

INTEGRATING EMOTION-FOCUSED THERAPY WITH THE SATIR MODEL

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The experiential humanistic family systems approach of Virginia Satir lacks a theoretical structure and is thus vulnerable to losing its experiential nature and being reduced to a mere collection of creative techniques. A way to effectively keep Satir's transformative presence alive is to integrate her approach with a model that is solidly grounded in explicit theory, relationship principles, and therapeutic skills and processes. The model proposed as appropriate to this effect is Emotion-Focused Therapy (EFT). Satir's approach, when integrated with EFT, becomes a model for creating change in individual and family systems that is indeed greater than the sum of its parts.

Therapists trained in family systems models are equipped to work from a systems framework even when only one individual family member comes into their office. The approach of Virginia Satir, now promoted as the Human Validation Process Model (Bitter & Corey, 2001; Satir, Banmen, Gerber, & Gomori, 1991) can be used effectively for systemic therapy with individuals as well as with families and couples. Satir's approach can be enhanced by integrating it with the explicit principles and tools of Emotion-Focused Therapy (EFT; Greenberg 2002). It is the concern of this article that without more explicit grounding in a set of experiential principles and processes, therapists seeking to adopt Satir's model will be lacking the present-moment (experiential) aliveness that characterized Satir's approach and made it transformative. Both Satir's approach and EFT are therapy models in the tradition of experiential psychotherapies that are oriented toward processes that create holistic and enduring change. Those seeking to preserve the intuitive artistry of Satir's "purposively non-technical" (Andreas, 1989, p. 52) therapeutic processes can benefit from the specific therapeutic operations of EFT, which are grounded in a more clearly delineated theory of emotion and emotional change and are supported by empirical research (Greenberg, 2002; Greenberg, Elliott, & Lietaer, 1994; Greenberg & Paivio, 1997; Greenberg, Rice, & Elliott, 1993; Greenberg & Safran, 1987). Integrating EFT's explicit guidance for teaching therapists to develop the therapeutic alliance and to work therapeutically with clients at the experiential level can both enrich Satir's Human Validation Process Model and preserve the transforming power of her healing presence.

THE EXPERIENTIAL PSYCHOTHERAPY TRADITION

The Human Validation Process Model, created by Virginia Satir in the early 1960s is part of a tradition of experiential therapies that are concerned with creating lasting changes sometimes referred to as "transformation" (Simon, 2002). Transformation in counseling and psychotherapy refers to enduring changes in behavior as well as in related thoughts, feelings, motivations, and bodily responses. Satir's model presents "transformation" as composite shifts in how people perceive, feel, think, communicate, and how they experience their self-esteem and the flow of the innate positive growth tendency in their

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bodies, minds, spirits, and interpersonal relations (Satir et al., 1991). This “shift” is more enduring than brief alleviation of dysfunctional symptoms. In the experiential psychotherapy tradition, notably Client-Centered, Existential, and Gestalt models (Cain & Seeman, 2002) clients’ awareness of their inner experiencing in therapy is given priority over intellectualization or strategizing about behavioral changes (Gendlin, 1978; Greenberg, Watson, & Lietaer, 1998; Martin, 2000). Here-and-now experiencing is one of two key elements which are seen as contributing to change. The other key element, “a genuine empathic and confirming relationship, is seen as a crucial curative factor in its own right as well as facilitative of the . . . main task of this approach—that of deepening clients’ experiencing in therapy” (Greenberg et al., 1993, p. 4).

SATIR’S HUMAN VALIDATION PROCESS MODEL

Virginia Satir made a great impression on the therapy field with her gifts to guide people in making transformative changes and to focus on growth potentials instead of pathology and deficits. *Conjoint Family Therapy* (Satir, 1964) was “a ground-breaking text for therapists and students alike” (Goldberg & Goldberg, 2000, p.152), but her primary influence was through her training and public therapy sessions. Her approach was not promoted clearly in terms of how to actually do the kind of therapy she did. “Those who wish to preserve Virginia’s legacy . . . need to recognize a basic discrepancy between what she taught about her work and what she actually did. Her descriptions of what she did were general, lacking clear and specific instructions” (Andreas, 1989, p. 52). Because she avoided teaching theory or skills directly (Andreas, 1989; Loeschen, 1994) Satir’s model is weak both in terms of offering an explicit theory of how therapy can effect change, as well as a guide to a practical application of therapist intentions and ways of responding. It has been suggested that her sensory-based, intuitive approach was what “made theoretical writing such a laborious and meaningless process for Virginia” (Corrales, 1989, p. 45).

She had a warm, empathic, therapeutic presence and style that could rapidly form therapeutic alliances and magically unearth positive intentions and resources in all presenting problems and interpersonal conflicts. She left a legacy of creating change by drawing on the positive growth potential in every person; understanding negative behaviors as positive attempts to meet universal human needs for love and connection; validating the integrity, however destructive, of each human being’s search for a sense of self worth and reliable interpersonal connections; and discovering and changing the impact of formative relationships on present problems and interactions. She combined techniques from Gestalt therapy, psychodrama, and Client-Centered therapy with approaches that grew intuitively out of her interactions with the people she trained and did therapy with (Andreas, 1989; Banmen 1999; Bitter & Corey, 2001; Brubacher, 1999; Goldberg & Goldberg, 2000; Loeschen, 1991; Satir et al., 1991; Simon, 1989).

