important thing to keep in mind.

But because we're working with emotion, really staying attuned and coregulating is the thing. We're always going to go back to the cycle and to our attunement, to our alliance with them, if we get lost at any time. That alliance, that attunement, is going to be the foundational thing that we always go back to.

YALOM: Okay, so now that we've done at least an overview of the steps and stages, let's move on to the essential interventions or techniques of EFT. All right, so let's now move to discussing the interventions that are specific to the EFT therapist as they move through the stages. And there are three primary tasks in EFT that the interventions support.

JORGENSEN: Yes, of course first and foremost, and not specific to EFT, is the creation and the maintenance of the therapeutic alliance. That's so important in all therapy. So in addition to that, the EFT therapist is maintaining two other primary tasks that are constantly intertwined-- to access and reformulate emotion, and to restructure the interactions. We can talk about each of those a little bit.

YALOM: Okay, so let's start with accessing emotions. That sounds like something that's done in almost any form of therapy unless, perhaps, you're a die-hard behaviorist. So does it have a specific meaning in EFT?

JORGENSEN: Yeah, so we're accessing and reformulating emotions—we're really looking at attachment affect. So we're going for emotion that pulls their partner close to them, emotion that is unexpressed within their relationship, vulnerable emotion that's hidden under their reactive behaviors and their reactive emotions.

So we're looking for primary emotion. We look at primary-- we look at emotion on two levels, primary and secondary emotion. And we're looking to access that more primary and vulnerable emotion.

YALOM: Okay, so what do you mean by primary and secondary emotion?

JORGENSEN: So we have emotion that occurs at two levels. When I'm under threat, I have my instant, unconscious response to the threat. And we're talking about an attachment threat, because as the partnership gets disconnected from each other, they're not co-regulating each other in some way, then that's a threat to their attachment bond.

And there'll be an unconscious response to that. It's fast. It happens before we think. And if it's not safe to be aware of or to express that my vulnerable feeling, like "gee, I'm really afraid that you're not counting on me, or you're not there to respond to me," then that emotion flips or twist into secondary or reactive emotions.

So underneath anger or looking what happens first before anger? What happens first before frustration? What happens first before going numb or shutting down? We want to go to those vulnerable feelings that happen, and access those. And then we're going to work to process or reformulate those emotions and the signals, both that trigger those emotions and that then we send when those vulnerable emotions get hidden under reactivity.

YALOM: So first you have to help each partner become aware of what those primary emotions are?

JORGENSEN: Yeah.

YALOM: And then, what does that mean to reformulate?

JORGENSEN: Yes, so actually I think where we would start at Step Two-well, we're always going to, regardless of what step we're in, we're looking to use the emotion. But after we've identified that negative cycle-- so I may know I'm insecure. So it's not a knowledge thing-- I actually want to access that emotion. So it's already identified. And then EFT is a-- we're working in the here and now. It's an experiential model. So I want to feel that emotion. I want to help the client feel that vulnerable emotion.

And oftentimes, they're feeling reactive. So I'm going to be with their

reactivity until it's safe enough for them to become aware of and feel their vulnerability. But they're actually going to feel it in the session. And then we're going to stay with that emotion, to reformulate it, which means that that emotion needs attention and it needs processing. It needs a new meaning attached to it.

As we spend and-- put words to feelings, that starts to shape and change it. So we're going to stay with that emotion as it reformulates until it can send a new clear signal to their partner.

YALOM: That sounds good, but what does that accomplish? Accessing and reformulating emotions, how is that helpful in the therapy?

JORGENSEN: It's helpful in a variety of ways. First, it helps each partner understand their own dynamics within the relationship. How they move-- it helps them understand their own move in the dance. It brings into awareness things that have been out of their awareness. So people start to feel better about themselves as they understand their own behavior better.

It brings us new understanding and meaning, not only for what's happening to them, but about their partner's behavior too. They start to see their partner differently. When there's an insecure bond, we'll fill in the blanks. And we'll make our own meaning for why our partner is doing or behaving certain ways.

And the reformulating-- the access and reformulating-- and then the sharing of the emotion, helps the listening partner to understand and make new meaning about their partner's behavior. And that really begins to challenge these long held perceptions that they have of each other, which opens up the ability for them to have new responses with each other.

YALOM: And that's the goal. You want to somehow throw a monkey wrench in the system and get them to get out of these very entrenched dysfunctional patterns, and start to have some new ways of understanding themselves and their relationship. And so then that brings up the final task, restructuring interactions. Tell me about that.

JORGENSEN: So the therapist is the choreographer here. The therapist is very active in helping the accessing, the reformulating of the emotion, and then sharing it with the partner. So through this way that we help partners share with each other, we're creating new patterns of interactions. They start to take risks with each other about sharing their vulnerabilities.

But it's a process to do that, because we're going to start first where people are at. And we're going to track and reflect their current interaction,

identifying these recurring sequences of the dance that they have and those basic patterns, and then the meaning that they make out of that within their experience, and reframe it through the attachment lens through that systemthe emotions-- using the attachment. And then we move into shaping and restructuring, really choreographing these new patterns of interaction.

So they start to feel more safe being vulnerable with each other. Again, couples usually start out sharing deeper experiences with each other. And through the course of developing more tension between them and this negative cycle between them, they stop taking risks of sharing. And that really blocks the flow of love and openness between them. So we go back to helping them being able to redevelop and have new patterns of interactions, and shift out of that negative cycle.

YALOM: So let's go into more depth about the interventions or techniques. And let's start with interventions for accessing emotions. The first tool is reflection of emotional experiences.

JORGENSEN: Reflection is a basic tool of Emotionally Focused Therapy. And the therapist uses it to build and to maintain the alliance, to focus the process, and to clarify the emotional responses.

YALOM: So with so much going on, how do you choose what to reflect?

JORGENSEN: That's the focus of EFT. So we're going to listen for the emotion, the attachment affect, how partners construct their emotional experience of relatedness, what happens within their relationship.

YALOM: All right, so let's look at our first example of a couple. And as I said before, we're going to be following six couples through these videos. And the first excerpt is just a simple reflection with our first couple, Anjum and Syed

SYED: It's against my nature to fight. I don't want to fight. And I don't want to live in a frictional atmosphere and the relationship.

SCOTT WOOLLEY: Mm-hmm, Mm-hmm.

SYED: But I retaliate if I'm-- I mean, the mean word is said to me, then I retaliate.

WOOLLEY: Right, right.

SYED: But I don't like to hear it and I don't want to utter the word myself.

WOOLLEY: I mean, you do retaliate sometimes and you do say mean things sometimes, but it's not what you want.

SYED: Of course, no.

WOOLLEY: It's not your values. It's not who you are deep down inside.

SYED: No, not at all.

JORGENSEN: So now we're going to see some examples of reflections with our second couple, Carl and Sandra. We want to notice how in the first clip, I reflect Sandra's fear and what prevents her from being vulnerable with Carl, rather than exploring her history of abuse in her past relationship. And in the second clip, the reflection allows me to focus on the present process. And that helps to manage any potential conflict or any potential escalation.

SANDRA: If I let him see that I really care so much for him, he's going to hurt me.

JORGENSEN: Right, Sandra.

SANDRA: 'Cause that happened in the first marriage.

JORGENSEN: Yes.

SANDRA: Twenty years of caring for somebody, and then they end up hurting me. So I'm a little bit leery, you know?

JORGENSEN: Yes.

SANDRA: So that's why I'm kind of--

JORGENSEN: Thank you for bringing that up, right? Thank you for bringing that up. 'Cause there is a way you can say in this relationship, Carl, even though I care so much for you, I'm a little leery about really letting it show. Because if you know how much I care for you, you could stomp me. You could hurt me. I've been hurt in the past when I've been in a relationship where I let myself really, really care.

SANDRA: That's one of those feelings that isn't fact.

CARL: I think it is.

SANDRA: That you think I'm all tied up with the inn. I'm not in love with Arkansas. Good grief! I was born and raised here in California. I didn't even know the word humidity existed till I moved to Arkansas.

CARL: I know, I understand that. You're right.

JORGENSEN: So what happens though right here, Sandra? We can slow this down a little bit. You were gone. We lost you for a minute. Where were you?

SANDRA: I was out there going running down the street.

JORGENSEN: Okay, so right now you just noticed that you got wound up. And you felt full of that negative energy. Is that what happened right now?

SANDRA: Yeah, because I don't like to raise my voice to Carl. He's a gentle soul. He doesn't like to hear loud words.

JORGENSEN: So what happened right now is, when you looked blank, it had to do with you stopping yourself from running out the door, because your automatic response would be, "uh-oh. I just brought negative energy in. I'm yelling at Carl. He doesn't deserve this. That's not who I want to be. That's not what I want to have happen."

SANDRA: Yeah, that's right.

JORGENSEN: Yes, because my heart isn't in Arkansas. I'm worried about it. It's a burden.

SANDRA: Yeah it's all consuming. Because the bank could take everything tomorrow, and that--

JORGENSEN: But my heart is here trying to figure out-- and the only reason I go away is because I don't want to hurt Carl. Reflections may seem easy to therapists, but here's an example of one that doesn't work very well. I reflect and track the process, while I should have reflected the secondary emotion first. So watch how Sandra tries to get through, and I miss the opportunity to be with her emotionally. That results in Sandra giving me more examples of the message that she's trying to get through to me.

Then what do you do, Sandra, when you're discouraged that way.

SANDRA: Well, like last night I said to him, you know, I have felt sick all day long. I have-- I don't know what it is, but I'm always feeling like I have to throw up. It might be stress or something. I don't know, but as soon as I eat, I feel sick.

So last night I was going to do a surprise and make him a hamburger. He loves hamburgers and we're off beef. And I had some I bought. And I was going-- so I said, stay out of my kitchen. I want to do a surprise. You know what I mean? And he kept hovering around. He wouldn't give me any space, even though it's-- you know the RV. All I need was the space in front of my stove and my thing, just this little space. He wouldn't stay out. And I kept saying, I need some space. Get out.

So this class phrase I always will manage to say "stay out of my kitchen"--which is silly, because there's no kitchen. It's just a sink and a stove. But you know--

JORGENSEN: So the idea--

SANDRA: --can't get away into a little teenie bit like this, I can't have to

myself.

JORGENSEN: So that's really interesting how you describe that. Let me see if I'm tracking you right. Because I think what you said is, Becca, when I start to feel really discouraged, one of the things I start to do is to try to make it better.

I think you said something like this last week, right? I planned an outing for us to go to the casino. When I got really discouraged, I'm going to pull myself in there, try to make the best of it, do something that Carl will like, give him a little bit more, put myself back in. But then I get the message, it's not enough. Like he wants to be there too. I can't even bring a surprise to him. It's like it's not enough in some way. Help me, Sandra.

SANDRA: I don't want to have words put in my mouth.

JORGENSEN: No, I appreciate you telling me that.

SANDRA: But it's just the space. It's just, it's not possible. Like, I need a little time to myself. I like to comb my hair and try and fix myself without him right in my face. You know, I just need a little space. That's not asking a lot.

So now I close the door so that he won't come right by while I'm going to the bathroom. I couldn't even go to the bathroom. I couldn't even sit on the john without having him going back and forth. So now I close another door so, you know, it's a sign. You know? Please, I'm on the john. Don't come through. I just--

JORGENSEN: So when you're discouraged-- on one level, when you're discouraged, whew, right? On one level, when you're discouraged, you try harder. You come in, you will cook a hamburger. Like, I'll make this exception. We're not even on beef. I'm going to do something that he really likes. But on the other hand, inside I'm feeling like I'm coming forward, so see that I'm coming forward and don't try to get more from me.

YALOM: So another tool is validation. And you, as the therapist, can validate the present experience, which you see clearly in front of you. Or you can validate a newly emerging experience, something that's just coming to the surface.

JORGENSEN: Yeah, validation is used to legitimize their responses, to create emotional safety, and to support the client to explore more deeply how they construct their experience, as well as to build and maintain alliance. We validate their experience, both the secondary or the reactive experience, and the primary or vulnerable emotion, and their moves in the cycle. So it's really helpful to validate a partner's risk in sharing, or their new response to their

partner's shared emerging emotion.

YALOM: Seems therapists often get stuck there. They have a hard time with validating.

JORGENSEN: We might think we're validating just by having a positive presence or by reflecting experience, but validation and reflection are two separate interventions. They're two separate things. And we may have very little experience using validation, or fear that our clients might reject our input.

So it's important that validation is sincere, that it comes from real understanding, and to recognize that really hollow compliments—it's not like an "attaboy." Those things aren't really helpful. Validation builds alliance and creates more safety. And it is to really affirm that we understand. And it legitimizes what's been happening, how they've organized what they do.

YALOM: Okay, so let's look at three examples of validations. The first one is with Jon and Nydia. And the validation is to encourage John's positive participation. And the second one is with Carl and Sandra again, where you validate Carl, who is sinking into hopelessness.

JORGENSEN: In that case, I want to support them. I want them to know I see their progress, so I provide encouragement and a sense that I see them as capable.

YALOM: And the third one with Carl and Sandra as well, where you validate to punctuate Sandra's new position.

WOOLLEY: You would like her, when you come up to her, to acknowledge you, to shift. And she does it a lot, right--

NYDIA: Right.

JON: Mm-hmm.

WOOLLEY: --but not always. And it hurts sometimes when she doesn't.

JON: Yeah.

