

Therapeutic Presence in Emotionally Focused Couples Therapy

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Abstract

Introduction: This theoretical study explores the concept of therapeutic presence (TP) in the context of Emotionally Focused Couples Therapy (EFT), as there is a lack of literature devoted to exploring these concepts. This qualitative systematic literature review explores, identifies and describes TP and its role in the practice of EFT.

Objectives: This article aims to provide findings on TP to successfully practice the skills and interventions required for becoming an effective EFT therapist and to aid the teaching, supervising and development of EFT therapists.

Methods: Literature review.

Results: This article finds that TP is a fundamental, trans-theoretical phenomenon implicated in the provision of effective psychotherapy. Furthermore, TP is identified as a determining factor – part of the “roadmap” per se – in the quality of the therapeutic relationship that informs meaningful change in EFT.

Conclusions: This literature review provides strong evidence for the necessity of further development of TP as a construct as it is foundational and conditional to transporting a couple from insecure and distressed to secure and bonded in the process of EFT.

Keywords: therapeutic presence, therapeutic relationship, emotionally focused therapy, couples therapy, common factors

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I. Introduction and background

Researchers define therapeutic presence (TP) as a therapist being completely within the moment for the client, and the engagement of one's whole self with the client with almost no self-centered goal or purpose in mind (Hycner, 1993; Moustakas, 1986; Webster, 1988). The concept of TP is considered a common and integrative factor in therapeutic practice (Geller, Pos, & Colosimo, 2012). Therapeutic presence encompasses mindfulness practices (Campbell & Christopher, 2012; McCollum & Gehart, 2010; Stauffer & Pehrsson, 2012) and development, as an individual, couple, or family's work with a therapist must include the fostering of a strong alliance and a positive therapeutic presence (Geller & Greenberg, 2002). Rogers' work (1951) detailed the conditions offered by the therapist, which are now considered fundamental elements of therapy, that are necessary for the growth and treatment of the client, namely, *genuineness*, *unconditional positive regard*, and *empathy* (Arnold, 2014; Malikioti-Loizos, 2013). However, in his later reflections, Roger noted his overemphasis on these three conditions and stated the obvious and clear *presence of the therapist* as the most significant element of therapy (Baldwin, 2013).

According to the theory and practice of Emotionally Focused Couples Therapy (EFT), the therapist being present as a "process consultant" is an essential skill they must learn in order to become proficient in EFT (Johnson, 2012). Without reflective practice on the part of the therapist, the therapeutic alliance is at risk. Despite this, there is a lack of research directly exploring the concept of TP in the context of the EFT therapist's training and development.

Common factors

According to Blow and Sprenkle (2001), factors that influence client outcome can be divided into four areas: extra-therapeutic factors, expectancy effects, specific therapy techniques, and common factors. Common factors such as empathy, warmth, and the therapeutic relationship have been shown to correlate more highly with client outcome than any specialized treatment interventions. The common factors studied the most include person-centered facilitative conditions (empathy, warmth, congruence) and the therapeutic alliance (Kelley, Kraft-Todd, Schapira, Kossowsky, & Riess, 2014).

Decades of research indicate that the delivery of therapy is an interpersonal process in which a crucial curative component is the quality and nature of the therapeutic relationship (Duncan et al., 2010; Dziopa & Ahern, 2009; Frank & Gunderson, 1990; Szasz &

Hollender, 1956). Existing research indicates an association between TP and the establishment and maintenance of a good alliance with the client, suggesting a rich therapeutic relationship (Geller et al., 2012; McCollum & Gehart, 2010; Timulak, 2014). Per Geller, Pos, and Colosimo (2012), the therapist's ability to be present in the moment with the client is considered necessary to support some of the most critical processes in therapy that encourage positive treatment results. The development of a positive therapeutic presence with clients supports the formation of a strong working alliance and secure environment in therapy (Geller & Greenberg, 2002; Stauffer & Pehrsson, 2012). Therapists have the responsibility for structuring and maintaining a therapeutic relationship built upon therapeutic presence. Outcome research indicates that the therapeutic relationship is more important to therapeutic change than any particular therapy technique (Lambert & Barley, 2001; Geller & Greenberg, 2012).