Satir’s method of training was to demonstrate her approach to therapy, allowing others to participate in her intuitive artistry, and to take from it what they wished. Trainers, including Satir’s colleagues and co-authors Maria Gomori and John Banmen (Satir et al., 1991), continue to offer training in her approach in North America, Asia, and Eastern Europe, and writers such as Andreas (1989), Baldwin and Satir (1987), Corrales (1989), and Loeschen (1991) have attempted to capture the spirit and techniques of her approach; however, the approach continues to be weak in terms of theoretical and practical specificity. Satir’s Human Validation Process Model is vulnerable to losing its experiential nature and being a collection of appealing techniques utilized in a cognitive-behavioral or insight-oriented manner, particularly by novice therapists or therapists with these orientations. Andreas (1989) noted at a conference of the American Association of Marriage and Family Therapy, which paid a touching tribute to Virginia Satir, that most presenters “stayed glued to their chairs; there was no touching, action, or enactment. Instead [he] saw a flood of words, most of them intellectual abstractions and diagnoses about the past” (p. 52). A suggested way to keep alive the transformative presence and processes of Virginia Satir, while guarding against “compassionate, well intentioned clinicians being ineffective” (Andreas, 1989, p. 52) is to integrate it with a model that is solidly grounded in explicit theory and technical skills, supported by effectiveness research. The model that is proposed as appropriate to this effect is EFT (Greenberg, 2002).

PHILOSOPHICAL ASSUMPTIONS

Choosing a model to enrich and preserve the spirit of Satir's approach necessitates that they share common philosophical assumptions. The four salient assumptions in Satir's approach begin with the notion that people have an innate potential to grow and self-actualize. This is followed by the view that the growth potential is either nurtured or blocked by the impact of the family system. Furthermore, therapeutic change depends on the person of the therapist and his or her ability to establish a therapeutic alliance. Lastly, a view promoted strongly by Banmen (1999) is that the extent to which therapy has a here-and-now experiential quality will determine its effectiveness in facilitating change (Satir et al., 1991). The first three assumptions were taught explicitly by Satir in her therapy and training (Satir & Baldwin, 1983), whereas the fourth was only tacitly implied by her demonstrations, which were rich with movement, touch, and sensory experiences (Andreas, 1989; Corrales, 1989). This fourth assumption is in danger of being minimized unless it integrates the more explicit processes that the system of EFT has to offer.

A belief in the self-actualization tendency holds that people are oriented toward growth and capable of positive change and possess the needed, although frequently undiscovered, inner resources to make these changes. The focus on the therapeutic relationship is two-fold: the therapist needs to maximize his or her own personal growth and awareness (Baldwin & Satir, 1987) as well as to attune deeply with clients in order to develop rapport. This use of self and development of empathic rapport are preconditions to work toward change. The tacit assumption in all of Satir's work was that by virtue of holistically involving clients' behavioral communication patterns as well as the here-and-now experience of their bodies, feelings, perceptions, cognitive expectations, and sense of self-esteem, therapy can be effective in creating lasting change. Satir intuitively practiced this. For therapists to master this today, they will benefit from the EFT conceptualization of emotion as a process involving all of these components.

Similar to Satir's approach, EFT is based on the assumptions of human growth potential, the impact of the family system to block or nurture this growth, the importance of the therapeutic alliance and the need for therapy to work at the experiential level. In EFT, however, the latter two tenets are more explicitly expanded upon. They are grounded in a detailed theory of emotion and emotional change, are taught in precise detail, and their effectiveness is supported by empirical research (Greenberg, 2002; Greenberg et al., 1993; Greenberg et al., 1994; Greenberg & Paivio, 1997; Greenberg & Safran, 1987; Hill & O'Brien, 1999). There are two basic treatment principles: relationship principles for facilitating a therapeutic relationship and task principles for facilitating work on specific therapeutic tasks. The relationship principles include empathic attunement, creating a therapeutic bond through empathy, genuineness, and prizing, and facilitating task collaboration. The task principles include: experiential processing, fostering "client growth and self-determination" (Greenberg et al., 1993, p. 102) and facilitating therapeutic task completion. There are four "essential experiential intentions": "empathic understanding, empathic exploration, process directing, and experiential presence" (Greenberg et al., 1993, p. 119).

The prerequisite skill for both the development of the therapeutic relationship and working at an experiential level is that of "evocative empathy" (Martin, 2000, p.7; Rice, 1974, p. 290). This is an area that must be made more explicit in attempts to preserve the model and spirit of Virginia Satir. Satir, although intuitively able to connect empathically with others, did not train therapists in basic empathic attunement and responsiveness. "Although Satir developed a number of techniques aimed at facilitating the change process, most of her interventions grew out of her intuitions about what [clients] needed" (Bitter & Corey, 2001, p. 410). Consequently, empathic responding, which is an inherent part of EFT and the prerequisite for the effectiveness of any experiential therapy (Greenberg & Elliott, 1997; Martin, 2000) is not made explicit in Satir's model. Some Satir training tragically minimizes empathy as mere passivity and support (Banmen, 1999). The unfortunate result is that many applications of Satir's model do not remain consistently experiential.