WOOLLEY: And what you would like is for him to shift over to you, but he doesn't do it that often, right?

NYDIA: No, he's-- he's a very busy man.

WOOLLEY: But we're only talking two or three minutes. We're not talking about hours. Right?

JON: Well, just like we have that key word, ow, we should have that key word, shift. That way I can understand shift.

WOOLLEY: In other words, you would like her to say, hey, could you shift over to me for a minute.

JON: Shift.

NYDIA: Hey, that's good.

WOOLLEY: That is good. Good job, Jon.

CARL: When we were dating-- the year that we were dating-- it was easier, because I could go back to my business. You know, we'd spend the weekend together. You'd come up occasionally. We'd spend a week together. We'd spend whatever. And it was easier. I mean, it was. And you know, that is a concern that I feel.

JORGENSEN: Yeah.

CARL: That that was an easier-- well, it was an easier relationship, obviously, than being married.

JORGENSEN: That's right.

CARL: Goes without saying.

JORGENSEN: That's right.

CARL: But there was a point to-- yeah.

JORGENSEN: So right now--

CARL: Two alcoholics come with a lot of baggage, more baggage than I expect I realize I have.

SANDRA: Well, at least alcoholics deal with it. They don't just put a padlock on the suitcase and leave it in a corner.

JORGENSEN: You guys are doing some incredible stuff, aren't you? Look at in your recoveries, and with each other, and you're doing some incredible stuff. And you really come from places where walking in a really close relationship is a new thing to figure out how to do with each other, right?

SANDRA: It is. It's more fun to be with somebody sharing, laughing together, or crying.

CARL: Yeah.

JORGENSEN: So it's not-- your reservation is not about Carl loving you and wanting to be with you. It's about-- I don't know how to let it in. I've had these experiences that say danger to me. And part of what's dangerous to me is that I could lose you. Yeah, is that right? Am I--

SANDRA: Yeah, right. That's right.

JORGENSEN: Yeah.

SANDRA: Yeah, it was all those other people who had to care for-- the aunt, the mother-in-law-- they all died of these horrible deaths.

JORGENSEN: And it didn't ever feel like they were-- it was like you were taking care of them, not like you were a team together, right?

SANDRA: Oh yeah, no, I was the caretaker. I really was.

JORGENSEN: And you're really trying to create this new team approach.

SANDRA: Yeah, right.

JORGENSEN: Yeah.

SANDRA: Yeah, that's a new concept.

CARL: Yeah, that's a new concept, yeah.

JORGENSEN: So you're doing beautifully not going here or here. You're saying, I have a committee. I have both parts right here inside of me. Right? I'm not going this way or that way. I'm holding the middle road right now. Yeah?

CARL: Yeah.

JORGENSEN: And you're doing that because he's so important to you. You're learning something new, aren't you?

SANDRA: You are important to me, Carl, no matter what.

CARL: I know Sandra--

SANDRA: You are, Carl.

CARL: And you are to me. You are to me too.

SANDRA: 'Cause you're a really good person-- kind, brilliant. Handsome and good-looking, that's what they all said.

YALOM: So one of the main tools used to guide clients to explore their emotions is called evocative responding. What is that?

JORGENSEN: Well evocative responding is to evoke more feeling, more emotion. It could be either a question or a reflection, but it is used to focus, to incite more exploration into the emotional response. So it is about evoking, calling forth, these implicit elements of their emotional experience. So it expands and it becomes more vivid and more real.

If I was evocative responding with a reflection, for example, I might say

something in a tentative way. I see water in your eyes as you say that. Is there some sadness? Is it even kind of sad to describe that you sense you've let Margaret down in some way?

YALOM: So you're really tuning in to them, to their words and to their nonverbal cues. And it sounds a lot more subtle than just asking, how do you feel?

JORGENSEN: Yes, that's right. We're really being with the client, and seeing the emotion as it emerges and evoking it to become more present. So they're feeling more of the attachment affect that we are helping them to expand.

YALOM: So what are some other examples of how you do that?

JORGENSEN: So we might use questions that could start with, what is happening right now as you describe? So it's both present process-focused and emotion-focused. What's happening as you describe that, or how do you feel when you hear your partner say? What is it like for you in this relationship when? Or, right now when I see that expression on your face, what's happening?

Maybe something like, could we go back to that moment when you described feeling. Or, tell me more about what you're feeling inside as you say this, and pass those words back by them.

YALOM: Yes, inside, or you also might bring attention to their body.

JORGENSEN: Yeah, we'll bring attention to their body, to their words, to some expression that we see, some nonverbal we may see. We might ask a client to repeat a really specific pointed phrase, or to share an imagined voice, or an attachment figure. What would your mother say to you in this moment? We're going to invite more engagement with their inner experience and their response to that experience.

YALOM: Yeah, and in watching these videos, I see that that's something that EFT therapists seem really good at. And they do it in so many different ways that you describe that are really helpful in terms of getting clients to tune into themselves in, often, a pressured situation where they're dealing with some conflicts. And it's not an easy skill to master.

What are some of the challenges of learning to do evocative responding?

JORGENSEN: Well, we might ask too many questions, rather than evoking through reflection, for example. If we don't know how to keep pace with the client, they won't be able to move into this growing or leading edge of awareness and expand their experience.

YALOM: So there's staying tuned to the client. There's timing. There's sensing where the client's at, are they ready to access their feelings.

JORGENSEN: Yeah, the attunement is really critical when we're going to evoke emotion, because we don't want to take them too far, too fast. I may, kind of, know that this emotion expands into more. Like, this little expression on their face could expand into a lot of sadness.

I may know that theoretically, but I don't want to get ahead of my clients. I want them to be able to experience the discovery of that emotion, so I'm going to evoke it by being really present with them, attuned with them, and helping them to focus in on the leading element of their emotional experience.

YALOM: Yeah, all right, so let's take a few examples of evocative responding. The first one with another couple, Steven and Cassandra, who you're working with.

JORGENSEN: Here, I use the intensity of Steven's defensively blaming-in real time, in the present process-- what Cassandra has been trying to describe to me-- to stick with her and to begin to access her more vulnerable experience.

STEVEN: You grab onto something and you won't let go of it.

JORGENSEN: So what do you call this?

CASSANDRA: He's doing it right now. He's--

STEVEN: And she holds onto that. I'm not mocking you. I don't have the word to explain it, but that's what you do. You grab on to it and hold.

CASSANDRA: I've done it a few times-- you've been mocking me when you--

JORGENSEN: All right, so you end up starting to feel mocked, like humiliated or ashamed or--

CASSANDRA: Yeah, a few times--

JORGENSEN: Like, how does that leave you feeling when this tension gets so high between the two of you and you feel like he turns to-- it sounds like you're trying to shut down the argument in some way, but you end up feeling like you're not heard, you're not understood. And on top of that, maybe you're also being mocked. What is that feeling for you, in the end?

CASSANDRA: It feels terrible. It feels awful.

JORGENSEN: In the next clip, we're looking at Carl and Sandra again. Carl admits this new discovery and Sandra laughs it off. So I recognize this increased emotional intensity as she laughs. So I want to explore what

happens to her as he shares his new discovery. And tenderness emerges here for a moment.

CARL: A really important thing to discover in this last week is I really don't want to lose you. And you know, that--

SANDRA: He doesn't want to be stuck finding a woman who has 10,000 grandchildren he has to deal with. And I don't want to restart finding a man who wants to sit on his boat drinking beer all weekend. That's just out there.

JORGENSEN: How is that Sandra, for you, when he looks you straight in the eye and says, I don't want to be without you, right?

CARL: I don't want to be without her.

SANDRA: Well, this is the first session I've even been able to to look at Carl.

CARL: Yeah. Yeah.

JORGENSEN: To hear him-- yes, you're saying something different is happening. I can look at him. He wants me. He's letting me know he wants me. Yeah. You've been so afraid about that, yeah, yeah. He's handing you a tissue.

SANDRA: Oh, thanks. I'll pretend I need it.

CARL: Yeah, I know you don't. But that's when naps were automated. It's like an AA meeting.

JORGENSEN: Like, you're saying, when I wasn't sure if you wanted me, I couldn't even look at him. It was so awful, the idea that he was going away.

SANDRA: Well, you know, you got to quick build up the walls, so you don't get hurt when he leaves.

JORGENSEN: Right, the wall was all about-- I'd be so hurt if you left. Yeah, 'cause he's really important to you. This is an example where evocative responding is more open ended and based on what I already know from the cycle. This enables Carl to become more aware of his catastrophic fear and where it comes from.

CARL: And not having the cell phone was really good for me, because of the-- I told Sandra-- I said, well, you know, I didn't have to call her and ask her which of the two kinds of peppers she really wants, you know? She said get one of these three, and I got them. I was like, ah, what the hell. I'll get that one.

JORGENSEN: Right, but I think what you're saying is--

CARL: 'Cause I have that terrible tendency to to want to do that. It's like, you

know-- I wanna know which one she wants--

JORGENSEN: Well, you really want to get it right by her, right?

CARL: Yeah, and--

JORGENSEN: And the underlying feeling of that, Carl, is some sense of,

what-- If I don't get it right, what will happen, Carl?

CARL: She may be upset.

JORGENSEN: She's gonna get upset-CARL: As previous wives have been-

JORGENSEN: Right, and mothers and aunts. **CARL:** Grandmothers and aunts and others--

CARL: And I never know what the reaction is going to be--

JORGENSEN: It's unpredictable if I get it wrong. She's going to get upset and I don't know what it will be.

CARL: Yes, and Sandra really isn't like that, but it's-- yeah, it's a lot of years of baggage.

JORGENSEN: It's that fear, right?

CARL: It's that fear.

JORGENSEN: I don't know what's going to happen.

YALOM: Okay, so we're going to see another example of evocative responding with Jon. And as you'll see, he's very defensive in this and other volumes of this series. And he has a difficult time accessing emotions. He fidgets. He exits. He avoids frequently. And here, we'll see Scott using a different method.

JORGENSEN: This is a really good example, because oftentime, clients want to talk about the fight of the day or the fight of the week. And we're trying to get them to explore their emotions in the present process.

So even though this is a past example, Scott is able to bring Jon into-- to experience his emotions. He has him become aware of his body. So he brings him to that awareness in his body, so that then Jon can start to describe what it feels like in his body experience, and then into the emotion, so that Jon has much better access to it.

YALOM: Yeah, and we will see the results, because John becomes much more present and can start to put words on what's happening inside of him.

JORGENSEN: And the meaning of his experience.

YALOM: Yeah.

WOOLLEY: When Lydia for example, says-- Nydia, sorry.

NYDIA: Yes.

WOOLLEY: Nydia says, you pulled the blankets off of me and I get cold at

night-- what happens inside of you emotionally?

JON: That time, or now?

WOOLLEY: Oh, well, that time-- what happened that time?

WOOLLEY: I felt hurt that you couldn't-- I mean, you're blaming me for the blankets getting on the floor. It's not my fault they get on the floor. I don't know how they get on the floor, I'm asleep.

WOOLLEY: You felt hurt.

JON: Yeah.

WOOLLEY: And you felt blamed.

JON: And accused and--

WOOLLEY: Accused.

JON: Disrespected.

WOOLLEY: Disrespected-- where do you feel that in your body?

JON: It would be right in my--

WOOLLEY: Deep inside?

JON: --kidneys.

WOOLLEY: In your kidneys? Like--

JON: Yeah, right there. Yeah, right there-- center deep.

WOOLLEY: And what's it like? Is it like a tension?

JON: Like a--

WOOLLEY: What is it?

JON: What is it like? It's like a pow.

WOOLLEY: A punch to the gut.

JON: Mm-hmm.

WOOLLEY: Wow. Did you know that?

NYDIA: No.

WOOLLEY: A punch to the gut?

JON: That I can't defend.
WOOLLEY: What, wow.

JON: I can't-- I can't-- it's like it already happened. I can't block it.

WOOLLEY: You can't block it. It's already happened.

JON: Already got me.

WOOLLEY: Punched, then you feel like you're, kind of, the victim, or you're not right?

JON: Yeah, yeah, I'm-- hm. Well, I mean, you knock me out. You knock me down. You got me. You knocked the wind out of me.

WOOLLEY: You're walking on me, you got me. I'm-- it's almost like helpless, maybe? It's like there's nothing I can do about it now.

JON: I don't know. There's nothing I can do about it. Yeah, I guess. It's like that's your opinion of me. You judge me that way, what can I say? It's valid. You're right, I'm wrong.

WOOLLEY: There's no way I can be seen. It's like you're right, I'm wrong. And you're not going to change your mind.

JON: Well, I always was trying to reason, talk-- reason, say something. But bam! Shot down right again. It's like bam, bam, bam.

JORGENSEN: And in this final example with Carl, I highlight Sandra's tender responses to his sharing. And that evokes new feelings of warmth and competency inside of him.

Her understanding-- what happens to you, Carl, when she understands? And she says-- I mean a part of me could come up, and part of you can come up and go no, no, no. I don't want to see it. But at first you said, oh Carl, I understand that. I get that. I've lived with that feeling too. I get that. And you look him in the eyes. And you had this tenderness, this tender moment. Yeah? What was it like for you when she could really know and accept those feelings?

CARL: --really important to me. I mean, that really made-- gave me a, sort of, warm-- you know. It is important.

YALOM: So another important aspect of, I think, any successful therapy, is the congruence between a therapist's verbal and nonverbal message. The content of what we say matters, of course, but how you say it is equally important.

