

# Experiential psychotherapy consists of three therapeutic relationships<sup>1</sup>

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## I. Introduction

In this paper I try to clarify two questions: ‘what is the experiential?’ and ‘how to reach the experiential in therapy?’ The experiential is the crucial factor for making a therapy effective. The experiential is essential to understand what makes change possible, and for this understanding it is more important than the client-therapist relationship.

The second question, ‘how to reach the experiential in therapy?’ is: how can we help the client to bring his<sup>3</sup> body - the body-as-it-feels-and-creates-meaning - closer to and in his feeling and speaking during therapy sessions? This is another formulation of ‘bringing focusing into therapy’. How the therapist can bring focusing subskills to the client’s inner process, is elaborated.

## II. Three therapeutic relationships

Experiential psychotherapy can be represented as  $T \rightleftharpoons C \rightleftharpoons E \rightleftharpoons S$  (in short: T-C-E-S). The first therapeutic relationship (E-S) is the relationship between the client’s experiencing and symbols (words, drawings, etc.). Without this relationship there is no therapeutic effect. Now and then this relationship works on its own without the client’s inner attention, but often it needs the relationship between the client and his experiencing (C-E). These two relationships together can already do a lot of therapeutic work on their own, without a client-therapist relationship. But sometimes they need the relationship between the client and a therapist: The third therapeutic relationship (T-C) helps the client become experientially reflective.

Let us have a closer look at this. The *first therapeutic relationship* is the relationship between e and symbols (E-S). E is the abbreviation of ‘the *e*xperiential referent’, ‘an *e*xperiential datum’, ‘the *e*xperiential’, etc. The experiential (e) is the base of everything. The true change process occurs at the level of the client’s experiencing. The core of therapeutic

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<sup>1</sup> Paper presented at the Third International Conference On Focusing-Oriented Psychotherapies, May 15-18, 2014, Stony Point Center, Stony Point, New York. This text is protected by copyright.

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<sup>3</sup> ‘His’ can everywhere be substituted for ‘her’, ‘he’ for ‘she’, and ‘him’ for ‘her’.

change takes place in the relationship between e (experiencing) and symbols: the symbolization. Of the two the e is the most important: it is the source of change (it searches and arbiters symbols) and it is the place of change, the place that changes (it shifts; it is carried forward). It is the deepest relationship (it is at the bottom of the scheme). It is the most important therapeutic relationship because the experiential body – which *is* e – must be involved in therapy. If e is not affected and is not carried forward, then there is no therapeutic effect; it is essential.

This relationship can work alone without the focusing effort of the client. For example, in an unguarded moment, let's say, during shaving at morning in the bathroom or during a dreamy driving, suddenly a new idea comes up, an idea that 'affects' you, that also has a bodily effect, i.e. it makes you happy. Immediately you want to keep it, because it gives you a new perspective which meaningfully carries forward what you are currently working on. When such a new step comes, it's important that you receive it.

Also a therapeutic step may come in this way, this means alone, autonomously - without focusing. I remember during a class about Hegel an important shift in my relationship with my mother. The theme of the class was the relation between the ideal and the real in Hegel. The shift concerned a deep feeling that my mother did not have to be the ideal person for me, a deep feeling of acceptance of my mother as she is. There e did work in me autonomously (also see below), alone: I was NOT focusing on that.

The ***second therapeutic relationship*** is the relationship between the client and his experiencing (the inner relationship<sup>4</sup>).

Also, the second relationship (C-E) too sometimes works alone<sup>5</sup>, without the third therapeutic relationship. A person, who is not in therapy, at certain moments is able to bring forward his own process therapeutically. Also a client who is in therapy is able to bring forward his own process between the sessions – which means without the presence and the accepting and empathic reflections of the therapist<sup>6</sup>. The second therapeutic relationship is also 'at work' in sessions focusing-oriented art therapy or in sessions collage work, where the client for smaller or greater parts is working alone during which he brings forward his process without contribution of the therapist.

And we will see that the second therapeutic relationship is 'at work' in therapy sessions of clients who themselves are well at work experientially (clients from group I in

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<sup>4</sup> Weiser Cornell and McGavin (2008) did put the inner relationship at the centre of the focusing protocol they created and named Inner Relationship Focusing.

<sup>5</sup> E is the driving force. The first therapeutic relationship is about the client's *experiencing*. The second therapeutic relationship is about the client's *focusing*. And the third therapeutic relationship is about the client's *relating* with the therapist. The first is the most fundamental; that's why, in my opinion, the name experiential psychotherapy is more legitimate than the name focusing-oriented psychotherapy.

<sup>6</sup> See below the example of a somatizing client, whose writing has therapeutic effect.

Depestele, 2013). These clients are saying much in the session *from their e*, not preceded by a reflection of the therapist. They are ‘going down’ and staying there on their own initiative. And their speaking is not so much a speaking to the therapist but an expressing for themselves what they have inside. It is work of the C-E alone.

The ***third therapeutic relationship*** is the relationship between the therapist and the client (T-C). Sometimes this relationship is necessary to enable the second therapeutic relationship, the relationship between the client and his experiencing. The experiential therapist facilitates this process by a kind of interacting with the client that is different from the usual relationships of the client, by making a difference. The therapist is a companion of the client in helping to work through the personality difficulties that the client brings in the relationship in such a way that the client comes to reflection, and the therapist is a companion by being present with the client working in his e-field (Depestele, 2004). The result is: the therapist makes reflection possible for the client.

The therapist does this, for example, by being empathic<sup>7</sup>. This invites the client *indirectly* to move into his inner attention. For example, the therapist gives attention to and reflects tentatively an unclear spot in the client’s experiencing: indirectly the client’s attention may be taken along inside, but this is often not the case and if so one is not sure if it is experiential attention.

The therapist also makes reflection possible for the client by inviting him *directly* to one of the many possible focusing acts (subacts or subskills<sup>8</sup>) to his experiencing. For example he does it by inviting the client to pause at what he was just saying or by *inviting the client’s attention* to something the client tends to pass by<sup>9</sup>. This inviting by the therapist belongs to the third therapeutic relationship as it introduces the focusing attitude.

This is facilitating *within* the therapeutic frame. Through the therapist’s guiding the client comes to another coping with himself: The therapist - next to accompanying the development of client’s process - introduces the focusing attitude and the focusing subskills to the client. This is how he makes the difference within the therapeutic frame.

It is facilitating *outside* the frame when the client wants to step outside the therapeutic frame and when the therapist makes the difference, for example, by not answering a question the client asks. The client asks about something: “Do you agree with me?”. Or the client asks about the choice i.e. if he would best continue the relationship with his lover or not: “What do

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<sup>7</sup> We want to put e at the centre and not the T-C relationship: *we understand and define empathy from the client’s e and not from the therapist.*

<sup>8</sup> See below for the subskills in action, with therapy examples.

<sup>9</sup> At first the client’s being affected may be vague, he easily passes by it. One thing to learn is *that ‘it’ may be inconspicuous or may begin inconspicuously; you can barely see it, it is something at the periphery of your experiencing*: subskill (SS) 38. It is important that the client learns to be aware of this and to go back to it when something seemingly insignificant had just surfaced for a moment, also when he thinks at first that it isn’t important.

you think I should do, continue with him or not?”. If the therapist does not answer the question but brings it back in an attentive way to the client, then the client comes in a new situation, which makes it different than his usual conversation partners who do answer this kind of questions.

The client comes before ‘a blanco’: a *possible*<sup>10</sup> new implicit e, evoked by the new situation. At first he does not know what to do with it, it is ‘blanco’, it asks for a new response from him.

Now there are two possibilities. Either the client works with it, he does something with it. He no longer addresses the question to the therapist but to himself and he is able to stay with his not-knowing for a while. A new interaction-first arises between the client’s inner attention and this implicit feeling. *So the blanco becomes an implicit e.*

Or the client does nothing with it: It doesn’t strike a chord. The client *will repeat the same structure-bound pattern still a few times.* The interaction-first, namely the blanco-feeling-that-asks-for-carrying-forward, remains implied but it doesn’t occur. The implicit feeling doesn’t form just as the inner addressing doesn’t form: their interaction-first doesn’t form.

If the client – in the first possibility - does something further with it, then what was blanco becomes an implicit e and gets symbolized. The initiation of this process was made possible by the refusal of the therapist and by the therapist’s encouraging the client to take time to experience his own meanings. In the process of creating a new e and the symbolization of it, a new bit of I is generated in this interaction-first: The client himself comes to an answer, and in this way expands the capacity of his I.

### **III. Experiencing as the new point of view**

A good relationship between client and therapist is necessary so that the client does not close himself, but it is not sufficient to make therapy effective as research has shown (a.o. Gendlin, Beebe, Cassens, Klein & Oberlander, 1968). Where necessary the therapist must be process-directive (Sachse, 2004, p. 22; 2014, p. 12). Instead of stating ‘the client-therapist relationship does it’, I want to start from the statement ‘the experiencing in the client does it’ when therapy is effective and to elaborate this.

