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Introduction

*There can be no knowledge without emotion. We may be aware of a truth,
yet until we have felt its force, it is not ours. To the cognition of the brain
must be added the experience of the soul.*

—Arnold Bennett

E*motion-focused therapy* (EFT) can be defined as the practice of therapy informed by an understanding of the role of emotion in psychotherapeutic change. EFT is founded on a close and careful analysis of the meanings and contributions of emotion to human experience and change in psychotherapy. This focus leads therapist and client toward strategies that promotes the awareness, acceptance, expression, utilization, regulation, and transformation of emotion as well as corrective emotional experience with the therapist. The goals of EFT are strengthening the self, regulating affect, and creating new meaning.

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Emotion-Focused Therapy, Revised Edition, by L. S. Greenberg

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CORE CONCEPTS

EFT is a neohumanistic, experiential approach to therapy reformulated in terms of modern emotion theory and affective neuroscience. It is informed by humanistic–phenomenological theories of therapy (Perls, Hefferline, & Goodman, 1951; Rogers, 1957), emotion and cognition theory, affective neuroscience, and dynamic and family systems theory (Damasio, 1999; Frijda, 1986; J. Pascual-Leone, 1987, 1988; Thelen & Smith, 1994; Weakland & Watzlawick, 1979). It views fundamental emotions—like anger, sadness, fear, and disgust—as foundational to the construction of complex frameworks that orient us to our environment. In addition, the emotional system is seen as the primary motivational system throughout life, essential to our survival and adaptation. Emotions are seen as purposive and playing a key role in goal directed behavior. They have unique motivational and phenomenological properties and influence perception, cognition, and behavior (Izard, 1977).

Since its inception decades ago as an approach to how people change in different episodes in psychotherapy (Rice & Greenberg, 1984), EFT has evolved into a full-blown theory of functioning and practice that proposes that emotional change is central to enduring change. EFT is premised on the belief that traditional psychotherapy has overemphasized conscious understanding and cognitive and behavioral change to the neglect of the central and foundational role of emotional change in these processes. Although it does not deny the importance of the creation of meaning and behavioral change, EFT emphasizes the importance of awareness, acceptance, and understanding of emotion; the visceral experience of emotion in therapy; and the importance of changing emotion in promoting psychotherapeutic change.

EFT posits that emotions themselves have an innately adaptive potential that if activated, can help clients reclaim unwanted self-experience and change problematic emotional states and interactions. This view that emotion, at its core, is an innate adaptive system that has evolved to help people survive and thrive has garnered extensive empirical support. Emotions are connected to our most essential needs (Frijda, 1986). They rapidly alert us to situations important to our well-being, by giving us

information about what is good and bad for us by evaluating whether our needs are being met. They also prepare and guide us in these important situations to take action toward meeting our needs. EFT views the individual as fundamentally affective in nature. Emotion sets a basic mode of processing in action (Greenberg, 2015; LeDoux, 1996). Fear sets in motion a fear processing mechanism that searches for danger, sadness informs us of loss, and anger informs us of violation. Emotions are also our primary system of communication, rapidly signaling our intentions and affecting others when expressed. As our primary meaning, communication, and action orientation systems, emotions determine much of who we are. Rather than “I think, therefore I am,” EFT is based on the idea that “I feel, therefore I am” and proposes that first we feel, and then we think, and we often think only inasmuch as we feel. Thus, emotional change is seen as the key to enduring cognitive and behavioral change.

Clients are helped in EFT to better identify, experience, accept, explore, make sense of, transform, and flexibly manage their emotions. As a result, they become more skillful in accessing the important information and meanings about themselves and their world that emotions provide, as well as become more skillful in using that information to live vitally and adaptively. Clients in therapy are also encouraged to face dreaded emotions to process and transform them. A major premise guiding intervention in EFT is that transformation is possible only when individuals accept themselves as they are. EFT is an approach designed to help clients become aware and make productive use of their emotions.

EFT grew out of, and was a response to, the overemphasis on cognition and behavior in Western psychotherapy. It is easier to focus on cognitions than implicit emotions because they are more easily accessible to consciousness, and it is easier to try to change behaviors than automatic emotional responses because behaviors are more accessible to deliberate control. Emotion, however, exerts a key influence on cognition and behavior. EFT attempts to shift the focus by emphasizing the crucial role of the experience of adaptive and maladaptive emotion in therapeutic change.

A core feature of EFT practice is that it makes a distinction between conceptual and experiential knowledge and it posits that people are wiser than their intellects alone. In an experiencing organism, consciousness is

seen as being at the peak of a pyramid of otherwise nonconscious organismic functioning. Experiments in directed awareness are used to help concentrate attention on as yet unformulated emotional experience, to intensify its vividness, and to symbolize it in awareness. In therapy, emotion is focused on as visceral experience and is accepted, as well as worked with directly, to promote emotional change. The articulation of emotion in *narratives* of being with self and others provides the story of our lives (Angus & Greenberg, 2011).