Some of the foundational theories introduced by Rogers, such as "Rogerian theory" and "person-centered psychotherapy", emphatically support the importance of therapeutic presence. Rogerian theory emphasizes relational qualities such as unconditional positive regard and empathy (Rogers, 1951). Some of the components of TP include *nonjudgmental acceptance*, *empathy*, *present moment acceptance*, and *attitude*.

Therapeutic presence

A working model of TP was developed by Geller and Greenberg (2012). The authors identified three emergent domains of TP in the psychotherapy encounter: preparing the ground for presence; the process of presence; and the actual in-session experience of presence. They also defined TP as "bringing one's whole self into the encounter with the client, being completely in the moment on a multiplicity of levels, physically, emotionally, cognitively and spiritually" (Geller & Greenberg, 2002, p. 82). When a therapist combines purposeful attention, nonjudgmental acceptance, and empathy, he or she embodies TP. The nonjudgmental acceptance – also known as unconditional positive regard – of clients is a core focus of person-centered counseling (Rogers, 1951). When the therapist is willing to show nonjudgmental acceptance and empathy towards the client, TP is demonstrated within a relationship (Rogers, 1951). Therefore, in addition to the commonly taught skills of helping, the personal qualities and characteristics of the therapist influence TP. Within the literature on TP, these personal features are consistently identified as warmth, acceptance, empathy, flexibility, self-awareness, and genuineness.

TP is trans-theoretical and foundational to all therapeutic encounters. TP is classified as essential in a healthy therapeutic dynamic, the “capstone” of sorts in a therapeutic skill set, and a foundational interpersonal stance that is necessary for progress in therapy (Kinsella, 2017; Tannen & Daniels, 2010). TP will only impact clients if they are experiencing the therapist as present as well. The therapist being with and for the client is essential (Colosimo & Pos, 2015; Geller & Greenberg, 2002). The point of the client meeting with a therapist is to benefit the client alone. There is an absence of therapist ego or self-consciousness. The singular intention is to heal the client. Furthermore, the intention to heal the client supersedes the intention to create a particular outcome.

An awareness of potential blocks or challenges to TP during a therapy session must also be taken into consideration. According to Colosimo and Post (2015), TP is difficult to sustain. They identify five sources of non-present behavior: hyper-intellectualization, fear, fatigue, reactivity, and distractibility. These states of mind in the therapist can easily create missed client signals or a failure to respond accordingly.

Emotionally Focused Couples Therapy (EFT)

Developed by Johnson (2007, 2012), EFT is an evidence-based method of couples therapy. The EFT therapist frames relationship distress as a result of partners’ rigid engagement in negative interaction cycles which grew from their unmet attachment needs within their romantic relationship (Johnson, 2012). EFT, based on the attachment theory developed by Bowlby (1969), uses an integrative approach that encompasses humanistic, experiential, systemic, and attachment-based strategies to help improve relational distress. During therapy, partners learn new and functional interactive patterns by identifying, experiencing, and expressing their attachment needs. Once internalized, these new patterns are believed to assist in the restructuring of partners’ relationship specific (RS) attachment orientations and behavior that is responsive and creates safety in the relationship (Johnson, 2012). The process of change occurs through nine steps and three stages during the course of treatment.

Theoretical framework

The theoretical framework of this literature review is based on three foundational theories of psychotherapeutic change that guide therapists throughout the process of EFT: the experiential-humanistic approaches of both Rogerian and Gestalt therapy, along

with systems theory. According to Greenman and Johnson (2013), “one of the strengths of EFT is its grounding in specific theories of intrapsychic experience and interpersonal change” (p. 48). Rogerian and Gestalt therapy are both person-centered theories, which, according to Herlihy (1985), are based on the fundamental assertion that humans are driven by self-actualization. According to Rogers (1961), at the fundamental level, human nature is trustworthy and constructive when it is freely functioning. As such, the Rogerian approach to counseling consists of helping individuals to “reclaim the self-actualizing urges and acknowledge their wisdom” (Meador & Rogers, 1979, p. 132).

The Gestalt therapy approach was developed by Fritz Perls (1951) and is also based on the concept of self-actualization. In this approach, the goal is to assist individuals in their transition towards self-support, and the approach is based on the assumption that growth is increased through self-regulation. The two approaches are significant in the context of this study, as researchers have found a link between TP and both Rogerian (Ardito & Rabellino, 2011) and Gestalt therapy (Calderón, 2011) approaches, and have highlighted TP as a foundation of the primary condition for empathy in these same approaches.