JORGENSEN: Yeah, in EFT we have an acronym, called RISSSC, to describe paying attention to, not only the way we say things, but also that non-verbal aspect of our interventions. So we use RISSSC to hold and keep a client in the present moment, and to invite the client into deeper engagement with their affect, and to really use our attunement with them to help them deepen.

YALOM: All right, so you got to tell us. What does RISSSC stand for?

JORGENSEN: So it's R-I-S-S-S-C, so RISSSC, I guess.

YALOM: Okay.

JORGENSEN: So R is to repeat key words for emphasis, use a lot of repetition.

YALOM: So we've shown a little bit of that in just reflection.

JORGENSEN: Mm-hmm, we're going to use images. Images are really powerful to help evoke emotion. They hold a lot of emotion, images do. And then we want to be simple in our language. We want to speak really in everyday language, very simply and respond in simple and concise phrases, slowly.

YALOM: All right, so even though you may have this attachment model, you're you're not imposing that on them. You're finding ways to put things in their language, their images, that are meaningful to them.

JORGENSEN: Yes, we want to use their language, their images, and we're going to be really simple. So we're taking a collaborative approach with them. We're not the expert telling them about their relationship. We're working with them.

We're going to be slow, especially when we're trying to evoke emotion. We're going to risk-- help them move into risking sharing or risking feeling more. And we're also going to slow down. We're going to slow our words. It allows emotion to unfold.

We're going to set the pace of the therapy. And for emotion to work, it's slow. So when we're evoking, or working, at the emotional vulnerable level, we're going to really slow things down.

YALOM: That's especially important when clients are activated, and reactive, and they're fighting and not even giving each other a chance to get in a word edgewise. It's a nice modeling for them.

JORGENSEN: Yeah, well, we may use it for that, but RISSSC really has more to do when things are maybe a little bit calm and we're trying to go deeper. So we will be slow and simple, and using those images to evoke emotion, to create safety. And we're going to be soft too. So along with simple and slow,

we're going to be soft. So if I use a soft tone with you, that invites into deeper experiencing.

YALOM: Uh-huh, yeah.

JORGENSEN: And then finally, the C of RISSSC-- R-I-S-S-C-- the C is for using clients' words. So we are going to repeat, but we're going to try to use the words that represent their experience. And we adapt to them in this way.

So maybe a client says mad. And I use the term angry myself. Well, I'm going to start to repeat-- I will use their word for their experience so that I can be with them. I'm going to try to, as the therapist, be responsive to them. Let them know that I am responding to them by using their words. And this helps us stay really close to their experience.

YALOM: Okay, well yeah, I've certainly seen you use all of these components of RISSSC frequently in the clips, when I see you working with clients. Let's take a look at a few examples where RISSSC is used to deepen primary emotions, or amplify newly emerging positive emotions.

WOOLLEY: And you think that tears, the way he makes sense of the tears is not her fear. 'Cause I can look at her, and talk about her fears of losing you. And those tears are not very far away, right?

NYDIA: Right.

WOOLLEY: I mean, you've suffered a lot. And I think you know I see that to a degree, right?

NYDIA: Mm-hmm.

WOOLLEY: Except that it's bigger than I can even know, I think-- Right? To a degree. I mean, I can see it. But it's far deeper than you've told me, I think. Am I right about that?

NYDIA: Right.

SANDRA: Like, he didn't even let me have my name on our checking account-- we had this big business I ran. You know? He was this silver spoon in your mouth kid. Didn't do anything, he just sat there. My name wasn't even on anything.

JORGENSEN: Right.

SANDRA: And so I was helpless. I had no money at all. Even though we were very wealthy, I'd have to ask him for a few dollars to buy feminine products, you know? It was horrible.

JORGENSEN: Demeaning and so demoralizing.

SANDRA: So helpless, put in a helpless, hopeless situation.

JORGENSEN: So when you say to Carl something like, I don't need your help, you're really saying, I'm so afraid, Carl, that if you see me as helpless, I could end up hurt, again. Yeah?

CARL: I get that.

JORGENSEN: That's what you're saying? All right, can you share that with Carl, what it feels like inside to be letting it in just a little bit.

SANDRA: It's nice Carl, because before I met you, when we were writing back and forth e-mails and everything, it was when I was hoping I'd meet somebody that I could trust. And I didn't think of that word love, because I didn't know about it. But, you know, somebody I could be with and be-- we would be happy and be like children playing, you know? And still taking our own responsibilities for ourselves, but having a sense of independence but of togetherness. I was hoping that that's what it would be.

JORGENSEN: Wow, Sandra.

SANDRA: Maybe that's what it is. Maybe it is already. Maybe it is.

JORGENSEN: Maybe it's here right now?

SANDRA: I just had the curtain closed.

CARL: Mm-hmm.

JORGENSEN: Right, wow, that's big, Sandra.

CARL: What was that line this morning? Living the life-- can't remember--

The Campbell's quotation?

SANDRA: About bliss.

CARL: Bliss-- yeah, yeah.

SANDRA: Yeah.

JORGENSEN: Wow. That's huge what you're saying, right? It's huge, isn't it? I've been dreaming of this really-- I was hoping when we started together that it was this place, that we could be happy together, that we could create new things. We could be with each other, be our own people, and still be together.

SANDRA: Yeah.

JORGENSEN: Yeah, and like maybe this is it actually. This is it right now.

SANDRA: Ah!

JORGENSEN: And it's scary, because I guess I could lose it, right? But right

now you can feel it. Maybe this is it right here. All right.

YALOM: Oftentimes I've seen EFT therapists use touch to soothe. I know Sue does that a lot. And I've seen other of her other EFT therapists doing that as well.

JORGENSEN: We use touch in emotionally focused therapy to soothe and comfort. And we're going to see this clip where I use touch along with RISSSC to help coregulate, to provide some soothing, to help her stay with her present experience, while her history was beginning to flood and overwhelm her-- I don't want her to be flooded or overwhelmed. So I'm going to help her by using touch. So she can organize her present experience and get the vulnerability and the meaning that are just under the surface of her reactivity.

YALOM: Is there a male, female kind of differential there? It would seem, for me as a male therapist, and I imagine for other male therapists, it feels like a riskier thing to do, especially touching a female client. What's your experience with that?

JORGENSEN: Well, I think there is so much more-- male therapists have been so much more accused of inappropriate touch in therapy. So of course, there's going to be a little bit more concern about that. Of course, as a female therapist, I'm touching my male clients and my female clients. Or, maybe I'm working with a same gender couple, and they're both men that I'm touching, both of them.

So I think as far as the effectiveness of using touch, we don't see a difference. But certainly, the therapist has to, maybe, risk trying touching or finding places where they feel comfortable. There are certainly some places that feel much more socially appropriate. Than-- if you would touch-- you touch your friends when you're outside of therapy in a social context, then all of a sudden, we're constricted within therapy. And in Emotionally Focused Therapy, we're bringing ourselves as the tool. And one of the things that we can use, of ourselves, is our ability to move and touch people, and to really be with them.

So yeah, you can, as a male, move into it, take little risks getting closer or asking permission, finding places on the body. I know that with male clients, for example, I will often-- they many times sit with their legs crossed in a way that I can just reach over and touch the foot, or the shoe, actually. So if I'm concerned, in any way, about-- maybe the client's very close to my age, or there's a vibe that I might be concerned about that, I don't want there to be any question about my intention around touching or evoke something in them that would be concerning to them or their partner, then you're going to

read that and pay attention to it. You also might want to challenge yourself a little bit and risk to see what happens if you try using touch.

YALOM: Yeah, okay, it's a good challenge. Okay, so let's take a look at you working with Sandra.

JORGENSEN: So when this pattern flares up, it goes to that place of, oh my goodness, I don't know what to do anymore.

SANDRA: I'm not where I can go and make meals. I don't have to eat out every meal. I don't have to worry-- see somebody not taking care of themselves. Because it's painful to see somebody that-- well, I did love him. I don't even know how I feel about him now.

But it doesn't feel good to watch somebody just not do what-- you know. I took care of somebody who died of cancer. My father died of it. My mother-in-law, I took care of her for-- she was bedridden for a couple years. And I had to go walk up and down with food every time. And I had a miscarriage over it. And I know what it's like to die of cancer.

And you know, at least he could take care of himself. I already told him when I met him. I'm not a nurse. I've taken care of my aunt. I found her dead on the kitchen floor. You know? I mean, I've dealt with dead people and dying people. And I told him I'm not going to be anybody's nurse anymore.

SANDRA: I don't want to.

JORGENSEN: For me, it's overwhelming too. It's almost too much. It's too much.

SANDRA: So I should leave him now while he's healthy and he can find himself a nurse.

JORGENSEN: So when you feel so flooded, overwhelmed, I've done all of that. It was so, so painful. Right? So painful. Sandra, it's scary. Looks like it's so scary.

SANDRA: There was even another one, the father-in-law, they had to cut off his leg. I had to take care of him. Oh, Lord, I'm just-- I'm overwhelmed with it all. But this seems like pity pot. And I'm not on a pity pot. I'm just tired of it all.

JORGENSEN: So, Sandra, when you're the most overwhelmed, right? When you're the most overwhelmed, that kind of comes in on you.

SANDRA: No, thanks. I'm fine.

JORGENSEN: That kind of comes in on you. I see him going out in the sun,

and all of this experience comes up and says, can't do it. Take care of yourself, and I don't want to be there where I get overwhelmed. It's so painful to be--

SANDRA: All these people dying.

JORGENSEN: -- to lose you, the idea I might lose you again.

SANDRA: Well, it's just that I can't take care-- I'm taking cared out. I can't do it anymore. I can't take care of one more sick person. And I told him that when I met him. I'm not a nurse.

JORGENSEN: That's what it meant, when you're not a nurse. It means I've had tragedy, after tragedy, after tragedy.

SANDRA: Well, my mother got paralyzed from the waist down. I was taking care of her. See, there's just one after another. I can't do it anymore. When I see him not taking care of himself, all it says is, oh, god, he's not taking care of himself. He's going to get sick, and all that, and I won't know how to do it, and oh, no.

JORGENSEN: I won't know how to do it. It will be too much for me. It will be too much for me. I won't know how to do it. It will be too much. It's another tragedy. I can't bear it. I can't bear it. That's what it says to you when he doesn't put his hat on, Sandra. All of that emotion comes up, all of that. All right.

YALOM: So together with RISSSC, EFT therapists also use heightening as a way to further intensify a client's experience.

JORGENSEN: Yeah. Once the emotion has been accessed, the objective is to create a more vivid engagement with it. It's through the expansion and the reprocessing of emotion that we can then facilitate new meanings and new patterns of interaction. So ETF research confirms that both client satisfaction and change is facilitated through emotional experiencing. So there's many ways to heighten. Repetition, using those key words and phrases--

YALOM: Like we discussed with reflection?

JORGENSEN: Yep, key words, key phrases that the couple will use that, in their words, that will often repeat. We'll use metaphors and images. They are so full of emotion. And clients will give us images. And we can listen to those, they'll also accept images from us that are poignant like, being on the edge of a cliff, or feeling paralyzed, or in a desert, or a bomb is ticking, maybe they're frozen, or they feel like an alarm is going off, some danger signal.

YALOM: In my experiences, when you have a good image that often clients come up with, you can use it again as kind of like a shortcut. It just explains

the whole experience with a word or two.

JORGENSEN: Exactly. The image is so rich of that experience that you can just offer that image at a key time, and they can, again, access all that emotion that the image represents. And we also will heighten emotions by the way that we respond to the client, our presentation to the client, where we can lean forward. We match their pace and volume.

We can use proximity. So we'll often be on a rolling chair, and move in, move closer. We'll use that focus to maintain the emotional intensity and to keep the work in the present process. Another way that we heighten is to use enactments, having one partner turn and share experience with the other partner. And that really helps crystallize and heighten their present moment experiencing, and their interactional position. So they might say something like, can you tell her that? Can you say that to her again to heighten it and help it crystallize?

YALOM: I know Minuchin used that. I think he developed that technique in family therapy. So it's a similar idea?

JORGENSEN: Yes, about expanding the emotion, the felt sense in the room in the present process. And it it's a very interesting-- kind of an intervention, because often we think of just accessing as enough. But we really want to go and turn up the volume of the emotional experience even more.

YALOM: There's a difference between talking about some experience. It's talking about some need you have, or blaming your partner, and actually turning to them directly, and telling them what you want or how you feel.

JORGENSEN: Yeah, It's very different. And therapists are often afraid of heightening, or not used to using it, or feel a little bit uncomfortable with it. But, again--

YALOM: Why?

JORGENSEN: I think it's new to them to do it, or they wonder, is it too much emotion or--

YALOM: There's so much. There can be so much tension or conflict in the room, they don't want to create more.

JORGENSEN: Yeah, and we're trying to maintain a working distance with that emotion, meaning we don't want the emotion to trigger them into flooding, or to trigger them out into reactivity. But emotional experiencing—the clients will evaluate the session in session evaluation that more emotional experiencing gives them more satisfaction with the therapy, and it's also is what really facilitates change.

YALOM: All right. Okay. So let's take a look at a few examples of using heightening in sessions.

WOOLLEY: She doesn't want to need anybody, right? How come? How come she doesn't want to need anybody?

NYDIA: She's going to get hurt again.