INTEGRATING EFT WITH SATIR TO PRESERVE THE EXPERIENTIAL NATURE

Satir's approach does not present an explicit framework of emotion, nor does it specifically teach how to work with emotion. EFT offers tasks and operations for facilitating emotional change and salient experi-

ential principles of change: empathic attunement and evocative process directive explorations. The value of integrating these central elements from EFT is centered on its view of emotion, which will be discussed first, followed by an examination of the other elements.

EFT Framework of Emotion

Emotion-Focused Therapy utilizes a “process-experiential” framework of emotion (Elliott, Watson, Goldman, & Greenberg, 2004, p. 3) that conceptualizes emotion as a dynamic feeling-meaning process with action tendencies that guide human behavior. Practitioners using Satir’s model can enhance their ability to work in the here-and-now with EFT’s framework of emotion. What Satir seemed to know intuitively in the early days of family therapy—that lasting change happens when emotions are addressed (Satir & Baldwin, 1983)—there now is research to substantiate (Greenberg et al., 1993; Greenberg & Safran, 1987; LeDoux, 1996). Emotion in EFT does not refer simply to affect but rather to a complex interacting sequence of thoughts, feelings, bodily felt sensory experience, and motivation toward action (Greenberg et al., 1993). The internal process is comprised of a set of “emotion schemes” (Greenberg & Pavio, 1997, p. 3). “Emotion schemes,” not based solely on emotions or feelings, are a complex interacting system of bodily, sensory feelings, thoughts, memories, hopes, expectations and knowledge derived from one’s total life experience (Greenberg & Paivio, 1997). Emotion schemes are not unlike the metaphor of the iceberg used in Satir’s model to describe an individual’s internal process.

Emotion-Focused Therapy has clear guidelines for therapists to use in differentiating types of emotion (Greenberg, 2002; Greenberg & Paivio, 1997; Greenberg & Safran, 1987). Greenberg’s (2002) recent book on emotion coaching includes exercises for therapists and clients alike to use for enhancing their awareness of emotion and the process of emotional change. The basic distinctions to be made are between primary and secondary emotions and between maladaptive (stuck emotions) and adaptive emotions (those that produce change or lead to transformation). Effective therapists work with these distinctions. They know intuitively, for example, that all anger is not the same anger and that all anger does not need to be approached in the same way. Neither is all sadness worked with in the same way. The adaptive action tendency of primary anger is to set limits or be assertive. The maladaptive tendency of reactive secondary anger may be to cover up sadness. The primary sadness needs to be uncovered so as to access the adaptive tendency to seek comfort.

Therapeutic Tasks and Operations for Facilitating Emotional Change

To facilitate emotional change, EFT presents specific directives, lacking in Satir’s approach, for developing a therapeutic alliance and recognizing in-session cues that signal which therapeutic responses will enhance experiential exploration and facilitate change. Satir’s model does not explicitly show how to access and work with clients’ experiences of their internal cognitive, emotional, and bodily processes even though it recognizes the importance of doing so (Banmen, 1999; Satir et al., 1991). The humanistic, process-experiential operations (Greenberg et al., 1993) that EFT has expanded on in the last 10 years (Elliott et al., 2004; Greenberg, 2002; Greenberg & Paivio, 1997) provide concrete and theoretically sound ways to preserve the seeming magic of the loving, validating, transforming nature of Satir by attending and responding in the moment to clients’ nonverbal behaviors and processing styles as well as “the content of what the clients say, especially as it relates to their history and emotion schemes and to their current relationships with others and themselves” (Elliott et al., 2004, p. 53).

Greenberg et al. (1993) isolated “six specific therapeutic tasks of the process-experiential approach to facilitating emotional change” (p. 137). Their treatment manual clearly outlines the markers (or signals of what therapeutic operation a client is needing), the moment-by-moment therapeutic operations that correspond to each marker, and the process and result of client change through each of these operations. The six therapeutic operations are as follows: systematic evocative unfolding, experiential focusing, two-chair dialogue, two-chair enactment, empty-chair work, and empathic affirmation for working with vulnerability. The marker or signal for a therapist to use systematic evocative unfolding is a client’s perplexity about self-understanding; the marker for a therapist to use experiential focusing is an “absent or unclear bodily felt sense”; the marker for a therapist to use two-chair dialogue is a client’s self-criticism

or torn-ness; the marker for a therapist to use two-chair enactment is blocked feelings or resignation; the marker for a therapist to use empty-chair work is lingering bad feelings toward a specific person; and the marker for a therapist to use empathic affirmation is painful emotion related to him- or herself, such as shame (Elliot et al., 2004; Greenberg et al., 1993).

Primary EFT Principles to Enhance and Preserve Satir's "Magic"

In addition to the specific EFT tasks and operations that can complement and enhance Satir's model, two EFT experiential principles of change must be highlighted in this integration. To maintain Satir's experiential nature and recreate her transformative "magic" (Loesch, 1991) therapists need to integrate: (a) empathic attunement and responsiveness; and (b) working with bodily felt experience (bodily awareness of what one is experiencing, Greenberg, 2002; Greenberg et al., 1993; Greenberg & Paivio, 1997).

