

I. Facilitating Optimal Emotional Processing (Hermann & Auszra, Chapter 9)

(adapted & modified from Greenberg & Goldman, *Clinical Handbook of Emotion-Focused Therapy*, 2019)

- During Floorwork emotional processing occurs in a *moment-by-moment* manner.
- *Emotion* is understood as the complex synthesis of both affective feelings and the meaning embodied by those experiences (*affective-meaning states*).
- Key questions to we ask ourselves are:
 - Is the participant just talking about feelings or experiencing what he/she is talking about?
 - Will experiencing or expressing more of this type of emotion be helpful or not?
 - Will the way the participant expresses and experiences this emotion help him/her to take a productive next step? Is this emotional expression a sign of distress or a sign of working through of that distress?
 - And what could I do to help the participant experience his/her emotions in a more helpful way?
- a. Emotional Processing in Emotion-focused Therapy (EFT)
 1. Body of research elucidates the nature of effective participant *emotional processing*. Emotional processing is a theoretical construct aimed at specifying what emotional experiences and ways of dealing with them promote positive change.
 2. Change in EFT is hypothesized to occur by a three-step, *deepening of experience*, sequence that helps participants move from (1) symptomatic *secondary* (surface) *emotions* (e.g., hopelessness) to (2) *primary maladaptive* (underlying) *emotions* (e.g., shame, fear) and then by deepening the primary maladaptive emotion to get to the associated *unmet need* generating more (3) *primary adaptive* (sometimes underlying) *emotions* (e.g., anger, sadness).
 3. Deepening of experience is a twofold concept: (a) deepening as an in-session movement from secondary to primary emotional experiences and (b) deepening as a process that involves a focus on bodily experience and creation of new meaning.
 4. In this process, the experience of what appear to be negative emotion such as shame/fear, hurt/grief or assertive anger, will be painful and unpleasant but will also promote healing if conducted in a productive way.
 5. To identify and promote productive emotional processing, it is useful to divide the concept into three dimensions: *emotion activation*, *emotion type*, and *manner of emotional experience*.
 6. *Emotional activation* seems to be a necessary but not a sufficient condition for change—whether it is beneficial or not seems to depend on several factors. Emotional activation in emotionally meaningful contexts combined with some form of *meaning-making* seems to be

facilitative of positive change and symptom reduction. Also, facilitating *moderate to high levels of emotional arousal* appears to be most optimally effective. There is an engagement in a continuous cycle of contacting, expressing, and making meaning of emotional experience.

7. While emotional activation is important, knowing which *type of emotional experience* to promote, activate, and deepen and which to validate (but perhaps bypass) is fundamental. Differentiating what types of emotions are being activated is very relevant for successful outcome. Type of emotion is subdivided into categories of *primary adaptive emotions* or *primary maladaptive emotions*, *secondary emotions* or *instrumental emotion*, independent of emotion label (e.g., anger, fear, sadness, shame, and so on) and context.

It is important to reduce secondary reactive, mostly symptomatic, emotionality. Further, it is significant to experience core painful primary maladaptive emotions at moderate levels, to work through them, and to access adaptive emotional resources—the more frequently this is done, the better. Reducing secondary, symptomatic emotions is important, but only to the extent that it succeeds in subsequently accessing primary adaptive emotionality.

8. A productive *manner of processing* activated primary emotional experience is related to the degree of expressed emotion in general, as well as when it is a more highly aroused emotion, rather than the frequency of highly aroused emotion alone that is crucial in facilitating change.

b. EFT Model of Emotional Processing

1. Research has supported an *emotion process* perspective of how change occurs. What this means is while emotions need to be activated, and one needs to know what type of emotion is activated, there is sequence of activation and access to emotion that is predictable for success. A *three-step model of emotional transformation* is outlined. The sequence is as follows: successful participants move in their *moment-by-moment experiences* from (a) a *secondary* (surface) *emotion* to (b) a *primary maladaptive* (underlying) *emotion* and eventually to (c) a *primary adaptive* (sometimes underlying) *emotion* activated through the articulation of existential needs (See Fig. 1 model below)
2. Empirical findings support that the model's components are organized in a sequential structure. In concrete terms, the first emergence of advanced states (either hurt/grief or assertive anger or self-soothing) was preceded by an intermediate state (either negative evaluation or need), which in turn was preceded by an early state (either fear/shame or rejecting anger), which in turn was preceded by global distress. When the emotional experience of a person included all four levels in the model, that experience unfolded in a step-by-step sequence that was predicted by the model and occurred significantly more often than chance. Thus, when certain prerequisite affective-meaning states occur, it increases the likelihood that emotional processing of global distress will reach the final stage. Hypothetically, these moment-by-moment patterns of emotional experience may occur in predictable patterns because of the psychological proximity between the affective-meaning states involved.



Fig.1: Rational/empirical model: State-transition diagram for emotional processing of distress.