What does the experiential process in the client need? What does the experiential body need in order to get into the therapeutic process? What kind of interaction does it need from the person when he is alone? And if he is not alone what kind of interaction does it need from the therapist who is with him?

Only provide T-C interaction is not enough, also C-E interaction must be provided. It is *this interaction that does it* when therapy is effective; and within the C-E interaction

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<sup>10</sup> A blanco is not yet an implicit e; the client must do something with the blanco.

eventually it the E-S interaction that does it. We need specifics of *how to help the client to bring he himself bits of focusing* into his therapeutic process.

Crucial is that the therapist is oriented to the client's experiencing and it's unfolding (that must be his guide), and in particular ***that he helps the client so that the client himself is able to attain to his experiencing***. In the first place the therapist helps the client to orient himself to his experiencing, to let an e form and to put into words and to carry forward his e. In the second place the therapist 'goes through' the client to his e to put into words the content of e.

In therapy much more is going on than the relationship between the client and the therapist. Underneath the client-therapist relationship two other relationships are at work, which are sometimes unnoticed: The client's reflective work with his experiencing, and underneath that the autonomous work of the client's experiencing with carrying forward symbols.

#### **IV. Experiencing (e) is the most important factor in therapy**

##### ***4.1. The body must be involved***

Why is experiencing the most important factor in therapy? Therapeutic change does not merely take place on a cognitive or behavioral level. Knowing things about yourself (information) does not have much effect, does not result in real change. Also reasoning has little effect. An occurring merely on the cognitive level is not enough. Also mere learning another or a new behavior is insufficient.

There must also be feeling. But feeling does not simply mean emotions. Emotions are important; when somebody in a session for the first time discovers that he is angry about something, then this an important step. But becoming angry again and again about the same thing - which is the case when the client doesn't get deeper - does not result in change. More must occur than that the same emotions repeat themselves. A deeper layer must come in motion or must be brought in motion, the layer of the felt *meanings*. This is the experiential layer. This must be involved, as is confirmed by much research (Hendricks, 2002).

In other words not so much emotions and usual feelings are important but felt *meanings*. How do we feel meaning? We feel meaning 'with' the body. Not your body as it feels a physical thing, but your body as it feels a situation.

So the body that must be involved in therapy is the body-as-it-feels-and-creates-meaning, the experiential body.

## **4.2. *The experiential change step***

The body is involved as experiential change steps. A full change step consists of (1) the forming of the experiential feeling (felt meaning, felt sense) of the unresolved situation, and (2) the forming of the solution of it, the shift. A change step may be small or big, partly or wholly. In therapy change moments do not always come in the way of a full step. Mostly *aspects* of a change step occur<sup>11</sup>, small ones or bigger ones. These are experiential change moments. They ask that we, client and therapist, in sessions *operate closely to the body*, the therapist in his interventions and suggestions as much as the client in his wordings and symbolizations.

## **4.3. *E itself is active: The power of implying***

### **4.3.1) *General: the implying***

There is a power in us: the implying. On the level of meanings we feel a ‘forward urge’. The implying is at work continuously, underneath everything. For example, when there is a problem we feel a forward urge toward a solution. We feel an aspiring to a solution, which we have to tune in to, and which we have to help to come into action. *We must further examine this experiential power or e-power.*

### **4.3.2) *The powers of e***

When e is touched (when it gets an opportunity) then often the wording from there comes automatically, by itself<sup>12</sup>. This means that the e wants to go further. There is an own propelling, driving power in it. We are not in control of this wanting to go further. The person, the client, the I is not in control of it. Thus, the e of the client does a number of things autonomously.

One of these is the following:

Take the example when a wording is only partly right, and see what e can do. So, a wording by the therapist or by the client is only partly right. When the client then gives inner attention to the whole of what wants to be worded, then *e focuses itself from out of the only partly rightness of the wording* (e gets the opportunity to do that – the good environment for it is the attentive I of the client). And very often the point of the exactly focused e IS im-media-

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<sup>11</sup> The change step is not just defined by two aspects - forming a felt sense and explicating a felt sense - which would imply that there are only two subskills in focusing (see below); there are many subaspects. So there are many subskills.

<sup>12</sup> “The feeling knows how to speak and demands just the right words. The feeling, more exactly, is sufficient to bring the words to the person’s speech” (Gendlin, 1978/79, p. 52).

tely the point of coming of the exact carrying forward words: it is an interaction-first process<sup>13</sup>. When e is exactly focused, it responds: it ‘jumps up’ into the right words. This is the point we need to achieve, the point where e jumps up from itself.

Conclusion of all this: *the e of the client is the most important*. When therapy is effective it is not so much the client-therapist relationship that does it, it is in the first place the *client’s e* that does it. And in reverse when the client-therapist relationship works it is because C-E works and because E-S works.

**V. E will ‘move’ within a good/right environment** (transition to applying all this into practice)

E will be able to actualize its power (which is not static) when it gets an opportunity to do that.

### **5.1. General**

We said: When there is a problem we feel an aspiring to a solution. This aspiring, *this striving needs* the right environment to realize itself. This means: we have to tune in to it, we have to come in contact with the implying and to help it come into action.

This process needs *an attentive I*, a re-flecting I, an I that re-flects<sup>14</sup> to what the experiential body needs. This is the task of the I: tuning in to and coming into the aspiring. That’s why *the explicit invitations and suggestions of the therapist to the client’s I to take up the focusing attitude (in its many subskills) is a vital element* in therapy in order to involve the body. When we say ‘the therapist tries to involve the body’ we mean ‘the therapist tries to help the client to open his inner attention to the body’.

We said: When e is touched (when it gets an opportunity) then often the wording from there comes automatically. What does this ‘touching’ mean? It means that *in one way or another the client must have come to e; e must be touched with attention*<sup>15</sup>. E needs that the I

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<sup>13</sup> E is more important than the empathic reflection of the therapist. Say the first wording is a reflection by the therapist. The therapist reflects how he understands the client’s point. The wording is only partly right and the client goes inside, checks the wording with what he wants to say and comes back with a correction from his e that gives him a relief. This work of the client and his e is the most important. It is more important that the therapist’s empathic understanding in his reflection, because the client’s e has spoken, something happens in his body, in his experiencing. Without this there would be no change, despite the wording of the therapist.

<sup>14</sup> Re-reflection: The I ‘flexes back’ to how the process ‘was’ until now. And then: “Facets can be lifted out and symbolized, which “were” how one was already living. This “were” is in quotation marks, because one changes in authentic explicating” (Gendlin, 1978/79, pp. 67-68). Before the reflection there was just an unreflected being (see below).

<sup>15</sup> “If we, as it were, touch that “feel” of the name over and over, “touch” it with our attention, it may suddenly “open,” so that the name appears” (Gendlin, 1978/79, p. 49; my italics).

opens itself to it. For example, if there is only a partly right wording (see 4.3.2 above), the good environment that the I can create is that it *pauses on* the only partly right wording, and that in that opening the I *lets make its presence* that what is still not worded. In that opening the still-not-worded itself will do the focusing work, to the point that it is so sharp that the right words come.

In one way or another the client must come to it. Coming to e means giving the opportunity to e. E is brought to life. E is forming. It is by the client's inviting attention that e *comes*.

How exactly is the I necessary? First, my body 'takes in' a situation and then, secondly, I may try to come to this with my focusing attention. When I orient my attention inwardly, I can come to this 'something': something forms. This is: the body will form further what it has taken in into this 'something', into something-for-my-attention. Then the I *has* an unclear feeling about the situation.

The I must actively make time to come to this bodily formed feeling. When the I becomes experientially reflective, it sets up an interaction. An interaction is generated. This I is im-mediate-ly an interactional I: even before there is an e, the I is at least looking-for it<sup>16</sup>.

The knowing body itself takes a step. The bodily knowing takes a step when it is 'touched' by the reflecting I. The I orients the attention to the e-area (the body) in such a way that e itself can form and move. Nothing did happen before; thus e-forming was stuck. Formation and movement of e needs a 'touching', a stirring. It is a touching in the sense of creating a possibility-to-e, inviting e-formation, inviting further I-e creation<sup>17</sup>.

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<sup>16</sup> "This seeking, waiting for, looking, and letting is a kind of action. It is a way of relating to, interacting with ... What? Where? It is interaction with a right feel, a new kind of feel which will come in a new place. This feel, and this new space, are both made in this very interaction. (This is an instance of our principle "interaction first": Only from the interaction do the participants come. A new kind of interaction makes new participants. See IV-A.)" (Gendlin, 1997b, VIII-A.1; p. 214).

But the I? *This searching makes another I (than the usual I)*. "The term "focusing" seems like a "looking at" a felt datum. Really it is a process in which focuser and datum are one, and both change, as focusing is ongoing. One cannot attend to a feeling without thereby feeling it in a way one didn't moments earlier. To "focus on" is also a "feeling further" which explicates what is felt" (Gendlin, 1968, p. 212).

The I's inner attention is direct reference. "(D)irect reference to what is implicit *changes everything*. It is a new ground (...)" (Gendlin, 2014, p. 6).

