Emotion-focused therapy (EFT) aims to help clients enhance their emotional processing, which we define as approaching, accepting, tolerating, symbolizing, making narrative sense of, and utilizing or transforming emotions. This increases people’s ability to respond adaptively to situations as they arise. EFT helps people face previously disclaimed, painful emotions; reflect on them to create meaning; use them to inform adaptive action; and transform those that are maladaptive. Developing this type of emotional competence (Greenberg, 2015) then involves the ability to (a) experience emotions and symbolize them in awareness, (b) tolerate and regulate dysregulated emotions, (c) transform maladaptive emotions, and (d) develop positive identity and relationship narratives on the basis of new emotions. Emotional competence thus is seen as the ability to use adaptive emotional responses to guide a process of becoming, and to transform emotions that have become maladaptive, to redirect this process. This enhances people’s capacity to deal with problems in living and promotes harmony within and among people.

The therapeutic relationship is the cornerstone of EFT, serving as an essential reference point throughout the treatment and providing the stability and structure for clients to grow and change. Growing out of the client-centered and experiential traditions that emphasize the importance of the therapeutic
attitudes of acceptance, prizing, congruence, and empathy, EFT similarly stresses the importance of therapists’ attitudes toward their clients. Emotion-focused psychotherapists are accepting of and empathically attuned to their clients’ inner worlds to facilitate changes in clients’ emotion schemes and emotional processing as well as their relationship with self and others.

This volume provides a comprehensive review of the most current, research-informed work on EFT in both individual and couple therapy. We see this approach as highly comprehensive and relevant to a broad array of clinical populations. The approach is the premier therapy model for addressing emotion at a deep, experiential level that is not psychoanalytic, nor cognitive behavioral in orientation, although we believe that it can contribute to these approaches. The chapters in the book provide systematic coverage of theory, research, and practice of an emotion-focused perspective that has emerged from the work of Greenberg and collaborators emphasizing emotion as the fundamental datum of human experience.

This is a clinical handbook and as such, the focus is on clinical practice. The contributors were all asked to emphasize clinical applications of their work. Researchers and clinicians alike were asked to make their chapters research informed and as clinically relevant as possible. The EFT authors in this handbook are all both researchers and skilled clinicians, a necessary aspect of doing meaningful research on how people actually change in therapy. The chapters by these clinician researchers, therefore, are all highly clinically focused. The chapters in the book follow a trajectory from the developing theory, to current hypothesis testing, to practice.

The aim with this collection is to reach both professionals in the field who are somewhat knowledgeable about EFT as well as established therapists who are looking to learn about this approach. Advanced graduate students looking to incorporate working with emotion into their approach will also benefit. The goal of this book is to promote the emotion revolution, which is rapidly gaining momentum.

**EVOLUTION OF THE THERAPY APPROACH**

Initially, Greenberg and colleagues called the individual therapy *process experiential therapy* (Greenberg, Rice, & Elliott, 1993; Rice & Greenberg, 1984), while Greenberg and Johnson (1986, 1988) called the couple’s treatment *emotionally focused couple therapy*. There was a seamless transition between the name *process experiential* and *emotion-focused therapy* in the individual model. In the couples model, however, although there are a lot of similarities in an emotion-focused and an attachment-based, emotionally focused approach to couples, the approaches have taken slightly different paths. As
was originally conceptualized (Greenberg & Johnson, 1988), couples functioning is seen as organized around both attachment and influence; however, over time, Johnson dropped this differentiation, focusing solely on attachment and increasingly viewing couple’s functioning primarily through the lens of attachment theory (Johnson, 2004). Greenberg (2002), on the other hand, stayed with emotion as the primary focus from the original version of the emotionally focused approach to couples. All the individual and couple work was then integrated under the name emotion-focused therapy (Greenberg, 2002) to accord with the term emotion-focused used more generally in the psychology literature. Greenberg and Goldman (2008) presented an updated view of EFT for couples (EFT-C) in which they viewed affect regulation as the central force that organizes couples’ dynamics. The aim was to produce an integrated volume with both approaches, but this effort did not succeed because of Johnson’s desire to maintain the separate identity of emotionally focused couple therapy. EFT for couples, grounded as it is in affective neuroscience and empirical studies of how people change in therapy, is covered in this volume.