3. This three-step process is perhaps the single most important contribution to understanding emotional processing. When certain prerequisite affective-meaning states occur it increases the likelihood that emotional processing of global distress will reach the final stage of resolution. The emotional shifts of successful individuals move, moment-by-moment, toward: (1) reducing secondary reactive emotions, which are mostly symptomatic, (2) working through their core painful primary maladaptive emotions when activated at moderate to high levels, and (3) accessing adaptive primary emotion and resources, thereby transforming primary maladaptive emotions and subsequently leading to the articulation of existential needs. In concrete terms, anxiety/depression (global symptomatic distress, secondary emotions) moves to the experience of fear/shame or rejecting anger (maladaptive primary emotions) to hurt/grief or assertive anger or self-soothing (adaptive primary emotions). This is how emotion changes emotion.
4. Some emotional experiences propel one on a healthy self-organizing trajectory that reaches its completion as a meaningful, emotionally differentiated, and integrative experience. However, before such an experience is carried forward it may begin as a sense of intense, poorly regulated, and ill-defined global malaise. Thus, potentially injurious affective-meaning states such as global distress, fear/shame, or negative evaluations could be painful

and stagnant or could be rendered into important affective meaning to be developed forward into an emotional experience that eventually results in healing. In the sequential order of change, working with painful emotion is accepted as contributing to emotional processing and resolution.

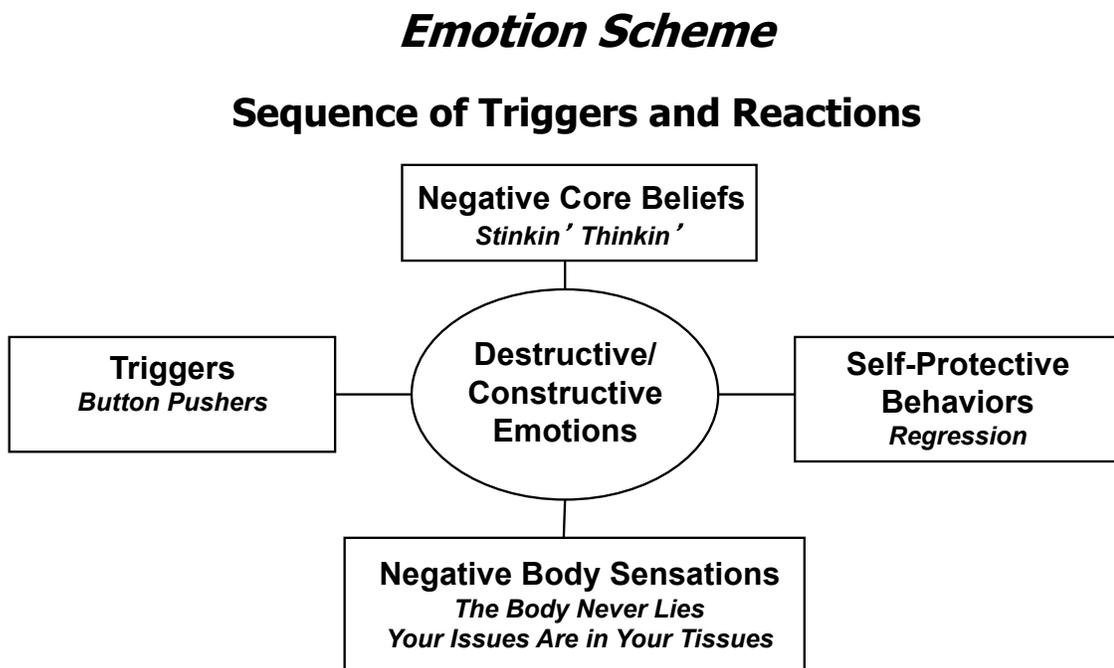
c. Facilitating Optimal Emotional Processing

Optimal emotional processing is described along three dimensions: *activation*, *emotion type*, and *manner of processing*.

o Activation

1. For optimal emotional processing to occur, *emotion schematic processes* need to be activated, so that essential information can be extracted; maladaptive schemes become amenable to change, and motivation increased by adaptive action tendencies (see Fig. 2 the *emotion scheme* below).

Fig. 2: The *Emotion Scheme*



Adapted & modified from L. Greenberg, 2002, *Emotion-focused therapy*, Washington, D.C., American Psychological Association

2. Emotional processing in the above context means changing pathogenic emotion schemes underlying the presenting problems—for example, transforming maladaptive shame into pride and self-confidence. This is accomplished by first deepen one’s experience of activated maladaptive emotion schemes, often related to chronic unmet needs. These schemes will later be transformed by activating experiences of primary adaptive needs and

emotions that can act as antidotes to maladaptive emotions. The desired changes generally follow a sequence:

- i. Help decrease secondary or self-protective emotion scheme expression (e.g., helping one not use puffed-up anger to avoid feeling hurt).
- ii. Leading one to experience core pain (maladaptive emotion schemes; e.g., helping experience core feelings of being unlovable).
- iii. Helping experience their unmet needs (e.g., a need for love).
- iv. Leading one to experience helpful primary adaptive emotions (e.g., expressing adaptive anger at a parent for not showing love one deserved and needed).

3. Activation implies that one not simply talk *about* or intellectualize, but rather express emotion and speak *from* one's activated emotional experience. This is indicated by nonverbal emotional behavior such as expressive and action tendencies like making a fist, shrugging, sighing deeply, crying, and so on, as well as emotional voice quality.