Systems theory highlights the interactions between individuals who are members of a system. In the context of EFT, systems theory states that presenting problems are often outcomes associated with recurring interactional patterns. EFT follows a number of premises in systems theory. These premises include the assumption that causation is circulatory, the consideration of a behavior in its specific context, a consistent and predictable relationship between different system elements, the assumption that every behavior has a communicative element, and the idea that the goal of therapy is to interrupt negative, recurring interactions, to allow new patterns to emerge (Gurman, Lebow, & Snyder, 2015).

II. Methodology

The problem under investigation is the need to explore the concept of TP in the context of the EFT therapist’s training and development (Greenberg, 2014; Norcross & Lambert, 2014; Timulak, 2014). The purpose of this qualitative systematic review of the research is to describe the operative variables involved in using TP, through the existing literature on experienced EFT therapists, in order to successfully practice the skills and interventions required for becoming an effective EFT therapist.

The following questions guided the study:

What contributions from the literature inform TP in the context of EFT?

What core skills and interventions in EFT use elements of TP?

And finally, how does TP contribute to change events in EFT?

The thematic data analysis method is based on the qualitative literature review synthesis method described by Thomas and Harden (2008). The analysis generated analytical themes on TP and how the themes are encapsulated within the practice of emotionally focused couples therapy.

III. Results

EFT is an empirically validated process-experiential approach to helping couples in distress (Wiebe & Johnson, 2016). In successful EFT, the therapist can create a safe context – a secure base, in attachment theory terms – for both partners to access and work with emotion and restructure their interactions (Denton, Johnson, & Burlison, 2009; Johnson et al., 2013). The couple system is actively engaged, and the therapist uses their personal style, resources, and interventions to connect with each partner's experience. The core elements of EFT were defined and themes of TP were identified and explored within those elements. These themes were used to determine the contributions from the literature that inform TP in the context of EFT.

General themes found in the literature

There are several over-arching themes identified that inform the concept of TP in the practice of EFT. These themes impact the alliance building, maintenance, and the emotional attunement required for a successful outcome in EFT. Several themes speak more to the essence of TP within the practice of EFT, and specifically the importance of the alliance. These themes highlight the ways in which the presence of the therapist is critical to creating and maintaining a therapeutic alliance by creating safety, as well as staying attuned and in the moment (Colosimo & Pos, 2015; Fife, Whiting, Bradford, & Davis, 2014; Makinen & Johnson, 2006; Phelon, 2004; Tannen & Daniels, 2010).

Empathy is also a necessary prerequisite for, as well as an integral part of, both EFT and humanistic approaches to psychotherapy in general (Johnson, 2012; Rogers, 1951). By bringing themselves into the session, therapists are potentially able to take themselves into their client's experience. They are able to step into the client's shoes and essentially 'become' the client,

experiencing the client's feelings while also feeling their own (Webster, 1988). Several studies identify the unique contributions of empathy and TP to the quality of the working alliance (Colosimo & Pos, 2015; Geller, Greenberg, & Watson, 2010; Schapira, 2013).

Safety and attunement

TP facilitates the creation of safety and establishes the therapist as a safe attachment figure in the practice of EFT. A scholarly article by Geller and Porges (2014) identifies right hemisphere neural co-regulation as a chief component of safety that is conveyed through TP. Furthermore, in accordance with Porges' polyvagal theory (1995), effective social communication can only occur during states when safety is experienced, because only then are the neurobiological defense strategies inhibited. One of the keys to successful therapy is for the therapist to be present and to promote client safety so that the client's involuntary defensive subsystems are down-regulated, and the client's newer social engagement system is potentiated (Geller & Porges, 2014). In effect, this safe environment encourages the development of new neural pathways for the client, which also contributes to the repair of attachment injuries and a positive social interaction.