WOOLLEY: She's going to get hurt again. So if I risk, and I allowed myself to ask this man, then he's not there, I'm just going to get burned again, is that right?

NYDIA: Yeah. I'm going to get rejected, and I'm going to end up alone again.

WOOLLEY: I see. Right. Right.

NYDIA: So I'm afraid to ask him. He's going to get mad.

WOOLLEY: Right. You're afraid of asking him because he's going to get mad. It's like being a teenager all over again, right?

NYDIA: Right.

WOOLLEY: Or, a young adult even, right?

NYDIA: Right.

MARK KAUPP: Because when he leaves you then, that devastation is so awful. It's so awful, that you say, okay, I'm not going to allow myself to even expect to even long. And you keep yourself guarded, and you keep yourself protected as much as you can. But then you have these experiences, that as much as you try to protect yourself in that way, that he still gets in. And a longing still happens.

And the hope, and the expectation that he's going to be there still shows up. And the need for him to be there still shows up, that longing for him to be in the pit with you still shows up. As much as you fight it, it still comes in. And then it's like you look for him. Is he with you? Is it safe to have this expectation, this longing? And when he's not there, or it doesn't look like he's there, and you can't find him, oh, how awful that would be. How terrifying that would be. What's happening, Shelley?

SHELLEY: It started to drift me back to feeling when that happens. I was going down that journey with you. I somehow feel bad about myself, and that makes me really sad--

LISA PALMER-OLSEN: Yeah.

SHELLEY: --that I feel unworthy--

PALMER-OLSEN Yeah.

SHELLEY: I feel bad, like why is this happening in my life again?

PALMER-OLSEN: Right.

SHELLEY: Why? Why aren't I worth it?

JORGENSEN: Can we explore that place a little bit, that fear that comes up

for you, Steven?

STEVEN: Mm-hm.

JORGENSEN: Yeah? Where do you feel that, and what happens with this idea that-- this sense of, oh, I see us, where it's a better week, we're partnering, and we're making changes in ways. But I don't want to draw attention to it. I don't know. I could make it worse somehow, or I could be left alone again. Yeah.

STEVEN: Well, yeah. It's just the same stuff, where you just feel empty, feel alone. And I don't want to feel like that. I desperately don't want to feel like that. That's not the life that I wanted to choose. So I think those are the feelings that come up with me.

JORGENSEN: It's that desperation that comes up for you. When you start to notice you're not alone, that desperation can come up, because you don't want to be there. All right. That desperation, that's that really lonely alone place you've known for a long time. But when you guys first got together, it was resolved for a while. And then it's so scary, like could we lose it again somehow?

STEVEN: Yeah.

JORGENSEN: All right. I didn't know that she really understands that, what it feels like for you to want so much, to not only get it right, but to not be left alone, and to feel that deep desperation that's been with you for a very, very long time. And you help-- maybe if you help me understand it a little bit, describe it a little more, you can share it with her in a way that she might understand.

STEVEN: I'm trying to think of a way-- the swimming metaphor, where you're just out of breath, and you're like-- but that's not really helpful.

JORGENSEN: That was so beautiful last time, right?

STEVEN: Yeah. It's like--

JORGENSEN: That was the perfect metaphor, because when you're surfing--

STEVEN: You're just under water, and then you come up.

JORGENSEN: I'm under water.

STEVEN: But it's the opposite too, like I think that desperation is wherelet's say--

JORGENSEN: I have to be under waiting.

STEVEN: Yeah. Well, if you get crushed on a big wave or something like that, and it holds you under water.

IORGENSEN: Yeah. I'm not down here because I want to be.

STEVEN: Right. There's nothing you can do. You have-- basically, it doesn't matter how much breath you took before you got crushed under. You know what I mean? There's nothing you're going to be able to do to come up and get that air, other than relax, cover your face, or if you hit the bottom, you don't crack your face, but just get tumbled, and just wait until your body just naturally just comes to the surface. And then you can get a breath, and hope that another wave doesn't crush on you.

JORGENSEN: So this is almost that--

STEVEN: That's that feeling.

JORGENSEN: --so painful crushing place.

STEVEN: It's more like I don't have any air in me, but there's nothing I can do about it so I can't fight it. You just got to wait for it to allow you to pop up. And when the opportunity comes, you take a breath.

JORGENSEN: Is that that blank, frozen spot? Is that that blank, frozen spot that happens? I'm just being crushed. I'm under water.

STEVEN: I just have to wait it out.

JORGENSEN: I can't do anything.

STEVEN: Yep.

JORGENSEN: That's also this, if I wait it out, if I can wait long enough, maybe I won't be so helpless here. I'll find a way out of this incredible aloneness, and isolation, and crushing. I've been crushed by waves before. It's painful. It's painful. You can't take a breath because it hurts too much, right? There's nothing there to breathe. It would hurt more if you breathed in some way, right?

YALOM: So I notice with Steven, you're really working hard to try to get him out of his head and more into the moment, into the present process.

JORGENSEN: Yeah, Steven is very intellectualized. He does a lot of

intellectualizing. So at first, the imagery actually gets him more into his head. And then it takes a lot of work, in this case, using repetition, and the images, and his own metaphors to help him feel that I get him more and to reach a place where he can settle in and become more tender, and have more experience in his emotion.

YALOM: Mm-hm. So one more tool that is sometimes controversial in the therapist community is the empathic conjecture or interpretation, where the therapist infers from the client's current experience, or from their non-verbal, what we think they're experiencing.

JORGENSEN: Yeah, it is controversial at times. People will complain about that, or say we're putting words in the client's mouth. We're leading the clients, or putting words in their mouth. But really, these interventions are often based on the therapist's knowledge of the attachment process in the couple's relationship, and inferred by the context of what the clients have already expressed to us and out of our attunement with them. So these are exploratory responses to enhance, and focus, and move clients into the leading edge of their experience. And we give them in a very tentative matter. So we're open to correction by the client. From a good alliance and through attunement, these conjectures really help clients to have more contact with their own experience.

YALOM: Mm-hm. Yeah. So you're observing or sensing something within them and offering it as a suggestion. They can either say you're right, or they say no, that's not it. So do you only offer conjectures on their emotional experience or other things?

JORGENSEN: Yeah, we conjecture on emotional experiences, and we also will conjecture on pieces of their interactive pattern based on our understanding of their attachment needs, and fears, and how primary and secondary emotion works, something like-- then if you don't know how to share these vulnerable feelings, the thing you end up doing is getting mad.

YALOM: Okay. So let's take a look at some examples.

JORGENSEN: Yes, and let's notice how conjectures are done in a very tentative manner, keeping it open for the clients, and then the first two clips to disagree and to clarify.

WOOLLEY: So what happened then in the waiting room? Did you ask what she was reading, and did she pull the--

JON: No, I just-- I started looking. **WOOLLEY:** Then what happened?

JON: I don't know. It seemed personal or something, Nydia, how you feel, or something? What?

NYDIA: Reading an article.

JON: With her personal name in it.

NYDIA: Yeah.

JON: How do you feel, Nydia? Phone is like away-- who's this asking her?

WOOLLEY: What happened when you saw that? And then does she just give you the phone and say, here, look, or does she pull it away?

JON: Then I just try to reassure myself because I was just tired. I want to go on your shoulder just to take a nap.

NYDIA: Take a little nap. **JON:** And she liked that.

WOOLLEY: She said, you got tired. You got tired. but Jon, Jon, when-- I guess I just can't help but wonder if somehow some kind of maybe fear came up, and you saw that, and she didn't want to share with you?

ION: More like an irritation.

STEVEN: It's not my job. It's a job that I have to do for us and for the baby. And there are certain things that I have to do for that, or it's not because-yeah, I like the house clean. But you know what? There's a hygiene issue. You lose things all the time, and that creates a chaotic situation that then stresses everybody out, and it creates an argument. So if we keep the house clean, we can prevent that. So there's all of these things that need to get done.

JORGENSEN: There's these ways that you keep in mind-- how's this system going to run smooth, the big picture-- and maybe I don't like in any one moment feeling, like I'm the guy running around doing all this stuff. But I keep the big picture in mind that I'm remembering, that I want a partner, and I want to be a team, and I hope that it's me that she really wants. So in that peace, respect, and dignity, what I think I really hear you saying is, Becca, I get a little afraid, maybe, at times, that does Cassandra really want me, Steven, as her partner?

STEVEN: I don't think he was even afraid. I think I get-- I'm to the place where I'm sad. I'm sad because I'm alone. I feel alone a lot, and isolated.

WOOLLEY: Do you explain things, or he's opposed, or if he gets upset-- my sense is, is yeah. You get irritated, and you fire back, or you fire, or whatever. It doesn't matter which one starts it, okay? The real iss-- because it's not about

that. It's about the pattern itself. But my sense is that this man of yours is so important to you that this is critical, right?

NYDIA: Mm-hm. Yes, it is.

WOOLLEY: And if I'm getting this right-- and I'm taking guesses, but you tell me if I'm wrong-- that really, underneath, it gets really scary.

NYDIA: Scary. It is.

WOOLLEY: Yeah, you've invested a lot here, just like he's invested a lot. Both of you invested a lot.

NYDIA: Right.

WOOLLEY: You guys get scared. And then all of a sudden, wham, wham, wham.

NYDIA: It's horrible.

WOOLLEY: It is horrible. The one you love, the one you want to spend the rest of your life with is all of a sudden the enemy rather than your friend. It's like he's going to hurt me. She's going to hurt me. She's going to judge me. He doesn't understand me. You guys get scared. Am I getting that right?

NYDIA: Mm-hm. Yes.

WOOLLEY: --how you guys are missing each other?

NYDIA: What happened?

WOOLLEY: You're missing each other. What do you need from each other right now? What do you need?

JON: Respect, love.

WOOLLEY: You need to feel her respect and her love. Okay. Well, what do you need from him right now?

NYDIA: I--

JON: To drop my religion.

NYDIA: No, not that. But I just want him to think before he starts just climbing up.

WOOLLEY: Somehow it's about-- my sense is, is that somehow you don't feel seen right now, and you don't feel understood.

NYDIA: I'm invisible right now.

WOOLLEY: You feel like you're invisible.

NYDIA: Like I'm nobody, just the same.

WOOLLEY: Like I'm nobody.

YALOM: So let's switch now to the second task of an EFT therapist, which is to help restructure the interactions between the partners.

JORGENSEN: Yeah, so we're looking now away from the psychic interventions to the interpersonal interventions.

YALOM: One of the interventions used in that task is called tracking and reflecting patterns of interactions.

JORGENSEN: Yeah, tracking and reflecting enables us to slow down and clarify the process of the interaction and identify the recurrent patterns. First, we identify the negative cycle of interaction between the couple. We focus on the prototypical moments that are significant in attachment terms, such as greeting, fighting, needing comfort, isolating from each other, from recent incidences. And then we move to interactions within the session. Tracking and reflecting usually starts with something like, what just happened when, or you said this, and then to the other partner, you said—how do you feel when he talks about this in this way?

YALOM: All right, so you're noticing. You're really paying attention to how the partners communicate with each other in the session, what kind of patterns there are, and are reflecting that back to them.

JORGENSEN: Yes, how and when, and then also maybe why, what the underlying feelings are. So we're tracking the interaction within the present process based on what we know about their overall pattern of interaction that we assessed in Step Two. So we're looking for those responses or reactions over time where it becomes complex. We track those perceptions, their emotional responses, and their interactions that occur in front of us and the present process.

YALOM: It seems to me an advantage of doing that, similar to group therapy, which I have a lot of experience with, is that if the couple is reporting to you, what happened in their fight, they're each having their own perspective of it, and you really don't know what happened. But when you observe them interacting in the session, I mean you see how it gets played out, how they interact each other, or one person rolls their eyes, or whatever it is they do. You see it right there, and then you can accurately reflect back to them what's happening.

JORGENSEN: Yeah, and that's so important, because we're another set of eyes seeing what they don't see. They don't see their impact on each other within

this pattern. And so it really helps to slow things down and elucidate what's going on between them.

YALOM: Okay. So now let's see a few simple examples of tracking and reflecting with our clients.

JORGENSEN: You get irritated.

CARL: Yeah, I get irritated.

JORGENSEN: And sometimes you might shut up.

CARL: Yeah. Sometimes I might snap back. And then it just-- it escalates a bit. We do not get into generally screaming at each other or anything like that.

JORGENSEN: Right. You both watch that.

CARL: We're civil in that.

JORGENSEN: So you might snap back. And then what happens?

SANDRA: I can never get through. See, part of the problem is when we first got married, I thought, oh, no. I'm now in the mother role. He can't remember anything to pick up after himself. He can't remember that he has to go to the doctor's. He can't remember any of this stuff. I'm supposed to remind him about everything. And I told him, I didn't get married to be somebody's mother. I've had kids. So that irritated me. So when these things happen--

JORGENSEN: You're already irritated.

SANDRA: Yeah, it's irritating, because he hasn't lived in an RV. He hasliving on a boat, it's a whole different world, 12 volt and all his stuff. You have to be careful, or you get ants, and roaches. There's all kinds of things. So I can't get it through my head, why can't he just follow these simple-- they're rules, because I don't want ants and roaches in the thing.

I don't want to have to go get milk for my cereal and find it's gone sour because he keeps putting it up top instead of down below. I can't understand it. It's not rocket science. So I start thinking, he's doing this on purpose to aggravate me. It's called passive aggressive behavior. That's what he's doing. And I started thinking, boy, I don't want to be in a passive aggressive relationship. I was happy alone. I don't need this bullshit. Oh, I don't need this crap. Oh, no. That's worse.