Empathic attunement and responding. Although Satir's main focus was on "communication and emotional experiencing" (Goldberg & Goldberg, 2000, p. 152), she was implicitly (or naturally) empathic and did not teach or write about empathic attunement and responding. Skills of empathic understanding and empathic exploration must be thoroughly mastered before a therapist can competently or effectively carry out experiential techniques (Greenberg & Elliott, 1989). In EFT it is imperative that "all of the tasks are engaged in only in the context of empathic relating" (Greenberg et al., 1993, p. 137). Utilizing the techniques and process questions of Satir without a context of deep empathic understanding and exploration will be unlikely to evoke here-and-now experiencing in the client or to effect transformative change. The principles and framework of what Rice (1974) called "evocative empathy" are the key to maintaining an experiential quality to therapy (Greenberg et al., 1993; Martin, 2000). Evocative empathy according to Martin (2000) is:

Communicated understanding of the other person's intended message, especially the experiential part. . . . It is not enough to understand what the person said. You must hear what he or she meant to say, the intended message. It is not enough to understand even deeply; you must communicate that understanding somehow. It is absolutely essential that the other person feel understood—that the understanding be perceived. The part of the intended message that will be critical is the emotional or experiential part of the message. (p. 4)

The measure of whether one has accurately responded in an empathic manner is whether the other person experiences feeling deeply understood and recognizes what the therapist has said as accurately articulating what he or she was trying to say but could not quite put into words. It is evocative in that it has the capacity to evoke increasingly deeper levels of emotional and cognitive awareness. By virtue of the fact that evocative empathy is alarmingly absent in many counseling and marriage and family therapy training programs, this capacity to work experientially is understandably lacking in the repertoires of many therapists eager to utilize Satir's techniques.

Although it is recognized that Satir was significantly influenced by Carl Rogers and placed a high value on utilizing empathy with her clients (Bitter & Corey, 2001; Goldberg & Goldberg, 2000), the fact that empathy was not (nor currently is it being promoted as) a fundamental part of this model (Banmen, 1999) detracts from the experiential nature of many practitioners' applications of Satir's techniques. In Banmen's training (1999) of a brief Satir model, empathy is associated with the passive, nondirective type of supportive therapy that does not facilitate therapeutic change.

"Much of what happens in therapy is experiential" (Martin, 2000, p. 261). It is an experiential-cognitive process moving from a bodily felt sense to conscious, language-based knowing. Research into the therapeutic change process has shown that an implicit kind of experiential knowing that is sensed in an immediate, bodily, and holistic manner precedes conscious knowing and later gets translated into explicit cognitive understanding (Gendlin, 1978; Greenberg et al., 1993; Martin, 2000). The way to facilitate this experiential process is to attune to a client and to respond with evocative empathy. While for Satir, it would seem that empathy was a tacit principle, in EFT and other experiential therapies it is an explicit operation.

Bodily felt experience. Satir worked intuitively with people's bodily experience, using touch and

bodily movement in sculpting and psychodramatic enactments. She made intuitive hunches as to their internal experiences and drew pictures with their bodies to illustrate them. She paid attention to the effect of bodily experience on internal processes and communication patterns and taught that “human beings are made so that our bodies flow in a balanced position and relaxed state. Any distortion of our balance causes us both to take in and give out incongruent messages” (Andreas, 1989, p. 52). Banmen (1999) stresses that whether a therapist is exploring a client’s family map or their unmet expectations or what is blocking them from reaching their goals, the process needs to involve in-the-moment-experiencing. In Satir’s model, a therapist explores with a client, not the content of his or her story, but the impact that that story continues to have at all levels of internal experience (Brubacher, 1999). This experience is a “constant mind-body interaction” (Goldberg & Goldberg, 2000, p. 153).

Satir used the iceberg metaphor to describe people’s inner experience: “Like icebergs we show only parts of ourselves. Much of us lies below the surface” (Satir et al., 1991, p. 34). The iceberg metaphor describes what process–experiential therapies call exploring and deconstructing internal emotional–cognitive processes or “emotion schemes” (Greenberg et al., 1993; Greenberg & Paivio, 1997). By its very nature, a therapeutic exploration of these below-the-water parts of the iceberg must be an exploration of perceptions, feelings, thoughts, expectations, yearnings and the visceral, bodily felt experience which is alive in the moment for the client. Although Banmen and Satir intuitively demonstrated this flow of body–mind integration, EFT’s concrete therapist operations facilitate the exploration of bodily felt meanings. The EFT tools for assessing emotion provide a way to notice tiny, moment-to-moment shifts in internal mind–body processing. The bodily component of emotion is explicitly recognized in EFT’s integration of Gestalt therapy and Gendlin’s (1978) Focusing. Greenberg (2002) highlights that bodily felt experience is frequently outside a person’s awareness and that bringing it into awareness is what makes the person open to change and capable of change. Evocative empathy (Rice, 1974) and process directives such as the two-chair exercises (Greenberg et al., 1993) are used to bring the inner process of the person into awareness. Examples of bodily focusing techniques (Gendlin, 1978) include asking, “You’re feeling anxious. Notice where in your body you feel that” and “Notice what it is like inside when you feel/think of that.” The therapist is attuned to and comments on bodily factors such as facial expression, voice tone, posture, pacing, breathing, or arm movements to heighten the client’s awareness of their internal mind–body processes. Drawing clients’ attentional focus to their internal experiencing facilitates here-and-now contact with cognitive–emotional processes and is the beginning of a change process (Greenberg et al., 1993).

Case Example of the EFT Framework of Emotion Enhancing Satir Therapy

A case example of Felicia illustrates how the EFT framework of emotion can complement and restore the “magic of Satir” to therapeutic work. Furthermore this case demonstrates the adaptive quality of primary emotions both as a source of information about core needs and a source of motivation to meet these needs.