Generally speaking, there are three steps in facilitating emotional activation. First, there is empathic responding based on the one's empathic attunement, offering reflections and guiding attention from this inner experience of attunement. Second, there is focusing on bodily felt experience. Third, there is the use of Burns, Psychodrama, Role Play, Chair-Work, etc. interventions, that draws on episodic memory. However, when one is very blocked in accessing emotion, we need to review the relationship and ask ourselves, "What can I do, or stop doing, in order for the person to feel safer?"

o Type

It is useful to not treat all emotions the same, but to differentiate and intervene accordingly. We differentiate primary adaptive, primary maladaptive, secondary, and instrumental emotions.

1. *Secondary Emotions*

- ii. A secondary emotion is not a person's first fundamental emotional response to an internal or external stimulus, but rather a secondary reactive response to a more primary emotion, which can be adaptive (e.g., anger at violation) or maladaptive (shame of being unlovable). A secondary emotion is not associated with a primary need, and it obscures the more primary experience. Secondary emotions are often part of the symptoms from which the person suffers (e.g., anxiety, depression, hopelessness, helplessness, irritability). One might consider these emotions to be more on the "surface."
- iii. There are two main classes of secondary emotions: (a) an emotion as a secondary response to another more primary emotion (e.g., feeling scared or ashamed but expressing anger; appears most often) or to a thought (e.g., feeling anxious after excessive worry thoughts) and (b) an emotion *about* another emotion (e.g., feeling guilty about feeling angry or feeling ashamed of one's fear).

- iv. Secondary emotions cover primary emotional experience (with no sequential ordering apparent to person). When this is the case, there are several indicators that help us identify secondary emotions in contrast to primary emotional experience:
- The expressed emotion does not fit our sense of the situation. For example, a person might at core feel ashamed or afraid in a situation but expresses anger, disgust or contempt, or feel violated, but expresses sadness or helplessness instead of anger. This will not help one respond adaptively to the situation and get the need met that is implicit in the primary emotion. This secondary anger usually has a strong external focus, uses “you” language, often expresses a sequence of accusations, and/or uses swearing or name-calling (e.g., “rejecting anger”). It does not have the empowering, boundary-setting quality of primary adaptive anger, but rather comes from a stance of standing with one’s back against the wall, lashing out at the other in pain.
 - The emotional expression has a fused quality; two or more emotions appears in a fused manner which creates the experience of a new emotional state obscuring the more primary underlying (adaptive or maladaptive) emotion or emotions. Neither emotion is fully acknowledged and allowed separately; two action or expressive tendencies are present, as in crying and angrily accusing at the same time often with a whining or complaining quality or when one emotion like sadness is fused with hopelessness, creating a sarcastic or resigned quality, often underlined by expressive tendencies like shrugging or shaking the head.
 - The emotion is global, with no clear action tendency and/or fuzzy labels like *upset*, *bad*, *down*, *resigned*, or *frustrated*. It is not differentiated into more specific emotions like, for example, fear, shame, anger, and loneliness.
 - The emotion is a reaction to thought (e.g., secondary fear/anxiety). The emotion-producing thought is part of the secondary processes (e.g., rumination, worry) that obscure one or more underlying primary emotions.
 - Here are some examples for secondary emotional expressions: A person says with tears running down her face with a “whining” quality in her voice: “I can’t take this anymore. I want this to change. I just want to feel good again!” Both a painful emotional quality as well as an angry/frustrated quality are present in a fused manner in the emotional expression. Also, when faced with a demeaning critical side says in a low voice: “I mean she’s right . . . (shrugging her shoulders) . . . it’s like ‘what’s the use’ . . . I just want to lie down in bed and never get up again.” This is considered to be secondary hopelessness or resignation. Another example of a secondary emotional expression: A person says to her mother in the empty chair with tears in her eyes, but a clear and agitated voice: “I just don’t get you! It’s always someone else’s fault, it’s never you! You never take responsibility for anything!” This anger expression would be considered secondary, as the focus of the anger is on accusing the other, and it is slightly fused with pain/hurt as

indicated by the tears. Emotional expressions classified as “global distress” are examples of secondary emotional experiences.

2. *Primary Emotions*

A *primary emotion* is a person’s first emotional visceral response to a stimulus situation. It orients the person to their environment.