JORGENSEN: No, that's fine.

SANDRA: I don't need this baloney.

JORGENSEN: All right. So if he snaps back at you, then for you, it gets more tension, and along with that, some confusion, like why is it a big deal? And at the same time, why is it a big deal-- I don't need this extra stress. I don't need this BS. I don't need this crap. Why can't he just go along and take care of these things? I don't want to be in the mother role.

FARRAH: Right, right. And it wasn't that I needed your help. I was just stating merely that we needed to do certain things.

DREW: In regards to Dylan's trip.

FARRAH: And all his school activities coming up, we had places to--

DREW: But I was talking about with the chart. When I said I will help you make copies, and what did you say? You said you didn't tell me for me to do it, right?

FARRAH: Right.

DREW: But you just told him you did tell me because you wanted my help. You were--

WOOLLEY: Okay, can we slow down here just a little bit here, because this is the way it goes, right?

DREW: Right. **FARRAH:** Right.

WOOLLEY: Except--

DREW: I take things too literally, I guess.

WOOLLEY: Okay, well maybe. I don't know.

FARRAH: And I know he needs things super short and clear. It's like Drew, folder, Drew, copies. I can't talk about a day or have a conversation. And then he gets lost.

WOOLLEY: Okay. So I want to slow it down a little further. Because what's interesting, as I'm watching this, let me just tell you what I see--

CASSANDRA: Okay?

WOOLLEY: Okay. If that's okay--

FARRAH: Absolutely.

WOOLLEY: Yeah. I do see you both getting frustrated. And I see you trying to-- I see you keep trying to clarify what you meant and why you're frustrated, which is related to the fact that you heard one thing on Sunday,

you heard another thing right here in terms of what she wanted.

DREW: Right.

WOOLLEY: And that doesn't-- and that's like-- wow.

DREW: Conflicting feeling.

WOOLLEY: Yeah. It's conflicting and it's upsetting.

DREW: Right, because why didn't she just say what she wanted instead of--

WOOLLEY: Well--

DREW: Kinda, you know, men are from Mars, women are from Venus--

WOOLLEY: Okay, yeah. So it's hard to-- well, why didn't she just say what she wanted? And it's confusing. And what happens when you get confused, as you do get irritated at times, right?

DREW: Right.

WOOLLEY: And typically, what I think what I saw right there was as you were trying to point out where the discrepancy was, right?

DREW: Right.

WOOLLEY: That's kinda the strategy, it's kind of okay, I'm going to try to be clear here and show you why it is that I'm frustrated, which has to do with my perception of what you've said.

DREW: Right.

WOOLLEY: Right, so do you use that strategy a lot with her when there's a conflict?

DREW: I wouldn't call it a strategy.

WOOLLEY: Well, I know you don't think, oh, strategy number 26. I'm going to use it. I mean, does that happen a lot in terms of the pattern?

DREW: Yeah. Not just with her, with anybody. I think I have a good memory, and I know what I heard, and it sinks in, and I know what the words were said.

WOOLLEY: And you do tend to take them fairly literally.

DREW: Sure.

WOOLLEY: Okay. It's okay. Some people do, and some people take things more figuratively.

DREW: Right.

WOOLLEY: But you do. And my sense is over here you're not feeling understood, and it's painful. And because I saw the frustration, and it was almost like-- did you feel like you had to defend yourself?

FARRAH: I feel like I defend myself all the time.

WOOLLEY: What you need is-- and actually, you probably just need something-- maybe you need some protection. In other words, if the caterpillar cocoon is on a stick, and the stick is just sitting in the middle of the road, you may want to move it, or you may want to just have a shelter around it, or whatever, right?

NYDIA: Right.

WOOLLEY: Just to make sure nothing comes along and eats it, right?

JON: Or, a little smoke gets on it, especially tobacco smoke.

WOOLLEY: Now where did you just go?

JON: No, it's for real. It's a good analogy. You ought to give it healthy leaves, not junk food leaves.

WOOLLEY: Right. That's true. But what does she need?

JON: Nurturing. Loving.

WOOLLEY: When he goes to adding smoke and junk food into the metaphor,

what happens?

NYDIA: That's a jab.

WOOLLEY: That's a jab.

JON: That was a funny jab, a little tap.

WOOLLEY: It didn't work.

NYDIA: No. He's so into nutrition. But he doesn't eat either.

JON: Yeah, I do. I eat all the time.

NYDIA: No, no. He thinks that what he eats is-- he doesn't eat.

WOOLLEY: Whoa, whoa, whoa, okay. Are you going into criticizing him?

NYDIA: Uh-oh, see? There you go.

WOOLLEY: Okay, it's happening right here and right now, right?

NYDIA: Right.

WOOLLEY: You were feeling hurt because he threw back, and he's committed that he's not going to do it. And all of a sudden, he threw back in, the smoke,

and the-- And then you went into, well, yeah. He's into nutrition, but he doesn't follow it. And then you're starting into criticizing him, right?

NYDIA: Yeah.

WOOLLEY: Yeah. We got to stop. And then you end up feeling disrespected. If she kept going, right? You'd feel disrespected, and you might hold on, but then you'd get really angry, eventually. And you guys are off to the races.

YALOM: Those look like demonstrations of pretty simple tracking of interactions. So now let's look at some more complex examples.

JORGENSEN: The next clip is an example of tracking Sandra's part of the cycle to work with her primary emotion in a place where they get stuck together. And this is around her sense that Carl doesn't care for her because he doesn't respond to her in the way she expects him to.

YALOM: Okay.

JORGENSEN: I use her positive intention to organize the negative cycle, to keep my alliance with her, and to support her experience. So when he's sharing out loud, the message you get is I'm not sure he does care about me. I'm not sure he cares about me. And if he'd cared about me, he'd pick uphe'd know sooner, or something happens right there for for you-- like it's so hard to tell him, "Carl, I don't feel good. Can we go to some place? I don't feel good."

SANDRA: He already knew that. He knows I haven't been feeling good, because normally, I'm not a bitcher about health or feeling bad. Normally, I just plow through it.

JORGENSEN: Right, so there's this part. This is a tricky part. So I'm wanting to really understand it, because you're describing-- you have Carl on your mind, and you're trying to find these ways to let him know you care about him, whether it's go to the casino, or go play together, go to Indian food. We're anticipating.

Carl, Carl would like this or that. Let's do something fun together, right? Let's make our time together happy. So on one hand, because that's how you care about him, by anticipating one of these likes. And on the other hand-- and so that's also what you really miss. Yeah. I want to know that he's thinking about me too, and anticipating, caring about me, where I'm at, what makes me comfortable. Yeah? Am I getting that right?

So it would be harder to say-- you would have to more consciously think about saying to Carl, "I know you would like Indian food. And I feel bad that we can't go have Indian food because I don't feel good tonight," because you

would so much rather put what he needs first, what he would like first. That's your way of showing that you care about him.

And here's another example of complex tracking, where I track cycles of interaction and the consequences of the cycle. The complexity is also due to the complexity of their cycle because they both use pursuing and withdrawing attachment strategies. One thing to notice here is I talk to each partner about their part of the cycle. This is a good way to maintain balance and alliance, talking to each partner rather than about one partner to the other partner.

You guys had a cool conversation. Last weekend you came in and said, "I'm getting the impact I have on Carl. I hate it when he goes away, but I'm seeing that when I move into critical, or when I move into what to me just is being assertive, or what to me is holding my ground, that he feels then left out, and like he has to perform, and he avoids me. And I don't like it when he goes away," right? And when he goes away, you get afraid too, because that's the worst. You said the other day, that's the worst possible thing, is if he goes away. But when he goes like this, it's like he's gone away, right?

SANDRA: Right.

JORGENSEN: And then you move back into, what can I do for Carl, right? I'm going to plan a trip. I'm going to fix him a special dinner. All the sweetness comes out, right? And then you're thinking, well, when I'm doing that, why doesn't he consider me? That's one way that you guys get into trouble, right?

She's doing something for you. And you're like, okay, finally. Well, I get a little voice here, because you're suppressing that all the time. And then when his voice comes out, it's like he forgot all about you. And you're back to being unassertive, and like you don't matter, and he's not considering you, which makes it all the more likely you're going to get more critical. As she gets more critical, you go away farther. And the by product of going away farther is then you also are going to come back in this manipulative way-- or this assertion way-- of, well, but I want to do this. Let's do this. Let's do that.

YALOM: Now we'll introduce the idea of reframes. ETF therapists use a lot of reframes, which are used to shift the couple away from the negative and place conflict in an attachment context.

JORGENSEN: Yeah, the attachment view is a reframe in and of itself. So there's these different types of reframes that we're using. And the first one is that the negative cycle is the enemy, that it's not about the partner's personal deficiencies. It's about the interaction. It's about the inter-personal cycle. And that provides us context for the couple to come together and fight against this

common enemy.

YALOM: So what's the purpose of doing that? It's externalizing the conflict in a way.

JORGENSEN: It does externalize the conflict. It pulls the couple together, and it really privileges the attachment.

YALOM: How so?

JORGENSEN: Because the context is why they're fighting, and helps them pull together. And that keeps the relational bond as primary, as central, and primary to what's really important about what's going on.

YALOM: Okay. So let's see some examples of that.

WOOLLEY: So we talked about then when things are bad, it's easy sometimes still for you to get upset.

NYDIA: Yes.

WOOLLEY: Rather than slowing down, figuring out what you really need, figuring out if he's available, and asking.

NYDIA: I don't ask, actually, just go into a little shelter, and then avoid him.

WOOLLEY: And then what happens to him? He feels rejected.

NYDIA: He feels rejected.

WOOLLEY: It hurts.

NYDIA: It hurts, and then he retaliates.

WOOLLEY: And then he can get reactive, retaliate. And then what happens to you?

NYDIA: And I end up alone.

WOOLLEY: Because you feel hurt, and you get more scared, and you pull away.

NYDIA: I pull away from him.

WOOLLEY: And then he feels more alone, more hurt, right?

NYDIA: Yes.

WOOLLEY: And he gets more reactive-- not always. And so the cycle goes. Boom, boom, boom, boom, boom, boom. All right, that's the enemy. That's the enemy, is that cycle, what you just described.

NYDIA: That's the enemy.

WOOLLEY: That's the enemy.

JORGENSEN: Another version of the cycle is the enemy reframe, is the cycle is a fight for connection or for secure attachment. The couples' distress is framed not only as a struggle against the enemy of the negative cycle, but as a struggle for secure attachment, for more connection.

YALOM: That's a non-pathologizing, even a positive way of reframing it.

JORGENSEN: Yeah, because the attachment frame is positive. And our need for each other and closeness is positive. So the reactive behaviors are viewed as normal reactions that emphasize how crucial attachment is.

YALOM: Okay, so let's take a look.

NYDIA: But I wanted you to react.

JON: Why push my buttons, you know what I'm saying?

NYDIA: I did. You know why? Because when we were coming in the car, and you said, shhh, they want to hear it. Okay. So I let you-- let me do the same. I'm reading something. It's the same thing.

JON: No. It's not. It's not.

NYDIA: If I want my moment to read something, an article or something, I can do it.

JON: Oh, yeah. There's breaking news. They caught-

NYDIA: He doesn't let me do anything. That's why I'm not doing real estate or going to school because everything, every moment he wants to do what I'm doing. If I feel like resting, I can't even rest because he's like--

WOOLLEY: Well, wait a minute here. Nydia--

NYDIA: Really.

WOOLLEY: Nydia--

NYDIA: Really, he suffocates me.

WOOLLEY: Nydia, that's important.

NYDIA: It is.

WOOLLEY: That's really important, okay? Yeah. You feel suffocated.

NYDIA: I feel very suffocated.

JON: That makes me want to give her her freedom. I'm out of here. I'm gone.

WOOLEY: Jon, Jon--

JON: I feel like I'm suffocating you.

WOOLLEY: Jon, Jon, Jon--

NYDIA: See, he takes it so personally. He doesn't understand.

WOOLLEY: So let's slow down.

NYDIA: You don't understand.

WOOLLEY: And yet you two are so in love with each other. You are.

NYDIA: It's crazy.

JON: And there she feels that way--

WOOLLEY: Oh, well, wait a second here. That is why she feels that way.

NYDIA: Mm-hm, that's why.

WOOLLEY: Because if you weren't so incredibly important, it wouldn't matter. She wouldn't care. She's just tell you to bug off, right? That's why you get-- not that she's handling it the best way, but really what's going on is she's deeply in love with you, and she's terrified of losing you. And so she ends up feeling suffocated because she doesn't know how to let you know what she needs, right? At least, it's hard.

NYDIA: I don't know how to tell him.

WOOLLEY: You don't know how to tell him. And you don't know how to be direct.

NYDIA: Yeah. I hide.

WOOLLEY: You hide.

NYDIA: Because I don't want to be hurt.

WOOLLEY: Yes.

YALOM: I've noticed you look at couples in terms of one being a pursuer and one being a withdrawer. Can you say briefly what that is?

JORGENSEN: Yeah. There's some general types of cycles and positions in that cycle that couples take. And the most common one is the pursue/withdraw pattern.

YALOM: Okay, so a second type of reframe is a withdrawer reframe.

JORGENSEN: Yes, withdrawers—the reframe is that withdrawers withdraw in an attempt to regulate their emotions and protect their relationship from further negative escalation.