Felicia, in her mid-thirties, came to therapy overwhelmed with sadness and depression. The family map from the Satir tradition provided the therapist with a framework for empathic attunement and responsiveness. The therapist listened to this woman as a person coping with the external demands of her current adult world in ways that reflected the internal expectations formed when she was young. Felicia’s mother died when she was 10-years-old, leaving her with younger siblings and a father who coped with his grief by drinking heavily, neglecting his daughter, and acting out in fits of rage. He was unreliable and unresponsive to her basic physical and emotional needs. As frequently happens with men, according to gender-role expectations, his primary feelings of vulnerability and deep loss and sadness passed quickly into more socially acceptable secondary anger.

The cultural and familial expectations that Felicia had followed were that she was to present a positive, well-functioning picture to the outside world. As Felicia unfolded her story of her work-related burnout combined with marital and parenting difficulties, she was flooded with guilt for telling this to the therapist. Talking about her struggle was a violation of the familial and cultural expectation to present only a positive, well-functioning picture to the outside world. Her family rules included, “Don’t be silly. You don’t have it so bad. Work harder. Ignore the pain.” She experienced secondary emotions of guilt “for complaining”

combined with the sadness, despair, fatigue and burnout that she wanted to “get rid of.”

Secondary emotions can defend against underlying and unacceptable primary emotions. According to the social rules that she lived by, complaining and primary emotions of anger had to pass quickly into something more socially acceptable. Although sadness was considered unfavorable, complaining and anger were absolutely unacceptable for her to feel. Were the therapist merely to have attempted to help her to manage or get rid of her sadness and depression, the emotional intelligence and life-giving messages embedded in the primary anger would have been missed.

The therapist attuned to and validated her sadness and depression while responding to the hints of anger and impatience in her words and body language (taut facial muscles and gestures of shaking hands and arms as she described her work and family life). The therapist reflected, with a tentative tone that conveyed permission to Felicia to check if this was accurate, “It’s like you shake your hands and say, there’s a part of me that wants to come out! I have some needs and longings that no one is listening to! I am fed up with being so responsible and trying to act cheerful all the time! It like that?”

Suddenly, Felicia’s visage came to life, her face softened, her eyes lit up, and she described her tears of relief as she experienced the life-giving energy in the here-and-now experience of her agitation and impatience. Experiencing for a brief moment the legitimacy of her anger and impatience, she was able to find the change-producing tendency in this (previously unacceptable) primary emotion of anger. She acknowledged how hard she works at stopping herself from making complaints and having feelings of anger. She described intense shame at occasionally having felt the kind of anger and impatience her father had shown to his children.

Together the therapist and Felicia explored the needs embedded in her primary emotions of anger and impatience. The therapist responded empathically and invited her to engage in a two-chair dialogue. The therapist guided her critical “judging part” who blocked her anger and minimized her longings for self care to speak to her angry, impatient “feeling part,” who adamantly insisted she wanted to “be selfish.” Through this process she found the strength and courage to set limits with others and to discover her long abandoned silly, fun-loving self. Her expectations that she must hide her own needs and be responsible and cheerful for others, became transformed through the experiential processes of acknowledging and working through primary pain, anger, sadness, and shame. This process involved working through parallel tracks of family- of-origin experiences and present-day interactions. The debilitating shame, guilt, and depression were transformed into experiences of vibrancy, confidence, assertiveness, and joy. She also developed awareness and comfort with validating primary anger as containing helpful, life-giving messages for her to pay attention to.

Differentiating between types of emotion, accessing adaptive emotion tendencies, and replacing maladaptive processes is an empowering map for experiential therapists to follow. It is important that the “emphasis on emotion in the change process not become a ‘new technique of emotion manipulation.’ . . . A key strategy for avoiding this danger is for [practitioners] to reconnect themselves to the human facilitation tradition . . . developing a synthesis of the humane and the scientific and of the holistic and the specific” (Greenberg et al., 1993, p. 322). The current emotion research (Goleman, 1995; LeDoux, 1996; Levine, 1997; Pert, 1997) and EFT interventions for assessing and working with emotion to facilitate change, combine well with Satir’s “unshakable convictions about people’s potential for growth and the respectful role helpers needed to assume in the process of change” (Simon, 1989, p. 38).

ILLUSTRATIONS OF PRIMARY SATIR TECHNIQUES ENHANCED WITH EFT

Having shown how EFT principles, skills, and processes can enhance Satir’s approach, I want to show further compatibility between the two approaches and illustrate how concrete EFT operations can be used to ensure that the primary Satir techniques remain in the domain of experiential, here-and-now processes. Primary techniques in Satir’s approach are empathy, touch, communication, psychodramatic sculpting of communication styles and family relationships, role-playing, family-mapping (listing a family’s three-generation history), family reconstruction, critical impact reconstruction, “parts parties,” and following a metaphoric model for exploring internal processes: the “iceberg” of thoughts, feelings, perceptions,

expectations, and sense of self that are hidden beneath the surface of behavior (Satir et al., 1991).