i. *Primary Maladaptive Emotions*

- Primary maladaptive emotions also are a person’s first automatic emotional response to a situation, but they are based on aversive learning experiences often due to failures early-on in the dyadic regulation of affect and do not prepare the individual for adaptive action in the present. They once represented an attempt at optimal adaptation to difficult circumstances, but as circumstances have changed, they are no longer adaptive. For example, experiences of separation from a partner and resulting feelings of abandonment might activate intense feelings of fear of “not being able to survive alone” developed from experiences of abandonment or loss in childhood. This fear in the abandoned child had an adaptive aspect and might have motivated the child to actively seek out supportive attachment relationships and triggered caretaking behavior in adults. However, it leads to current maladaptive behavior in the adult, as the core fear is no longer appropriate to the current situation, rather it is an obsolete response that has not changed despite changed circumstances.
- Maladaptive emotions are often described by the person as a “familiar, old feeling”; they tend to be chronic and become part of a person’s identity. Although any emotion can be adaptive, maladaptive, secondary, or instrumental, it appears that the (1) fear of not being able to survive alone—being unprotected, (2) fear of being disconnected from others, (3) sadness about loneliness/isolation based on experiences of abandonment, and (4) shame about feeling unworthy are the most prevalent maladaptive emotions. For example, a person faced with self-criticism sinks into a chair, eyes cast down, and said in a low and focused voice, “I feel so like a nothing . . . so worthless . . . (starting to cry) . . . like a little boy sitting in the corner . . . naked, knowing that I am nothing”. This is an example of primary maladaptive shame. Another person said about her children growing up and leaving home “It scares me so much . . . it’s difficult to hold it together . . . I feel like a bath ball being thrown into a bathtub . . . dissolving . . . falling apart”. This is an example of primary maladaptive fear. Other primary maladaptive emotions also appear are deep helplessness resulting from experiences of abuse and hair-trigger rage.

ii. *Primary Adaptive Emotions*

- Primary adaptive emotions are defined as those automatic emotions in which the implicit evaluation, verbal or nonverbal emotional expression, action tendency, and quality of adaptation fit the situation and are appropriate for preparing the individual for adaptive action in the world, helping to get the person’s needs met.

- Examples are sadness at loss that reaches out for comfort, fear at threat, anger at violation that is empowering or protecting, grief that lets go of what is irrevocably lost, or disgust at intrusion. Primary adaptive emotions strengthen attachment bonds, affirm the self, and facilitate coping with the situation. When working with the representation of a degrading parent in empty-chair work, a person says in a clear assertive voice: “I did not deserve to be treated like this! I was a good boy!”, accompanied by some small gestures of assertion like puffing up of chest. This would be seen as primary adaptive anger/assertion. Similarly, when a person who suffered sexual abuse as a child and never got support from his mother, who was most often away on business trips, accessed sadness about not having had a warm and safe childhood and started crying, this was considered an expression of primary adaptive sadness.

iii. *Instrumental Emotions*

- Last, instrumental emotions are learned expressive behaviors or experiences that are used to influence or manipulate others. This process might be conscious or nonconscious. The emotion can be manipulative and/or have a secondary gain. Typical examples are the expression of anger to control or to dominate, or “crocodile tears” to evoke sympathy.

iv. *Deepening from Secondary to Primary Emotion*

- It is vital to help one move from the secondary emotions that often present as symptoms to primary maladaptive emotions and finally to primary adaptive emotion. Many interventions have been developed to support this transformation process, and they are described other papers. However, it is what Primaries do in a moment-by-moment fashion that is core in facilitating transformation and productive process. Following are various helpful strategies.
- To start with, secondary experience is real experience and needs to be validated before we can bypass it and invite one to go deeper. A core element in deepening experience is empathic exploration. We want to guide attention toward primary aspects of experience that are as yet out of awareness or not yet fully formed in awareness. In this, we follow the “pain compass” toward the most painful aspects of experience, toward the “core pain” (primary maladaptive emotion). Primaries will thus always reflect the primary aspects of their participants’ experience, and in their reflections, they will put more primary aspects of experience at the end of their reflection (e.g., “So there was a resigned feeling, but you also felt really hurt.”). They will also reflect the quality of the primary emotion in their own voice quality. Empathically conjecturing into primary aspects of experience can also shift participants’ attention toward primary emotion, as in “I hear you saying ‘Overall it wasn’t so bad,’ but I imagine you must have felt pretty alone . . . like nobody is there for you”. Sometimes it can even be helpful to explicitly ask if she/he feels another emotion underneath/apart from the secondary emotion that is being expressed.

- When two primary emotions like sadness and anger are mixed, and the participant thus gets stuck in secondary complaint, working to differentiate both emotions is critical. Sometimes it can be very difficult to deepen from secondary to primary emotion, for example, when participants are really stuck in secondary anger. Here it might be in place to actually point out what is happening in the process (e.g., “You seem to be really stuck in the anger, and as we explored, it does not empower you, but rather leaves you feeling helpless and unable to move on”) and explicitly saying that to find a solution, it is important to look “underneath” the anger toward the more vulnerable aspects of your experience. And, of course, sometimes, when participants touch on primary experience (e.g., primary maladaptive pain or primary adaptive anger or sadness) and then quickly move back to secondary experience or no experience, bringing this process to awareness and working directly with the interruption may be necessary and helpful.

v. *Arriving at Primary Experience*

- When participants arrive at their primary maladaptive experience, at their core pain, an important step has been accomplished. It is important to communicate, implicitly and explicitly, that “it is okay to be here,” that it is valuable to hear what this emotion has to say. It is essential to validate this experience in the sense of “given what you went through, no wonder you feel this way,” not trying to ‘make it good’ for the participant, but to see his or her pain and make space for it. This is the place the participant has to *arrive* at before he/she can *leave* it; metaphorically speaking, the one has to arrive at and explore the bottom of the lake, before he or she can come up again. Primary maladaptive emotions have to be processed in a mindfully aware manner (described in the next sections).

