WORKING WITH BLOCKS

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STAGE 3: ACCESSING UNDERLYING FEELINGS

- 7. *Access* unacknowledged feelings/needs underlying interactional positions and express them
  - Softening of blamer- sadness, loneliness, anxiety
  - Withdrawer re-engagement - anxiety, anger
  - Dominant goes one down – shame, fear
  - Submissive asserts – fear, inadequacy, anger
- 8. *Identify & overcome* blocks to accessing.
- 9. *Promote* identification with disowned needs/aspects of self, integrating these into relationship interactions.

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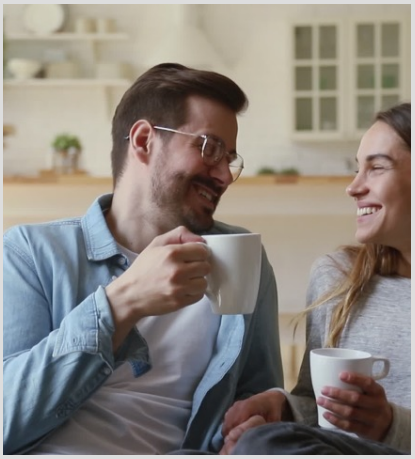
STAGE 4: RESTRUCTURE THE INTERACTION AND THE BOND

10. *Promote* acceptance by the other of partner's experience/aspects of self.

11. *Facilitate* the expression of needs and wants to restructure the interaction, and create emotional engagement.

- - Promote softening events
- - Structure emotional engagement-bonding and validating events.

12. *Promote* self soothing and emotion transformation in each partner.



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Working with a Non-responsive Partner

WORKING WITH PARTNER A

- *I hear how painful it is to feel alone. (validate vulnerable feeling)*
- *I know it's hard to hear your husband not responding. If he was able to respond to you, we wouldn't be having the difficulty we are having. (validating it's painful to not have her husband respond empathically)*
- *This is a helpful opportunity to figure it out, and I am going to take some time to work with him now to see what's going on. Okay? (I will help you/get permission)*

WORKING WITH PARTNER B

- *What stops you from being able to respond to your wife's pain? What happens inside?*

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Blocks & Avoidances

Treated as *needed protection* and the goal is to *understand the protective function*

Identify the nature of the fear:

a) reaching out - fear of rejection or criticism:
I am afraid you will reject or criticize me.

b) letting the person in - feeling ashamed, worthless, unlovable: *If I let you see me, you will see how unlovable/worthless/shameful I am.*

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TWO TYPES OF BLOCKS

- Interpersonal –- Impasses, walls, breakdowns, gridlocks, vulnerabilities are not shared because of fear or anger. No one willing to 'jump in' first.
- Intrapersonal – Block with intrapsychic processes. Self interruption. Working to increase awareness of physiological, (bodily-felt experience), feelings, cognitive processes.

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WORKING WITH INTERPERSONAL BLOCKS

- Naming it as block, impasse, crossroads. (Difficult to come across the bridge)
- Validating it as understandable in terms of cycle and past history. (this has happened over many years)
- Contextualizing and reframing. (It is understandable, given all that has happened between you.)
- Creating contact in present (How does it feel when you look at each other now?)
- Use of evocative language and metaphor (Like a dead forest between you)
- Recognizing function of block. (Kept you safe; kept relationship intact)
- Encouraging acceptance. Not encouraging to move too quickly. (Don't go out to battlefield too quickly after a war)
- Naming and conjecturing about what is behind walls for each. (Fear, anger, sadness)
- Directing Dialogue (Can you share your sadness with each other?)
- Setting Direction (This is also a possibility and you need to decide how you will move forward; Contemplating can be turn things back around to make it grow again?)
- Sometimes about reaching in a speaking for unspoken (underlying vulnerabilities)

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OVERCOMING INTRAPERSONAL BLOCKS (SELF-INTERRUPTION)

When one partner is unable to access underlying emotion:

Stage 1: Help person become aware of how s/he is interrupting or suppressing. When happens, say "What just happened there?"

Stage 2: Helping person become aware of HOW s/he is doing it. This is main work. Helping person become aware of what they are doing to stop themselves. May be cognitive, .ie "If I cry, my wife will think I am weak."

Stage 3: Become aware of previously blocked emotion Once it is accessed to therapist, turn to partner and ask what they feel in relation to underlying feelings.