To promote the view that therapists seeking to adopt Satir's approach are frequently weak in facilitating the present-moment aliveness that characterized her work and can benefit greatly from EFT's experiential principles and processes, three primary Satir family systems tools will be examined and blended with EFT to ensure that Satir's experiential change-producing nature is sustained. First is a presentation of empty-chair work complementing and ensuring the experiential goals of family mapping and family reconstruction; secondly two-chair dialogue is shown to enhance the experiential nature of Satir's parts parties; third, principles and tasks of Greenberg's emotion coaching are presented as a readily accessible format to learn Satir's approach for transforming unmet expectations (Satir et al., 1991). Finally, a brief discussion is offered on how EFT can substantially augment and expand the spirit of Satir in the realm of couple and family therapy.

Family Mapping and Family Reconstruction

Satir's family reconstruction has evolved from the day-long large group marathon sessions of psychodramatic reenactment of a three-generation family of origin into a shorter version called the "critical impact reconstruction" (Satir et al., 1991, p. 243), which is focused more on specific stuck points and making specific changes. Banmen's training (1999) has also adapted the goals and processes of these group reconstructions and change processes into exercises for the individual therapy room: experiential family mapping and the "ma, pa, kid exercise." In these exercises the therapist draws the map of a client's family of origin or simply the triad of the client and his or her father and mother figures. In the context of empathic rapport, the client describes qualities he or she perceives as positive and negative in each person, including him- or herself. The client also describes the type of relationship dynamic and communication patterns between each individual in the "map." This can be an experiential exploration if the therapist, trained in experiential empathic exploration that is used in two-chair work, is totally present to the client, attuning and responding to what the client is experiencing emotionally, cognitively, and bodily throughout the process. The therapist follows empathically where the client is and continues to lead the process of deeper exploration, facilitating the process of exploration and change in the client's felt experience of emotions, cognitions, unmet needs, yearnings, motivations, and empowerment for action.

Family reconstructions and family maps draw on Satir's communication patterns (or "coping stances") of placating, blaming, computing, irrelevance, and the alternate empowering response of leveling or congruence. These stances are outward expressions of individuals' internal senses of self-esteem made manifest in their styles of communicating and coping during stressful moments. An important part of the change targeted in family mapping and reconstruction is to increase awareness of incongruent communication styles that entrench low self-esteem, thereby empowering them toward congruent communication to nurture positive self-esteem.

Similar views of self-esteem and views of the reliability of others are embedded in EFT. Attachment styles and attachment needs, a backbone of Emotion-Focused Couple and Family Therapy are differentiated according to views of self and other. The views of self and other that categorize attachment styles (Bartholomew & Perlman, 1994; Johnson & Whiffen, 1999) can readily be paralleled with the views of self-esteem that define Satir's coping stances (Satir, 1988; Satir et al., 1991). The leveler or congruent communicator in Satir terms corresponds to the secure attachment style, with a positive sense of self and a view that others can be relied on. The placater stance corresponds to the anxious ambivalent style where one feels negative about self and sees others in a more positive, worthy light. Irrelevant coping would seem to correspond to the fearful-avoidant style, which experiences unworthiness in self and unreliability in others. The blaming and computing stances could correspond to different nuances of the dismissive-avoidant attachment style, which has an elevated sense of self and a negative, untrustworthy sense of others. Family mapping and reconstruction processes are intended to transform self-esteem and increase possibilities in relationships. Having established that the two models share a concern with self-esteem and its impact on communication styles and patterns, it is appropriate to see how EFT techniques can be integrated with the intentions of family mapping and family reconstruction.

Empty-chair work to address family members. In the EFT framework there is a common Gestalt intervention called empty-chair work, which has goals similar to Satir's family reconstruction or experi-

ential family mapping techniques. It can be used to resolve or transform “unfinished business” or lingering bad feelings toward a specific other, and in so doing, has a positive impact on the client’s sense of self worth and dignity. A client addressing an empty chair with an imagined image of a person who has injured him or her evokes the emotions that he or she has largely blocked from his or her awareness. When clients are able to face the pain of the injury done to them by another, they are able, through the therapists’ process of directing and closely following their moment-to-moment inner experience, to shift their sense of self and other. They may genuinely be able to forgive the other, which invariably shifts their experiences of themselves and the other person. Alternately, they may instead hold the other person totally accountable for the injury and affirm themselves as worthy, and deserving of love and protection (Malcolm & Greenberg, 2000). This shift in sense of self liberates and empowers. Shifting sense of self is a prominent value in both EFT and Satir’s model.

Natalie, a young woman recently engaged, was struggling with how to speak with her fiancé and perplexed with the accommodating ruts in which she was stuck. The therapist, using a synthesis of Satir and EFT, guided Natalie in family-of-origin exploration in which she discovered that the pattern in which she was stuck (of fearing her fiancé’s disapproval) reflected a life-long theme. With the therapist’s validation, she identified this “placating” stance (Satir et al., 1991) as having been her best attempt at coping with the early life experiences of an aggressive and volatile father. At the therapist’s invitation to move beyond an intellectual understanding she faced an empty-chair image of her father. In so doing, she was able to differentiate her fears of disapproval as she experienced and expressed first her (secondary) fear, and then her emerging (primary) sadness at fearing this man whose love she sought. Then, with continued empathic reflections and evocative exploratory directives from the therapist, she came in touch with her need and her entitlement to have felt love, comfort, and safety around her father. Acknowledging her entitlement for this, she came in touch with anger. With continued validation from the therapist, who operated from the EFT theory of emotion, she was able to “own” her feelings of anger toward him for exposing her to violence at this young age. The therapist supported her in validating her own anger as a source of strength. Thereby, she contacted her inner strength to assert herself and protect herself as an adult. The therapist then helped her to expand this new strength into her relationship with her fiancé. The result was that their relationship became much more egalitarian and satisfying for both of their needs.