vi. *Preparing for the Upcoming Primary Adaptive Emotion*

- Primaries always have open eyes and ears for aspects of primary adaptive emotional experience; this is particularly important once participants have arrived at their core maladaptive emotions. They will pick up elements in content, voice, and body in the participant’s expression that point toward more adaptive experience and shift attention accordingly. In this the Primary is like a gardener, waiting for and noticing the slightest hint of green coming from a seedling pushing upward, immediately giving it his or her attention, watering it to help it grow. When the Primary is empathically attuned to the participant’s emotional experience, her or his focus and voice quality will automatically reflect aspects of the upcoming primary adaptive emotion, which helps the participant allow and fully express the new experience, helping it grow stronger. When anger/assertion comes up, for example, the Primary’s voice might become louder and sharper—however, not too sharp, always just one small step ahead of the participant. Similarly, when sadness comes up, the Primary’s voice might become softer, his or her pace slower, and so on. Reactions that facilitate elaboration and expression of primary emotions, such as “Can you speak from the tears?” and “Can you speak from the anger?” as well as elaboration of needs connected to emotions like “What do/did you need?”, “What did you miss?” (in sadness), and “What do you want?” (in anger) are helpful

questions/tools. The goal is to help the participant emotionally organize in a more resilient manner using the adaptive information and action tendencies inherent in primary emotions.

○ Manner

This dimension is concerned with *how* participants deal with their activated primary emotions in a moment-by-moment fashion. It helps answer the questions: Does my participant experience a primary adaptive emotion in such a way that he/she can extract the useful information inherent in the emotion in the service of problem resolution (emotion utilization)? Or, is my participant's emotion being processed in such a way as to enhance transformation of primary maladaptive emotion toward more adaptive emotion (emotion transformation)? Is my participant processing a primary emotion productively, namely in a *mindfully aware manner* from one moment to the next? Based on the *Emotional Productivity* model, seven criteria must be met: participants must *attend to, symbolize, be congruent, accept, regulate, show agency, and differentiate* their primary emotional experience. Following is an explanation of each category and related interventions to facilitate *the next step* toward more productive processing. What is required consistently from the Primary is attunement to affect and accurate empathy.

1. *Attending*

When participants verbally symbolize or nonverbally express emotion (e.g., emotional behavior like sighing, clenching one's fist, emotional voice or tears), we assume that they attend to it, unless there are clear indicators that they don't. For example, although one participant visibly expressed some form of anger (clenching his fist), he was not aware of what he was feeling (saying he felt nothing). When participants do not attend to emotional experience, Primaries empathically reflect the emotional expression to draw attention to it in a nonconfrontational way. For example, "There's a deep sigh . . ."; "You shrug. I am not sure exactly what that means"; "As you say that, I hear anger in your voice. Is that right?" At times, focusing interventions can be useful to promote attending to emotion.

2. *Facilitating Attending to Blocks to Emotional Processing*

Besides drawing attention to emotional responses, Primaries might sometimes draw attention to processes that prevent attending to and processing of emotion. This might be the case when participants diminish, invalidate, shake off, talk away, or otherwise protect from their emotional experience, and empathy and empathic refocusing are not sufficient to establish a focus on and deepen primary emotion. Often, drawing attention to implicit process and making it explicit opens the possibility of exploring its origins or function and adapting the internal and external conditions in such a way that the emotion can be allowed and attended to fully. For example, the Primary might say,

I am not sure whether I am right, but just now when you talked about your husband and how he is not there for you, I sensed that some sadness came

up, and then it seems like you held your breath, and it was gone. Is that right?
Can you do it again?

Participant and Primary might explore together what prevents the participant from staying with the sadness. When fear of the emotion is preventing productive processing, the safety in the relationship has to come into focus, and the Primary needs to help the participant experience more control over the process itself (e.g., by allowing the sadness a bit and then moving back out). In other cases, the participant might need a better rationale for how “feeling bad leads to feeling good.” Sometimes, however, the interruptive or protective process is more powerful or more automatic. In these cases, directly working with the interruption in a two-chair dialogue can be very helpful (e.g., “Come over here, tell him not to be sad.” “Take away his sadness. How do you do this?”).

3. *Symbolization*

- i. Once an emotional reaction is attended to and felt in awareness, it has to be symbolized in words or some other fashion to be able to fully comprehend its meaning, use the informational value inherent in primary emotion, and reflect on it to create new meaning, which in turn helps develop new narratives to explain one’s experience. Symbolization means that participants have to be engaged in a process of describing their experience in words or some other form. In contrast, a lack of symbolization occurs when a participant attends to and acknowledges a nonverbal emotional expression (e.g., sigh, tears) but cannot identify its meaning. A participant may, for example, shrug and say, “I have no idea what my tears are about.”
- ii. Primaries serve as *surrogate information processors* who continuously facilitate symbolization of emotional reactions by different empathic responses using their corresponding inner felt flow of experience as a referent and source of possible symbols to offer to the participant. For example, a participant might say, “When I realized she had left the party and not even told me she was leaving, I felt so bad . . .”. Primary: “so bad . . . somehow abandoned . . .”? Participant: “Yeah abandoned, I didn’t know anyone . . . but also like I just wasn’t important to her . . .”. Primary: “like I wasn’t important to her the way I wish to be . . . so sad . . . (nod from the participant)”. When participants are missing words for what they feel and fall silent, for example, when crying, Primaries try to “speak the unspoken” for them, offering words and talking into the silence, constantly checking for nonverbal expressions of agreement from the participant to make sure they are on the right track.