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EFT SKILLS USED WHEN WORKING WITH BLOCKS

- Exploratory Question re both he and partner's feelings
  - Do you know about your wife's loneliness?
  - What is it like inside for you when she cries?
- Empathic Validation
  - Something important happens inside for you, that you deal with it in such a way…..(discovery-oriented tone)
- Empathic (interactional) Reframe
  - But you don't see the tears…..you actually see her coming after you…
- Naming it as a Block
  - For you there is a wall.
- Empathic Reframe in terms of protection
  - But we know that the wall is somehow protecting you….

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EFT SKILLS USED WHEN WORKING WITH BLOCKS

Exploratory Question

- What is happening behind the wall?

Empathic Conjectures to explore feelings behind the wall

- You have been mad???
- So it is a place to gather yourself? (Understanding/Conjecturing about FUNCTION of the wall)
- So you feel almost thwarted…defeated…?
- I am angry but I don't want to be…?

Linking Behavior (withdrawal) to emotion regulation (underlying feelings)

- So I am going to withdraw in order to not be too angry as a way of not feeling

Identifying and Exploring the Fear Inherent in the Block

- It's as if it will be bad?... How so…? Is it a fear of retaliation? Or a fear of losing control?

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Overcoming Self-interruption

Awareness of the how of Interruption: **Help client become aware of <u>how</u> they are blocking, interrupting emotion**

How do you stop yourself? Do you squeeze back your tears? Or do you say something to yourself?

- **Cognitive Blocks**: *It's weak to cry.*
- **Physiological Blocks:** Squeezing back muscles in the jaw, holding one's breath
- **Behavioral Blocks:** Changing the topic, laughing, making jokes, looking away
- **Affective Blocks:** Feeling anxious or angry, worrying - rather than feeling the underlying sadness

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Overcoming Self-interruption

Recognising Agency: **Get clients to own what they do (the interruption)**

- *So you tell yourself that you are weak if you cry, try saying that out loud, 'I am weak if I cry'.*
- *So you just held your breath when the sadness came up, can you hold your breath again now?*
- *So you just got angry when you felt vulnerable. Can you do that again right now, tell her I'm angry.*

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Impasses

Non-therapeutic partner RESPONSES to primary emotions:

- **When A is expressing primary sadness,**
  B goes into maladaptive shame spiral
- **When A is expressing health primary adaptive anger,**
  B starts to cry
- **A is expressing new core vulnerability and**
  partner B is indifferent or angry

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What to do?

WORKING WITH PARTNER A

- Validate the primary, vulnerable or adaptive emotion in partner A before you address partner B's negative response
- Validate that it is difficult/painful to get that response from partner B
- ***I'm going to help you with this:*** Let partner A know you're going to work with partner B to understand what's happening
- **Get permission: *Is that okay?***

WORKING WITH PARTNER B

- Go to partner B and ask, *What just happened when...?*

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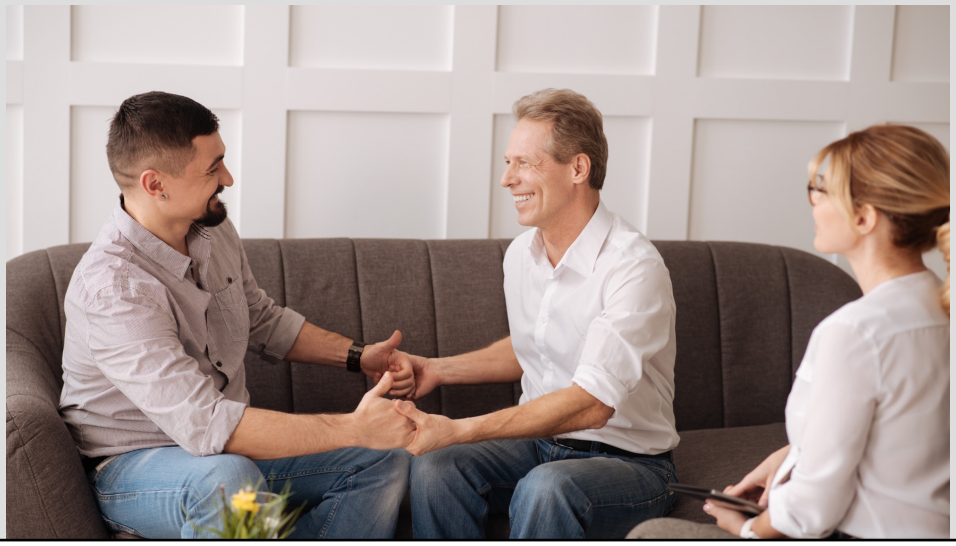
ENACTMENTS: RESTRUCTURING THE NEGATIVE INTERACTION



