

been emotionally removed from the family and is often perceived as critical and judgmental. There is a history of physical punishment throughout her childhood, particularly from her father. Talking about her parents in the first session, she says:

“And she [mother] does things like, in the middle of the night, call you up and call you names, and once I was married, I guess I just decided I had enough. I can't take this anymore so I just cut my ties with her. And my father is just, he's just not there. Like I've been—I haven't worked for a year, my husband's had a breakdown, even my best friend died. He's never called once to touch. Not just this year, any year. Just doesn't, he just doesn't, he's not demonstrative.”

The therapist, hearing a focused voice when she talked about her father just not being there, focuses her internally by selectively reflecting on her loneliness implicit in her current state: “You're feeling so alone. There's nobody really there.”  
Soon after this the exploration turns toward her lonely, weak, and vulnerable feelings and she moves into hopelessness. The therapist identifies this as a potential focus of therapy, marking it for later, while suggesting a rationale for an emotion-focused therapy and an alternative approach to dealing with such emotions:

C: Oh, I think I should be doing other things rather than sitting around feeling bad for myself.

T: You're saying you hate getting weak.

C: Oh, yeah, a waste of time.

T: Somehow your emotion is an important message that you're giving yourself.

C: Well, yeah, I've been doing this all my life.

T: Yes, so its here you want to—Somehow, what is this, what do you feel as you begin to cry? Do you feel so alone? Is that what—

C: I guess that's it. I just—feel tired.

T: Tired of the struggle.

C: Yeah, I'm tired of thinking about it. You know, sometimes I'm preoccupied, just like, “Oh, God like if I could turn a switch.” A lot of times I like to sleep because then I don't think.

T: Yeah, yeah, but somehow whatever's going on you do think and it does go around and around.

C: All the time.

his can be seen as a form of

rn is presented where the client

anger, or shame. During each ep-

disrupting her normal speech pat-

expressions of emotion the client

session, constituting almost 50%

arent points at which she demon-

her family anymore:

message saying, “I'd like to take

ome reason it really upset me all

lunch with you because I might

life and she's the one who called

then I never heard from her for

the hospital. And she wonders

I think we feel? They told me to

ly ill. So you're supposed to go

re resentful toward them.

and go for a birthday lunch or

ands up somehow in you crying

er for how's she's treated you.

lity to, that she's going to criti-

times when I have got angry in

point now where I don't want

me alone. That's how I feel.

is coming and I dread it.

are difficult, and often painful.

and her three sisters no longer

camp survivor. He has always