See also: "Ego and intricacy both contribute to the steps (Gendlin, 1985, p. 138). And: "Focusing steps don't come from how you know yourself. They change that" (Gendlin, 1986, p. 149). "Such steps cannot be explained from how you know yourself. You are not a subjective entity, a self-known thing with one set of definitions. Rather, the steps change that self-known person" (Gendlin, 1985, p. 145). Or the I opens itself to e ... in order to let change itself. "Two systems do seem to be operating in what I said so far: ego and intricate body-experience. Only both of them make a focusing-step in which they both change" (Gendlin, 1985, p. 146).

<sup>17</sup> "In our new kind of sequence the move she makes toward the as yet vague feel has an effect on this feel which in turn affects the next move that arises from her body. Only now these moves are not dance steps, not words or images, but her interaction with this feel, her pointing or pursuing or waiting for. And the new environmental changes are changes in this "feel"" (Gendlin, 1997b, VIII-A.1; p. 217).



People must learn to rely on the power of e; and the first thing then is knowing that this power is there.

## 5.2. *Specific (within a good environment)*

As we said, e will move when there is a good environment. Above we outlined focusing as the good environment; but focusing is not always necessary, and sometimes more than focusing is necessary.

There are several possibilities to distinguish.

5.2.1 First possibility: E does it merely by its own power. For example, the sentence that drops in *unexpectedly* when I am in the bathroom in the morning. When this occurs I am not focusing. The good environment is here: Receiving it; this is, for example, writing it down immediately. I have to receive it, if I want to give it a chance to develop itself *further*.

5.2.2 Second possibility: E does it by its own, can do it by its own, when *an e-ground is put to work* by the client's own interaction with his experiencing (C-E) preceding it. For example, after a therapy session - not in but after a session. Or after reading something.

5.2.3 Third possibility: E does it *within the inner experiential attention* of the client who works alone.

Example of a client who reflects alone (and writes it down)<sup>18</sup>. In the intake session the client had told about her somatic complaints: somatizations (complaints without medical explanation). She had a list of twelve complaints; for each she had a different medication. At the end of the session I suggested her the following homework: "Each time you feel something somatic, try to ask yourself 'With which situation may this complaint have to do, and with which personal difficulty in that situation may it have to do?' and write it down briefly".

In the next session, it appears that she has been working very fruitfully with this suggestion. She is enthusiastic and says: it was a golden clue to ask for the situation with each complaint. *Because until now with any painful event I tended to push it away instead of feeling it.*

Now she didn't push it away but she did the opposite. For example, her sister is visiting her with her family for dinner. During the aperitif she becomes dizzy. But she succeeds to reflect on her situation. She asks: "What is upsetting me now? I am sitting

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<sup>18</sup> From my contribution to the panel 'One process, many avenues: Therapeutic paths for carrying forward in FOT', at The Second World Conference on Focusing-Oriented Psychotherapies 'Living the Practice', November 10-13, 2011, Stony Point Center, Stony Point, New York.

here alone, across from a family, sitting there opposite to me. Being single, without a family, is a failing. I don't comply with the expectations of the prevailing standard".

She did this reflecting work in different situations. Each time she writes it down briefly. She says: "At the moment I can name it, the tension diminishes and after one hour the somatic complaint has disappeared completely, or it has strongly diminished, or it becomes totally unimportant".

This client succeeds to come to reflection *without the presence of the therapist; she doesn't need his presence and she doesn't need his immediate invitation to reflection*. She is alone. The therapist just invited her to do this at the end of the intake session. She does this therapeutic work alone. In fact e does it within the inner attention of the client who is working alone.

Also here belongs the example of the therapeutic effect of expressive writing<sup>19</sup>.

5.2.4 Fourth possibility: E does it within the *inner attention of the client facilitated by the therapist*. In the session the therapist gives a focusing suggestion. Directly (e.g. "Wait here for a moment if you can ..."). Or indirectly (e.g. "*You are sensing ... something in you ... that is shocked*").

5.2.5 Fifth possibility: E does it *in response to a reflection of it* by the therapist. The therapist does not offer a focusing suggestion, he reflects an e of the client. The wording may be right or not right or partly right. That it is only partly right makes it possible for e to specify 'the still-not-worded'.

## **VI. Central in the environment are: *I* and *inner attention***

You see e does a lot of work on its own, in different kinds of environment. We have seen examples where *much creative and therapeutic work occurs outside the relationship with a therapist*.

But here, we continue our explanation with the example of therapy, where the therapist helps to create this environment. We have no space to elaborate the other cases.

So, how can a therapist help to create an I, to make the client reflective? For this, often in therapy much work needs to be done at the level of the client-therapist relationship,

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<sup>19</sup> The therapeutic effect of expressive writing is confirmed by much research. In a meta-analysis of randomized studies (Frattaroli, 2006) expressive writing (also called emotional disclosure) is found to have a positive effect on (13 subcategories of) psychological health and on (16 subcategories of) physiological functioning (p. 841), among other the immune system. Two research reports show that the "level of "experiencing" or involvement in the disclosure was a critical factor in outcomes" (Lutgendorf & Ullrich, 2002, 180) and that "those individuals showing greater "experiencing" showed a greater" effect on the immune system (they used the experiencing scale to measure it).

because some clients start therapy far from the experiential level (see Depestele, 2004: the relationship space; Depestele, 2013: group III).

Some clients are telling and telling and describing and explaining what happened and what people did and what they did and so on, but they ‘forget’ to look inside for a split second at what all that is effecting in them<sup>20</sup>. As therapist I often must be active and invite them to do it. When I don’t come in with this intervention now and then, the client would continue telling and telling and forgetting himself. This is one of the first focusing subskills that a therapist can offer to the client<sup>21</sup>.

I already gave some other examples: The client asks the therapist about something: “Do you agree with me?”. Or the client asks about the choice if he would best continue the relationship with his lover or not: “What do you think I should do, continue with him or not?”. Or the client asks for reassurance about something. The therapist doesn’t answer the question or doesn’t give reassurance. An exchange follows. The result may be that the client comes to realize ‘Oh, I am doing this!’. From just doing without realizing it, comes a realization, comes a realizing I. By the client-therapist interaction *an I is generated in this problem area*. Before there was just a doing without realizing it. Now there is an I, beginning to realize what it is doing. Before there was just a being, an asking, a doing. Now there is an I differentiated from this just being, now there is a beginning of being-with<sup>22</sup>.

The creation of an I (in this problem area) is a very important moment in therapy, because the I of the client is the *first base* to build all further therapeutic work<sup>23</sup>. This I is reflecting but it is not yet an experientially reflecting I, it is not yet focusing. In the creation of this I the client succeeds in making the passage from the relationship space to the reflection space (Depestele, 2004). Or, in other words, the client was far from his experiential level (group III: Depestele, 2013) but makes a considerable move now in the direction of it. The therapist did help him to come a little bit closer to the e-level, a little bit closer to focusing.

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<sup>20</sup> “(P)eople (...) have the terrible tendency to give up on what is inside” (Gendlin, 1974, p. 215).

<sup>21</sup> Here comes a new task for us as focusing teachers: How could we make it more easy, more natural that people themselves (alone, without the instigation of another person) make a pause automatically? It’s important that people learn the pause and that they practice it. But it is as much important to learn people *apply it automatically*.

<sup>22</sup> The following are alternative names for the I or show aspects of it: ‘Garden’ and ‘Guesthouse’ (CWF); ‘the safe place’ (many trainers) makes me think of the ‘locus amoenus’ ([http://nl.wikipedia.org/wiki/Locus\\_amoenus](http://nl.wikipedia.org/wiki/Locus_amoenus)); the ‘all fine place’ at the end of ‘clearing a space’; ‘self-in-presence’ (Weiser Cornell & McGavin); ‘presence’; ‘grounded presence’ (WBF); ‘inner listener’ (several trainers); ‘the reflecting I’ (Kuba & Hikasa: NY 2011); ‘base of existence’.

Common to all: I = a more or less solid ground.

<sup>23</sup> Sometimes the therapist may give a reflection with the client’s I-term.

C: (...). I have to take care that I don’t do it from habit.

T: Taking care that I don’t allow the habit.

The client knows that the “I” in the reflection doesn’t refer to the therapist but to himself. The client receives and experiences the reflection in the I-form. The I-formulation can lead the client’s attention directly to his own inner sense or keep it there. It strengthens the invitation to the client to reflect.

The I can also be occupied, for example, by the inner critic; then first therapeutic work is needed to free the I; we have described this elsewhere (Depestele, 2009).

The next step we need is to create an experiential I, an I that can help to involve the body, an I that can help create and develop e's. We try to help create in the client an interaction of the I with an e, an I-e interaction<sup>24</sup>. The I-e relationship (C-E) is the *second basic* structure that we must achieve in the client.