YALOM: All right. So you try to understand, again, why they withdraw from an attachment perspective rather than how their partner sees it, which ishe's trying to escape, or he's trying to irritate me, or he's shut down--

JORGENSEN: Or, he doesn't care about me. He cares more about himself. He leaves me at these moments when I really need connection.

YALOM: Right.

JORGENSEN: So the reframe for the withdrawer, of course, based on attachment science, is that the withdrawer does withdraw to regulate their own emotion and to protect themselves and their partner from more fighting, from more escalation.

YALOM: We'll have a chance to see how this looks in two different excerpts, one showing Jon, and then with Carl. And both of them are withdrawers.

WOOLLEY: When he goes off to a motor home, you feel abandoned, and you feel rejected.

NYDIA: Rejected.

WOOLLEY: And that just ties into something so deep, and so long term.

NYDIA: It makes me upset. And it stresses me.

WOOLLEY: Really stressful.

NYDIA: Yeah. It just takes away my energy.

WOOLLEY: All right, it's like, wait a minute here, the most important guy in the world here, right? I know your son, but this is different, right? And he's leaving you. And everyone leaves me. So there's that dynamic. And that usually doesn't happen until you feel disrespected.

NYDIA: And he leaves.

WOOLLEY: And he leaves to avoid the fight. You leave to settle yourself down because she's so important. You don't want to make things worse. That's why he's leaving.

JORGENSEN: It's like you're dancing in close connection, and it's easy to trip up on each other, right?

SANDRA: If you didn't care at all.

JORGENSEN: If you didn't care. That's right. But I think what I'm hearing from you, Carl, is when you go and avoid, or distance, it's not, not, not because you don't care. It's actually because you care so much. You're worried about getting it wrong.

CARL: Yeah. Yeah. In a word, yes.

JORGENSEN: So that's what we'll keep fighting against, that place.

YALOM: So I suspect that there are also pursuer reframes.

JORGENSEN: Pursuers, behavior is critical. Blaming, often controlling-- and that behavior, the reframe around that behavior is that it's an attachment protest. It's a reaction to the unavailability or the non-responsiveness of their withdrawing partner, and an attempt to pull the other close. In attachment terms, any response is better than no response at all.

YALOM: All right. So again, from a pursuers perspective, they're just trying to make contact.

JORGENSEN: Yes.

YALOM: But the withdrawer, may see their behavior, as nagging, or demanding, or criticizing.

JORGENSEN: Complaining.

YALOM: Yeah. So let's take a look at this.

JORGENSEN: And what happens for you when you're worried about that, right?

CASSANDRA: Then I start to feel sad because I feel like if you're not going to take it seriously, then I that makes me feel discouraged about our relationship, and makes me feel discouraged of our attempts to try and work this out.

JORGENSEN: Right. And when you get more discouraged, what happens, Casandra?

CASSANDRA: I get-- well, on the inside, I get sad. But I think on the outside, I get angry.

JORGENSEN: Right, when I'm the very most sad and discouraged is probably when I blow up the most, show you anger. I'm fighting to not be in this discouraged place. I'm fighting to keep trying to get contact with you.

SANDRA: So here all of a sudden, it's fighting, the same thing. Oh, Lord, I have to be his mother. He forgets his hat. He-- never-- I don't know-- maybe once he's put the cream on when I finally-- I have to almost have a tantrum for him to take care of himself.

JORGENSEN: Right. And when you feel like you have to have a tantrum, that's when you start to close off and go farther away yourself, because then you hit that angry spot that you don't want to bring that energy into the relationship that we were talking about last week? And you'll go away?

SANDRA: That's when I see how it's hopeless. It's hopeless. Oh, God, he's out without the hat again. And I already told him the other day. Guess what? There's a pimple there where I first saw the first one. There's no--

JORGENSEN: So some sense of--

SANDRA: If I didn't care about him, let him get skin cancer. Screw it. I don't give a damn. Let him die.

JORGENSEN: Right. I'm pointing those things out to him because he matters to me, because I want us to be together. I want us to work it out. Yeah.

YALOM: Finally, a third and very important tool that EFT therapists us is enactments. We talked about them just a minute ago in terms of heightening emotions. Now we're going to discuss enactments in terms of restructuring interactions. So refresh our memory. What exactly is an enactment, and what's the purpose of it?

JORGENSEN: Much of the therapy is being run through the therapist. And an enactment is when we invite the client to turn and talk directly to their partner. And much of the clients' sharing with each other is done at the therapist's prompt, which is an enactment. So enactments are really critical in helping the therapist to choreograph new interactions between the partners, and therefore, help redefine the relationship.

You can enact present position, turn new emotional experience into new interactions, or highlight rarely occurring responses, like a positive response to something that would formerly or usually trigger the negative cycle.

YALOM: Okay, so when do you use them?

JORGENSEN: We use enactments beginning early in Stage One. We use them for assessment, and then to access primary emotion. We'll also use them to help couples begin to take emotional risks with each other, to send a more clear signal, and to help them get the attachment reframe so they can deescalate.

And then in Stage Two, that's when we use enactments with deeper emotional experiencing to restructure their experience of self, and their experience of their partner, and to change the negative cycle of interaction into the ability to be emotionally accessible and responsive to each other.

YALOM: In some way, it's a way of getting them to practice a new skill.

JORGENSEN: Yeah. It's a way for them to begin to take emotional risks in ways that they wouldn't really know how or that are different than what they do in the negative cycle. So being really vulnerable with each other, turning

and sharing when they're feeling those things right in the present moment. So there are three phases to doing enactments. The first-- at first, we have to prepare for the enactment.

So we're going to set the context of that. So Johnson talks about that it's key to make enactments evocative, and to focus them on sharing the primary emotion. So we are wanting to share something that's new, or different, or deeper in their experiencing. So we're going to create a context as an introduction to the enactment.

We're going to build the intensity of the emotion by bringing that emotion experience into the enactment, either something that's emerged spontaneously, or that we've deliberately heightened by the therapist, and also to help the client imagine what it would be like to do the enactment. We give them the opportunity to warm up and express their fears.

YALOM: So you are setting them up. You're giving them a lot of support. And then you prompt them to actually do the enactment.

JORGENSEN: Yep. After we prepare them for that, then we invite them to use their own words so that they can share a clear, coherent message with their partner. And we often will be really specific in our request for them to enact. We might say something like, Carl, could you turn to Sandra, and tell her about this fear you've been describing to me, this fear of disappointing her?

So in Stage One of EFT, it's really common, and it can be expected for the enacting partner to become reactive. It's risky to turn and share. And when they feel the fear, they go automatic into their reactivity. So it's important that the therapist maintains the focus, blocks, deters, or exits, and contain the escalation.

YALOM: So how do you do that? How do you manage that reactivity and prevent the escalation? Because you're not wanting them-- one of the goals that I assume-- you're not wanting them to repeat their pre-therapy pattern. You're wanting them to make some changes, to do something different.

JORGENSEN: Yes. We're working on setting up corrective emotional experiences, really.

YALOM: Yeah. It's another way of thinking about it.

JORGENSEN: In little bits. So framing the escalation in terms of the risk is one way that we can slow that down. And paying attention to the emerging fear, or the attachment insecurity that they have that's fueling this reactivity, that helps to contain the escalations and encourage them to enact.

YALOM: And then the last phase is processing the enactment.

JORGENSEN: Yeah, so after the partner enacts or shares, then we're going to process that with both partners. And it helps to validate and put any resulting reactivity into context of the negative cycle, because the partner can be reactive at hearing the enactment as well.

YALOM: So processing it would be something like-- after you have Sandra say something you Carl, you might say, what was that like for your to turn to him and say-- was that an example?

JORGENSEN: Yes, exactly. What was it like? And then also turn to Carl and say, Carl, what was it like to have Sandra share with you? And they will be specific too, because it gives us an opportunity for repetition.

Sandra, what was it like to share with Carl that you're sad and lonely when he goes away, that you want his closeness? What was that like? And then to Carl, Carl, what was it like to hear Sandra share this feeling of sadness, about not being close to you when you go away? So it gives us also that we're processing it. And gives us an opportunity for repetition. So we do process that enactment with both partners. And then in Stage Two, we can expect that we're going to be processing fears about making the contact, making the contact, and facilitate the acceptance of the observing partners.

It's a little bit different in Stage Two. In Stage One, I just want to say what happens when you did that, and what happens when your partner shared that with you. In Stage Two, I'm really wanting to facilitate acceptance of the observing partner. So I may say, what happens? And if they're reactive, I may say, does a part of you understand that, or can a part of you feel that, what your partner just shared? So it gives us an opportunity to facilitate promoting acceptance of the observing partner.

YALOM: Well, one of the things I like about this, and I think is integral to any effective therapy, is you're trying to find moments in the therapy that are alive. So whether it's working with a feeling that's emerging, working with an individual, or you're doing an enactment where you're involving both of them, you're trying to get new material and new behaviors happening.

Otherwise, clients, individuals, or couples can just come in and tell you the same old stories. And couples especially, that's a risk, that they'll just want to have the same old fight all over again. So you're really trying to establish some new--

JORGENSEN: New experience.

YALOM: --new experiences, new neural connections--

JORGENSEN: Yes.

YALOM: --et cetera. So but it's risky when you do that.

JORGENSEN: It's new. And anything new is unknown and risky.

YALOM: Yeah. So what are some typical or common mistakes a new EFT therapist might make in terms of setting up an enactment.

JORGENSEN: Well, one common mistake is prompting an enactment before the client is experiencing very much primary emotion.

YALOM: So you're having them tell something to the partner that they're not really in touch with themselves.

JORGENSEN: Or, maybe asking them to enact their need and their desire rather than their vulnerable emotion, especially in Stage One. We might get ahead of ourselves and think, oh, if I could just have them turn and ask really nice for their emotional need to be met, then they'll do something new and different. But that's early, because asking for their need to be met is much later in Stage Two at Step Seven. So we're really wanting them to turn and enact their emotional experience.

Another common mistake is expecting the partner to be responsive, to look at the enactment and be favorable about it.

YALOM: Yeah. We would sure hope that.

JORGENSEN: We would hope that. And earlier in Stage One, it's actually more likely that the new experience is going to trigger fear and the old automatic negative response. So we can almost expect that this new sharing is going to trigger an old response at first.

So sometimes we ask clients to make enactments. And they may not feel prepared to. So they may be a little bit more nervous. And that in and of itself is fine. But we need to stick with it, make it easier for them to do that enactment so that the risk is less risky where we're going to slice it thinner for them-- is one way that we call that.

YALOM: And anticipate that may not land well.

JORGENSEN: Yes. Even when the emotional sharing is at good depth, something new that we can't anticipate, that in Stage One, especially earlier Stage One, that's going to bring reactiveness from the partner. A little bit later in Stage One, you'll start to see maybe a two-part response from the partner, a part that feels new and different, and likes what they're hearing, and can understand it, and the other part that's reactive as well. So that's one of the markers that we see as people are moving closer towards Stage Two.

YALOM: So let's take a look at a typical enactment.

JORGENSEN: This is a standard enactment where you can recognize the three phases. I'm going to create the context, maintain the focus when Steven goes to problem solving, asking for his needs rather than sharing his emotions. And then I'm going to process the enactment with Cassandra.

So can you help her with that part? The sadness actually is so vulnerable when you've been missed that so hard, that you get afraid about sharing it because your experience is If I'm really raw and open, I come across wrong, or somehow that's when I'm left most alone. Am I getting that right?

STEVEN: Mm-hm. I'm just trying to think how--

JORGENSEN: You may not even know how to share that with her.

STEVEN: No. What I'm asking, again is, is the opportunity and your help to allow me to show you my sadness and my vulnerability--

JORGENSEN: So, Steven--

STEVEN: --which may not come across as very articulate. It may come across as wrong. And that's the painting that I would like to hang up on our wall that would help remind you that I care about you, and I love you. And when I am saying these things or reacting from these places, it might be coming from a place of me being sad, and for you to reach into that and come with me.

JORGENSEN: So before we go to the problem solving, can you help her with the sad and how terrifying it is to show her the sadness?

STEVEN: It's really hard and terrifying to show you my sadness because I haven't had a really good experience in showing the world my sadness. And it's a scary place to me. And certainly, it's scary in our relationship to show my vulnerability to you.

JORGENSEN: Yeah. That was really great, Steven. How did it feel to tell her that?

STEVEN: Pretty terrible.

JORGENSEN: It felt pretty terrible. As you saw her start to cry, it felt pretty terrible?

STEVEN: Yeah.

JORGENSEN: What do you see when you well up that way?

STEVEN: Well, she mentioned feeling guilty early on, that she needs attachment consistently. So I have that running through my mind. I look at her and I just see sadness that runs from my mind. I don't want her to be sad.

JORGENSEN: Like, oh, no. I'm sharing my fear, my sadness with her. And it's

making it worse right now as she's getting sad.

STEVEN: No, I don't think it's making worse.

JORGENSEN: It just feels terrible.

STEVEN: Yeah. It just feels terrible. Again, I like my assumption, which is she knows me. She already knows this about me.

JORGENSEN: It feels terrible that she might not have known this. It feels terrible that she's sad right now?

STEVEN: Yeah, I think maybe sad, terrible in the sense that I have to say this because she doesn't know me. And that's alone.