Working with Parts of an Intrapyschic System

Working with the many parts or facets of a person as an intrapsychic system is endemic to Satir’s approach. Although an individual may perceive some parts, such as a critical part, a controlling part, or a shy part, as negative and would want to “get rid of them,” Satir’s approach was to reframe the experience of each part so that it became a resource instead of a liability. Isolating the different parts, giving them names, experiencing how these different parts are in conflict with one another (such as the shy part in conflict with an indignant part) and then guiding the person through the process of conflict resolution and collaboration or conflict transformation with the inner parts, is a group process called the “parts party.” In a parts party different group members enact the many different parts of a person. It is a process to help a person discover and integrate inner resources that were previously outside of their awareness or experienced in a negative manner (Satir et al., 1991). The goals of the parts party techniques are to identify the repressive rules and injunctions that are prohibiting an individual’s awareness and expression of many thoughts, feelings, yearnings, and resources.

Creative adaptations of the parts party are utilized within Satir’s model in individual therapy; however, these activities can become laboriously detailed and can detract from here-and-now experiencing as a client names and describes a long list of parts and intellectualizes on how these parts could begin to collaborate and transform each other. Emotion-Focused Therapy utilizes Gestalt two-chair work, which shares the goals of Satir’s parts party, and guards against this intellectualizing tendency. Empirical research supports the effectiveness of two-chair work (Greenberg, 2002; Greenberg et al., 1993, 1994; Greenberg & Paivio, 1997; Greenberg & Safran, 1987; Hill & O’Brien, 1999). The two-chair dialogue, like Satir’s parts party, is a tool for accessing and integrating previously repressed resources and energies. It effectively facilitates the integration of dichotomous parts, toward the goals of releasing maladaptive processes, discovering hidden resources, and transforming inner conflicts. It is helpful to use when a client is experiencing internal

conflict, such as decisional conflicts, self-critical conflicts, and conflicts between needs and wants and “shoulds” (Greenberg et al., 1993).

A two-chair dialogue with intrapsychic parts. A therapist directed Sarah, a young woman longing for independence from her mother, to have a conversation between her “critical judging part” in one chair and her “experiencing, feeling part” in another chair. Sarah’s “critic” said, “You can never do it. You will fail!” The part representing her experiencing, feeling self sat in a facing chair being in touch with and expressing her yearning for autonomy. Under the therapist’s direction she moved into this chair and insisted, “I want to move out! I need to be on my own!” As she moved back and forth in this dialogue, she shifted spontaneously to experiencing the judging chair as her mother, and then again as her self-critic. As the therapist and young woman continued to attune with her internal experience, she shifted spontaneously from wanting to get rid of her mother and self-critic, to recognizing and experiencing the assets and strengths in this part. She was delighted when instead of attacking her, the initially critical part affirmed her. “This is my vibrancy, my outgoingness, my courage!” she stated in amazement. Her experiencing self, in the second chair transformed its experience of helplessness, weakness, and longing for autonomy to an experience of courage and belief in herself. Following this inner transformation, which resulted from owning and accepting the value of both previously conflictual parts, was a spontaneous shift in her relationship with her mother. The shift was in the direction of autonomy and appreciation. This power of facilitating clients’ integration and transformation of their relationships to parts or individuals previously experienced as only problematic is offered through EFT processes in combination with Satir’s goals.

Coaching the Transformation of Unmet Expectations

The explicit processes of EFT can facilitate an experiential process of “transforming of unmet expectations.” This task, a hallmark of Satir’s model (Banmen, 1999) facilitates clients acknowledging and either taking responsibility for or grieving unmet needs for love and validation, and also taking responsibility for or releasing various self-defeating beliefs and perceived criticisms from self and others. To transform an unmet expectation in Satir’s model involves moving through pain or denial to acknowledging, for example, the hurt and blame towards self or others for how they failed to do what they “should” have done. Therapists guide people through a change process where in which disappointments at what they expected should have happened no longer retain the previously debilitating emotional impact.

Although salient to Satir’s model, this process can appear somewhat vague and complex and could be confused with advice giving or cognitive restructuring. (For example, a therapist may say, “Your father did not care properly for you and now you need to give up trying to get his love and find others in your life who do support you,” or “Stop telling yourself you should have been able to save your mother from her depression. You are not responsible for her feelings. Begin to appreciate who you are!”) Unlike a successful transformation of unmet expectations, these therapist insights and suggestions do not facilitate a client’s here-and-now exploration toward making lasting changes. The view in this article is that many therapists in training in Satir’s approach seem to stay primarily in a cognitive domain in their attempts to transform expectations. Remaining at a cognitive level is thus similar to the cognitive restructuring of Beck’s (1976) Cognitive Therapy. The steps of Greenberg’s (2002) Emotion Coaching provide explicit ways of working toward this holistic transformation of unmet expectations. These steps lay out a process that works with the complexity of emotion that is affect, cognition, meaning, bodily experience, motivations, and so on. Following are abbreviated emotion-coaching steps that a therapist used with Charlie, including experiential therapeutic examples from a live therapy session.