So the I and the inner attention of the client are the central elements of the good environment for e. More precisely we can say, once we are at the reflection level, that *the I* constitutes the first environment for e. From there the environment for e expands gradually. The second and more powerful environment is made up by the *I and inner attention*. The third environment is made up by *the I, the inner attention, and the subskills*. Finally, the full environment is made up by *the I, the inner attention, the subskills, and symbols*: carrying forward symbols are the right environment to complete the carrying forward<sup>25</sup>.

## VII. How can the therapist help the client (to) make I-e interactions (I-e's)?

So far we have seen that e is the most important factor for making therapy effective. And that the I and the inner attention of the client are central elements of the good environment for e. The I-e interaction (the second therapeutic relationship) is the necessary structure that we must achieve in the client.

How can the therapist help the client to make I-e's? First let me show it with an example (for many other examples see Gendlin, 1974, pp. 230-234; 1977<sup>26</sup>; 1984<sup>27</sup>; 1996, chapter 10; 1997a).

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<sup>24</sup> See also Gendlin (1974, p. 222) "A therapist must strive (and I will show how) to help the person allow directly felt referents to form, to attend to a bodily felt sense, and to let that live further in words and interactions" (for examples see p. 232ff.)

<sup>25</sup> These are the subsequent necessary environments when the client is at the reflection level, i.e. in the second therapeutic relationship (C-E). As we said, a therapist may be necessary to bring the client to the reflection level, i.e. a third therapeutic relationship (T-C). How is the therapist a good environment to bring the client to the reflection level? The therapist creates a space where it is safe for the client to speak as free as possible. When necessary he helps to work through the personality difficulties that the client brings in the relationship. Subsequently he helps to create a reflective I in the client. Finally he forms an environment for the client's being oriented to his e.

<sup>26</sup> Gendlin (1977) introduces a depressed client: "It could be it's hard [for the client] to get out of bed, discouraged, getting [p. 124] up early, a draggy sort of down, depressed, lonely kind of quality. (...) You can now respond *to this vague feeling* even though the person doesn't have it yet because they're not looking there, they have no vague feeling at all yet, they're just telling you they got up early, that's all. But you can respond, you can say, "So that's a heavy way that you feel about when you first get up in the morning?" Or, you can respond with saying, "So that was hard for you?" or you can say, "So what does that feel like when you first get up?" or you can say, "That feeling that you're putting a whole lot of effort into this, what is that feeling more?" In all these examples what is really talked about is "that." "That" is the felt edge that he has there, but he's not looking at it. I can respond to it without deciding what it is, fortunately. If I had to decide what it is I would get it wrong. The point is

The following excerpts come from a session with a client who came in therapy because of chronic depressivity, started after he finished his PhD one year ago, and intensified after the birth of his son half a year ago. He came to Belgium six years ago for his PhD, and here he met his partner. In the previous sessions it became clear that he had difficulty to make the transition from his life in his native country to life in Belgium, and from the life as a student to the life of an autonomous person who is responsible for everything. At the end of the previous session he had said that his father died when he was 12 years, and he had added: "If he [his father] had lived a couple of years longer, then he could have taught me to make this transition [the transition from child to adult]; my father considered me still as a child". The sessions were fruitful. In this session he says that he has come to realize that he must make a transition, even with a transition ceremony: He will marry his partner within a couple of months.

In these excerpts I want to show some small bits of focusing, some small focusing subskills that I bring in.

For example,

T How do you see this transition?

C I must leave something: What is done, is done. And I don't look back. My student life is finished. The adventurous trip, which I have made to Belgium to make a dissertation, is finished. A month ago I still was between the two.

T *Try to stay with that image, with that sentence*, the sentence 'the adventurous trip is finished'.

The suggestion 'try to stay with' is a small focusing suggestion. It is not the whole focusing, it is only one element of the whole bunch of numerous possible different suggestions which together constitute the whole focusing set. It is that element which is the most useful here. But the suggestion comes up spontaneously in the therapist.

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to get him to turn around and look at it. So, typically, he will say, "No, it's not hard for me to get up," but he'll look at it maybe for a second. He'll say, "It's more like such and so." Even in my very vague way of phrasing it I expect to be wrong, and I expect to be corrected. What I want him to do is look at "that." Usually, of course, it won't work. It will work only once every ten times a little bit. But I can respond like that to *everything* someone says. It's not hard for me to come right back always just to a "that feeling" behind the sentence" (Gendlin, 1977, pp. 123-124).

Thus reflecting to the client *as if* he spoke from an e (maybe we can call it a virtual e). This is still a reflecting, namely implicitly taking the client's attention inside (and thus addressing the I in this way) and not explicitly bringing a subskill into the client's I.

But we see this explicitly bringing in in other excerpts of Gendlin, for example: "Now, let me first mention a little bit about the way I use this focusing in ordinary therapy. During therapy I use it by urging the person talking to me to slow down. I often say things like, "Oh, yeah, right," and "Let's stay with that for a minute." (...) You see what I'm doing? I haven't said anything. It is always a question of staying here, and after I've done that for a little bit I may say, "O.K., let's ask this feeling what it is more. What is really so scary? Or, what is really so hopeless? Or, what is this really that's making you so angry? Or whatever is here" (1977, p. 120; see also 1997a, p. 203).

<sup>27</sup> For a difference between client-centered responding and experiential responding, see Gendlin (1984, p. 89d-90a).

Example of a different aspect (session continues)

C As a student much is done for you, predetermined by the university, by the promotor, and so on. This is different now. Now *I* have to decide about everything. There is no longer a promotor.

T There is no father any more.

C (...) [C is telling some things but I want him to feel it]

T ***How does it feel when I say this?***

This is an invitation, when the therapist says something (or in general if another person says something to him), first to go inside and to feel what it effects in him. This is 'teaching' not just an important but a crucial subskill. It's not a common intervention although in the session I did it intuitively.

Example of still another kind of focusing suggestion (session continues)

C It is the same as saying: My student life is finished. I decide on myself. Now I decide myself in my life, without looking if somewhere there will be a father.

T *Stay with this sentence, slowly, **don't go too fast**, take some time.*

Some more aspects (session continues)

C I always search for confirmation. I also did it with the promotor. Now there is nobody there. I have to decide<sup>28</sup>.

T *Try to **pause and give this sentence a moment thought***<sup>29</sup>.

This may seem an interruption but it tries to *be with* the client in a deeper way, and to help the client to *be with* himself in a deeper way. A focusing subskill can be brought in seamlessly, in response to what the deeper process needs.

C That is something I have to learn. It is standing on an unstable, trembling ground. But there is no other way. The other way I had [in his depressive episode] was: Closing off myself, because after all there is nobody. There is nobody and you have to accept it.

This again is a sentence that carries much experiential load, and therefore I invite him again:

T ***Stay with the sentence, and feel it for a moment. Wait for what may come inside, be patient.***

These are five different facets of 'going inside': stay with, feel it, wait, for what may come, patient: five different things, in fact five subskills.

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<sup>28</sup> I underline the sentences of the client that seem to be experientially loaded.

<sup>29</sup> (1) It is not just pausing (interrupting for a moment) but also giving this sentence a moment thought. (2) Another suggestion could be to repeat this sentence slowly. But it may seem a bit weird to do this in a therapy session. We can do this when we teach focusing, but not so easily in therapy.

C (Silence). Scary ... jumping into deep water is the only way to learn to swim. It is not scary ... but more 'I don't know what will be there. A big unknown'.

These excerpts show how crucial the inner interaction of client-with-his-experiencing (C-E) is. All these suggestions are attempts to help the client to make connection with the body and to bring the body into the process, via addressing the client's I. To bring the body into the process is to *make the body a close companion of the client's talking and expressing*.

In these excerpts you see how the therapist can make focusing suggestions<sup>30</sup> – which are small bits of focusing - in a regular therapy session.

What the therapist does is offering focusing suggestions to the I of the client with the invitation to take them with his inner attention to his experiencing level. *So with a subskill the therapist does not so much address the experiencing of the client but he addresses the client's inner relationship with his experiencing (C-E)*<sup>31</sup>. The second is better because going to C-E is always also a strengthening of the client's I.

### VIII. Where do the subskills come from?

Where do the subskills come from? The subskills come from differentiating the focusing act into many subacts. We may define focusing as *one thing*: spending some time with the unclear bodily sense of a situation. So defined focusing can be seen as one skill. Or we may see focusing as *two things*: first letting form an unclear sense in the inner attention, and second letting it be carried forward by symbolization. So focusing can be seen as two skills<sup>32</sup>. Or we may consider focusing as the numerous aspects of it. In fact the big access road

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<sup>30</sup> See Depestele (2013): Difference between *content reflection* and *focusing suggestion*.

<sup>31</sup> "I ask the person to ask the body. I don't work with the person's body without the person. For example, I ask the client a question. If the client answers immediately, I say, "No, wait. I didn't mean to ask you; I was giving you this question to take downstairs, to ask your body. Ask your body this question"" (Gendlin, 1997a, p. 204B).

Also the following excerpt supposes an I that is inner relating: "If a client tells me that something is "too scary," I say: "Don't go into it, but don't run away either. Back up for a minute, back up until you can breathe. Then stay there."" (Gendlin, 1997a, p. 205A).