TP facilitates attunement between the therapist and client during an EFT session. Attunement may be emotional, empathic, and/or present moment focused. Attunement reflects "being in the now"; being in the moment rather than preoccupied by thoughts of what has just occurred in the past or what may occur in the future (Colosimo & Pos, 2015; Geller & Porges, 2014). Successful EFT is dependent upon the therapist focusing on the here-and-now responses of each partner; tracking and expanding both internal experiences and interactional moves and countermoves (Johnson, 2012; Johnson et al., 2013; Palmer & Johnson, 2002).

Present process

The EFT therapist is most frequently working within a process-experiential framework. Clients are constantly processing and constructing their experiences and making meaning out of them. Focusing on present process helps the client expand awareness of that experience and integrate aspects that were excluded from awareness to create new meaning (Johnson, 2012). TP occurs when the therapist is attuned in the moment, not behind or ahead of what is happening, and the therapist may use certain behaviors to indicate this phenomenon. For example, the therapist may use 'time words' such as '*what just*

happened or *just now* to take clients to the leading edge of their experience, or use the client's same words to stylistically express that they are present and engaged with the client's experience (Bradley & Furrow, 2004; Colosimo & Pos, 2015). Using a present moment focus allows the therapist to communicate their own resonance, or resonant felt sense, to the client's in-session narrative. TP allows for the therapist to attune to and recognize when the client is not feeling safe, heard, or understood, along with recognizing and regulating their own reactivity to maintain authentic consistency with the client.

Facilitating emotional depth

Engaging deep emotion is also dependent upon a strong alliance, as clients must be willing to access deep emotion. TP facilitates depth, which enables clients to access emotion – a key target and agent of change in EFT. Relational depth allows for a shared intersubjective moment that promotes the therapeutic work of exploration, emotional transformation, and the creation of new meaning to one's experience (Colosimo & Pos, 2015; Geller & Porges, 2014; Greenberg, 2014; Webster, 1988). EFT targets emotion, as emotions are believed to tell us what we want and need (Johnson, 2012). Emotion primes our behaviors – or, in EFT terms, “action tendencies” – within our relationships. Typical action tendencies such as pursue/demand or withdraw are viewed as coping strategies in the face of a threat in a romantic relationship. With the attachment system activated, the therapist must provide a presence that is a secure base/safe haven, for partners to risk new steps of vulnerability in their relationship (Bradley & Furrow, 2004). The therapist works inter-psychically and intrapsychically to create enough depth to access primary (underlying) emotion and create a corrective emotional experience, at times within the clients themselves, and at other times with their partner through the use of enactments.

Blocks to therapeutic presence

Awareness of potential blocks or challenges to the manifestation of TP within EFT must also be taken into consideration. Like any psychotherapeutic approach, the EFT therapist must learn how to master the skills, interventions, and techniques that create this positive outcome. Blocks to TP may arise from a sort of “hyper-intellectualization” of a therapist's theoretical and analytical processing, making experiential processing difficult (Colosimo & Pos, 2015; L. S. Greenberg & Geller, 2001; Sandberg & Knestel, 2011).

Therapeutic presence and EFT interventions

According to Johnson (2012) and Johnson et al. (2013), there are several specific skills and interventions in the practice of EFT that the therapist uses to access and reformulate emotion and restructure the couple's interactions. These skills and interventions were delineated in the results reported in chapter four. In addition to the core skills and interventions, the manner in which the therapist skillfully delivers these interventions relies heavily on vocal quality and nonverbal behavior, termed “RISSSC,” which stands for *repeat, image, simple, slow, soft, and client's words*.

The findings of the literature synthesis identify two primary themes within TP that inform the core skills and interventions in the practice of EFT. The first theme demonstrates the congruence between TP and EFT interventions, as TP is a necessary element that is foundational to the therapist's ability to successfully carry out the interventions. The presence of the therapist is an instrumental part of conveying congruence towards each client and the couple within a therapy session.

A task analysis study by Colosimo and Pos (2015) puts forth a “rational model of expressed therapeutic presence” that was found to contain elements of reflection, heightening, and the use of RISSSC. For instance, the authors state that using empathic reflections, in essence using the same word that the client is using, affirms the client's implicit communication as accurate. They also mention the therapist focusing the dialogue on the present moment, which is known as evocative responding in the EFT literature.