4. *Congruence*

- i. Primaries pay attention to emotion incongruence. The verbal symbolization and the nonverbally expressed emotion have to match. For example, smiling brightly while talking about feeling powerless and full of despair or expressing anger in a meek voice indicates incongruence and that the emotion is not fully allowed and experienced.

- ii. When Primaries sense incongruence, they are drawn toward it and reflect it in a nonconfrontational way. Primaries are careful not to damage the bond by being intrusive or by shaming the participant. The skill lies in pointing out incongruities in a way that is validating and invites the participant to allow emotional expression. Thus, when a participant smiles while talking about a deep loss, the Primary might say something along the lines of “. . . and you are smiling while you talk about this . . . and really it is so sad”. If the incongruence remains, the Primary invites the participant to become curious and explore the genesis and meaning of the incongruence.
- iii. When primary adaptive emotions start to form in chair work (e.g., assertive anger against an abusive father) but are expressed incongruently (e.g., participant smiles while asserting himself), Primaries can suggest the congruent expression as an experiment, as in “Can you say that again without smiling: ‘You had no right to treat me like that!’”? If this is in the proximal zone of development of the participant, expressing it will help the anger/assertion grow stronger. If it’s not, obstacles can be explored and worked with (e.g., “I can’t say it like that, it makes me feel guilty”).
- iv. When participants are highly vulnerable and/or insecure or self-conscious, and masking their vulnerable feelings is the only way they can handle it, it is not indicated to reflect an incongruence to the participant.

5. *Acceptance*

- i. *Acceptance* refers to the stance participants take toward their emotional experience. This involves accepting both the emotion and themselves for having the emotion. Primaries have to pay attention to signals that point to nonacceptance of emotional experience, which can be indicated by clear signs of discomfort when confronted with feelings (e.g., moving nervously in the chair, squeezing back tears, moving to a more rational or conversational level of discussion). Lack of acceptance can also be indicated by participants negatively evaluating the feeling (e.g., “What’s the use of getting angry?”) or themselves for having the feeling (e.g., “Fear just makes me feel weak, and I don’t want to feel this way”).
- ii. Acceptance of painful, dreaded, “forbidden” or shameful emotional experience is generally facilitated by a safe, validating, understanding relationship. In addition, it might also be useful to empathically explore beliefs about and to identify the negative “voices” associated with the nonacceptance of certain feelings (e.g., “Feeling like this is a sign of weakness and you cannot be weak”). It can be helpful to validate the participants’ struggle to accept vulnerable feelings (“No wonder you are struggling with that, given that your father always told you real men don’t cry”). It is important for Primaries to acknowledge and validate the fear or nonacceptance of the emotion and then to focus back on the feared emotion.

6. Regulation

- i. Judging whether an emotional expression is productive also involves assessing the self-perceived role participants take in the emotional change process. Participants need to take responsibility for their emotion as opposed to taking the stance of a passive victim. This involves acknowledging their emotional responses as their own personal construction. Another way of putting it: A participant should have the emotion as opposed to the emotion having the participant. Indicators for *not* taking responsibility for felt emotion include the following:
 - Attributing responsibility for felt emotion to external sources such as other people's actions, for example: "He (husband) always criticizes me. He makes me feel so bad, so small." This participant locates the source of her pain exclusively outside herself, rather than owning the pain as part of herself as in: "When he criticizes me, I feel so small. It instantly opens this old wound, and then I go to this dark place inside."
 - Assigning responsibility for resolution of problematic situations to others (e.g., partner, Primary, medication).
 - Resigning to the emotion, treating it as an affliction about which nothing can be done ("I just always feel worthless, what can I do about it").
- ii. Generally speaking, the more participants experience (not only understand) their core pain as stemming from past wounds (e.g., being shamed by a parent; being abandoned) and/or problematic internal processes (e.g., self-criticism) and come to feel valid in their emotions and needs, supported by the attunement and validation of the Primary, the likelier they are to own their emotions and needs and take responsibility for their emotional and behavioral reactions. Additionally, Primaries facilitate responsibility for the emotion in their participants by inviting the participant to speak from an "I" position, for example, saying "I feel angry" rather than "It makes me angry" and focusing on other peoples' behaviors. In their reflections Primaries will formulate accordingly, for example, "It sounds like when she (wife) says something critical to you, it touches this wound in you (humiliation by parents) and you start feeling worthless, and then you lash out at her rather than showing your pain". In this formulation, the locus of responsibility and of control is placed more in the participant, not in the external world, and emotions are connected to sources and meaning and to each other. In the same manner emotions can also be connected to the needs of the participant ("and then you lash out at her, but really you need her to appreciate your efforts."). Willingness to actively work with emotion is often the result of a strong or positive alliance. Persistent passivity on the part of the participant might call for an alliance dialogue or experiential teaching on the nature of experiential and emotional and the role of the participant in that work.