See also Gendlin (2006, p. 2): "What that means is that you are not your feelings. You're welcoming them, and in welcoming them, you sense yourself as none of those things. You have them. They're guests. You take them in and you give them a room in your guest house. That's an important kind of "I" (...)"

<sup>32</sup> Of course they are not separate, they go together. But they can be distinguished: In *A Process Model* Gendlin (1997b) describes and analyzes in VIII-A.1 the process of *how to let form a felt sense* (with the famous Duncan example), and in VIII-A.2 the process of *how to help a felt sense open itself*.

See also the distinction in Gendlin (1974, p. 231): "Once a place forms (and this happens by itself, if one keeps quiet and lets it), then people can relate to that place. They can wonder what's *in* that, and can feel around it and into it, and can let aspects of it come to them one by one" [in this article "a felt sense is called a *place*": p. 230].

by which we can invite the body to come in and by which the body can come to create the experiential process, is constituted by *many small avenues*, each with a distinct character. In the focusing skill many subskills can be distinguished.

I made a survey where the focusing subskills are brought together in an ordered way. I'm indebted to many focusing trainers and their training programs where I found these subskills. The survey can certainly be ameliorated and refined in several respects, and is far from complete. For example, the possible subskills of 'clearing a space' are not yet included. The list of subskills I present here is far from exhaustive, I think. And some may overlap. Much more study and investigation are necessary. We must come to a systematic study of the subskills's. I made a trial.

In this survey we start at the most general level with a division into three. At a deeper level we find some subdivisions. At one more level deeper we see that each of these subdivisions appear to contain several deeper subdivisions. And at the deepest level the whole arrangement shows numerous subskills.

I want to show you briefly how to go deeper in the survey, from the general level into the most detailed level.

At the most general level the focusing skill may be divided in:

1. Bringing oneself to focusing
2. Your body as it feels a situation: How to help a felt sense to form itself?
3. Your body as it takes a step: How to help a felt sense to open itself?

You see: three subskills: How to let form a felt sense? How to let open a felt sense? And a preparation phase.

At a deeper level we see that these three subskills appear to be three *groups* of skills (Table 1):

*The first group has two subgroups of skills:*

1. Bringing oneself to focusing
  - 1.1. Learning to make for oneself the opportunity for coming to focusing
  - 1.2. Creating a good 'environment'

*The second group has eight subgroups of skills:*

2. Your body as it feels a situation: How to help a felt sense to form itself?
  - 2.1. The crucial pause, the crucial breaking
  - 2.2. We can start focusing in two ways: Starting from the body or from the situation
  - 2.3. 'Choosing' the focal point
  - 2.4. Inviting attention: The specific bodily way to be with the situation with my attention



- 2.5. The specific inner attention must be sufficiently long
- 2.6 Finding the right distance
- 2.7. Presencing attention (the pure being-with; presence)
- 2.8. Central characteristics of a felt sense

*The third group has six subgroups of skills:*

- 3. Your body as it takes a step: How to help a felt sense to open itself?
  - 3.1 If you stay with 'it', then it will possibly take a step from itself
  - 3.2 Try to get deeper, try to get at how the situation effects something in you
  - 3.3. Handle: Asking for the core
  - 3.4 Resonate
  - 3.5. Deepening questions
  - 3.6. Receiving and protecting

At one more level deeper what can we find? Let us take the skill '2.4. Inviting attention: The specific bodily way to be with the situation with my attention'. This appears to *contain more subaspects:*

- 2.4.1. The quickest way: "Do I feel totally okay with this situation?"
- 2.4.2. Inner focusing attention is friendly, receptive, and without comment
- 2.4.3. The client learns to avoid the non-focusing way of going inside
- 2.4.4. Learning to distinguish a felt sense from what is not a felt sense
- 2.4.5. What to do when the usual manner to let form a felt sense doesn't succeed?

And, in this, when we look closer at 2.4.2, for example, and ask *what we can see more in* 'Inner focusing attention is friendly, receptive, and without comment', then we get a list of more specified subskills:

- You let come the being-affected (SS<sup>33</sup> 36).
- Not analyzing 'it', not describing, not judging, not doing anything with 'it' (SS 37).
- 'It' may be inconspicuous or may begin inconspicuously; you can barely see it, it is something at the periphery of your experiencing (SS 38).
- It is a being-with without compelling expectancy, without agenda, without that it must come, without that it has to be such and such (SS 39).
- Instead of 'I am so shocked' → I feel/notice/am aware of/am sensing ... something in me that is so shocked (SS 40).
- In this way the 'I' can be a stable pole (SS 41).

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<sup>33</sup> SS = subskill.

## **IX. Each of the subskills can be brought into therapy**

In the whole survey, from 1.1 to 3.6, so far we found more than 110 subskills. These are all small bits of focusing that a focusing guide may offer to a focuser or that a solofocuser may use.

Each of them can be brought into the therapy. How can they be introduced by the therapist? Let me explain it in the following way. The subskills are what an experienced focuser does with himself. He has all these skills and *in his inner relationship he uses the skills according to what his experiential process needs at a specific moment*. Imagine in the place of the experienced focuser a client who does not have these skills or who does not use them, and imagine a therapist sitting next to him and offering the skills to the client's inner attention, to his I, inviting the I of the client to orient these skills to *what his experiential process needs at that moment*, inviting the I of the client to take these skills down to his experiencing.

The term subskill refers to a small bit of the focusing act that the therapist proposes to the inner interaction process of the client with himself. He invites the client's inner attention to take down the small focusing suggestion to his actual experiential referent.

The therapist and the client form a team that is oriented to and collaborates on a third point: forming an e and/or trying to explicate an already existing e. In the beginning of the therapy the team or the alliance is established silently or later in the therapy it is re-established after a relationship problem between them in the relationship space (Depestele, 2004) is resolved. The therapist's caring expresses itself in the alliance he tries to establish with the client, in helping to remove the obstacles to e and to e-formation, and in working together with the client on the client's e.

## **X. Possible subskills such as the therapist may offer them to the client's I**

So I have 'translated' the subskills into possible suggestions and questions from the therapist, which are possible experientializing micro-interventions for therapy. Important in all these interventions: It must be clear to the client that the therapist addresses the I or the inner attention of the client. The therapist may introduce each subskill by '*You might ask inside: ...*'; after some time this is no longer necessary because the client knows how to understand such a suggestion or question from the therapist.

We follow the scheme above, from 1.1 to 3.6, but with more subdivisions and sometimes with a slightly different formulation. Afterwards – see appendix - I put the numbered subskills from the examples in the scheme again, to show how they have a place in an ordered system (in fact the survey is a scheme; there is an order).

## **A) *Bringing oneself to focusing***

### **1. *Learning to make for oneself the opportunity for coming to focusing***

T notices it when C spontaneously stopped and is gazing now, 'looking at the ground'. C seems 'captured' by something. It may not yet be focusing (unclear, bodily, about a situation). But it may be a beginning, and at least it may be an opportunity to show focusing elements to the client: The importance to stop, be silent, being-with something, and to stay with 'it' (SS 2, SS 3).

### **B) *Your body as it feels a situation: How to help a felt sense/an e to form itself?***

The examples show gradually further steps in helping the client with the inner process in which an e forms itself.

### **2. *Interrupt, stop the usual pattern***

T<sup>34</sup>: These are all things you know. Try to put it aside for a moment. And look for what comes then. Try to look at the edge of all what is clear, to look for what is unclear about the situation (these are versions of SS 9).

T: There is always more ... than all what is known (SS 10).

T: This is the way you're usually thinking/speaking about it (and/or handling it) ... may I suggest you to try to stop it for a moment and look for what comes then (SS 11).

T: Take a break for a moment<sup>35</sup> (SS 12).

### **3. *Going inside***

*When C suddenly indicates that he feels something bodily but doesn't know that it is important:*

T: *There*, what you feel now in (the middle of) your body about this situation, stay with it for a while. Feel it. Keep contact with it (version of SS 2, adapted for therapy).

T: What you now feel there in your body, is very important: Acknowledge it, feel how it is connected with what you are speaking about, stay with it for a while. Wait there, for other things that may come there (SS 32).

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<sup>34</sup> The therapist must be active, he must intervene to bring and to keep the body in the process. If the client has to do it alone, it is more difficult. Now that there is a therapist with him, this must be 'used'.

<sup>35</sup> A break is a beginning, is a possible initiative to an *experiential pause*. A break is not yet *going inside* and going inside is not yet *directing to*.

*When C does not yet feel anything bodily:*

T: This can be taught in the therapy: “When something touches you, you feel that in your body” (SS 24).

T: Keep your attention to the situation, and wait for the unclear feeling that may come in the middle of your body (if necessary after trying the words ‘the situation is totally okay for me’) (SS 30).

T: The following questions may be used in therapy (SS 32, SS 33, SS 34) (adapted to where the client is):

- Can you bring now your attention ‘here’, in the middle of your body, together with the question ‘how does the situation affect me?’ (‘what does the situation effect in me?’)
- Which feeling does the situation evoke in me?
- What does the situation say/mean to me bodily?
- What does the situation bring on in me?