The second theme explores the use of RISSSC (repeat, image, simple, slow, soft, and client's words), which was found to be abundant within the TP literature on therapist behaviors indicative of TP. The therapist's voice, vocal tone, and vocal quality (prosody) was identified the most within the literature (Bradley & Furrow, 2007, 2004; Colosimo & Pos, 2015; Geller & Porges, 2014; Greenberg & Geller, 2001; Kykyri et al., 2016).

Specific elements of RISSSC, including use of the clients' words, soft voice, images, and so on, as the face and voice, are powerful conduits through which safety is communicated (Geller & Porges, 2014). The language of the right hemisphere, which is affective and body-based, is transmitted by the primary process communications of the face, gesture, posture, touch, and prosody (Kykyri et al., 2016). Through providing consistent presence, the therapist relationally regulates the client's nervous system stress responses. This, in turn, facilitates self-exploration through social contact.

This sense of safety is what helps the client explore implicit fears and take emotional risks with their partner in EFT.

Therapeutic presence and key change events in EFT

According to Johnson (2012), within EFT, the process of change in the couple dynamic occurs in three major shifts. The first is *de-escalation of the negative cycle*, and other two are *withdrawer engagement* and *blamer softening*. These are also termed key change events, as they create first order change, resulting in the couples' ability to be both aware of and exit the negative interactive cycle on their own and increase their attachment security. Eventually, a couple moves from insecure and distressed to secure and non-distressed during the therapy process. Successful change events are dependent upon the therapist mastering the complete range skills and interventions within the practice of EFT. EFT makes use of enactments between partners to shape responsive attachment-significant contact, and to change couple interactions in all EFT stages, to orchestrate change events (Tilley & Palmer, 2013).

The lack of peer-reviewed literature poses difficulties in fully answering how TP informs key change events in EFT. Within the studies available, there are two primary themes identified within TP that inform the facilitation of key change events in the practice of EFT. The first theme identifies how interventions are ineffective or insufficient to promote key change events without TP (Furrow, Edwards, Choi, & Bradley, 2012). As already established, TP is a necessary element that is foundational to the therapist's ability to successfully carry out interventions that "scaffold" in order to successfully facilitate key change events.

The second theme posits that the presence of the therapist is instrumental for the engagement of the client's emotional depth and the facilitation of the emotional regulation necessary to facilitate key change events. What has been gathered from current studies is that key change events are highly dependent upon the clients experiencing emotional depth (Bradley & Furrow, 2007, 2004; Johnson & Talitman, 1997; McRae, Dalgleish, Johnson, Burgess-Moser, & Killian, 2014; Zuccarini, Johnson, Dalgleish, & Makinen, 2013). Furthermore, successful blamer-softening events are most dependent upon the client experiencing and disclosing attachment-related affect, along with the therapist's ability to heighten, engage, and construct enactments of this affect (Bradley & Furrow, 2004; Moser et al., 2016; Wiebe & Johnson, 2016). These change events are also dependent upon the therapist having a strong and

stable therapeutic alliance throughout clinical work with both partners (Johnson & Talitman, 1997). The couples' therapist, working in a "right hemisphere modality" such as EFT also functions as an external regulator to contain affect and facilitate responsiveness and repair between partners (Lapides, 2011).

IV. Discussion

The research questions guiding the literature review were answered by systematically analyzing qualitative, quantitative, and mixed methods peer-reviewed articles on TP, EFT, or both TP and EFT together. The existing theory, skills, and interventions of EFT were identified within the published works of Dr. Sue Johnson on the practice of EFT (Johnson, 2012; Johnson et al., 2013). This section summarizes the results of the data analysis, discusses how the results correlate with existing theory and literature, and reviews the relevance of the findings.

The results are exemplified in humanistic theory, most specifically the works of Carl Rogers and the practice of person-centered psychotherapy. In this theory, therapeutic presence is seen as the foundation of the relationship conditions of empathy, congruence, and unconditional positive regard (S. M. Geller & Greenberg, 2002). Presence may also be viewed as a larger whole; an overarching condition through which empathy, congruence, and unconditional regard can be expressed (S. M. Geller & Greenberg, 2002). This data analysis supports and explains Rogers' suppositions about the nature of presence. TP is a precondition for all other relationship conditions. TP is regarded as the state of being fully engaged and receptive in the moment, as well as in contact with the client's inner experience. This interaction allows for empathy, congruence, and unconditional positive regard to emerge and be expressed. According to Rogers, such contact is a precondition for the relationship conditions (Schmid, 2002).