JORGENSEN: I thought that she had known me. And it brings up all this more sad and aloneness. What actually happens to you Cassie, when he slows this all way down to let you know that what's under the "stop it?" There's this fear that I-- when I feel the most raw and sad, the least likely person doesn't even know me. I'm really, very sad about it.

CASSANDRA: It feels good to hear him come from that place. And I don't know why that made me cry. I think because I've been wanting that for so long for him to share from that place. To finally hear him share from that place, it's-- I don't know. It's not sad to hear him.

JORGENSEN: It's not sad tears.

CASSANDRA: No.

JORGENSEN: It's like, oh, you're showing me. You're letting me in.

CASSANDRA: Yeah.

JORGENSEN: That is filling up that [INAUDIBLE] spot.

CASSANDRA: Yeah.

JORGENSEN: I'm special to you. You're letting me in.

CASSANDRA: Yeah.

YALOM: From what I understand, couples often express their needs or wants versus the underlying emotion because it's less risky. But that often generates a defensive response from their partner.

JORGENSEN: Yes. And this is what you will see Nydia do here in this next clip. Enacting needs usually creates distress in the partner. And you will see that in this clip how Scott tries to block Jon's reactivity. It's still a good assessment tool to see what happens when she turns and shares her needs, especially at the beginning of therapy.

So we consider that there's no real enactment failure and failed enactment. There's only an observation of the process and feedback about how it worked. And in this case, it enables Scott to witness their negative cycle.

WOOLLEY: What happens when you hear she is absolutely terrified of being rejected and controlled?

ION: I never heard it.

WOOLLEY: You never heard it? Can you tell him about that, about your fear of being rejected and controlled? Tell him about that.

NYDIA: I don't want to feel like I'm going to be locked in, controlled, and not be able to move or say anything--

JON: Well that's what marriage is.

NYDIA: --or say--

WOOLLEY: No, hold on, Jon.

NYDIA: --something, and I'm not going to be listened to.

WOOLLEY: Right, and the deeper one--

NYDIA: And the deeper one is rejection, because I don't want to be in a relationship by myself.

WOOLLEY: Right. You have felt rejected and so hurt, right? You weren't even sure you were wanted as a baby.

NYDIA: Exactly. I don't want to feel in that position.

WOOLLEY: And you long to feel loved and wanted. Can you tell him about that?

NYDIA: I want to feel loved, and wanted, and respected.

JON: I'm trying to tell you, if you want that from me, what you got to do.

WOOLLEY: Okay. So hold on a second here, do you hear her?

JON: Yeah.

WOOLLEY: Do you see her?

JON: All women want that.

WOOLLEY: Sure.

JON: Everybody-- I want it too.

WOOLLEY: Yeah. Yeah. He does want it, doesn't he? You do want it. This whole bit about wanting to be deeply respected, that's all about being loved,

and seen, understood, and valued, just like what you want. You guys want the same things, I think.

YALOM: As we've discussed, enactments are not about challenges. Clients will often block, refuse to, or they'll exit back into content.

JORGENSEN: Yep, clients will do what they automatically do under threat, and we'll see their automatic defensive strategy emerge when we're asking them to do something that feels too risky.

YALOM: All right. So let's take a look here how Scott addresses Jon's reactive response to Nydia's vulnerable sharing.

WOOLLEY: She feels suffocated because she's terrified, because you are incredibly important, and she's terrified of telling you what she needs. Am I right about that?

NYDIA: Right. I don't know how to tell him what I need.

WOOLLEY: Can you tell him that you don't know how to tell him what you need? Just look at her.

NYDIA: Look at me. I don't know how to tell you what I need.

JON: I think you speak your mind strongly, clearly everything, what you need, and you get what you need.

WOOLLEY: That's hard for you to understand. That's hard, Jon. Jon, that's really hard for you to understand. That's hard for you to believe. It's like it's so different than the way you experience her, right?

YALOM: And the following example, we'll take a look at you working with Sandra's block.

JORGENSEN: Yeah. This block when we're doing an enactment is the reactive response that blocks their contact and their emotional engagement. So here, Carl comes forward and is vulnerable emotionally. And Sandra can't hear it. She has an old model that says, you are dangerous.

So I process her block, and I go back to Carl so he can say it louder. Therapists are afraid of this. But I like it because it provides information about what keeps them from securely attaching. And after Sandra can receive Carl's vulnerable message, I metaprocess or summarize what happened between them to help them integrate the experience and reframe the negative cycle as the enemy. So this is an example where processing the block can actually create moments of contact.

Can we go back to just a minute ago? You started to say how unusual it would

be to tell Sandra about how it feels inside, painful, hurtful, discouraged, that you're on the outside, and you're not sure where her heart is. Is it really about the two of you making this space together? Yeah?

CARL: Right.

JORGENSEN: Can we go back there? Could you talk to her about that?

CARL: It's hard to talk about it. That's it.

IORGENSEN: It's hard to talk about it.

CARL: It is. I think for me, it is.

SANDRA: What's hard to talk about now, just to get it right?

CARL: How I feel, the discouragement, because I am discouraged. I hate being the big, bad meanie all the time that's keeping us confined. And yet, I am the one who's doing that. So it is hard for me.

JORGENSEN: I hate being in this spot, the big, bad meanie. I hate being the one doing that. And here I am doing that. And I hate that. And it's so discouraging.

CARL: Yeah, because I don't see. I don't know what the solution is.

SANDRA: The whole financial situation, you mean, or what?

CARL: No. Well, the financial situation -- there are--

JORGENSEN: So can I interrupt you guys here for a minute? Can I interrupt you for a minute? How is it for you when he figures that all out, that what's under the trigger for him is a sense of discouragement, and it being uncomfortable to talk about and to share it because he's not sure he has a good solution, but he hates being in this position where he's the big, bad meanie? Yeah?

SANDRA: Well, I have one little problem with that because that's making himself in a power position. He's the big, bad meanie controlling my life. But nobody controls my life except my higher power up there. So he doesn't even have power over my life.

JORGENSEN: So that's scary.

SANDRA: No. I feel like-- the nerve that he should think he has power over my life, that he's controlling me.

JORGENSEN: So what you don't hear-- you don't hear--

SANDRA: I heard the discouraged part. And we both already admitted to each other over and over we're discouraged about all of it.

JORGENSEN: All right. So let me go really slow right here because I love what you're saying about-- it brings up for you really that image that you described earlier. If I open up, he could hurt me, and I can't see him in that place as the big, bad meanie, because that would put me down and him up. And I can't be there. I've been too hurt that way before.

SANDRA: No, no, no. That isn't that at all. It's because I spent those seven years sailing alone in the Pacific, and I became empowered. Before that, men were always more powerful than me. But after 10,000 miles alone facing all that, it empowered me as a person and a women. So nobody has that kind of power.

JORGENSEN: So when you hear big, bad meanie though, you think about empowerment. You think about empowerment, big, and bad, and empowered. That's what comes to your mind. And you say, but I don't see him that way. And I don't let myself be in that position anymore. Am I tracking you right? You know how to take care of yourself and how to get yourself out of a spot. If there was a big, bad meanie, you know how to get out of that.

SANDRA: Yeah.

JORGENSEN: Yes. So what I think I hear you saying--

SANDRA: You see he's operating from his last marriage where he had to take care of that lady for long--

JORGENSEN: Let's slow that down. Let's slow that down right there, because I think what you're saying is you don't actually feel big and powerful. You're describing discouraged, small, helpless, ashamed, maybe, even. You don't like feeling like you're this bad guy, basically.

CARL: I wouldn't say ashamed. But that's one I don't-- I would not-- that's a bad one to get into in the program.

JORGENSEN: Okay.

CARL: That's not a good recovery term.

JORGENSEN: Okay.

CARL: We're going to stay away from that one.

JORGENSEN: That's a feeling we don't even go close to.

CARL: We don't get into that one.

JORGENSEN: Okay. But you would feel like the bad guy in some way. And that's kind of a small-- that's not, "I'm empowered to be this."

CARL: No, no. Right. Right.

JORGENSEN: It's more connected to feeling stuck, more connected to feeling not that you are helpless, but that emotion, feeling that way, stuck. It doesn't matter which way I go. It's not a good way.

CARL: Right.

JORGENSEN: So can you--

CARL: Well, I don't know what to describe. But in terms of feelings, it's just that feeling of having run out of options.

JORGENSEN: Right. So stuck. It doesn't matter which way I go. I'm on the outside, and there's not a good way for us to be together. And that's what I want. And that's what's so frustrating.

CARL: I don't-- I don't--

JORGENSEN: It feels stuck, powerless. It doesn't matter where I go.

CARL: Yeah. It's not powerful. It's powerless.

JORGENSEN: It's powerless, right. So can you help her understand that, because she got a little stuck there on the big, bad meanie. But you're really describing more of a powerless feeling.

CARL: Right. Yeah. It's not powerful.

SANDRA: I really do. I completely relate. We're both in the same spot. We're both powerless, and we're both stuck. We don't know how to fix it. We want to get it fixed. I agree with everything you said, darling.

CARL: I know. I know. And we're both there. It's just--

JORGENSEN: But look how we-- let's see what just happened here, because at home, if I hadn't been able to interrupt you guys, for one, it would have been very difficult. It was difficult even here to share with her the feeling. And when you shared it, what happened to you was, that's not it. I can't hear-- you didn't relate to it. In fact, it sent you farther away. You're not going to be up over me. Are you kidding?

SANDRA: Yeah, really.

JORGENSEN: It left you in this, almost like-- I don't know if disgusted-- like, no way, Jose, right?

SANDRA: Well, 20 years of the first marriage I was like that. I didn't even talk.

JORGENSEN: It's a sensitive spot for you.

SANDRA: Right. But I got over it by doing all that sailing. And nobody's

going to put me there ever again.

JORGENSEN: Right. And so you did-- it didn't create a moment of contact. But you automatically moved into that fight position, which then leaves you feeling awful about yourself. And like Carl just did, would leave you feeling--you just did something to make it worse. But you really want to be together so you can stay in conversation and solve it together, because you can't solve it on your own. It's a together problem. So when we slowed it down though, now you're smiling at each other.

SANDRA: Oops. I blew it.

JORGENSEN: No. It's like, oh, if you feel powerless, I get you. I feel that way too. And that brings you back together. And that feels a little more hopeful when you're together because that's what you both want, right?

SANDRA: Do you want that, Carl?

CARL: I really do, Sandra. I really do.

SANDRA: I do too, but somehow it keeps getting messed up.

JORGENSEN: It's this pattern. It's this pattern. We're going to fight this pattern.

YALOM: So let's look at our final clip of challenges and enactments with Bill and Shelley. And they have a co-therapy team working with them.

JORGENSEN: Yes. And in this clip, as Shelley is doing the enactment, she switches levels. While she was vulnerable with Mark, her therapist, she becomes blaming in the form of a question when she turns to talk to Bill and says, do you agree?

So she's hiding her vulnerability because it feels too risky to her at this moment to be that vulnerable. And Bill tries to respond back. We can watch how Lisa, the female therapist, corrects Shelley's initial enactment and brings her back to her more vulnerable emotions.

SHELLEY: Just, when I just in myself forget, and--

LISA: You're feeling safe.

SHELLEY: --could you grab this, I usually get a-- "I said I'd grab it." And it's a very defensive response. So I have learned that even being just spontaneous about something, and you can't even say-- you didn't say please, or thank you-- and I'll go, okay. Please, tha--

MARK: It's not safe.

SHELLEY: It's not safe. You're right, not to even just say, "can you grab that

off the sink?" It's like, "I said I'd remember"-- it's not just an easy, sure.

LISA: Yeah, right.

SHELLEY: Nothing is that easy. Nothing.

MARK: You just turned to look at him. What did you want to say to him? It's not that easy.

SHELLEY: When I looked at you, it's like, do you agree? Do you understand just what daily life is like for me?

LISA: It's such a deeper question.

SHELLEY: It's a deeper question.

BILL: I'm hearing what daily life is like for you. And no. I don't know what daily life is like for you. But I'm hearing about it.

SHELLEY: But do you know that I've told you what it's like, and that I've said, I just asked you to help me with this, how hard I've worked at that?

MARK: But my guess right now, Shelley, what I'm hearing you say, Bill, is you're starting to hear it perhaps in a different way than you've ever heard it before. We're slowing this down. You're taking such huge risks with this, Shelley, to really stay at this place.

BILL: Well, I'm hearing it, Mark, as something other than a complaint. I'm hearing it. I'm hearing about what's going inside of her, which touches a different part of me. When I hear it as a complaint, it reinforces that I'm disappointing, and that I'm not doing it right, and I'm forgetting this, and I'm forgetting that, and we need to go see another psychiatrist about my ADD, and all that sort of stuff.

MARK: That's an interesting piece though because what I'm hearing you say here is-- and I'm getting the confusion that's coming up from you, Shelley, because you're saying, "I'm telling you this stuff. This is not the first time. I've told you this before."

SHELLEY: And then he's almost to me-- I'm almost hearing him say, "well, I'm hearing it differently. Usually when I hear it, it's in the form of a complaint." And that's not my reality.

LISA: He said, "usually, I hear it as a complaint, and this feels different."

MARK: But that doesn't mean that it's coming from you as a complaint, that maybe he's hearing it as a complaint, because that's his stuff. And Shelley, that could be his stuff that's coming up, that's getting in the way.

BILL: If I were sitting here and talking about my day, and I could get to

the place where you are, I'd be talking about how I feel during the day, not necessarily what the facts are or anything else.