T: You might ask inside: “Do I feel totally okay with this situation?” and then wait for the answer? (SS 35).

#### **4. Connecting with the situation(s)**

T: Sometimes I ‘re-center’: setting the client again before the central point, before the situation. A moment came in a session with an unassertive client when I suggested: “The problem now is: situations where managing/leading is difficult for you” (SS 28). A further question could be “What do you need so that this could go better?”. With this question the therapist leads the session in the direction of further e-development.

T: *Can you take along inside the question:* With which situations in my life could this have to do? (a variant of SS 28: Finding the situation).

#### **5. Waiting experientially:** Wait with curiosity for ... something else than the usual.

*Wait in the presence of an inner question like ‘how does the situation affect me?’ or ‘what exactly wants to be expressed now?’ This specific waiting (the specific inner attention) must be sufficiently long (SS 44), at least 30 seconds, as long as it needs to feel how my body (and not my thinking or my emotions) has this problem now<sup>36</sup>.*

T: Keep waiting in the presence of the question to yourself ‘what does the situation effect in me?’ (SS 25).

T: Wait in the presence of the question to yourself ‘what exactly wants to be expressed now?’ (SS 25). E.g. ‘what exactly wants to be danced now?’ (Duncan example in PM).

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<sup>36</sup> Forming an e is the most difficult part of focusing.

- T: Keep your attention to the situation, and wait for the unclear feeling that may come in the middle of your body (SS 30).
- T: Can you ask inside: “Do I feel totally okay with this situation?” and then wait for the answer? (SS 35).
- T: You may turn your attention to the place in your body where usually you feel a meaning (SS 32), and focus your attention to the ‘feel’ of the whole problem, and let come into focus what-the-whole-effects-in-you.

*These are examples of waiting **for** an unclear sense. There is a second moment of waiting, namely once the unclear sense is formed: waiting **at** the unclear sense<sup>37</sup>.*

- T: When you have an unclear sense, just be with it, acknowledge it just as it is (SS 26).
- T: Stay with your attention with the vague uneasy feeling, sufficiently long, at least thirty seconds, even if nothing happens: Just being-with-it (SS 44, SS 45).
- T: Ask the question ‘what is the quality of that whole feeling?’ (asking for a handle) and then wait for what comes: A word, an image, a gesture, or a movement . . . , while you keep touching the quality of the whole (SS 73). Wait for what symbol comes of its own accord.

#### **6. The client gets to know something as a felt sense/an e**

*A learning moment can be that the client indicates that he feels something bodily while he does not know that this may be important.*

- T: What you now feel there in your body, is very important: Acknowledge it, feel how it is connected with what you are speaking about, stay with it for a while. Wait there, for other things that may come there (SS 32).

#### **7. Receiving it, feeling it bodily, and just being with it:**

- T: There, what you feel now in (the middle of) your *body* about this situation, stay with it for a while. Feel it. Keep contact with it (version of SS 32, adapted for therapy)
- T: Don’t do anything with it, just let it be. Don’t allow a judgment . . . (SS 36).
- T: Let it be. Just welcome it. It’s your being-affected by the situation (SS 36).
- T: It’s just bodily. You don’t have words for it yet. Let it be that way. And if there are immediate words let them go by (SS 36<sup>38</sup>).
- T: Don’t force anything on it. Don’t analyse ‘it’, don’t describe it, don’t judge it. No judging. Don’t do anything with ‘it’ (SS 37), just feel it, be with it, stay with the bodily-not-okay-feeling.

<sup>37</sup> Here the aspect ‘acknowledgment’ is emphasized (subskills 26; 44; 45; see also SS 54).

<sup>38</sup> And still, even these three examples of SS 36 are different.

T: Try inside an attitude of just being-with something, ‘just’ also in the sense of ‘nothing has to come’; or, if it comes, ‘it does not have to be such or such’<sup>39</sup> (39; PS: SS 39 specifies more the right attitude than SS 36).

#### **8. ‘It’ may be inconspicuous or may begin inconspicuously**

T: Even though it is vague and inconspicuous, orient your attention to it, stay with it, or go back to it (SS 38).

#### **9. Self-in-presence language**

T: reflects “*You feel/are sensing ... something in you that is shocked*” (SS 40).

#### **10. When it is necessary, strengthen the I-position**

T: Keep feeling: ‘I’ am here, ‘that’ is there, ... (SS 41)

T: Can you imagine, just for a moment, that the problem is solved, and how this feels in your body? Can you stay with this for a while? (SS 47)

#### **11. Distance too close (e.g. emotion)**

T: Can you *feel* the whole thing that is involved for you in this anger? Can you *feel* (not just know) the broader whole, the total situation the anger is part of, all aspects of the situation as one whole the anger is about? Anger is only wanting to fight/hit; what else does the whole situation evokes in you/in your body?<sup>40</sup> (SS 49)

T: Don’t go into the emotion. Make a step backwards. Try to feel all that the emotion is about, and try to feel it as one whole (SS 49).

T: What is it in the whole situation that makes you feel so (angry, ashamed, ...)? (SS 50)

T: You might ask inside: What does the situation which is making me angry (ashamed, ...) effect *uniquely* and specifically in me? (SS 51). For example, what does *this* being cheated mean to *me* precisely? (“Just what was involved *for you* in this being cheated”<sup>41</sup>)

#### **12. Distance too big**

T: Maybe it is too difficult, too threatening to let come *completely* what the situation effects in you? (SS 52)

T: Can you come a small step closer to it? How does that feel in your body? (SS 52)

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<sup>39</sup> This intervention may already be too long. The therapist may use only a part of it. An intervention must be short, just ‘touching’. Otherwise the client doesn’t not keep his attention to it, or his attention is distracted from his direct referent.

<sup>40</sup> As a whole this intervention is too long. The therapist may use a part of it.

<sup>41</sup> Gendlin (1978, p. 325).

**13. *The right distance***

T: Can you feel 'I' am here; 'that' is there, at close distance, so that you can 'see' it completely (that you can see the whole of it)? (SS 53)

**14. *Presencing attention***

T: Keep being present with this vagueness. Let it be as it is for a while. Don't force anything on it. Acknowledge it just as it is. Welcome it. Give it a space. Stay with it (SS 54).

**15. *Suggestion not to allow anything interfere***

T: Don't allow anything to come between you and 'it' (SS 55).

T: Let 'it' take place in a free space, where nothing can disturb it, and where it can entirely be as it now is (SS 55).

T: Also don't allow other automatic reactions (other than the inner critic) - your usual and familial reactions - interfere. For example, the tendency to analyze 'it' (SS 55).

T: Don't allow any judgment or any 'comment' interfere (SS 55).

**16. *What can be done to get beyond the comment?***

T: Can you try to acknowledge the comment ("Hello") (SS 56a).

T: And then: can you feel 'it' without the comment? Can you let 'it' come in a friendly space that you make next to and protected from the 'commentary box'? (SS 56b)

**17. *Staying with it for a while without words***

T: Stay with it for a while without words (SS 57).

T: Try to keep the attitude of 'it can be in the manner it wants to be and as long as it wants or needs to be that way' (SS 57b).

T: Try to feel which kind of contact 'it' is ready for. *Be with* 'it' in the manner 'it' wants to be accompanied (SS 57c).

**18. *Central characteristics of a felt sense:***

**18.1: *Something unclear, vague***

T: You feel that your wording is only partly right. Feel what is not yet caught by it. Stay with that unclear sense, without words (SS 58).

T: More than the usual feelings you recognize (SS 59) (more than, for example, the anger or the sadness or the jealousy).

T: Don't go away from it because it is unclear (SS 61); on the contrary stay with it. Exactly because it is unclear it harbours something new and thus it is precious. Stay quiet and feel it.

### 18.2: *In your body*

T: It is a bodily unease. You have the unresolvedness as an uneasy feeling in the middle of your body (SS 62).

### 18.3: *About a whole*

T: Take your time to feel what ‘all that’ effects in you; what is the single meaning effect of ‘all that’ on you? (SS 63)

T: Try to feel all aspects together as one single sense there. All tendencies, often conflicting tendencies. Much comes together as one in that unclear sense. You feel much in one (SS 63).

T: Ask yourself: What is my single feeling about all that ‘here’ in (the middle of) my body? (SS 64).

T: (For example, C suffers from a broken relationship.) While being with yourself, avoid sinking into only one feeling, and also don’t run away. Take a small step back, so that you can have all aspects of it. Something like ‘the whole thing is there’ and ‘I am here’ (SS 65)<sup>42</sup>.

T: Feel the conflicting tendencies together. Don’t go from the one to the other and back again. They are both in you, together. Their *being together* at the same time<sup>43</sup>: what feeling does it give you? Try that (SS 66).

T: Feel the conflicting tendencies together. Without ‘taking sides’. Let them be there as one thing. What does it want to ‘say’ to you? (SS 66)

## **C Your body as it wants to take a step: How to help a felt sense to open itself?**

### 19. *Just staying with it: a step may come*

T: If you stay with the single unclear bodily feeling of the whole situation (presencing attention) for about a minute, then it will possibly take a step from itself. Because it has a focus, and it is an unresolvedness (SS 67).