TP involves being fully with the client in a state of moment-to-receptivity. In addition, it is a foundational way of being that lays the basis from which all other therapeutic processes can emerge. It has been identified that TP is not always the easiest practice to sustain, as therapists are also human. Therapists must be versed in a method of helping, while also trained to pay attention to the process, which can pose some challenges.

The findings strongly suggest that mindfulness meditation and mindfulness practice are instrumental in helping therapists become fully present with their clients. This idea demonstrates that therapists can embody skills to become better at TP as it is a practice

that involves bringing one's awareness fully into the present moment without judgement or evaluation (Kabat-Zinn, 2003). Mindfulness meditation has already been established as a valuable technique that may be used to cultivate the presence of the therapist within the practice of psychotherapy (Baker, 2016; Colosimo & Pos, 2015; Gambrel & Piercy, 2015; Geller & Greenberg, 2002; Gu, Strauss, Bond, & Cavanagh, 2015; McCollum & Gehart, 2010; Phelon, 2004).

The themes that emerged when exploring how TP informs EFT align with both humanistic and systems theory. Carl Rogers' person-centered philosophy is foundational to building and maintaining the alliance. The key parts of the process of person-centered therapy are inherently common to those practiced in both TP and EFT with respect to the therapeutic alliance. Having moment-by-moment empathy allows the client to reflect and connect with the therapist, offering common factors found in all relationship therapy (O'Leary, 2015). The alliance is an even more critical construct within EFT. If ruptures in the alliance are appropriately managed, they can lead to positive therapeutic change; however, if not handled well, ruptures can result in drop out or other negative outcomes in therapy (Swank & Wittenborn, 2013). A potential alliance rupture may arise from a therapist being distracted or "in their head" while attempting to remember the theory and practice of EFT during a session.

Another humanistic component of EFT involves the emphasis placed on the influence of emotional experience to initiate and maintain interpersonal and behavioral change. Rogers and his contemporaries who practiced Gestalt therapy (e.g., Fritz Perls) worked to help clients recognize, talk about, accept, and use their emotional experiences as sources of information to guide their behavior (Greenman & Johnson, 2013). Similarly, in the practice of EFT, therapists help clients recognize, expand, feel, and express their emotions by intensifying and reflecting them within the session. TP has been identified as an element to monitor and tune into the moment-to-moment emotion which can arise in the session.

The emerging themes also align with systems theory, as a systemic conceptualization takes into account the relational complexities inherent in having more than one client present during couples therapy (Karam, Sprenkle, & Davis, 2015). Therefore, the alliance is a much more complex issue in EFT, and all couples therapy approaches. It involves not only how each partner views the therapist, but also how that partner sees his/her spouse responding to the therapist,

and judges that the therapist understands and can work with the marital relationship (Johnson & Greenberg, 1989). According to Karam et al., when there is high agreement on tasks, goals, and bonds between all interpersonal subsystems of the therapeutic system, alliances will be strong. When there is disagreement on these dimensions, however, the therapeutic alliance is weakened, and intervention is needed to repair the therapeutic relationship. EFT emphasizes the need to repair such ruptures (Swank & Wittenborn, 2013). TP helps the therapist attune to such ruptures. However, the role of TP has not been visibly identified in the literature with respect to the systemic nature of couples' therapy.

TP clearly informs the practice of EFT. TP is instrumental in the therapist's ability to effectively maintain a therapeutic alliance, attune to ruptures in the alliance, focus on emotion, and have an awareness of blocks to effective EFT. As a process-experiential and humanistic theory, TP is abundant within the practice of EFT.

According to Johnson and Greenberg (1989), EFT, along with all conjoint couple and family therapies, must deal with the fact that the therapist becomes a part of the interactional system that he or she is trying to change. In both a humanistic and systemic manner, the therapist must establish a warm, accepting, genuine relationship with each spouse in the presence of the other, and validate each partner's views of reality and experience of the relationship without blaming or alienating the other. A positive and strong alliance with each spouse and with the system as a whole in all aspects – bond, task, and goal – is an essential prerequisite of a successful outcome in EFT.