7. Differentiation

- i. Finally, Primaries pay attention to changes in the degree of differentiation of emotional experience. For emotion utilization and/or transformation to occur, a participant's

primary emotional experience has to become differentiated over time. This implies that either the participant is verbally differentiating an initial emotional reaction into more complex feelings or meanings or into a sequence of other feelings or meanings, or that new feelings or aspects of the feeling emerge. In other words, participants' level of emotional awareness should increase and not get stuck in basic symbolizations of distressing feelings such as "feeling bad," "not well," or "afraid." For example, a participant started to tear up and look away when imagining his grandmother in the empty chair and said: "I feel so bad, I never visited her, after granddad died . . . I feel so ashamed . . . I just couldn't, I couldn't take it . . . I couldn't tolerate seeing the pain in you (to grandmother) . . . it was just too much." In this instance, the participant differentiates experience; the emotional process is highly fluid. Differentiation also entails a change in the manner of experience, that is, an emotion is more fully allowed, more freely expressed, or its expression changes. For example, in chair work a participant first freezes in fear, then starts to cry, fully allowing the painful experience. Here the emotional process is moving forward and fluid, without the participant explicitly verbally differentiating his experience. Generally speaking, a Primary has to look for some signs of "movement," either verbal or nonverbal, indicating that a participant's processing is not stuck or blocked.

- ii. The differentiation criterion thus introduces a time perspective, and in part looks at progress based on improvements on the other six dimensions. So, points raised in the previous sections are all relevant here. At the core, Primaries facilitate emotion differentiation by adopting a curious attitude and a highly exploratory style, both verbally and nonverbally, continually inviting participants to go to and stay with their internal experience, explore the "edges" of their experience, focusing on primary emotion. So, "I feel worthless" might differentiate into the following:

Primary: . . . worthless . . . like in his eyes I am no good . . .?

Participant: Like no matter what I do, I will never be the son he wants . . .

Primary: . . . like I am just the wrong son . . .

Participant: Yeah . . . not wanted, like a hassle to deal with . . . it makes me want to be invisible . . .

Primary: . . . just wanting to disappear . . . feeling so unloved . . . so alone . . .

Participant: (tearing up) Yeah, I was so alone . . .

d. Case Example

Optimal emotional processing is concerned with the moment-to-moment experience; following is an analysis of one piece of work looked at through the emotional processing lens. Analytical comments appear in brackets.

History: The participant is a 40-year-old woman working as a secretary. She had a psychiatric hospitalization for several weeks in the recent past for depression, but her mood did not improve substantially. She felt very low most of the time and was very critical of herself, for not being strong enough and unable to handle her workload, procrastinating the things she needed to do. In general, she felt empty and was at a loss as to what caused her to fall into depressed states time and again.

After a safe bond was established, the focus was on activating her emotional experience, raising her emotional awareness and helping her symbolize emotional experience and make sense of it. The work unfolded like this:

Participant: (in an external voice) It was a really nice wedding, everybody was friendly . . . and I was in a good mood . . . I don't know why I got so low . . . I still feel low. [verbal statement of undifferentiated global negative emotional experience]

Primary: And as you talk about this, you feel low . . . is it okay to speak from that place? [exploratory question, inviting participant to bring attention to bodily felt flow of experience to activate, symbolize and differentiate it]

Participant: (in low voice) I don't know, I don't know why I feel low . . . I don't really feel much . . . it's more like . . . everything is so pointless. These moods just come and go, there isn't much I can do about it. [expressing secondary hopelessness in a non-agentic manner]

Primary: So, it's like "what's the use . . .?" . . . like a resigned feeling? [empathic understanding] (participant nodding). And I hear you saying, "these moods just come and go." But somehow, you said that you got there in a good mood, and then something happened and you felt low. So, there is a process going on inside you that ends up with you feeling low. Is it okay for you to go there and look at it more closely, to see what happens inside you and see how this can change? (participant nodding) [Primary reframes participant's experience in terms of emotion process, thus supporting the participant's agency in this process]. Is it okay to just stay with this, maybe close your eyes and pay attention to your body . . . [keeping focus on bodily experience] and go back to the scene you were talking about . . . (using an evocative voice)? Everybody being so happy and loving and the bride's parents being so emotional . . . smiling faces . . . everybody seeming so connected . . . belonging . . . [Primary provides an evocative reflection of the emotionally relevant scene in evocative language, accessing episodic memory to help gain access to underlying primary emotion schemes].