T: If you stay with your attention with ‘it’, can you feel somehow where it wants to go, what is the next step, what comes then? (SS 67)

T: Does it have a single direction in which it wants to go? (SS 67)<sup>44</sup>

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<sup>42</sup> The therapist may use a part of this intervention.

<sup>43</sup> “You can see that this bodily function is more than just the contradictory alternatives. If only they were there, they could not be together – they would cancel each other out. But your body can have them together (...)” (Gendlin, 1992, p. 347).

<sup>44</sup> These two are still somewhat more than ‘just stay’.



T: Try to bear the unresolvedness (SS 68).+

T: We are not directing our focusing attention to an entity (to something finished) but to an implying, to an unresolvedness that wants to go forward (knowing this is also a subskill: SS 69).

## 20. *Questions to the unclear sense*

The central question here is: How does the situation make me feel? Above the aim of the focusing attention was to feel *that* the situation effects something in me (see SS 34).

Now we try to get deeper, namely we try to get at *what* the situation effects in me, *what exactly* the situation effects in me, *how* the situation effects something in me (in contrast with SS 34, SS 70 asks for ‘the content’ of how I am affected by the situation). The following questions to the unclear sense look like the questions of SS 34 but the context is different: SS 34 aims to form a felt sense; SS 70 aims to open a felt sense.

T: (Suggests to the C:) What does the situation make me feel? (instead of ‘what does it make me think?’). In particular: Which meaning(s) does the situation make me feel? (SS 70)

T: How does the situation make me feel? (SS 70)

T: How does the situation touch me? (SS 70)

T: How does the situation affect me? (SS 70)

T: How does the situation affect me as person? (SS 70)

T: How does the situation affect my body or my being? (SS 70)

T: Ask the unclear sense: What is the situation saying me, in the sense of ‘what does the situation mean to me’? How does it mark me? (SS 70)

T: How does the situation move me? What does the situation makes me do (while cognitively I don’t know well why)? (SS 70)

T: What tendency (to do what) does the situation evoke in me? (SS 70)

## 21. *Handle: asking for the core*

T: After staying with the felt sense *without words* for a while, the first word that one may let come could be ‘*something*’, and then the question ‘what is it *like*?’ (SS 71).

T: What is the quality of that whole feeling? (SS 72).

T: Ask – ‘what is the quality of that whole feeling?’ - and then wait for what comes: A word, an image, a gesture, a movement, ... while you keep touching the quality of the whole (SS 73). Wait for what symbol comes of its own accord.

T: Avoid pushing words upon the felt sense (SS 74). Let a word come with its own essence.

T: Or, if you try out a word, do it cautiously (SS 75).

T: When the client says, for example: “It doesn’t feel well” or “It feels uneasy”, then one can ask: “What kind of ‘not well’?” or “What kind of ‘uneasy’?” (SS 72b).

T: A first attempt to find a handle may be the reflective invitation to the client: Can I find a word (or image, or ...) that says something about it, about that feeling?” (SS 73)

## **22. Asking for the special quality is asking for the core of the felt sense**

T: Waiting for the quality, for the core, is waiting for a special feeling that may come from it (SS 76).

T: Suggests the question ‘how does all this feel in your body?’. The client doesn’t find a word, but the therapist sees the beginning of a line around her mouth; after a while he reflects that and it is right. The client says: “I have become averse to her” (it was about a colleague) (SS 76). So the special feeling may be a physical expression and sensation.

T: Other questions may be helpful here, e.g.: “What is the core of this problem?” (SS 77).

## **23. When there is a handle**

T: When you say the words or evoke the image, the felt sense stirs a bit and reliefs a bit; for that purpose your attention must be in your body when you imagine the handle (SS 78).

T: When a handle (word or image) has come, welcome it (SS 79).

## **24. Resonate**

T: Put the word or the image in front of you, while you are in good contact with the whole feeling, and wait for a signal. Ask ‘do these words fit *exactly* with the feeling? Are these really *the* words?’ Go back and forth a few times between the expression and the feeling (SS 80).

T: When the expression is not right or not completely right, and you evoke the whole feeling and match it with the ‘not completely right’, which expression would then be right? (SS 81)

T: Now that you have a right handle, let yourself feel it for a minute or so; sense what happens in your body (SS 82).

T: You may use the handle to evoke the felt sense again (SS 83).

T: After this resonating, you may take a rest (SS 84).

## **25. The handle can give a small shift**

T: When the handle gives a small shift, receive this small shift (SS 85).

**26. *Asking the felt sense directly what it is with the help of the handle***

- T: (The first way of ‘asking’ is just being with it) Be and stay some time with the vague felt sense, one minute or so. Or go back to it again a few times (SS 86).
- T: Use the handle to make the felt sense lively present (SS 87).
- T: When you lost contact with the felt sense, present the handle and ask: “Is it still here?” or “Does it come back?” (SS 88).
- T: Use the help of the handle (e.g. ‘burdened’) to ask: “What is it about this whole problem that makes me burdened?” (SS 89).
- T: What do you want this word (e.g. ‘burdened’) to mean for you here (in this felt sense)? (SS 90).
- T: Let pass by the thoughts that come. You need a bodily felt response, not a mere verbal response. Go back to the felt sense with the handle (SS 91).
- T: Maybe the question doesn’t arrive at the felt sense immediately, but the second or the third time you ask it (SS 92).
- T: Don’t answer yourself, let the feeling deepen itself (SS 93).

**27. *If a shift doesn’t come (immediately)***

- T: When a shift doesn’t come, that’s okay (SS 94).
- T: Next, a question which may help: “What is the most burdening thing about all that?”  
Or: “What is the worse about it?” (SS 95).
- T: Next possible helpful question: “What does the felt sense need?” Or: “What does this need to feel okay?” (SS 96).
- T: If these questions don’t work, it is good to stop for a while with this inner work (SS 97).
- T: Try later again, in a fresh manner (SS 98).

**28. *Other possible questions***

- T: What in fact is this? (SS 99)
- T: What is the core of ‘this’? (SS 99)
- T: What is the worse/so bad in all this? (SS 99)
- T: What is the best/so good in all this? (SS 99)
- T: What are the two or three things in this that touch you the most? (SS 99)
- T: What is in the center of this? (SS 99)
- T: What is under this? (SS 99)
- T: What does it do? (SS 99)
- T: What must happen with this for me? (SS 99)
- T: What does this whole need to become better? (SS 99)

T: What does it need? (SS 99)

T: What does it want? (SS 99)

**29. *Putting the question in another manner***

T: Searches another way/manner to ask the question (SS 100).

**30. *Stay there for a while in a space close to the felt sense***

T: Make a space close to the felt sense, prepare yourself to stay there for a while; go and have a look at it a few times a day, careful, to see if there is not yet anything new (SS 101).

**31. *Checking***

T: Suggests to the client to take the opportunity to check with the felt sense each wording and symbolization, whether it comes from himself or from the therapist (SS 102).

**32. *Felt shift***

T: Learns the client to recognize a felt shift: the bodily relief. There is a shift in the feel of the problem. The new meanings or aspects usually come (shortly) after the bodily shift (SS 103).

T: A shift always feels good (as process), even if the problem doesn't look better immediately (as content) (SS 104).

**33. *Receive and protect***

T: Welcome what came with the shift, receive it in a friendly way (SS 105).

T: When there was a shift, try to stay at a small distance, not in it but close next to it (SS 106).

T: Give yourself the time to *have* the good feelings you have there (SS 107).

T: Let your body be whole and separate (let the body feel itself-without-the-problem) again (SS 107b).

**34. *This is only a first form***

T: You *must* not do anything with it, you must not agree (SS 108).

T: Let it exist fully, you know that within minutes something else may come (SS 109) (for example, let us listen what may come further from this hopeless feeling).

T: Receive this first form and let it be as it is. Even if it not realistic, the direction of your life is in it (SS 110).

### **35. *Protect what came with the shift***

T: For now, don't tell it to anybody, until you have absorbed it yourself completely (SS 111).

T: Protect what came with the shift against all sorts of comment or critic (SS 112).

T: If what came has a linguistically strange form, keep this form: if it is not understood, it is protected against misunderstanding (SS 113).

### **36. *Don't go immediately to the next focusing round***

T: Take a breathing-space. Feel that you can leave this place inside, and that you can come back to it later (SS 114).

T: Focusing takes five, ten minutes, maybe thirty. Not more. Then it is time to rest, and to do something else (SS 115).

## **XI. Subskills: implications for training and practice**

As you have seen in the excerpts of a session the therapist brings in a subskill now and then, not the whole session; he also does other things.

The subskills differ from each other; they are different accesses to the body. On different moments of the session, different subskills are necessary. The inner attention of the I of the client needs a filling in with different subskills<sup>45</sup>.