Humanistic and systemic theory is exemplified in discovering the essence of TP in the practice of specific core skills and interventions of the EFT therapist. EFT therapists are continuously present and mindful of remaining open and empathic, connected to their clients' pain, and able to directly communicate support and understanding. EFT therapists learn that the interactional cycles they observe in couples, no matter how destructive to emotional closeness they may seem, generally represent people's sincere and best efforts to achieve the safety and satisfaction in their relationships that everyone longs for (Greenman & Johnson, 2013). This attitude of unconditional acceptance is the foundation upon which all EFT interventions rest. EFT therapists also understand the nature of the couple system, and recognize that couples' difficulties are primarily the result of self-reinforcing interaction patterns (Tilley & Palmer, 2013). The use of enactments in EFT are choreographed to directly change this system.

The integration of these theoretical foundations is designed to ultimately help clients recognize, experience, and expand upon the emotional repertoire that is often present, but exists beneath conscious awareness, during their problematic interactions. In turn, the clients will send clear, unequivocal messages to their partners that will help them achieve the comfort and connection they are seeking (Greenman & Johnson, 2013). It has been established that the way in which an EFT therapist exemplifies TP is crucial to the successful implementation of many of the tasks and interventions in EFT.

To determine how TP contributes to achieving key change events in EFT, the same humanistic and system principles apply. However, with key change events, an attachment theory frame is added to emphasize the need for partners to be accessible and responsive to each other to build a secure emotional bond. Attachment theory, as put forth by John Bowlby (1969), was later expanded upon to include the way adults bond, behave, and connect in romantic relationships. According to Moser et al. (2015), during EFT, as partners identify, experience, and express their attachment needs, they learn new patterns of engagement with their partner. These new patterns aid in the restructuring of partners' relationship-specific attachment orientations and behavior.

It is imperative to acknowledge both the unique and common factors within couple therapy interventions (Davis, Lebow, & Sprenkle, 2012). Understanding what the TP and EFT literature says about first order change in couples' therapy provides support for the theoretical and clinical assumptions that TP within the practice of EFT is helpful in facilitating key change events. In turn, this leads to a stronger attachment bond between partners during a course of EFT.

Limitations and delimitations

There are a few limitations recognized with respect to this literature review, which includes the data collection process and the generalizability of the findings. As the study is a systematic review of the literature, using only one inclusion criteria – studies available in English – may have proven to be a limitation. A few of the studies were not conducted in English but were translated into English. As such, additional research associated with EFT therapy and TP published only in non-English languages was not possible to include. Therefore, the research findings may have limited generalizability based on cultural variations.

A second limitation is the use of one primary source of data, that being existing peer-reviewed

literature. At times, there may be a lack of quality control within the peer review process. Also, a vast amount of data on a broad topic was sifted through to answer questions on a specific topic. Using additional data sources would help to solidify the strength of the answers to the research questions.

A third limitation identified after completion of the data analysis is the preponderance of qualitative data and research that used single subject case studies or secondary data. The lack of quantitative data may limit the generalizability of the results as well.

Implications for professional practice

Based on the synthesis of scholarly literature, this study has resulted in a conceptual framework of TP within the practice of EFT. A fair amount of literature exists regarding the development of TP, and this literature review's findings offer new information for the field of couples' therapy and the empirically validated EFT approach. This material may help fill the existing gap in the literature on this topic as it has contributed to a new way of conceptualizing TP within the practice of EFT.

According to Geller and Greenberg (2002), the primary way to view the presence of the therapist is about how they monitor their experience in therapy. Through an enhanced sensitivity to the client's experience, therapists can use their selves as tools in understanding and responding to the client, as well as to sense how their responses are impacting clients. The therapist's bodily experience when therapeutically present is a reflection of an inner synthesis of the client's expressed and felt experience with the therapist's own lived experience and professional expertise. There is a willingness to be impacted and moved by the client's experience, while still being grounded and responsive to the client's needs and experience.

TP involves a balance and dual level of awareness for the therapist of being in contact with both the client's experience and his or her own experience, which can pose some challenges. Therefore, this balance and dual awareness should be emphasized in the clinical practice of psychotherapy. The findings indicate that mindfulness meditation is the most instrumental skill in the ability to achieve this dual awareness. Including mindfulness meditation to facilitate TP should be a standard part of psychotherapy training.