At the center of the approach is helping clients discern when they need to use adaptive emotion as a guide and be changed by its urgings, when they need to change maladaptive emotions, and when they need to regulate emotions that overwhelm them. A key tenet of therapy is that clients must experience emotion to be informed and moved by it and to make it accessible to change. Clients do not change their emotions simply by talking about them, by understanding their origins, or by changing beliefs; rather, emotions are changed after they are accepted and experienced, opposed with different emotions to transform them, and reflected on to create new narrative meaning (Greenberg, 2015).

Changing emotions is seen as central to the origins and treatment of human problems, but this does not mean that working with emotions is the sole focus in EFT. Most problems have biological, emotional, cognitive, motivational, behavioral, physiological, social, and cultural sources, and many of these need attention. EFT adopts an integrative focus on motivation, cognition, behavior, and interaction; the focus is on people's emotions as a primary pathway to change. EFT therapists help clients understand the complexities of their lifelong relationships and their psychogenetic origins and manage their thoughts, behaviors, and interactions in a healthy manner. An emotion-focused therapist adds the following key elements as a focus of therapeutic work: (a) the provision of an empathic relationship to facilitate healing, (b) a nuanced exploration of a client's emotional experience and the origin and dynamics of these emotions, (c) encouragement to allow and accept emotions for the information they provide rather than cathartic repetition of emotional expression to get rid of an emotion, (d) a focus on interruptive processes that interfere with the client's efforts to

access emotion, (e) access to new emotions to change old emotions, and (f) the symbolization of and reflection on emotion to create new narratives.

Whether a therapist practices individual, couples, or family therapy, an understanding of emotion and emotion system dynamics can be crucial for success because emotions are involved in all clients' efforts to change. The issues and methods discussed in this book are thus applicable and useful to all forms of therapy. EFT is being used increasingly by couples and individual therapists, work with emotion is being integrated into psychodynamic and cognitive approaches, and many integrative therapists integrate EFT into their approaches.

Although methods for focusing on emotion can be used in all treatment approaches, EFT itself is not a simple, prescriptive therapy. Instead, it is a complex approach, theoretically and in practice, and mastering its empathic and emotion stimulating methods requires years of experience. This book attempts to provide a flavor of the approach, but it is only a beginning. I hope it excites you and motivates you to learn more.

CONCEPTUAL FRAMEWORK

EFT (Elliott, Watson, Goldman, & Greenberg, 2004; Greenberg, 2015; Greenberg & Johnson, 1988; Greenberg & Paivio, 1997; Greenberg, Rice, & Elliott, 1993; Greenberg & Watson, 2006; S. M. Johnson, 2004) is an empirically supported, integrative, experiential approach to treatment (Greenberg, Watson, & Lietaer, 1998). It is integrative in that it synthesizes elements of person-centered therapy (Rogers, 1959), Gestalt therapy (Perls et al., 1951), experiential therapy (Gendlin, 1996), and existential therapy (Frankl, 1959; Yalom, 1980) with modern emotion, cognitive, attachment, interpersonal, psychodynamic, and narrative theory in a dialectical constructivist metatheory. The individual approach was originally termed *process experiential psychotherapy* (Greenberg, Rice, & Elliott, 1993), reflecting its roots in, and embodying principles of, a neohumanistic and experiential approach. Over time, developments in the understanding of the central role of emotion in human functioning and in therapy led to a change in name from process experiential therapy to EFT. The term *emotionally*

focused therapy, however, was used initially to describe the EFT couples therapy approach, where expression of underlying vulnerable emotions was seen as central in changing interaction and in reestablishing the couple's emotional bond (Greenberg & Johnson, 1988). EFT has been adopted as an overarching term to encompass the individual and couple applications of this approach; Greenberg (2015) proposed its use as an integrative term to refer to all treatments that see emotion as the main focus of intervention.

A fundamental tenet underlying EFT is that the organism possesses an innate tendency toward maintenance, growth, and mastery. The growth tendency is seen as being embedded in the adaptive emotion system (Greenberg, Rice, & Elliott, 1993; Perls et al., 1951; Rogers, 1959). Emotions are seen as governing the most important aspects of our lives. They are signals of events that affect our deepest concerns and our most important relationships. They keep us connected, energized, loving, and interested. Sometimes, however, they lead us to do things we do not understand or that we regret. Emotions also can be vague and unformed, with meanings that only become clear as we symbolize them and express them to others. At the same time, however, our emotions are guides to our most authentic selves. Clients thus are viewed as experts on their own experience in that they have closest access to their emotions and are agents who construct the meanings by which they live.