An example of bringing in such a small bit of focusing is suggesting to the client 'wait here for some moments' (see excerpts from session above). The therapist addresses the client's inner attention; he doesn't address the client, he addresses the client's own interaction with his experiencing (C-E). The client may follow this suggestion; this means the client *offers the subskill to himself*, and he makes a pause inside. By doing so the client addresses his own experiencing with a skill to create an opening to his experiencing<sup>46</sup>.

What does a subskill do? When the client addresses the subskill - e.g. pausing - to his experiencing, it has, like any focusing instruction, a directive side (in this example, making an opening) and at the same time a non-directive side (letting the bodily knowing come in the opening).

Subskills are not techniques. Bringing in focusing subskills in therapy does not mean 'using small techniques'<sup>47</sup>. When the therapist suggests, for example, 'try to pause' or 'wait for' then - in suggesting this subskill - the *therapist is together with the client's inner*

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<sup>45</sup> Inner attention is implied by any subskill.

<sup>46</sup> 'Making an opening' is an ingredient of any subskill. 'Wait here' is suggesting not to continue talking, i.e. to make an opening or a break in the usual pattern. At the same time it is an opening in the experiencing (see below).

<sup>47</sup> Compare Gendlin (1996): "Skills for relating are not artificial", pp. 8-9 from unpublished manuscript 'Fitting in, pouring out, and relating'. Available at [http://www.focusingresources.com/private/reading\\_pdf/Fitting-In2.pdf](http://www.focusingresources.com/private/reading_pdf/Fitting-In2.pdf).

*attention oriented towards* what the experiential level needs at exactly this moment. Therapy is a smooth flow and now and then, where the therapist *feels* it is necessary, he brings in something from the repertoire that he knows implicitly. These small bits of focusing are so well known by the therapist that they are implicitly functioning and come spontaneously in the therapist's interacting with the client<sup>48</sup> (this has big implications for the training of therapists). Also the therapist can feel as precisely as possible how to apply a subskill at a certain spot, or conversely how one cannot attain an e at this moment.

Three things seem necessary to bring in a subskill:

1. The therapist needs to know ***the necessary subskill*** and to have it available.
2. The therapist must recognize ***the spot*** in (the speaking of) the client, where a subskill is necessary. The more one knows the more one can see. If one doesn't know all that may become visible, one will not catch sight of it. It is not 'technical' if the therapist has these two abilities *implicitly*.

Offering subskills is not applying techniques. The therapist is aimed and oriented towards helping the client beyond his blockages and he is not thinking explicitly of the many things he has learned in his training (in that case it would be 'applying a technique'); the learned things are so implicit that he applies them without being aware of it (see above note about the intentional arc).

Offering subskills follows from the therapist's being tuned in very well to what the client is feeling and saying at this moment (seamless, without causing a break in what the client is trying to express) and thus follows from how the therapist's next intervention is implied by the speaking of the client<sup>49</sup>, namely by spontaneously drawing from his implicit knowledge of the skills responding to the implied invitation in the speaking of the client.

The implication for training is that the trainees 'learn' the numerous subskills<sup>50</sup> so that these come to belong to the implicit functioning capabilities of the therapist-trainee (in the same way they learn to be empathic, for example).

3. ***Seamless***. The bringing in should not lead the client away from the content he is saying, on the contrary it should deepen the processing of it in a smooth way. The therapist brings the subskill – in timing and in form - immediately close to and connecting with<sup>51</sup> what the

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<sup>48</sup> Cf. The intentional arc (Merleau-Ponty): When you read a word, for example, your attention is not with the separate phonemes of the word; when you read a sentence your attention is not with the separate words of the sentence; these function implicitly (see also Depestele, 2006, p. 62).

<sup>49</sup> 'Tuning in to and coming into the aspiring of the process' is an ingredient of any subskill.

<sup>50</sup> Maybe for the client and the trainee to learn the subskills we can distinguish three complementary ways to acquire them. From this perspective a focusing subskill may be considered 1) as *knowledge*: something that must be told to you; 2) as a skill that you must *learn by practice*, e.g. bodily sensing meaning; 3) as an attitude that you must *cultivate*, e.g. being present in a non-judgmental way (Van de Veire, 2011).

<sup>51</sup> When the client is far from the e-level a subskill that connects with the content and deepens it, could be, for example, saying 'stop' to the structurebound form of it. It is a saying 'stop' in order to make possible the access to the e-form of it.

client is saying, so that the client can continue to work on the same point but on a deeper level. Ideally he offers his intervention (reflection) in such a way that the subskill is weaved into it.

## **XII. Conclusion**

In this paper I have tried to show how the experiential is the most fundamental level in all change. This applies to therapeutic change outside a client-therapist relationship as well as within it. When therapy is effective it is basically not the client-therapist relationship that does it, but the experiential. To say it concisely: not the therapist, not the client, not the symbols, but the experiencing does the real work.

Sometimes it does this work alone and independently, just by symbolizing itself without the focusing effort of the person (E-S). Often it needs the client's inner focusing attention (C-E). And sometimes this process needs a therapist (T-C).

The therapist helps to create a reflecting I. This may become an experiential I when the therapist offers focusing subskills to the client's I, who takes these down to his experiencing to open and to develop new experiential aspects. The client's inner work with his experiencing (C-E) is the crucial element that makes experiential therapy different from other therapies. Only provide T-C interaction is not enough, also C-E interaction – i.e. the client's interaction with his own experiencing - must actively be facilitated. All this has huge consequences for the training of therapists.

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**Appendix:** Place of the numbered subskills from the examples in the scheme of focusing skills

## 1. Bringing oneself to focusing

### 1.1. Learning to make for oneself the opportunity for coming to focusing

1.1a. When ‘there is something’ ...

**2, 3**

1.1b. With ‘when there is something’ it is meant ...

1.1c. Cultivating an attitude of spending time with that ‘something’

1.1.1. Taking an experiential pause; interrupting the usual.

**9, 10, 11, 12**

1.1.2. Focusing partnership

1.1.3. Solo focusing

### 1.2. Creating a good ‘environment’

1.2.1. ‘Going inside’

1.2.2. Going to ‘feeling your body’

1.2.3. Passage to *your body that can feel itself-in-a-situation*

**24**

## 2. Your body as it feels a situation: how to help a felt sense to form itself?

### 2.1. The crucial *pause*, the crucial *breaking*

**25; 26**

- 2.2. We can always start focusing in two ways: starting from the body or from the situation  
**28**
- 2.3. 'Choosing' the focal point
- 2.4. Inviting attention: the specific bodily way to be with the situation with my attention  
**30, 32, 33, 34**
  - 2.4.1. The quickest way: "Does I feel totally okay with this situation?"  
**35**
  - 2.4.2. Inner focusing attention is friendly, receptive, and without comment  
**36, 37, 38, 39, 40, 41**
  - 2.4.3. The trainee learns to avoid the non-focusing way of going inside
  - 2.4.4. Learning to distinguish a felt sense from what is not a felt sense
  - 2.4.5. What to do when the usual manner to let form a felt sense doesn't succeed?
- 2.5. The specific inner attention must be sufficiently long  
**44, 45**
- 2.6. Finding the right distance
  - 2.6.1. It is useful first to let form the feeling of I-without-the problem  
**47**
  - 2.6.2. Distance too close  
**49, 50, 51**
  - 2.6.3. Distance too big  
**52**
  - 2.6.4. The right distance is: keeping distance but being still close enough  
**53**
- 2.7. Presencing attention (the pure being-with; presence)  
**54**
  - 2.7.1. Don't allow anything to come between you and 'it'  
**55, 56**
  - 2.7.2. Stay with it for a while without words  
**57**
- 2.8. Central characteristics of a felt sense
  - 2.8.1. Something unclear, vague  
**58, 59, 61**
  - 2.8.2. In your body  
**62**
  - 2.8.3. About a whole  
**63, 64, 65, 66**

### 3. Your body as it wants to take a step: How to help a felt sense to open itself?

3.1 If you stay with 'it', then it will possibly take a step from itself

**67, 68, 69**

3.2 Try to get deeper, try to get at *how* the situation effects something in you

**70**

3.3. Handle: asking for the core

**71, 72, 73, 74, 75**

3.3.1. Examples

3.3.2 Asking for the special quality is asking for the core of the felt sense

**76, 77**

3.3.3. When there is a handle

**78, 79**

3.4 Resonate

**80, 81, 82, 83, 84**

3.5. Deepening questions

3.5.1. When the handle gives a small shift, receive this small shift

**85**

3.5.2. Asking the felt sense directly what it is with the help of the handle

**86, 87, 88, 89, 90, 91, 92, 93**

3.5.3. If a shift doesn't come (immediately)

**95, 96, 97, 98, 99, 100, 101**

3.5.4. Checking

**102**

3.5.5. A felt shift

**103, 104**

3.6. Receive and protect

3.6.1. Receive. Whatever comes, welcome it

**105, 106, 107, 107b**

3.6.2. This is only a first form

**108, 109, 110**

3.6.3. Protect what came with the shift

**111, 112, 113**

3.6.4. Don't go immediately to a next focusing round

**114, 115**