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THE EXPERIENCE OF AN ENACTMENT

An enactment is a moment of contact that can evoke:

- Defensiveness and negative reactions
- Blocks/avoidance/interruptions
- Confusing Feelings
- Underlying vulnerable emotional experience/heartfelt needs

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PROCESSING THE EXPERIENCE OF AN ENACTMENT

- Therapist checks in about experience of the enactment
  - ➢ *"What was that like for you? What's that like inside?"*
- Therapist's role is to:
  1. Validate fears/reactions/blocks
  2. Help partners understand their experience
  3. Integrate new experience into their sense of self and the relationship
  4. Highlight an important part of the enactment
  5. Help partner's take in and accept what was expressed

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COUPLES THERAPY INVOLVES COACHING CLIENTS

Having begun to learn to approach, allow, accept and transform emotional states, the therapist coaches couples to:

1. Avoid triggering difficult states in each other.
2. Help partner shift out of protective states
3. Take breaks to calm or shift states.
4. Give partners time and space to work out their states.
5. Practice new positive ways of acting that were previously blocked.

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ENACTMENTS

Example

- **Therapist** – "Tell her this:, *'I resent when you...'* **or** *"I'd like you to hold me"*
- This helps enact present position to experience and expand it. This is where we emotionally explore.

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SUCCESSFUL ENACTMENT: 1)MEANINGFUL

1. **Meaningful Context:** Does it make sense to the couple?:
   - In the context of the present in-session conversation?
   - In the context of their identity and attachment related issues?

If not:

- Make sure you connect the enactment task to the goals of therapy
- Provide rationale

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SUCCESSFUL ENACTMENT: 2) EMOTIONALLY ENGAGED

2. **Emotional Engagement and Intensity:** Needed for the enactment to be meaningful and successful.

Enactments often occur best:

a) When the therapist has been differentiating and deepening partners' feelings/heartfelt needs using advanced empathy skills.

OR

b) The core vulnerable feeling or need is already present in the room, implicitly or explicitly.

- Contact with partner can also create intensity – can use enactment to deepen experience.

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EXAMPLE: MAKING AN ENACTMENT *MEANINGFUL & INCREASING EMOTIONAL INTENSITY*

SHE: *He never expresses how he feels about me (complaint).*

HE: *Of course I love you, I'm just not an expressive guy*

T (Therapist): *Can you turn to her and tell her this?*

HE: **(**looks at me, rolling his eyes) *'really?' That's not me, she knows that!*

T: *says gently, 'I know it feels awkward because you're not one to talk about your feelings. And you feel like she should know how much you love her, but I think this vulnerable part of her that feels insecure and unlovable needs to hear that from you. I know you want her to feel more secure'*

HE: *Yes, I do, okay I'll try...*

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EXAMPLE (CONTINUED)

T: *Can you make eye contact with her?*

HE: *(looking up at her slowly, long pause) Being with you is the best part of each and every day (tears start rolling down his face)*

T: *(To him) What's does it feel like inside?*

HE: *It's very touching to feel this love, I'm surprised that I am getting emotional.*

T: *(To her) How do you feel hearing that?*

SHE: *(is tearful) It makes me feel loved and special, and it means a lot to see him emotional about me, because he never cries. That's all I want, is to feel his love.*

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CREATING EFFECTIVE CONDITIONS FOR ENACTMENTS

3. ***Therapist Lead-Ins:*** To prepare the expresser

Asking Anticipatory Questions

Eg. **Therapist to Expresser:** *"Does she know how much you love her? What would it be like to tell her now?"*

Eg. *"Have you ever been able to talk to her about it?"*

Inviting Receptivity in Listener

- Emphasizing importance of the upcoming disclosure

Eg. **T:** *"I would imagine this is something that would be very important for you to hear?"*

Eg. **T:** *"Can you take in the apology he's about to give you? You've wanted to hear this for a long time."*

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OPEN-ENDED VS. FOCUSED ENACTMENTS
DIRECTING CONTACT

a)Open-ended Enactment

- Eg. "*Could you turn to her and tell her?*"

b)Focused Enactment

- Important to use client's own words, images
- Eg. "*Could you tell him how 'terrified the little child inside gets'"?*

c)Re-Focusing Vulnerable Experience in Enactment

- When client moves away from vulnerable emotional experience

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EXAMPLE OF RE-FOCUSING VULNERABLE EXPERIENCE IN ENACTMENT

C: I get so shaky when I can't find him.