Transforming unmet expectations through emotion coaching. The emotions, bodily sensations, cognitions, shifts in meaning, and experiencing that are shown in parentheses, emerged as the therapist attuned, reflected and evoked deeper explorations through empathic following and process direction.

1. Identify the primary unhealthy sensations in your body. [“An ache deep in my belly”]
2. Give this sensation a name. [“Sorrow”].
3. Verbalize the negative thoughts and beliefs that accompany this sensation. [“I shouldn’t feel sorry for myself. Even though he abandoned me, I still had a mom. What a sissy I am for feeling like crying! Don’t dare cry! I’ll never stop.”]

4. Soothe yourself through this process, to keep from becoming overwhelmed. Breathe deeply. Speak reassuringly to an image of a fictitious young child. ["This was a big loss for you! I see how sad and scared you are. I'll stay with you, and help you get through this."].
5. Identify healthy core feeling in response to your negative thoughts. [Anger. "He should never have left me! I deserved a dad to have been with me! I needed him and he left me. The bastard! I did deserve his love!" His core sense of self-worth emerged from this anger.]
6. Identify any other healthy, hidden (subdominant) emotions. [Sadness, weeping over the unmet needs to have had the comfort, love and contact with a father.]
7. Identify the need embedded in this healthy emotion of sadness. [To belong, to be loved and validated and to be told he was competent.]
8. Allow the healthy feelings of sadness and the needs for love and validation to transform the unmet, maladaptive stuck feelings and needs. [Grieving the loss—separating and owning both the sadness and the anger in the grief; experiencing the embedded needs for comfort, love, security and validation transforming the pain in his gut.]

Charlie had unwittingly created the pain in the gut to block (or keep himself from experiencing) the potentially terrifying core vulnerability and resentment over his father's abandonment. Facing his vulnerability and owning his resentment and sadness by experiencing and expressing it, he released the physical and emotional pain and accessed an experience of comfort and validation. In Satir's terms he had "transformed an unmet expectation," and thereby transformed his accompanying feelings, perceptions, yearnings and sense of Self.

Integration Benefits Both Approaches

The illustrations of three of Satir's family systems processes described above also have value for the EFT practitioner. Family mapping techniques can be a helpful backdrop to keep relevant family-of-origin issues accessible for exploration when resolving problematic feelings toward another person in the present. The "parts party" technique keeps an EFT practitioner grounded in the reality that in the dialectics of human processes there are a range of parts that need to be attended to. The focus on transforming unmet expectations keeps the EFT practitioner aware of the interaction of cognitions and affect in the process of emotion.

Couple and Family Therapy

Although a discussion of couple and family therapy is beyond the scope of this article, it needs to be mentioned because it is a very substantial way in which EFT augments and goes beyond what Satir's approach can offer. The techniques of Satir's model can be used individually and with couples, families, or other groups, but there is no specific framework for couple and family therapy. Emotion-Focused Therapy, in contrast, has an explicit map of the couple therapy process that clearly upholds Satir's values of seeing the growth potential and positive intentions in maladaptive communication patterns and building communication that fosters self-esteem in family members. Likewise, Satir's systemic tools mentioned earlier, such as family reconstruction and sculpting, are effectively adaptable to EFT couple and family work.

A brief overview of Emotionally Focused Couple Therapy (EFCT; Greenberg & Johnson, 1988; Johnson, 2004) serves to illustrate again how the more explicit processes of EFT, which are readily accessible to be taught to practitioners, will go a long way to ensure that the intuitive artistry of Satir can be carried on. Emotionally Focused Couple Therapy provides clearly delineated experiential therapeutic steps that collaboratively establish emotional engagement and restructure partners' interactions. These steps consist of identifying the couple's negative interaction cycle, accessing underlying feelings and needs in the cycle, reframing the problem in terms of underlying feelings and unmet attachment needs, promoting owning of one's needs and acceptance of partner's experience, facilitating asking the partner for one's needs and wants, and ultimately restructuring the interactions and creating emotional engagement. (Greenberg, 2002; Johnson, 2004). In addition, EFCT has a comprehensive model for working with trauma survivors and treating depression and anxiety in couple therapy (Johnson, 2002). The clearly delineated relationship and treatment principles and tasks of EFT and EFCT can be applied in family therapy. Johnson

(2004) includes one chapter on working with families in the EFT framework. Dankoski (2001) describes how EFT can effectively address the needs of families as they progress through the life cycle transitions.

CONCLUSION

In the spirit of Virginia Satir's legacy of creating change through the process of human validation, EFT makes explicit much that remains vague or intuitive in Satir's model. The two models share common philosophical assumptions about human nature and therapeutic change. Virginia Satir accessed people's innate goodness, positive growth potential and transforming energies of choice and freedom. Practitioners seeking the results of Satir's transformative therapy can be enriched and guided by integrating the EFT framework of emotion and specific experiential therapeutic interventions with Satir's approach. The therapeutic value of empathic responding, frequently minimized in Satir's model, is given prominence in EFT. Specific therapist interventions grounded in empathic responding and a framework for working with emotion as a mind-body process, are EFT's central contributions for retaining the artistic, transformative quality of Satir. The article focuses primarily on integrating EFT with Satir's approach for the very important element of activating a systems perspective even in work with individuals. A final section articulates why Satir's approach clearly needs the EFT structures for its family and couple work. Satir's approach, when integrated with EFT, becomes a model for creating change in individual and family systems that is indeed greater than the sum of its parts.

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