Emotions are seen as crucial in motivating behavior. People generally do what they feel like doing rather than what reason or logic dictates. It follows that to achieve behavioral change, people need to change the emotions motivating their behavior. Emotion also influences thought. When people feel angry, they think angry thoughts; when they are sad, they recall sad memories. To help people change what they think, therapists must help them change what they feel. For example, even cognitive changes such as the reappraisal of the self as worthy rather than unworthy are not simply cognitive changes on the basis of evidence or logic, but rather they are attitudinal changes that are highly affectively based. Seeing oneself as worthy involves a change in one's fundamental affective orientation toward the self and a change in one's basic mode of processing (Whelton

& Greenberg, 2005). Change in the view of self, world, and other thus fundamentally depends on emotional change. Emotion not only governs our views of self and others but also strongly influences interactions between people. Emotional expression governs, and changes, interaction. Anger, for example, produces distance, whereas vulnerability disarms. Thus, interpersonal conflict can be resolved by changing what people express (Greenberg & Johnson, 1988).

In the therapy, the therapist therefore encourages the client to attend to momentary experiencing and nurtures the development of more adaptive functioning by continuously focusing clients on their felt sense and emotions. The paradox of emotion work is that change initially involves acceptance rather than efforts to change. Emotional pain must be allowed and accepted to be fully felt and heard. Only then will it change. At the center of this approach is an I–Thou therapy relationship based on principles of presence, empathy, acceptance, and congruence (Buber, 1958; Geller & Greenberg, 2012; Greenberg & Watson, 2006; Rogers, 1959). This type of relationship is a fully accepting one that facilitates a focus on adaptive needs and validates the client's growth toward optimal complexity and adaptive flexibility.

As well as having biologically based emotions that act as a guide to adaptive action, people are viewed as living in a constant process of making sense of their emotions. Clients are consistently encouraged to identify and symbolize internal experience and bodily felt referents to create new meaning that promotes narrative change. Therapy is seen as facilitating conscious choice and reasoned action on the basis of increased access to and awareness of inner experience and feeling. Thus, when clients are able to symbolize their experience in words such as “I feel sad” or “I felt so redundant in my family, like an extra,” they create the meanings that guide their lives.

Psychological health is seen as the ability to creatively adjust to situations and to be able to produce novel responses, experiences, and narratives. The goal of treatment is to transform maladaptive emotional responses and gain access to adaptive ones to guide a *process of becoming*. Dysfunction is seen as arising through a variety of different emotional

mechanisms, such as lack of emotional awareness, avoidance, or disclaiming of emotional experience; learned maladaptive emotion schematic memories; the creation of narratives that are overly rigid or dysfunctional (meaning creation); conflict between two emotionally based parts of the self; and unresolved feelings between self and other (Greenberg & Watson, 2006).

EFT aims to help clients develop their emotional literacy and emotional intelligence (Greenberg, 2015). Emotional competence is seen as involving (a) access to emotional experience, (b) the ability to regulate and transform maladaptive emotion, and (c) the development of positive identity narratives. Ultimately, emotional competence is seen as enhancing a person's ability to deal with problems in living and as promoting harmony within and among people.

CONCLUSION

The basic idea in EFT is that although emotions are basically adaptive, they can become problematic for a variety of reasons: past traumas, skill deficits (e.g., never having learned to symbolize emotions in awareness or having been taught to ignore or dismiss them), or emotion avoidance (for fear of their impact on self or others). Emotion avoidance, however, robs people of part of their intelligence because emotions reveal what is important to them in a situation and guide them in the actions that are required to get what they need or want. Knowing that one feels angry or sad informs one that one's needs have not been met. Becoming aware of what one feels, therefore, is a first step in helping one to identify the nature of the problem. Then one can figure out what actions are most appropriate in specific situations. Over time, awareness of emotions and the ability to reown, regulate, use and transform them, when necessary, gives people a sense of mastery and helps them to function more effectively. A key tenet of EFT is that one has to *feel* a feeling in order to change it.

In EFT, clients are helped to better identify, experience, accept, regulate, explore, make narrative sense of, transform, use, and flexibly manage their emotions. As a result, they become more able to tolerate previously

avoided emotions and more skillful in accessing the important information that emotions contain about their central needs, goals, and concerns. Awareness of emotion also gives access to the action tendencies in emotion, which help move people toward their goals. EFT thus helps people become more skillful in using emotional information and action tendencies to live more vitally and adaptively.

This approach is growing in popularity and acceptance. Given that it is now an evidence-based approach, it is being taught in graduate schools and internship programs. Cognitive-behavioral approaches are focusing on emotion and are rapidly assimilating many aspects of EFT. Psychodynamic therapy, which has always theorized about emotion, and systemic theory, which has not, are now also both paying a lot more attention to the experience of emotion in the therapy session and in relationships.