MARK: That's right.

SHELLEY: I need to just tell you though that when I did turn to him and said, "do you get it," I felt a reaction-- just me-- that the way he responded, it's scary to me. It doesn't feel, like, "oh, I think I do hear you," or "I'm hearing it differently." It doesn't feel warm or fuzzy. It feels kind of out here, and a little defensive. Even when he says, "well, I'm starting to get it in here," I don't get the warm and fuzzies. I cannot pick up on it.

LISA: Can I challenge you just a little bit Shelley? All right, so we were talking. Let's back up, just before Bill responded. We were really walking into how cautious, how risky it is for you to be vulnerable. And I was saying how important that felt for us to talk to Bill about, to let him see you in that space.

And what I saw you do is turn and package it up into something very cognitive. "Do you get that, Bill? Do you get what my daily life is like?" And that's why I said, "oh, that's such a different question than what she's-- it's a bigger question." What was happening on the inside right there was you kind of testing the waters.

Is he here right now? Can I really go there with Bill right now in this moment? And that fear popped up, and you turned and said, "do you get that?" But from that space, it felt like you were really just seeing, is he here now? Can I walk further into this daily life and what I'm tormented by? Can I let him all the way in? And you were checking with him, right?

SHELLEY: Yeah, I was doing what I always do, is try to reach him on that level where I think he might be receptive, because my experience is if I tell him, this is so devastating, and this is so this, he will take it--

LISA: Of course, and this is what we're organizing, we're making sense of as a team. Of course, what you know, if we're hearing you, what you know is that if you turn to Bill, and you were to really let him all the way in about what it's like to be in that devastation, everything in your body says he's not going to show up. Everything inside of you, the history, before Bill, and in this relationship tells you, don't do it. It's too dangerous. He's going to be like everybody else.

BILL: Can I interject for just a minute?

LISA: In just a second. Does that make sense?

SHELLEY: Yes, except that I do think I keep trying to let him in. And maybe I don't--

MARK: I think you do.

SHELLEY: I think I do keep trying to tell him.

LISA: I'm seeing that, Shelley. And I felt like that was there.

MARK: I want to validate it.

LISA: Yeah. I want to validate that for you. I saw you trying to let him in when you turned and said, "do you get this, Bill? Do you get what my daily life is? Are you hearing me?" I know that was you trying to reach for him. But it's a cautious step.

BILL: And the follow on to that is that I had a much better sense of what her daily life was like while she was talking to the two of you. And when she turned to me, somehow I felt-- I did feel like I needed to be defended, or-something went on inside of me. So does that make any sense at all?

LISA: Absolutely. This is great though, Bill, because what you're doing is you're validating Shelley's experience of you. You're saying, actually, the radar was correct. When you turned to me, I felt something trip up, right? I felt something-- the walls started climbing for me, because you got such a different question.

You got a, "do you get that?" And that's an invaluatory-- do you get this? Show me you got this or I'm not coming more forward to you. But as you sit witness to Mark exploring this with Shelley, you were finding yourself hearing some things you hadn't heard before. But what happens with that to you is just what happened right here. Somehow when we turn towards each other, the history kind of takes over and hijacks-- hijacks everything.

SHELLEY: Because I think when I said it, it was like really soft. I said "do you understand what I'm"-- trying to see if he was with me.

LISA: But that has such a familiar—it lands in such a familiar place for Bill, right? He knows what that means. You're talking about the same thing. He knows what you're saying. He's saying to himself in that moment, "I got to say just the right thing or I'm going to disappoint her"—

SHELLEY: Or, I'm confused. I'm not sure I do get it.

MARK: Well, she actually even told me what I should've said, or if I'd said it this way--

LISA: She just said it earlier. Right. And this is what you would get hooked on in the past. This is it.

YALOM: To conclude the first volume, we'll take a look at how an EFT

therapist navigates through a typical session, and then using what are called the moves, which is a sequence of interventions that are done repeatedly through a session at any stage in the therapy.

JORGENSEN: Yeah. There's a process that we move through each session. And we call this the EFT tango. And the tango, like the dance, has a rhythm, has the movements, give us a beat of keeping the session going, and moving through different processes. So the EFT tango has five basic moves that are repeated again and again.

And the tango is this process of moves that we use to keep us going through the steps and stages. So the first movement here, the first process, is to reflect the process, both within and between, to be in the present process. Once we're in the present process, then we start to access the primary emotion. And that's the second move, is to move from the here and now into accessing primary emotion.

So here, we're exploring the vulnerable feelings where we're trying to get something new, different, or deeper in the way of emotional experiencing. Once we have that emotional experiencing alive in the room in the present process, then we're going to set up the enactment and do the enactment so that the one partner that we have accessed the emotion with is turning and sharing their primary or more vulnerable emotion with their partner.

And then we process the enactment. And that's the fourth move, is to spend time with each partner, checking in on how it feels to share, how it feels to hear, and processing any blocks that come up in that hearing, and understanding how that may-- how we may be then seeing the negative cycle come alive. And then the final move is to summarize what we've just done, to integrate, and to validate, and to reflect the process. It's a metaprocess, really. This gives the client another repetition to hear how the pieces of the negative cycle fit together, and to integrate any gains that we made while we've done the tango with them.

YALOM: Mm-hm. All right. So it's putting it all together. It's taking all the little pieces we've described. And obviously, practice makes-- probably not perfect, but you get better. And so you're taking these various skills and techniques. And in real life, it's happening fast. And you're going to be going through these again and again throughout the whole course of the therapy.

JORGENSEN: Yeah, that's right. So I can take all of my interventions, and what I know about steps and stages, and then use the process map to keep the session moving forward. It's like the wheel that keeps things spinning, so present process, access emotion, enact it, process the enactment, and then

summarize our metaprocess.

YALOM: All right. Good. So let's watch this whole process of the ETF tango as it unfolds in this example of you working, again, with Carl and Sandra.

SANDRA: I told him the other day I'm not as strong as you think I am, because in my head, I'm thinking suicide. And a strong person doesn't think suicide. So I said to him, I'm not the strong person you think I am. It's just a facade. I'm not that powerful and strong. I'm faking it.

CARL: You fake it really well.

SANDRA: Well, it's a protection thing.

CARL: I understand that. I understand that.

JORGENSEN: That's lovely that you can start to share that, Sandra. You're saying when we get all this tension between us, and especially if I see you tiptoeing around me, I get really self-conscious, and I start to feel bad, like I am that monster. I'm the pink elephant. I'm somebody you don't want to be close to, maybe.

And then maybe I'm more quick to criticize, or these little things spark me up. And maybe I look scarier. But really I'm not scarier. I'm feeling more scared. I'm feeling myself more weak, more vulnerable. And I put on a front. But underneath my-- "why didn't you put the milk here" is really this part of me that's very afraid and feeling bad, and vulnerable to how are we doing together.

SANDRA: It reminds me of all those-- traveling all over the world alone as a teenager, and having to fend men off, because I wasn't overweight. I was very attractive in my youth-- having to constantly fend men off, and dangerous situations.

JORGENSEN: Danger, danger.

SANDRA: I was in a lot of dangerous situations. And so that's why I look tough, because I've trained myself to let him see how tough you are. They ain't going to mess with you, kid-- out there. I was on the last trip of the Orient Express, the only young lady alone, the only American on the entire train. And soldiers were taking people off in the woods and shooting them. I've been in real danger.

JORGENSEN: Real life-threatening situations.

SANDRA: So, yeah. I've learned to pull on this--

JORGENSEN: Right. Boy, you're saying something so, so important, Sandra,

so important.

SANDRA: But inside, I'm just this little kid. Gosh, Sandra, how did you get away from that guy, and how did you--

JORGENSEN: Almost surprised by yourself sometimes, right?

SANDRA: Yeah.

JORGENSEN: Because inside, I feel so different than how I look outside. Inside, I feel like this little kid, afraid.

SANDRA: Yeah. I loved to watch the little butterflies. I loved to see the little flowers. I smell them all the time.

JORGENSEN: Afraid, and terrified. And when you're distant from me, I feel like you're just watching me. Then my alarms go off. I get terrified. And then I come out. I'm more quick to anger. I'm more quick to criticize. And I look like the tough one. But, Carl, I'm not so tough, all right? I'm really just scared. Yeah?

SANDRA: It's terrible to admit to be afraid. I have difficulty admitting that I can be afraid.

JORGENSEN: Oh, it makes perfect sense to me that you would be afraid because Carl matters to you, and having this work well matters, and not being under all this pressure matters, right?

SANDRA: Because he's a great guy, and he's brilliant. He knows all kinds of neat stuff I don't know.

JORGENSEN: And you want to be close to him. Yeah. Right. So that's huge. You don't usually let him see this little part of you.

SANDRA: No. Might be new to you to see it.

CARL: No.

JORGENSEN: So that's so important, Sandra. Would it feel okay for you to let him, to talk to him about-- I know I look tough. But underneath, I'm really just this little-- I feel like a little girl, so scared sometimes, it's hard to admit it. Would you talk to him about that?

SANDRA: Even though I look tough, I'm really a little kid inside terrified.

JORGENSEN: Right. And then you close your eyes tight, like oh, how do I even do that? How do I even do that? How do I even do that? Right, Sandra, right. Makes you want to run a little bit, just scary to show that part of you.

SANDRA: Yeah, because you're supposed to be tough, and out there, take

care of yourself, Sandra. Be independent. That's what I learned growing up.

JORGENSEN: Right, I'm supposed to be this independent, on guard, tough, take charge woman, right?

SANDRA: Because I have a twin brother that was very weakling. I had to take care of him all the time. I had to beat up the bullies at school when they teased him. I remember running into the boys bathroom to get his sweater because they threw it in in there.

JORGENSEN: You had to be tough. So how was it just now, Sandra, turn, and tell Carl when he could plainly see that was under what you're saying is really this fear about not feeling tough, right? What was it like to let him in on that?

SANDRA: I don't know. Today, I have this big wall up here right now. But I'll take a brick out.

JORGENSEN: Yes. It's hard. You're not sure, quite what you feel.

SANDRA: Because maybe he might hurt me. That's what the little kid is saying. If I let him know that I'm really not tough, I might get hurt.

JORGENSEN: Right. Right. It was very risky for you to let him in on that, but in the way that it's unnatural for you to let him in on that. So you could take a little brick out and go, how's he taking it? How is he hearing this message? Sharing it with him puts you behind the wall, maybe with a little brick out. Carl, what's it like for you, that she is slowing this down and letting you in on her fear?

CARL: It's just something I didn't realize. I'm still processing it. But it's--

JORGENSEN: It's new and different.

CARL: It's new. This is a whole side that I've never seen. I'm aware that all of us feel this way. And I do.

JORGENSEN: So you understand feeling terrified.

CARL: I understand. Yeah. I understand that part. I just didn't know that-

JORGENSEN: It was new to know that she feels that and that's what's under her tough girl. So it's surprising for you to hear. It's very surprising for me. A part of you really relates to it because you understand being terrified. But it also sends you back a little bit, like it's just totally new.

SANDRA: But I mentioned it to you the other day. I told you that.

CARL: Yeah, I know. But the emotional content is different today than it was. That was more subtle.

JORGENSEN: You've maybe talked about it a little bit. But you were just-actually, let's look at what you guys just did because this is new and different, I think. It's new and different for most couples to-- really, what we did was we looked at how you guys can get wound up, disconnected from each other. And you may come out in this harsh way. And you feel reprimanded. And you could either back way away. You might snap back. But then you both end up going away.

You'll go someplace to try to get comfort, not get more angry. But then you feel more and more trapped and isolated. And if he steps back, you feel more alone and almost like that pink elephant, like ashamed, or broken in some way. And then you don't know. Is he friend or foe? And so you're much more likely then to-- it builds up. You're much more likely then to criticize about whatever like-- is he with me? Am I safe or not?

SANDRA: It's the little kid that doesn't know if he's friend or foe, because the grownup knows he's friend.

JORGENSEN: That's what we're talking, that emotional sense, right? And then-- but you're over here then feeling reprimanded, and like, I just wake up in the morning, what sin I'm going to commit today, wondering how am I going to fail Sandra today? And so you're more and more on guard yourself and will create more emotional distance now so-- and then can be more reactive to these signs that maybe you're not making it. You guys aren't together in some way. But what we just did right now is we slowed that all down. We figured out that pattern--

SANDRA: Yay.

JORGENSEN: And slowed it down, and you took huge risks to get in touch with this part of you that you're not even sure you like having or are supposed to have, like it's afraid, and really needs reassurance, or comfort in some way to know where he's at. And you let him know that when I'm that afraid, what I do is I'm more likely to come at you.

SANDRA: Yeah.

JORGENSEN: Yeah.

SANDRA: Big time.

JORGENSEN: And you can hear that? You understand the fear? And it's really new information for you.

YALOM: Okay. We've really covered a lot of ground in this first video. I hope we've conveyed the central tenets of EFT, given our viewers an idea of the structure or arc of the treatment, including the key tasks and techniques of

the therapist. In the subsequent three volumes, we'll be following the same couples we've seen in this video, but we're going to go into much greater depth.

In the next video, we'll be covering Stage One, which as we've discussed, is assessment and de-escalation. The third volume coves Stage Two. And the final volume covers impasses and challenges in EFT. I hope you'll join us for the rest of this journey, *Emotionally Focused Therapy Step by Step*.