HOW THIS BOOK IS ORGANIZED

This volume is organized into five parts. Part I offers an introduction by the volume editors, with Chapter 1 covering the history and development of EFT theory and research in further detail. It covers the development of EFT from its origins in the 1980s through the present. Chapter 2 then elaborates EFT’s theory of emotion and its dialectical constructivist theory of functioning. Chapter 3 presents the theory of EFT practice and describes the four compasses that guide it.

Part II follows the theme of integrating research and practice in EFT. In Chapter 4, Timulak, Iwakabe, and Elliott present a summary of quantitative, qualitative, and case study research on EFT to illuminate the evidence base of the approach and discuss the clinical implications of the research. Chapters 5 and 6 present the relationship foundations of the approach based predominantly on empathy (Watson) and therapeutic presence (Geller). These are the cornerstones of EFT practice. The next three chapters focus on clinical applications of the process research done over the last decades. Chapter 7 by Pascual-Leone and Kramer provides an empirically based model of the sequence of emotions in therapeutic change. In Chapter 8, Pos and Choi look at research relating process to outcome with an emphasis on depth of experiencing in EFT. Herrmann and Auszra, in Chapter 9, define and give examples of productive emotional processing. In Chapter 10, Sharbanee, Goldman, and Greenberg review task analyses of emotional change, some of which
are published here for the first time. In Chapter 11, Angus, Boritz, Mendes, and Gonçalves focus on the relationship between narrative change processes and treatment outcome. Part II ends with Chapter 12 in which Warwar and Ellison discuss the role and process of experiential teaching in EFT with a focus on homework.

Part III focuses on EFT with specific client populations. In Chapter 13, Salgado, Cunha, and Monteiro review EFT of depression, including their recent randomized clinical trial comparing the effects of EFT and cognitive–behavioral therapy on depression. In Chapter 14, Watson, Timulak, and Greenberg present their recently published manualized approaches to EFT for generalized anxiety disorder. Elliott and Shahar then cover in Chapter 15 EFT for social anxiety coming from both their research programs. Following in Chapter 16 by Khayyat-Abuaita and Paivio is EFT for complex interpersonal trauma. In Chapter 17, Pos and Paolone present an EFT approach to the treatment of personality disorders and emotion dysregulation. In Chapter 18, Dolhanty and Lafrance present their novel approach to emotion-focused family therapy for eating disorders. Part III ends with a focus on cultural populations rather than populations with a disorder. In Chapter 19, Levitt, Whelton, and Iwakabe discuss integrating feminist-multicultural perspectives into EFT.

In Part IV, the focus is on EFT for couples. In Chapter 20, Woldarsky Meneses and McKinnon present the updated theory and practice of emotion-focused couple therapy, whereas in Chapter 21, Edwards and Levin-Edwards present strategies for integrating individual tasks into EFT for couples. Part IV ends with Chapter 22, in which Bradley presents a detailed description of specific interventions that can be used with couples.

The editors provide in Part V a review of the themes that emerged from the chapters and offer some future perspectives.

In many of the chapters the authors provide examples from clinical cases as a way of illustrating how EFT works in practice. To protect the confidentiality of therapy clients, authors have disguised names and other details, or used composites with details drawn from multiple cases. The contributors hope readers will take away clinically useful suggestions that span setting up therapeutic relationships and facilitating productive emotional processing and will apply these to specific populations and different disorders. The hope is that this volume will help readers see the important role of emotion in therapeutic change and understand how to work effectively with clients who have too little emotion of the right kind and those who have too much emotion of the wrong kind. If you are already trained in EFT, hopefully this handbook adds a more differentiated understanding on how to work with emotion. If you are new to this approach, hopefully it will encourage you to pursue further EFT training so that you can help your clients engage in deeper emotional work.