

nce, retroflection, introjection, and current unhealthy functioning and provide formulation and treatment as well as splits. Rogers (1951) could not, that of incongruence between the concept of depth of experience-process formulations about the client (1951) was also opposed to most psychological diagnosis as usually un-ly and may actually be detrimental Rogers (1951) expressed concern when the therapist is in the position the possibility of an unhealthy de- the role of expert, and the possi- control of the many in the hands with Rogers's concerns, that expert- and interferes with the formation view that developing a focus in- tulation, is beneficial. We believe our therapy help guide interven- tment of a focus for treatment- s: The focus that develops is tan- nular approach to the case formu- within the bounds of the experi- erges. In EFT, formulations are assessment) as we do not attempt time to know what will be most ve that that which is most prob- s progressively, in the safe con- at the focus is co-constructed by that assuming an authoritative- natively informing clients as to- natic. It can (1) rupture the deli- bond, and (2) create situations- ing, through attention to their- s a powerful experiential learn- of therapy). erential therapy that formula- client and therapist and are- nt's momentary experience or out a person's character. Our

major means of formulation involves "process diagnoses," about how peo- ple are currently experiencing their problem and impeding or interfering with their own experience. In relation to diagnoses, we believe that knowl- edge of certain nosological categories or syndromes can be helpful to exper- iential therapists but are best conceived of as descriptions of patterns of functioning rather than of types of people. Thus, for example, we prefer to think about anxious, obsessive, or borderline processes rather than people. A fundamental tenet underlying this emotion-focused approach is that the organism possesses an innate emotion-based system that provides an adaptive tendency toward growth and mastery; a corollary of this is that clients are viewed as experts on their own experience in that they have clos- est access to it. In the therapeutic hour, the therapist therefore encourages the client to attend to momentary experiencing and nurtures the develop- ment of more adaptive functioning by continuously focusing clients on their felt sense and emotions. The I-thou relationship based on principles of presence, empathy, acceptance, and congruence is at the center of the ap- proach (Buber, 1960; Rogers, 1951). This type of relationship permits a fo- cus on adaptive needs and validates the client's growth toward adaptive flexibility. The growth tendency is seen as being embedded in the adaptive emotion system (Greenberg et al., 1993; Rogers, 1951; Perls et al., 1951). Clients are consistently encouraged to identify and symbolize internal expe- rience and bodily felt referents in order to create new meaning. Therapy is seen as facilitating conscious choice and reasoned action based on increased access to and awareness of inner experience and feeling.

CONCEPTUAL FRAMEWORK

In this view, the self is seen as an agent, constantly in flux, manifesting itself at the contact boundary with the environment (Perls et al., 1951). The person is a dynamic system constantly creating and synthesizing a set of internal schemes evoked in reaction to the situation, thereby reforming a "self-in-the- situation." (Greenberg & van Balen, 1998; Greenberg & Watson, 2005). Overly repetitive experiences of painful emotions across situations and oc- casions imply lack of flexibility in the processing system and dysfunction; chronic enduring pain often represents rigid patterns of schematic activa- tion and limited access to creatively adaptive responses to situations. Psy- chological health is seen as the ability to creatively adjust to situations and to be able to produce novel responses and experiences. The goal of treat- ment, therefore, is to overcome blocks to creative adjustment and to rein- state a "process of becoming."

As well as having biologically based inverted emotion, people are viewed as living in a constant process of making sense of their emotions. We have proposed a dialectical-constructivist view of human functioning