Participant: (tearing up, focused voice) . . . I don't know . . . it's just . . . this would never happen for me . . . my parents would be like this with my brother, but not with me . . . they are never happy for me or interested . . . it's just when I

saw them there together, I felt like such an outsider . . . [begins to focus internally, starts to assume a more exploratory attitude toward her emotion; emotional experience appears to move toward a more primary emotional experience]

Primary: (with soft voice) . . . like an outsider . . . not belonging . . . so unloved . . . [empathic conjecture, supporting symbolization of primary maladaptive experience in proximal zone of development] (participant crying silently, nodding). Can you stay with that feeling? It is an important feeling . . . so painful . . . so unloved . . . [affirming empathic response to help participant stay with feeling and keep attending to it]. Can you speak from the tears? [invitation to symbolize primary maladaptive emotional experience and explore it]

Participant: (emotional voice) I don't know . . . it's just sad . . . lonely (crying silently) . . . I feel like nobody would ever want to be with me . . .

Here the participant interrupts her experience by criticizing herself, and the Primary introduces two-chair work. The participant attacks herself as being "whiny," "too fat," and "useless." As a reaction to the criticism, the participant goes into a state of undifferentiated resigned hopeless. To deepen and differentiate her experience, the Primary asks her to pay attention to her bodily experience.

Participant: It feels like there is a part of me dying down there. . . Like I can't breathe . . . (participant starts tearing up) [access to more primary painful emotional experience]

Primary: (in soft voice) I am dying down here . . . [empathic understanding], tell her (critical side) what it is like for you down there, when she attacks you . . . [facilitating expression and differentiation of emotional experience]

Participant: . . . It is so dark . . . so hopeless . . . (tearing up)

Primary: (soft voice) . . . so dark . . . yes, such a dark place . . . so hard to be there . . . [empathic affirmation] (pause; Primary nodding). Can you give these tears a voice? What would they be saying? [empathic exploration, facilitating differentiation towards the more primary experience]

Participant: . . . No matter what I do, it's never okay . . . it's never good enough.

Primary: Never good enough. . . And that leaves me feeling like "I am not good enough. . .?" [empathic conjecture toward the more primary maladaptive aspects of experience underneath the secondary hopelessness]

Participant: Yeah . . . like I am worthless . . . I'm not okay, never okay . . . (tearing up)

Primary: . . . so this is the painful place . . .

Participant: . . . I just feel so worthless . . . unlovable . . . like I just want to hide and disappear . . . I can hardly tolerate it . . . I just want to give up and just not feel . . . [differentiates primary maladaptive experience]

Primary: . . . So worthless and unlovable . . . so hard to feel this . . . [empathic affirmation]. Can you stay with that painful feeling, even though it is difficult, because it is important? It is this terribly painful place you go to, and then you start giving up and feel empty. But really, deep inside there is this feeling of being worthless and unlovable [supporting tolerance and acceptance of primary maladaptive experience, linking primary and secondary emotion, thus supporting agency]. Can you tell her (pointing toward critical side) what it is like for you when she attacks you, when she puts you down? "When you attack me, I feel so . . ." [facilitating expression and agency]

Participant: When you attack me, I feel so worthless and unlovable, and then I just want to disappear . . . not do anything . . . everything becomes so hard . . .

The participant expresses her need again in a more assertive way. The critical voice reacts with more contemptuous criticism. The participant switches back to the self-chair.

Participant: (shaking head) This is impossible! You are destroying me! I can't live like this!

Primary: (with slightly sharper voice) I can't live like this, you are destroying me! . . . I want to live! [supporting newly emerging more adaptive self-organization in an agentic way]

Participant: (with stronger voice) Yes, I want to live! This is no life; you are sucking it out of me!

Primary: I want to live! And I don't want this anymore! Stop doing this to me! [empathic conjecture, supporting newly emerging primary adaptive assertive self-organization]

Participant: Yeah, I want you to stop.

Primary: See what fits, but do you feel it "I want you to stop?" (participant nods) Can you speak from that place and say it with a stronger voice? "I want you to stop!" [supporting congruent expression of assertive anger]

Participant: (in louder, stronger voice, sitting up) Stop putting me down! Help me in all of this or leave me alone! [expressing primary adaptive anger]

When the participant switches back to the critical side, seeing and hearing the deeper need and assertion, she softens into respect and compassion for the self.

In the following sessions, the participant was able to address the unfinished business with her father, who had been invalidating of her emotions and needs and had put her down for being vulnerable. Over the course of therapy, she was able to assert herself against her father and allow sadness about never having had the support and appreciation she needed. Self-critical work also came back into focus in the form of a motivational split, when she faced her problems with procrastination. When she was able to assert herself against her pushy and degrading inner voice, she was able to more easily handle tasks she had to do.

e. CONCLUSION

Using the metaphor of a canoe on a river, participant and Primary are the team navigating the river of emotion processing. Unconditional positive regard for the participant and presence of the Primary are like the canoe itself. As Primaries we cannot see the territory directly; empathic attunement to the participant's experience gives us eyes to get a sense for what is going on around

us on this river. Different forms of empathy and their use to differentially facilitate different aspects of productive processing then could be seen as the paddle in our hands, both guiding and supporting the participant on his or her journey. Looking at the dimensions of emotion type and manner of processing as outlined above helps us adjust our next stroke to what is needed to keep the canoe steady and facilitate a mindfully aware manner of processing, and to navigate currents toward where the team wants to go, toward participants' primary adaptive emotions and needs. In this way, participant and Primary might become better navigators of process.