T: so shaky... it sounds like it brings up that feeling of terror that you had as a child? C:Yes

T: Can you turn to him and tell him about it?

C: It was so scary not to know where you were, I called everyone, and nobody had heard from you. (client sounds less vulnerable and more angry when she turns to him)

T: You were just telling me that you felt shaky and panicky when you couldn't find him. I know it's hard to show your vulnerability, but he wants to know. Take in his caring expression towards you (creates safety for expresser). Can you tell him about how terrified and vulnerable you felt?

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HEIGHTENING, EMPATHIC CONJECTURE/DEEPENING

Heightening: Repeating important words to intensify and deepen experience.

T: *"Say it again, I'm afraid you won't be there"* (client gets tearful when she says it second time)

Empathic Conjecture/Deepening:

T: *"It is a really tough place to be, I don't think you can accept me….can you look at him? Can you tell him what it's like inside?"*

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EXPRESSING APPRECIATION AND RESENTMENT

- Both are important to be able to express.
- Some partners take the other for granted and forget to express the positive, while others avoid negative conflict at all costs.
- Although it makes sense that people need to be able to express more positives than negatives (Gottman), people in relationships still forget. A little bit of positive goes a long way.

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RESTRUCTURING THE NEGATIVE INTERACTION: ACCEPTANCE

- In restructuring interactions, it is a partner's ***acceptance*** of the ***expressed vulnerable underlying feelings*** that is most important.
  - ➢ These expressions are what lead to a change in interactions

Partner A: non-blamingly reveals a primary feeling about an attachment or identity insecurity, and/or relational heartfelt needs.

Partner B: Responds with validation and caring.

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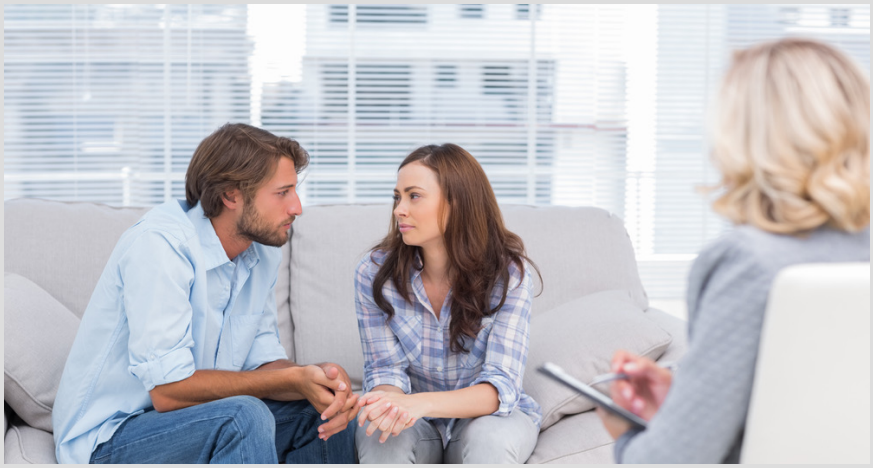
STAGE 4 - CHALLENGES IN ENACTMENTS: CREATING SUCCESSFUL CONDITIONS



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ENACTMENT TRAPS

Detours: When a client is given a suggestion to talk to their partner and they go off course.

- Need to re-focus client
  - Eg. *"I want to stop you here for a moment and bring you back. Is that okay? I think what you were saying a moment ago is important, can you tell him what the sadness is like?"*

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ENACTMENT TRAPS (CONT.)

Rebuttal "*Yes, but!*": Client is not listening, feeling defensive, and waiting for their turn.

- Therapist needs to be quick to jump in and contain escalation and stop negative interaction
- Escalation is framed in attachment/identity terms and negative cycle.

Example: *"It's so hard to hear what he's saying now because you feel abandoned and have a lot of hurt too, and you are afraid it will never get heard."*

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ENACTMENT TRAPS (CONT.)

Spontaneous Conversations in Negative Cycles

-Client: "Can I just say one thing first?"I know I shouldn't say this, but...

-Therapist: "~~Sure~~", "~~Okay~~", ~~Absolutely!~~

Therapist attitude needs to be:

'*It depends'* in service of restructuring negative cycle.

- If a partner slips back into a negative cycle of defensive interaction, the therapist must block, reframe, and refocus the enactment.

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