Considering the importance of TP in developing and maintaining a therapeutic alliance, staying empathically attuned, and creating an environment of safety, EFT training programs can use the themes

generated from this study to enhance EFT training and benchmarks for proficiency. Training material that emphasizes the common scenarios that arise from learning a new therapeutic model such as EFT can potentially create blocks to effective work. The critical aspects of an alliance and a “rupture and repair” process should be included in professional education on potential blocks to TP, as well as the dual awareness of the self of the therapist, and how each client (along with the couple system) is significantly impacted in the practice of EFT.

This study shows that TP is ubiquitous in the use of EFT core skills and interventions. Without it, a successful execution of EFT skills and interventions are not possible. The way these skills are carried out, using RISSSC, was found to be the most potentiating element of TP within the practice of the EFT skills. The elements of RISSSC and the vocal quality of the therapist are included in training materials. However, applying these elements may be unnatural and awkward for a therapist new to this style of therapy. An emphasis on the specifics of RISSSC and a significant amount of time immersed in RISSSC training is recommended, as this is one of the primary ways TP is conveyed in EFT practice.

Virtually no EFT research studies have explored the role of the therapist’s actions on the facilitation of change events, except for two by Bradley and Furrow (2004) and Furrow et al. (2012). It has been established in these studies that the therapist is working at a high level of client emotional experiencing. The Furrow et al. (2012) study specifically gauges TP at this high level of emotional experiencing. The Furrow et al. (2012) study reveals that TP is critical for successful change events. This includes the therapist’s vocal quality and his or her mastery of evocative interventions to heighten and engage emotion. Working at a level of intense emotion is another piece that may give therapists some degree of discomfort or struggle. This issue points to the necessity of EFT training that places a major amount of attention on the therapist’s ability to remain in the present process while accessing and heightening emotion and attachment-related affect. The presence of the therapist is also instrumental in co-regulating this emotion and providing a secure base for such emotion to emerge.

Recommendations for research

The results of this research should lend itself to further studies on the development of TP in the practice of EFT. Additional qualitative and quantitative studies would improve the transferability of this study. A study that explores the lived experiences of therapists with respect to TP is warranted and would provide more explicit

information on the EFT therapist’s experience of TP. EFT outcome studies, of which there are many, have yet to explore the presence of the therapist. This current synthesis of the literature shows that TP is highly dependent upon the client’s viewpoint. However, there are no scholarly works that discuss this aspect of couple therapy. More rigorous research on this topic may provide information for EFT therapists to improve their ability to be with distressed couples in ways that are healing, as well as being able to guide them into a state of attachment security.

V. Conclusion

The therapeutic relationship is viewed as a critical element of successful therapy in nearly every known approach to individual and couples therapy. There is a significant amount of interest in what elements of the therapeutic relationship appear to affect change (Crenshaw & Kenney-Noziska, 2014). Regardless of theoretical orientation, clinical interventions, and therapeutic tools, being mindful and purposeful by being fully present in the context of psychotherapy is essential. Humanistic theorists and clinicians have long regarded presence as a central factor in the process of therapy (Colosimo & Pos, 2015).

There is a substantial gap in the research regarding the specific elements and mechanisms through which TP contributes to change in EFT. More rigorous research on this is needed. It is critical for EFT therapists to recognize the importance of TP and its pivotal role in EFT. TP encompasses the skills and techniques emphasized in EFT, including the common factors of empathy, warmth, and genuineness; therefore it aligns with the existing body of research on common factors within EFT.

TP is a fundamental, trans-theoretical phenomenon implicated in the provision of effective psychotherapy (S. M. Geller & Greenberg, 2002). This includes EFT as well as any other method of couples’ therapy. According to Greenman and Johnson (2013), it is not sufficient to know simply whether a particular approach is helpful or not. It is also supremely important to know how a particular approach works and to ensure that what therapists and clients are actually doing in session is related to the positive changes observed in outcome research. This study undoubtedly identifies TP as a determining factor – part of the “roadmap” per se – in the quality of the therapeutic relationship that informs meaningful change in EFT. This review and synthesis of the literature establishes the necessity for TP as foundational for transporting a couple from insecure and distressed to secure and bonded using the process of EFT.

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